



COLLEGE OF
DENTAL HYGIENISTS
OF BRITISH COLUMBIA

ACCESS

The latest news from CDHBC | Summer 2012



Promoting Increased Access to Care: Expanding Practice Opportunities through 365-Day Rule Exemption

Along with the first signs of Spring this year came an announcement which will open doors for access to care and create new opportunities for many registered dental hygienists in B.C. The addition of a new registration category to the CDHBC bylaws was announced by the Ministry of Health and will be made effective on July 3rd, 2012. Although this change falls short of full removal of the 365-Day Rule for all, it is a step in the direction of increased access and will have an impact on many forms of dental hygiene practice in this province.

This new category, entitled Full Registration (365 Day Rule Exempt), offers hygienists with specific education and experience the ability to provide care to clients in a wide range of settings, without having to comply with the 365-Day Rule. Although registrants in this category will no longer be bound by this rule, there will remain a professional responsibility to refer clients for regular and timely dental exams in order to ensure that all aspects of their dental care

are met. Interprofessional collaboration on health and oral care will continue to be an ever-important element in providing optimal client-centered care.

In order to qualify for registration in the 365-Exempt category, certain criteria must be met and an application process completed. Qualified registrants will have either a degree in dental hygiene or will be able to demonstrate certain abilities to a degree-level related to the assessment, diagnosis, planning, implementation and evaluation of care for individuals with complex needs. These abilities will also include working effectively as a member of an interprofessional health care team, applying the standards of infection control and safe practice in alternative settings, and making appropriate and timely referrals when abnormal conditions beyond the DH Scope of Practice are identified.

(cont. on p.2)



Message from the Registrar

HEATHER BIGGAR, ACTING REGISTRAR



This Spring has been a time for new growth and new beginnings! While Jennifer and her family welcome their new addition, I find myself stepping into a new role at the College and feel fortunate to be a part of several exciting projects that are taking shape. With each project comes a unique set of challenges and rewards which will all serve to further support the College mandate of public safety.

Through the ongoing efforts of an expert working group, the Infection Prevention and Control (IPC) Guidelines developed for dental health care providers in B.C. will be finalized over the next few months. This manual is an invaluable source of information to guide dental hygienists, dentists and CDAs in establishing effective infection control standards consistent with current literature and best practice. Once published, the IPC document will be made available online at the CDHBC website for practitioners to easily access and may be printed off for immediate reference.

The Quality Assurance Program is well into its second stage of piloting with over 100 registrants having volunteered to

participate in the pilot group and having completed the online assessment tool in January/February 2012. The assessment phase of the program has shown a 96% success rate with an average score of 80%, which suggests that the vast majority of registrants who have completed the tool are at or above the entry-level standard for practice in B.C. The Quality Assurance Committee continues to review the feedback provided by the pilot group and will make changes as necessary to ensure the process remains valid and defensible. It is reassuring to see such positive results from a representative group of registrants as we move towards the uptake of the first cohort to their new QAP cycle in 2013.

Other new beginnings include the forthcoming implementation of the 'Full (365-Day Rule Exempt)' category of registration. As outlined in the cover article, this category makes further progress in reducing barriers to care and in providing hygienists with additional practice options. While we have not been entirely relieved of the existing 365-Day Rule and its limits on practice, we will endeavor to make available to an increasing number of registrants the opportunity to offer dental hygiene care to clients in a variety of practice settings. We encourage our registrants to embrace this opportunity for new beginnings and to seek out the avenues that will provide them with the requirements for registration.

Promoting Increased Access to Care *(cont. from p.1)*

Successful applicants to the 365-Exempt category will have also completed 3500 hours of clinical dental hygiene practice in the five years leading up to their application. Given that dental hygienists currently practice in a variety of environments while applying a range of skills and responsibilities, clinical practice will be further defined so as to facilitate determining the fulfillment of this requirement. Additional information will be shared on this topic as work continues with dental hygiene experts, consultants, stakeholders and the CDHBC Board and Committees.

Given the diversity of practice settings and the independent nature of this category, registrants are also required to maintain current CPR qualifications consistent with those required by continuing care staff. A distinct CPR course (CPR-Health Care

Provider) is available to this end which addresses additional resuscitation methods appropriate for this type of client care.

Registrants who currently hold Full (Residential Care) registration will be grandfathered into the Full (365 Day Rule Exempt) category on July 3rd. For these individuals, no additional application process will be required and documentation identifying their new registration will be forwarded to each registrant.

Please continue to visit the CDHBC website at WWW.CDHBC.COM for further updates on the launch of this new registration category.

Jennifer Lawrence, Registrar

Message from the Chair

MARILYNNE FINE, CHAIR

I know many of you are aware that the College has been making a greater effort to modernize its ways of doing business. In the past few years, these initiatives have included the redesign of our website and newsletter, online registration and Continuing Competency (CC) processing, double-sided printing on recycled or forest-friendly products whenever possible, moving to electronic distribution of documents, and emailing rather than mailing updates and information, which not only costs less but also creates less waste.

Our registrants have embraced these changes, entering hundreds of CC entries weekly into their online registrant profiles — and 93 percent of registrants renewed online this past Spring. In keeping with these improvements, CDHBC has seen the benefit of developing a QAP that is delivered online to allow our registrants complete flexibility in how and when to be involved. The virtual, web-based platform will enable registrants to access their Online Learning Plan (OLP) from any computer. The OLP will assist registrants in clarifying goals, linking educational courses to those goals, and supplementing weaker practice areas over the course of the five-year QAP cycle. We anticipate that this system will become an invaluable tool for all registrants throughout their career development, as it will help all of us focus on those areas that might need improvement. You can find more information about the QAP on p.4.

Handbook, with updated information about the QAP and a more user-friendly format. It will be posted on the website and updates will be provided digitally, rather than mailed. As we continue developing new ways of delivering important information, we hope registrants will rely on our website for ongoing practice support.



Speaking of the website, it was recently the two-year anniversary of its redesign. In that time, we have noticed a significant decrease in general questions from registrants, in part because much of the information is easier to find online. What is especially interesting are some of the statistics of our website viewership: Between Jan 1, 2011, and Jan 1, 2012, the site logged almost 21,000 visitors, and more than 43,000 visits (meaning some were returning viewers); almost 2000 of those visits were via a mobile device. In total, there were more than 104,000 page views! Another surprising number: more than 43 percent of visitors were new. We can also see that our viewers come from all over the world, including India, South Korea, Australia, the Philippines, Brazil, and New Zealand.

I hope you can appreciate how the College has grown over the years, and know that it will continue to grow as it works to uphold its role of protecting public safety, at the same time serving to support the improved practice of B.C. dental hygienists.

Comings & Goings

The College welcomes new receptionist Arpita Monahan to replace Alexandria Kreiberg, who was promoted into the position of Registrant Services Assistant. Gillian Dyck, who previously filled this role, is now the Quality Assurance Program Coordinator, a new administrative support position for the Quality Assurance office. We are also pleased to welcome back Jannelle Snowden in the new position of Administrative Manager.

We would also like to thank Popi Bowman for almost four years with the College as the Examination, Communications & Operations Manager, during which time she assisted with many important projects. As Popi and her family return to Toronto, we wish them the best for their new adventures.

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Quality Assurance Program Update

IN ACCORDANCE WITH THE HEALTH PROFESSIONS ACT (HPA), ALL B.C. HEALTH PROFESSIONS MUST ESTABLISH A QUALITY ASSURANCE PROGRAM (QAP).

On January 1, 2013 the new Quality Assurance Program comes into effect, replacing the existing Continuing Competency Program. Registrants will be phased-in to the new requirements over a 5 year period.

It is important to note that with the new QAP, the basis for selecting continuing education activities remains similar to the existing continuing competency program. Each registrant will still be making their own choices and decisions regarding continuing education activities. Feedback from the QAP Assessment Tool is intended to assist registrants in making their continuing education choices. There will be some requirement to link competencies identified as needing improvement to learning goals and activities over the 5-year QAP Cycle, but each registrant will determine the means that best suit their individual situation.

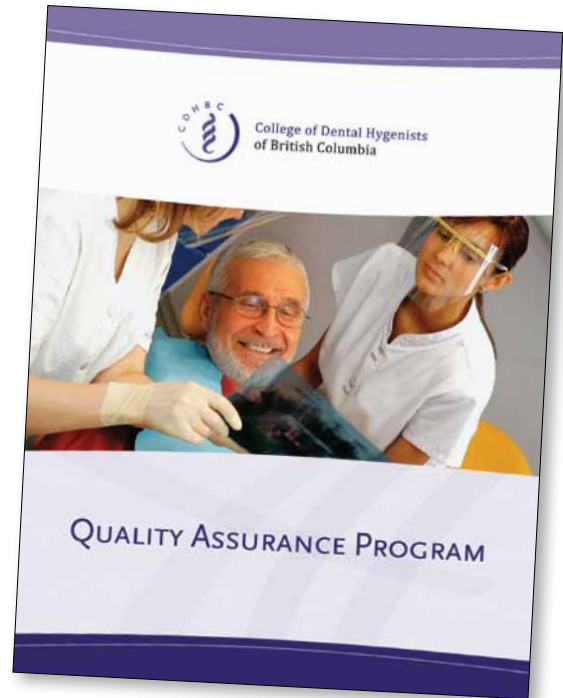


Approximately 600 registrants who have CC Cycles ending on December 31, 2012 will be randomly selected to begin the new 5 Year QAP Program and complete the QAP Assessment Tool in January-February 2013. The remainder of registrants will be assigned a new CC Cycle and will begin the QAP in January 2016. This model of selecting registrants to start the QAP will be followed throughout the next 5 years until all registrants have been successfully phased in to the new program.

All registrants selected for the QAP program in January following their CC Cycle expiry will be notified in June to provide a sufficient time period for QAP Assessment Tool preparation. In conjunction, there will be a full Information Guide and supporting materials posted on the CDHBC website to assist with your review of study materials. An existing review option is completion of the NDHCE Practice test which contains similar content to the QAP Assessment Tool and is eligible for Continuing Competency Credits.

Over the past fall and winter, two separate QAP Pilots were conducted in order to gain sufficient registrant feedback. The proposed QAP was evaluated, revised as appropriate and finalized. Registrant feedback has been an important part of the QAP development; ongoing evaluation of the QAP will continue to shape the quality assurance process.

To find more information about the Quality Assurance Program, including the QAP Guiding Principles and Assessment Tool information, please visit our website at WWW.CDHBC.COM



2012 AGM

The 2012 CDHBC Annual General Meeting was held in Parksville, BC on June 7th and was very well attended by registrants. The College was pleased to be able to present Dianne Gallagher with the 2011 Darlene Thomas Award and to acknowledge her valuable life-long contribution to the profession of dental hygiene.

Root of the Matter: Tooth Bleaching

JACQUELINE GUYADER, SENIOR DENTAL HYGIENE CONSULTANT

With the increasing availability of tooth whitening systems including both over the counter and in-office treatments, there has been a rising number of clients coming into offices asking for whitening. With this popularity, the College of Dental Hygienists of BC (CDHBC) office has had an increase in the number of questions from registrants inquiring about the scope of practice regarding vital tooth bleaching techniques. It is important to keep in mind that CDHBC regulates the individuals practicing dental hygiene in BC. However, the College does not regulate products such as bleaching materials or instruments used in the bleaching process. Since the act of bleaching is not a restricted activity, the College currently has no jurisdiction over regulating whitening that is offered by workers at mall kiosks and spas.

As Outlined in the CDHBC Registrants Handbook under Dental Hygienists Regulations Scope of Practice “a registrant may assess the status of teeth and adjacent tissues and provide preventative and therapeutic dental hygiene care for teeth and adjacent tissues”.^{1:tab 3 pg 2} This incorporates the removal of “stain through various methods”^{1:tab 6 pg 5} and includes the fabrication and placement of custom bleaching trays for clients.¹ The utilization of light to activate bleaching chemicals for the purpose of bleaching teeth is also included under within this interpretation. An example of light activated bleaching would be the Philips Zoom® whitening system. It should be noted that the dental hygiene process of care must be followed when providing professional bleaching systems. The steps of assessment, diagnosis, planning, implementation and evaluation (ADPIE) are applicable for this process.

Baseline information is required in order to provide the best treatment options for clients who are considering whitening their teeth. This may include photographs and shading information to determine baseline colour of the teeth. A soft and hard oral tissue exam along with reviewing current radiographs can determine possible contraindications to tooth bleaching.^{2,4} Consideration should be giving to the following prior to the implementation and delivery of bleaching trays: etiology of the stain, possible allergies to peroxide, presence and extent of recession, pre-bleaching tooth sensitivity, carious lesions, pre-existing restorations, cracks in the enamel, clients expectations and pregnancy & lactating women.^{2,3,4}

In order to provide safe and ethical care that is in the best interest of the client, it would be prudent to work in collaboration with

the client’s dentist.¹ This allows the dental hygienist to discuss restorative needs and options that have been planned by the dentist that contribute to the best treatment outcomes for the client.

The dental hygienist must have completed “appropriate education” in order to safely and competently provide vital tooth bleaching services. If this education was not obtained through the registrants dental hygiene diploma program, a refresher course or equivalent education would be necessary. This would include material on: alginate impressions, pouring cast models, fabricating bleaching trays, professionally dispensed whitening products and the ADPIE process involved in tooth bleaching.

Questions have been raised as to whether dental hygienists in BC are able to use bleaching systems that are activated by laser. The use of lasers to activate the bleaching chemical may increase the temperature of the pulp and have the potential to cause irreversible pulpal damage.^{3,5,6,7} Furthermore, the research indicates that besides the potential harm that may occur within the pupal tissue, there is limited clinical evidence demonstrating the efficacy of the whitening effect of laser activated tooth bleaching systems over professional tray methods.^{3,5,7,8} As such, laser use as a whitening method is not within the CDHBC Scope of Practice.¹

Ethical and evidenced-based client-centered care is the responsibility of all registered dental hygienists practicing in BC especially when implementing new systems and technologies into practice. Be sure to know the Practice Standards of your profession and practice within them. A link to the Dental Hygiene Practice Standards is provided on the CDHBC Website at WWW.CDHBC.COM.

References:

- CDHBC Scope of dental hygiene practice & interpretation guidelines, CDHBC Registrants Handbook: Tab 3, 6 & 7 pg 4, 5, 6, 58 & 59.
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- Burrows, S. A Review of the Efficacy of Tooth Bleaching. *Dental Update* 2009; November: 537-551



Committee Reports

A SUMMARY OF CDHBC ACTIVITIES & BUSINESS

Registration Committee

JACQUELINE GUYADER, PAST CHAIR

After serving on the Registration Committee for the maximum terms, we recently said goodbye to Carole Whitmer and Laura Leadbetter-Fuoco (Vice Chair). We also thank Maggie Winters (March 09- Feb 12) for her contributions to the committee.

Registration committee membership list

Denise Beerwald, elected Board member
March 2011 – February 2014

Caroline Jiang, registrant
March 2012– February 2014

Stephanie Kelly, registrant
March 2012 – February 2014

Kim Logan, public representative
March 2012 – February 2014

Tara McCall, registrant
March 2012 – February 2014

Myrna Park, public representative
March 2012 – February 2014

The Committee meets in person or by teleconference at least two weeks before each Board meeting. Mail ballots are conducted as necessary.

As of May 25, 2012, the status of the register was as follows:

2907	full registrants
82	full (residential care) registrants
273	non-practicing registrants
75	conditional registrants
0	student practitioner registrants

Major Initiatives

- Approved revised policies.
- Reviewed Local Anesthesia courses.
- Recommended minor revisions to the current Clinical examination
- Reviewed UBC Bachelor of Science in Dental Hygiene Courses in order to determine equivalency in meeting requirements for the Residential Care Category, then made recommendations to the Board for approval.
- Reviewed newly accredited dental hygiene education programs and made recommendations to the Board for approval in order to amend CDHBC bylaw Schedule I.
- Approved contractor for the development of the substantial equivalency instrument in order to determine educational programs that meet the requirements for the 365-Exempt registration category.

Inquiry Committee

MARILYNNE FINE, CHAIR

During the past fiscal year the Inquiry Committee received 4 written complaints, initiated an additional 10 investigations on its own motion, and continued investigation of one complaint carried over from the previous fiscal year. The complaints have ranged from alleged breach of ethics, violation of marketing bylaws, to working outside the Scope of Practice. The Inquiry Committee resolved a total of 8 complaints and continues to investigate the remaining 7 complaints during this next fiscal year.

(cont. on p.7)

Quality Assurance Committee

JENNIFER MELVILLE, CHAIR

The last year has been very busy for the Quality Assurance Committee with the main focus being the implementation of the upcoming Quality Assurance Program. The Committee has been working continuously with the College to ensure the development of this program unfolds in accordance with the *Health Professions Act*. The major ongoing activities that the Committee has been undertaking with regard to the QAP include:

- Preparation and implementation of the first and second QAP pilot phases for testing of the QAP assessment tool and online learning plan module
- Selection of a research firm to survey and report on pilot group participants' experiences during the QAP pilot phases
- Implementation of changes to the QAP assessment tool and online learning plan module as well as updating technology to reflect pilot feedback

The Committee's current QAP projects consist of developing bylaws and policies related to QAP and the implementation of an Assessor Process.

Although the work surrounding the QAP has predominately occupied the Committee's time, other ongoing activities have included the review of an Infection Prevention and Control Guidelines document and the provision of feedback to developers as well as the review of continuing competency credits requested by registrants.

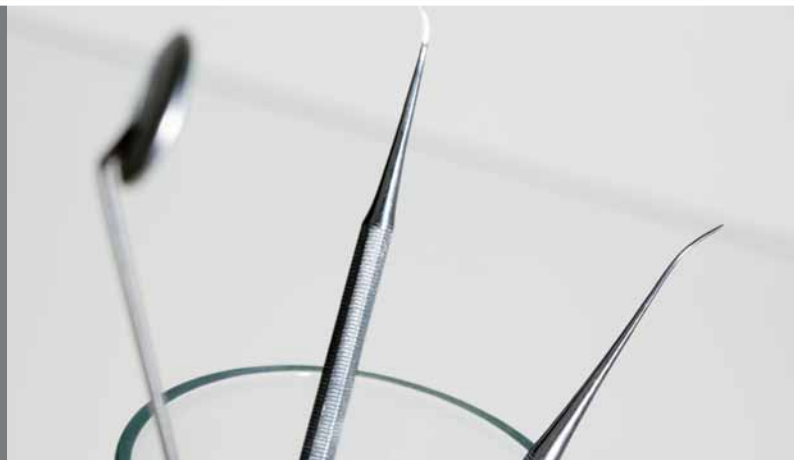
The Committee would like to thank Whitney Buggy, one of the Committee's long-standing public representatives, for his hard work and dedication to this committee since his appointment in October of 2004 until February of 2012. His contribution has been greatly appreciated and the Committee would like to wish him the best with his future endeavors.

The Committee welcomed a newly appointed public representative, Dr David Kennedy, and looks forward to working with him on the upcoming Committee projects. The term beginning March 1, 2012 also welcomed a new Chair, Jennifer Melville, who had previously served as Vice-Chair of the Committee since March of 2009. The Committee would also like to extend a thank-you to Monica Soth, who has served as Committee Chair for last two consecutive years.

(cont. from p.6)

The Inquiry Committee endeavors to thoroughly investigate all complaints received in a timely and diligent manner in accordance with the *Health Professions Act*.

The Committee would like to thank Kerry Simmons for being a valued Committee member since 2008, and for serving as Chair of the Committee this past fiscal year. The Inquiry Committee is very pleased to welcome two new members, Julie Akeroyd and Ruth Lunn as well as acknowledging Marilynne Fine in her new role as Chair of the Committee.



Moving?

It is a bylaw requirement 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 can be submitted online at www.cdhbc.com or via email to cdhbc@cdhbc.com and should include the following information.

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

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