

Quality Assurance: A Professional Responsibility

By Jennifer Burnett, Registrar

As many of you may know, the College has been working on developing a Quality Assurance Program for a couple of years now. And while the name seems pretty simple, the reality is that developing and implementing a Quality Assurance Program is anything but simple. The most common question that I receive is: Why do we need one?

The easiest answer to that question is: Because the legislation that we are governed by, the *Health Professions Act*, requires us to have one. But the real answer is much more complex than that.

Being part of a self-regulated profession and by extension, being a professional, has many serious responsibilities. One of the biggest is to ensure that your skills and knowledge remain current in order to help ensure that you are practicing in a safe and ethical manner.

While the Continuing Competency Program does foster lifelong learning, it is a quantitative tool. As we all know in many facets of our life, quantity doesn't always equal quality. More and more studies are coming forward suggesting that very few of us have 100% accurate self-assessment skills and can accurately identify areas where we are weak. And even if we can identify where we are weak, even fewer of us will take the necessary actions to improve those areas. The literature in this area is quite interesting and I encourage you to check it out.

In November 2007 I attended a Quality Assurance conference and heard Glenn Regehr, PhD, speak. In his presentation, his research showed that learning fun things is fun, learning boring things is boring and learning hard things is hard. Furthermore, after leaving institutional learning, i.e. school, there are fewer people telling us we have to learn the boring or hard things. This is one of the many reasons that the requirement for all health professions to have a Quality Assurance Program was put in place.

We know that the vast majority of, if not all, dental hygienists take their professional designation seriously and often challenge themselves with the hard or even boring things. However, in order to show that we are professionals and deserve to keep the trust of being self-regulated we must not be shy to put in place a program that has tools that will assist an individual hygienist in identifying areas that they need to strengthen, and then empowering them to improve those areas.

As the College moves forward in the development of this program, we are committed to designing a program that strikes the right balance between ensuring public protection and not being too cumbersome on registrants. It is our intention that this program will be a useful tool to strengthen the profession and the practice of dental hygiene in BC.

Please stay tuned to our website and future editions of ACCESS for updates as this program is developed.

College of Dental Hygienists of British Columbia

ACCESS



OUR MISSION

The mission of the *College of Dental Hygienists of British Columbia* is to protect the public by developing, advocating and regulating safe and ethical dental hygiene practice in British Columbia.

IN THIS ISSUE

Quality Assurance	1
Message from the Registrar	2
Message from the Chair	3
Comings and Goings	2/3
Board Election and Meetings	4/5
Darlene Thomas Award	6/7
Renewal/Inquiry Committee Report	8
Criminal Records	8
Registration Committee Report	9
Quality Assurance Committee Report	9
The ABC's of CDHBC and BCDHA	10
Root of the Matter	11/12/13
Study Clubs	14
Dental Conference/Call for Examiners	15
Contact the College	16

Message from the Registrar

Jennifer Burnett, Registrar

It's hard to believe the fall is upon us and the summer is already becoming a distant memory. But here we are and it is my pleasure to be writing in my second fall edition of ACCESS. And as I thought about topics to include in my message, I was struck by the significant number of current topics and developments in dental hygiene. It certainly was hard to narrow it down to fit the print space so below I've provided a brief overview of all the major issues that occupy our time at the College.

As outlined on the front page, the Quality Assurance Program is currently the largest project that the College is working on but by no means is it the only one. We are currently looking at how we examine the clinical skills of those who graduate from programs that are not on the approved list of dental hygiene programs (Schedule I). This not only includes graduates from programs within Canada, but those who are from programs in the US or overseas.

Also related to the evaluation of new registrants is the topic of free labour mobility. This term has become a buzz word of late and all levels of government have begun to pay serious attention to it. The goal of government is to ensure that there is free mobility within a profession across

the country. There are two agreements that the College is negotiating. The first is TILMA, which is between the provinces of Alberta and BC only. The second is the Agreement on Internal Trade (AIT). This is a further expansion of the already signed Mutual Recognition Agreement (MRA) and includes all provinces and territories. The goal of both of these agreements is to ensure that a dental hygienist registered in good standing in another province in Canada can come to BC and become registered without having to meet any other requirements. That is putting it quite simply, but the practicality of sorting out the details of such agreements is much more complicated. It is important to note that the only registration category that these agreements will affect is the full category. It is also important to note that these agreements don't only affect dental hygiene but all regulated professions including doctors, nurses, dentists, architects as well as trades such as plumbers and electricians.

Another significant development in dental hygiene in BC has been the growth in educational programs in our own backyard. Over the last year and a half we have seen the first graduating classes from



four new programs in BC. We have also seen the first and second class admitted to the four-year entry-to-practice dental hygiene degree program at UBC. We are now graduating more dental hygienists in BC than ever before. This coupled with the influx of new programs elsewhere in Canada has resulted in exponential growth in the number of registrants.

There is no doubt that it is an exciting and dynamic time in the dental hygiene profession. There is no shortage of issues and topics to discuss. I encourage you to think about and talk about one, many or all of these issues. The Board Members and I always welcome feedback, thoughts and opinions, so feel free to be in touch with us at the College. Also stay tuned to our website and future editions of ACCESS for further updates on these issues.

COMINGS AND GOINGS

COMINGS

The College is pleased to announce that Heather Biggar has been promoted to the role of Deputy Registrar. Heather has been with us for a little over a year and excelled in her role of Dental Hygiene Advisor. Heather will continue to be an important resource for registrants and the College in advising dental hygiene practice in addition to her new responsibilities as Deputy Registrar. Thank you for

all your hard work, Heather and congratulations on your new role and much deserved place on our team!

The College is also pleased to announce that Robin Adams has been promoted to the new role of Registrant Services Coordinator, which will encompass the role of Continuing Competency Coordinator in addition to other registrant-related duties. She has worked with the College for over a year as Receptionist and Administrative

Assistant. She encourages all registrants to give her a call or send her an email; she'd love to hear from you!

We would also like to introduce Popi Bowman as a new member of our growing College team. Popi joined the team at the beginning of October as Examination and Office Manager. She will be overseeing the administration of the CDHBC Clinical Exam as well as assisting with the day-to-day operation of the College. We are also

Message from the Chair

Heather Mohr, Chair



I hope all of you have had a wonderful summer. The fall is the time of year when we get back to “reality” after a summer of vacations and R&R. The kids are back to school and schedules become more routine for the fall and winter. This is the same for the staff at the College office and the Board and Committee members. As I reflect back on all the College activities over the past few months it has been very busy. As a member of the Quality Assurance Committee I have been working with Committee members to put together a Quality Assurance Program. We have attended workshops, read research articles, and discussed programs with other regulatory bodies. The more I learn, the more questions I ask. We are now at the point where we have a good framework for a program and now it needs to be developed by an individual with expertise in quality assurance. Thanks to all of you who filled out our survey.

We have four new programs in the province, three of which just graduated their first class of students. The staff at the College office have been extremely busy with Clinical exams and the Registration Committee has been helping with the registration of these individuals.

Congratulations to these programs and welcome to the new graduates from all the dental hygiene programs in the province. I look forward to working with you in the future.

There will soon be some Board and Committee members completing their terms in office at the end of this fiscal year (Feb. 28, 2009). If you are interested in becoming a Board member or Committee member, please check with the College office or the information in the recent mail-out for any openings in your area.

There have been some changes with our staff at the College office and I would like to take this opportunity to welcome our new staff members and thank those who are leaving for all their years of hard work and dedication. I wish you well in the future with all your endeavors.

very excited to be able to tap into her extensive experience in publications as she applies her wealth of knowledge to the College’s publications and website. Congratulations and welcome, Popi!

It is our pleasure to welcome Cassey Zhou to the CDHBC team as our new Administrator. Cassey comes to the College with experience in accounting, budgeting, and bookkeeping and we know she will do an excellent job of looking after the College’s finances.

GOINGS

As many new faces join our team at the College, some of our familiar faces move on to new and exciting challenges.

We will miss working with Susan Komoroci as she moves on to pursue her career goals. Susan has been the Administrator and a dedicated College team member for over 10 years, and we cannot thank her enough for the invaluable amount of time and hard

work she has given to us. We know she will exceed in her future career path and we wish all the best to her and her bright future.

We also bid a fond farewell to Fleur McHugh, our Continuing Competency Coordinator of nearly 10 years. Fleur was a dedicated member of the College team and was always a friendly resource for registrants during her time here. We will miss her and wish her all the best in future career endeavours.

Notice of CDHBC Board Meeting

Friday, Jan 30, 2009
in Richmond

Registrants are welcome to observe these meetings. Contact the College office for information regarding time and location.



Notice of Board Election

In accordance with section 4(1) of the bylaws, I hereby notify registrants of the expiry of the terms of office of Board members in the following electoral districts, effective February 28, 2009*:

Cariboo North (1 position)

Lower Mainland (1 position)

Okanagan (1 position)

The resulting vacancies on the Board will be filled through elections. The first term of office for an elected Board member is three years, and any subsequent terms of office are two years, for a maximum of three consecutive terms.

Any registrant in good standing may nominate for office a maximum of one registrant in good standing from his/her electoral district by mailing the nomination, in the form included, to me at the College. The nomination must be signed by the nominator **and at least five other registrants** in good standing. To facilitate verification that the nominator and supporting signatories are in

good standing with the College, names should be printed clearly beside signatures.

Once nominations are received, further election information will be provided and a ballot will be mailed to registrants with their 2009/2010 registration renewal application in January 2009.

Nominations must be received no later than 4:00pm on November 10, 2008. Those who submit nominations are advised to contact the College office in order to ensure the nomination has been received as there is no provision for extension beyond 4:00pm on November 10, 2008.

Please do not hesitate to call me at 1-800-778-8277 if you require any additional information on the nomination or elections processes.

Jennifer Burnett, Registrar

*Remaining Board positions do not become vacant until March 1, 2010, and will be the subject of election during 2009.

Nomination and Declaration for Election to the Board of The College of Dental Hygienists of British Columbia

I, _____, of _____ B.C.,
(please print)

hereby nominate for election as a Board member of the College of Dental Hygienists of British Columbia
_____ of the following district: Cariboo North, Kootenays, Lower Mainland,
Okanagan, Vancouver Island/Coast. (CIRCLE ONE)

DATED at _____, B.C., this _____ day of _____, 20_____.

Signature

The nomination of _____ is supported by the following 5 registrants:

- | | | |
|----|-----------------------------------|-----------|
| 1. | _____ | _____ |
| | Name and Registration No. (print) | Signature |
| 2. | _____ | _____ |
| | Name and Registration No. (print) | Signature |
| 3. | _____ | _____ |
| | Name and Registration No. (print) | Signature |
| 4. | _____ | _____ |
| | Name and Registration No. (print) | Signature |
| 5. | _____ | _____ |
| | Name and Registration No. (print) | Signature |

I, the above named _____ hereby accept this nomination.

In accepting this nomination, I declare that I will observe all the provisions of the *Health Professions Act*, all regulations made pursuant to the *Health Professions Act* and the bylaws of the College of Dental Hygienists of British Columbia.

Signature

Date

The Darlene Thomas Award

For Vision and Leadership In Dental Hygiene 2009

The College is proud to offer this award annually. Nominations are being sought for someone who, like Darlene Thomas, demonstrates vision and leadership in the profession of dental hygiene and makes a profound impact on the profession in British Columbia.

Darlene Joan Thomas was a leader in the dental hygiene profession at the local, provincial and national levels. She was a practitioner for 34 years before succumbing to breast cancer in 1999 at age 54. Darlene Thomas had a progressive vision for dental hygiene which she communicated through her many professional activities and her constant encouragement of others. Darlene was extensively influential in the establishment of the CDHBC. When dental hygiene became a self-regulating profession in British Columbia in 1995, she was appointed to the first Board of Directors of the CDHBC and was elected by her fellow Board members as the first Chair of the Board. Darlene was elected to the CDHBC Board in the Okanagan region in 1996 and was also re-elected as Chair of the Board, serving through February 1997. She then went on to pursue her vision for dental hygiene at the national level and, in 1997, was elected Vice-President of the CDHA, to be President in the year 2000. She was a dedicated wife, mother and community leader.

The recipient of **The Darlene Thomas Award For Vision and Leadership in Dental Hygiene** will be a College registrant in good standing who meets the following selection criteria:

- demonstrate and communicate a broad, progressive perspective on the profession of dental hygiene, including a future perspective;
- possess qualities that dental hygienists wish to emulate, including a consistently professional demeanor, encouragement of others, acceptance and carrying out of extra responsibilities and

challenges in the profession, lifelong learning, compassion and humour; and

- demonstrate balance in their life, including strong family values and commitment to the community.

A committee of the Board will review nominations in accordance with the selection criteria and make a recommendation to the Board at the January 2009 Board meeting.

If you are a College registrant in good standing and if there is someone you wish to nominate:

- complete the following form, ensuring signatures of three nominators (also registrants in good standing) and the nominee;
- state *clearly and specifically* in 500 words or less, on the following page, how your nominee meets the selection criteria listed above;
- attach a current curriculum vitae of the nominee including:

education
organization involvement
present work or activity
volunteer activities
career background
recognitions, awards or other achievements;

- forward to the College office by January 22, 2009 by mail to:

Suite 219, 645 Fort Street, Victoria, BC V8W 1G2
or Fax: (250) 383-4144 or Email:
cdhbc@cdhbc.com

Note: The recipient will be selected on the basis of the information provided in the nomination form. Previous nominations will not be carried over from year to year; if a nominated candidate was not selected last year, a new application must be submitted in order to re-nominate.

Current CDHBC Board members are not eligible for this award.



The Darlene Thomas Nomination Form

For Vision and Leadership In Dental Hygiene 2009

The Darlene Thomas Award – For Vision and Leadership in Dental Hygiene 2009 NOMINATION FORM

I am pleased to nominate: _____
[Print name of nominee]

This nomination (1) _____
Is submitted by PRINT NAME OF NOMINATOR SIGNATURE OF NOMINATOR REG'N. NO.

(2) _____
PRINT NAME OF NOMINATOR SIGNATURE OF NOMINATOR REG'N. NO.

(3) _____
PRINT NAME OF NOMINATOR SIGNATURE OF NOMINATOR REG'N. NO.

*I believe the nominee would be a worthy recipient of **The Darlene Thomas Award For Vision and Leadership in Dental Hygiene** because...*



2009/10 Renewal Reminder

As a reminder, all dental hygienists must renew their registration prior to March 1, 2009, to remain on the B.C. register. Please watch for your renewal notification which will be sent to you early in January 2009.

Liability insurance (professional negligence insurance) **is a requirement if you are registered in a practicing category** class and is not dependent on whether or not you are working, see section 53 of the CDHBC Regulation and Bylaws in the handbook. Please ensure that you have your insurance in place prior to renewal, as the College may require you to submit a copy of your proof of insurance to complete your renewal process.

Online renewal will be available starting Monday, January 12th, 2009. Also, a reminder that the online renewal will be shut off at midnight (12 am) the night of February 28, 2009. Online renewal is payable by Mastercard or Visa only. Your renewal will be fully processed online once the payment has been accepted and not before. The online system is secure to ensure the safety of your credit card number and payment.

If you prefer to submit a paper renewal application to the College, we will accept cheque or money order as payment only. Credit cards cannot be processed with a paper renewal application as we have no way to process credit cards in-house.

It is the responsibility of a self-regulated professional to ensure that they renew their license on time and maintain all their own documents for their records. Should you have any questions or concerns please see the back of this issue for ways to contact the College for assistance.

Inquiry Committee Report

Nancy Savaire, Chair

Members of the Inquiry Committee met this past June for a workshop that was presented by CDHBC's legal counsel Catherine Herb-Kelly. On this full day we reviewed the Committee's mandate as it pertains to investigating a complaint against a registrant of the College.

What came to my mind at the time was section 32.2, duty to report a registrant. As a CDHBC registrant, if on reasonable and probable grounds you believe that a registrant of one of the health professional colleges is to be:

- (a) not competent to practice the profession, or
- (b) suffering a physical or mental ailment, an emotional disturbance or an addiction to alcohol or drugs that impairs their ability to practice

it is your **duty to report** in writing to the Registrar of the other person's college if you believe that continued practice might constitute a danger to the public.

Making a complaint against a registrant of a college is a serious matter and will be dismissed if the Registrar determines that the complaint is frivolous, vexatious or made in bad faith.

Criminal Records Review

The Criminal Records Review Program (CCRP) within the Ministry of Public Safety and Solicitor General has announced changes to the *Act* and in particular the 5 year re-check to a criminal record. Watch for your instructions and detailed re-check plan arriving in your mailbox in the next couple of weeks.

Registration Committee Report

Bonnie Craig, Chair

Since the Spring edition of ACCESS, the Registration Committee met in person on May 8, 2008. The Committee reviewed several local anaesthesia courses to ensure that the course content reflected the provincial standard for the administration of local anaesthesia. Requests for local anaesthetic course approval continue to be accepted by the Committee in accordance with the anaesthesia course approval policy.

The Committee has re-issued a Clinical Practice Exam Review 'Request for Proposal' and will be accepting and reviewing proposals for this project shortly. The review will critically examine the existing clinical exam and provide a proposal for the redevelopment of a licensing evaluation tool in light of alternate processes currently employed by other health professions.

Three CDHBC Dental Hygiene Clinical Practice Exams were conducted in the month of June, 2008, across the Lower Mainland and on Vancouver Island. Forty candidates were examined at three facilities, marking the highest attendance at clinical exams in CDHBC history. The Registration Committee would like to thank all examiners who participated during these exam sessions and in exams over the past years, as their contributions to these important events are essential and invaluable. Future exam sessions are in planning and additional examiner participation is needed. If you are interested in becoming an examiner, please refer to the "Call for Examiners" on page 13 of this issue.

The Committee continues to see a steady increase in the number of applications for registration in BC. As of September 30, 2008, 257 new registrants have been added to the CDHBC register since March, 2008, bringing the total number of Registered Dental Hygienists in BC to 2584. The following is the breakdown of registrants by category:

Full	2183
Full (Residential Care)	52
Conditional	228
Non-Practicing	121

The next in-person meeting of the Registration Committee is planned for January 15, 2009, details of which will be reported in the next edition of ACCESS.

Quality Assurance Committee Report

Heather Mohr, Chair

The Quality Assurance Committee met in person on June 20 & 21, and again on September 19, 2008.

At the June meeting the Committee participated in a quality assurance workshop with Dr. Glenn Regehr. During this workshop all areas of quality assurance were discussed at length while referring to the data collected from the survey. The workshop was very successful and the result was the establishment of a framework for further development of a program.

During the summer more data was collected about other quality assurance programs across Canada with other health regulatory organizations. Other agencies were also contacted for more information in their areas of expertise.

At the September meeting the framework was reviewed and the new data discussed. We are now ready to proceed to the next stage. We will soon be advertising for an individual to assist in developing a program under contract with CDHBC.

The Committee continues to review policies, handbook updates and research. If you have any comments or concerns about quality assurance, please contact the College office.

Our next meeting will be held in January 2009 in Vancouver.

The ABC's of CDHBC and BCDHA

As a Registered Dental Hygienist in British Columbia, there may be times when you have a question and turn to one of the two dental hygiene organizations for assistance. Both the College of Dental Hygienists of British Columbia (CDHBC) and the British Columbia Dental Hygienists' Association (BCDHA) routinely receive phone calls and emails that should have been made or sent to the "other" organization.

To ensure that you receive prompt attention to your enquiry, take a minute to double check that you are contacting the right organization. So how do you know who to call?

The College of Dental Hygienists of BC is the regulatory body, and deals with the quality and standards of dental hygiene practice. The College's mission is to protect the public, and accordingly the College is responsible for the following areas:

- Scope of Practice
- Practice Standards
- Registration to Practice
- Complaints and Discipline
- Continuing Competency Requirements

The British Columbia Dental Hygienists Association is the member services organization and promotes the interests and needs of the dental hygiene profession. If you are a member, BCDHA can assist you with the following areas:

- Employment issues
- Practice administration issues (i.e. billing, production)
- Public education, information and resources
- Continuing education opportunities
- Practice opportunities

So before you pick up the phone, or hit "send" on your email, try to determine which agency is most appropriate to contact. To assist you, a few typical questions have been listed below, along with the organization to contact.

Typical questions for the College of Dental Hygienists of BC:

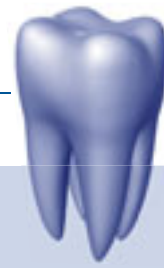
- How many Continuing Competency Credits do I have?
- Can a Registered Dental Hygienist use lasers in periodontal therapy?
- Does a dentist have to be in the office when I administer local anaesthetic?
- How do I receive a Residential Care Registration?
- Does an online course qualify for Continuing Competency credits?
- Does a specific exam qualify as an examination for the 365-Day Rule?
- Can I advertise my practice in the local paper?
- What are the current guidelines for antibiotic premedication?

Typical Questions for the British Columbia Dental Hygienists' Association :

- How much notice do I need to give my employer that I am leaving?
- Am I eligible to be paid for statutory holidays?
- What insurance companies pay independent dental hygienists?
- How do I become self-employed?
- What is the average wage for dental hygienists in BC?
- Where can I find information on upcoming continuing education courses?
- What employment opportunities are available?
- How do I deal with my employer's pressure to increase my production?

Contact both organizations if you change your name or address.

Be sure to check out both CDHBC's (www.cdhbc.com) and BCDHA's (www.bcdha.com) websites. The answer to your question can often be found here – 24/7.



Oral Cancer Screening and the Role of the RDH

Oral cancer has been identified as the 6th most common cancer worldwide, and the 9th most common in Canada. This devastating disease is predicted to claim the lives of about 1,150 Canadians yearly, while about 3,400 new cases will be discovered in 2008 alone.¹ The prognosis is poor (63% five-year survival rate) and has only marginally improved over 3 decades, largely due to late-stage detection in the majority of cases.¹ Many oral cancers were diagnosed at an advanced stage (Stage III or IV cancers) which has a meager survival rate of 26%, compared to early-stage disease diagnosis (Stage I or II cancers) which has a more robust survival rate of 81%.²

Oral cancer is thought to progress through various stages of premalignancy prior to establishing itself as oral squamous cell carcinoma, the most aggressive form of this condition which accounts for more than 90% of all oral cancers. Due to the destructive nature of advanced-stage oral cancers, early detection and diagnosis are paramount to the prognosis and success rates of treatment.

Several known risk factors exist for oral cancer, including tobacco use and alcohol consumption. A synergistic effect is known to exist when both alcohol and tobacco are being used. Any person with a prior head or neck malignancy is also at an increased risk of developing oral cancer and will require more frequent monitoring. An additional risk factor is the presence of the human papilloma virus (HPV), specifically the HPV-16 and 18 strains. Also of concern is that oral cancer is being found in younger, non-smoking patients under the age of 50, making regular systematic

screenings even more critical in this group than once thought.

Dental hygienists have long been integral providers of oral health prevention and management. Since the primary goal of oral cancer screening is early detection, dental hygienists play a critical role in identifying oral premalignant lesions and initiating steps in the referral pathway. Detailed treatment planning and individualized patient care provide the dental hygienist with the opportunity to identify individuals at higher risk for oral cancer and perform effective screening exams. It has been determined that early diagnosis of oral cancer leads to an excellent prognosis in treatment, therefore regular dental hygiene visits provide a valuable setting for oral cancer screening.³

According to a recent document released by the BC Oral Cancer Prevention Program (BCOCCP), a head, neck and oral soft tissue examination should be completed on all patients at the time of a new patient examination and at subsequent recall appointments.⁴ At a minimum, systematic annual exams should be conducted on all patients aged 40 or older using a standardized step-by-step approach to screening and the evaluation of oral mucosal lesions suspected to be malignant or premalignant.⁴ This step-by-step process involves:

- 1) a comprehensive review of the patient's history including health history, oral habits and lifestyle (tobacco and alcohol consumption) as well as any symptoms, pain or discomfort;

► CONTINUED ON PAGE 12

Root of the Matter, cont.

2) a thorough intraoral and extraoral visual screening exam which includes systematic palpation and inspection of lymph regions, lips and perioral tissues, intraoral soft tissues (with close attention to high risk sites such as the lateral borders of the tongue, floor of mouth and soft palate), lesion inspection and documentation of size, colour, texture and outline incorporating digital photographic records whenever possible;

3) the use of optional screening adjuncts such as toluidine blue staining and direct fluorescence visualization may be used to enhance lesion characteristics, identify satellite lesions and assist in biopsy site selection; and

4) diagnostic biopsy when suspicious lesions persist for more than 3 weeks after having removed the source of local irritants such as trauma, infection or inflammation.

In many American states and Canadian provinces (including BC), it is within the dental hygiene scope of practice to identify tissue abnormalities and make referrals to an appropriate specialist, which makes oral cancer screening an important responsibility for every dental hygienist. Even where dental hygienists may not self-initiate, they need to be professionally prepared and responsible for oral cancer examinations and risk counseling. According to surveys in British Columbia, Nova Scotia, Maryland, North Carolina, California and Italy, despite having received instruction in oral cancer screening, many hygienists still report not performing oral cancer screenings

on a regular basis and a gap has been identified between knowledge and clinical application of oral screening techniques.⁵⁻¹⁰ Thus, there remains a need for continuing education for dental hygiene professionals to improve clinical perceptions and skills in detecting oral lesions, which require further triage and management. The BC Oral Cancer Prevention Program has developed a website (www.orca.net) which offers useful information on oral cancer and referral pathways within BC as well as information on upcoming continuing education courses on oral cancer for dental health professionals.

Although dental hygienists are by definition “opportunistic screeners” based on the dental clinic environment in which they regularly treat patients and perform oral cancer examinations, the opportunity also exists for hygienists to extend their influence to population-based screening programs. In Vancouver’s Downtown Eastside, an oral cancer screening program of the area’s high-risk population has been successful in screening 200 patients and identifying 31 cases of leukoplakia, 13 (42%) of which showed positive toluidine blue staining.¹¹ To date, 12 of these 13 cases have been biopsied, identifying 2 cancers and 8 pre-cancers.¹¹ This oral cancer screening program has benefited directly from the involvement of a local dental hygienist who has been actively involved in the screening process and data collection as part of her graduate research in oral cancer screening programs of high-risk populations.

Being “frontline screeners,” dental hygienists should understand the nature of oral cancer, constantly update their knowledge of its detection and prevention and most importantly, conduct oral cancer screening for all adult patients at the time of their regular dental visits for hygiene procedures. With practice, this exam can be completed within a minute and can save lives.

References

1. Canadian Cancer Statistics 2008. Canadian Cancer Society/National Cancer Institute of Canada. (September 8, 2008) Available online at: http://129.33.170.32/Canada-wide/About%20cancer/Cancer%20statistics/~/_media/CCS/Canada%20wide/Files%20List/English%20files%20heading/pdf%20not%20in%20publications%20section/Canadian%20Cancer%20Society%20Statistics%20PDF%202008_614137951.ashx
2. Cancer Facts and Figures 2003. American Cancer Society. (September, 2008) Available online at: http://www.cancer.org/docroot/STT/stt_0_2003.asp?sitearea=STT&level=1
3. Cormier L and Lavelle CL. The dental hygienist's role in screening for oral cancer. *Probe*. 1995 Mar-Apr; 29(2): 53-6, 58-9.
4. Guideline for the Early Detection of Oral Cancer in British Columbia 2008, JCDA. 2008 April; 74(3): 245-53.
5. Forrest JL, Horowitz AM, Shmueli Y. Dental hygienists' knowledge, opinions, and practices related to oral and pharyngeal cancer risk assessment. *J Dent Hyg*. 2001 Fall; 75(4): 271-81. Review.
6. Forrest JL, Drury TE, Horowitz AM. U.S. dental hygienists' knowledge and opinions related to providing oral cancer examinations. *J Cancer Educ*. 2001 Autumn; 16(3): 150-6.
7. Nicotera G, Gnisci F, Bianco A, Angelillo IF. Dental hygienists and oral cancer prevention: knowledge, attitudes and behaviors in Italy. *Oral Oncol*. 2004 Jul; 40(6): 638-44.
8. Tinoco JA, Silva AF, Oliveira CA, Rapoport A, Fava AS, Souza RP. Human papilloma virus (HPV) infection and its relation with squamous cell carcinoma of the mouth and oropharynx. *Rev Assoc Med Bras*, 2004 Jul-Sep; 50(3): 252-6. Epub 2004 Oct 21.
9. Ashe TE, Elter JR, Southerlands JH, Strauss RP, Patton LL. North Carolina Dental Hygienists' Oral Cancer Knowledge and Opinions: Implications of Education. *J Cancer Educ*. 2006; 21: 151-156.
10. Clovis JB, Horowitz AM, Poel DH. Oral and pharyngeal cancer: knowledge, opinions and practices of dental hygienists in British Columbia and Nova Scotia. *Probe* 2003; 37(3): 109-122.
11. Poh CF, Currie BL, Hislop G, Sikorski S, Zhang L, MacAulay C, Rosin MP. Integration of new technology into a high-risk underserved community: pilot studies within an oral cancer screening clinic. *AACR Frontiers in Cancer Research* November 12-15, 2006, Boston, Massachusetts.

Study Clubs

A study club registered with the CDHBC has a membership of at least five dental hygienists who come together for clinical or non-clinical educational study for the purpose of maintaining or increasing their competence. The CDHBC believes that study clubs are a valuable venue for continuing dental hygiene competence and professional development. Each session is facilitated by a mentor who is responsible for the educational component of the session. Mentors may or may not be members of the dental profession; they may be guests of the study club, members of the study club, or designated guides for the entire series of sessions. To receive registration approval from the College as a CDHBC study club, clubs must meet all the criteria included in the study club definition and in the Application for Registration form (for more details visit <http://www.cdhbc.com>, Dental Hygienist Resources: Study Clubs). You can email Robin Adams, Registrant Services Coordinator (radams@cdhbc.com), for more information on joining a study club or call 1-800-778-8277.

Lower Mainland Dental Hygiene Seminars Study Club
Coquitlam, B.C.

Comox Valley Dental Hygiene Study Club
Comox, B.C.

Gateway Dental Hygiene Study Club
Abbotsford, B.C.

Dental Hygiene Study Club of the Fraser Valley
Fraser Valley/Lower Mainland, B.C.

Camgara Study Club
Vancouver, B.C.

Langley Dental Hygiene Seminars Study Club
Lower Mainland, B.C.

Plan II Dental Hygiene Study Club
Burnaby, B.C.

Hygiene 2000 Dental Hygiene Study Club
Delta, B.C.

Coquitlam Periodontal Study Club
Surrey, B.C.

Westside Periodontal Dental Hygiene Study Club
Burnaby, B.C.

West 10th Avenue Dental Hygiene Study Club
Vancouver, B.C.

Squamish Dental Hygiene Study Club
Squamish, B.C.

Cariboo Dental Hygiene Study Club
Williams Lake, B.C.

Okanagan Periodontal Study Club
Kelowna, B.C.

Greater Vancouver Dental Hygiene Seminars Study Club
Maple Ridge, B.C.

Harbour City Dental Hygiene Study Club
Nanaimo, B.C.

Semiahmoo Dental Hygiene Study Club
Burnaby, B.C.

Northern B.C Dental Hygiene Society Refresher Course Study Club
Prince George, B.C.

Pacific Dental Conference

REGISTRATION NOW OPEN

Pacific Dental Conference 2009, March 5-7 at the Vancouver Convention Centre sponsored by the Canadian Dental Association

For information and online registration, visit <http://www.pdconf.com>

With over 10,800 attendees at the 2008 conference, the Pacific Dental Conference is one of the largest dental conferences in North America, and it is a great source of Continuing Competency credits. Conference registration includes admission to over 110 open sessions as well as entrance to the exhibit hall, with over 500 booths.

Hygienist admission rates:

Early (on or before Jan. 16, see site for details): \$160

Full (from Jan. 17): \$260

Onsite (from March 3, see site for times): \$310

Student registration is only \$20, please provide your student number and school name to be eligible for this rate. For more information visit the Conference website or call (604) 736-3781.

Online registration closes at midnight on February 20, 2009.

Call for Examiners

The BC Dental Hygiene Practice Examination is an important function of the CDHBC. The Examination is designed to determine if an individual's clinical skills are at an entry level competency, which is required to safely practice dental hygiene in British Columbia.

Canadian and foreign graduates of dental hygiene programs who are not listed on the CDHBC Schedule I bylaws are required to successfully complete the BC Practice Examination to be eligible for dental hygiene registration in BC.

The CDHBC needs to expand its pool of qualified examiners due to the large increase in the number of examination applicants. In particular, we are looking for dental hygienists who have had experience teaching in a clinical setting and evaluating students to an entry level competency.

Examination sessions are typically held in the late fall and early summer each year.

If you are interested in joining the examiner pool please contact Popi Bowman, Examination and Office Manager, at the CDHBC office by email (pbowman@cdhbc.com) or via telephone at 1-800-778-8277 or (250) 383-4101.

Moving?

It is essential that registrants of the College ensure that their mailing address is always current on the CDHBC register. Incorrect or out-of-date addresses can lead to missed mailings that may include important notices and documents. Address changes are best submitted in writing and should include the following information.

- *Name*
- *Registration Number*
- *Old Address*
- *New Address*
- *Email*
- *Telephone*
- *Effective Date*
- *Signature*

Contact Us

MAIL

College of Dental Hygienists
of British Columbia
Suite 219 – Yarrow Building
645 Fort Street
Victoria, BC V8W 1G2

PHONE

1-800-778-8277 *Toll Free within B.C.*
(250) 383-4101

FAX

(250) 383-4144

EMAIL

cdhbc@cdhbc.com

WEBSITE

www.cdhbc.com

Postmaster Please Send Undeliverable Copies To

*The College of Dental Hygienists of British Columbia
Suite 219, Yarrow Building
645 Fort Street
Victoria, BC
Canada V8W 1G2*

