



MILESTONES

Resource for Dental Hygienists in Ontario

JULY 2009

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College of Dental
Hygienists of Ontario

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L'Ordre des hygiénistes
dentaires de l'Ontario



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Publications Mail Agreement No. 40026784

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MISSION STATEMENT

The mission of the College of Dental Hygienists of Ontario is to regulate the practice of dental hygiene in the interest of the overall health and safety of the public of Ontario.

ÉNONCÉ DE MISSION

La mission de l'Ordre des hygiénistes dentaires de l'Ontario consiste à réglementer l'exercice de la profession d'hygiène dentaire de sorte à favoriser l'état de santé global et la sécurité du public ontarien.

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PRESIDENT'S MESSAGE Linda Jamieson



Editor's Note: The following is a written account of the President's remarks to Council on May 29, 2009.

Good morning and welcome to our second Council meeting of 2009. Before we begin the day's deliberations I would like to take a few minutes to reflect on the important relationship the College of Dental Hygienists of Ontario has with the Public of Ontario.

When dental hygiene was granted self-regulation 15 years ago, the profession entered into a social contract with the citizens of Ontario. This contract is defined by the belief that dental hygienists, individually and as a profession, will put self-interest aside and instead will act in the best interest of the public in achieving optimal oral health for all. The CDHO is responsible for ensuring that the dental hygiene profession fulfills this contract.

Jos Welie discusses the Hallmarks of Professionalism in the October, 2004 issue of the *Journal of the Canadian Dental Association* (JCDA). Welie says that society's trust in professionals is not vested

in any one individual service provider but in the profession at large; that trust in the individual is secondary to the trust and belief clients have in the profession. He goes on to suggest that trust is established and maintained only when the profession assumes responsibility for itself. Welie identifies the following as professional responsibilities: 1) ensuring all members of the profession are competent to provide services within their full scope of practice; 2) recognizing that clients are unable to objectively assess the work of their professional provider and therefore the profession must institute a peer review process to monitor its members and protect the public from members who may not be acting in the common good; and 3) the care provided is the highest quality care regardless of the professional providing the service. Welie cautions however that competition between individual professionals creates a conflict of interest which is not in the public's best interest. He also concludes that even if a

profession fulfills the responsibilities listed above, it is of no consequence if access to services is a problem.

CDHO Council recently reflected on the accomplishments achieved over the past 15 years. Notable among these are:

- Establishing Standards of Practise for all registrants and recently specific Standards of Practise for Educators;
- A Quality Assurance Program based on self-reflection and peer review that requires registrants to develop strategies for continuous quality improvement;
- Authority to self-initiate the controlled act of “scaling and root planing teeth, including curetting surrounding tissue”;
- Ensuring that CDHO is an organization that is financially sound and provides strong and ethical leadership;
- Ongoing collaboration with other organizations and regulatory colleges;

- Establishing the Knowledge Network, a web-based tool that provides current, relevant information to support clinical decision making.

It is interesting to note how each of these reflects the hallmarks of professionalism presented by Welie. As the regulator of dental hygiene in Ontario, the CDHO works diligently to ensure the public can maintain its trust in the profession of dental hygiene. Unfortunately, access to dental hygiene services remains a problem. It is incumbent upon the CDHO and this Council to take whatever steps it can to increase access. We need to look beyond those who are currently receiving dental hygiene care and reach out to those with the most unmet needs. Not everyone will choose a dental hygienist as their preventive oral health care provider but CDHO needs to ensure that their choice is an informed one, and not

based on a lack of awareness of what dental hygienists can do or lack of easy access to dental hygiene services.

This Council envisions a future where all citizens in Ontario can receive quality preventive oral health care; where dental hygienists are able to act with full autonomy within their scope of practice; where dental hygienists are accepted and valued as an integral part of the broader health care team; where interprofessional collaboration is based on mutual respect, recognition of each profession’s unique expertise and places the client at the centre of all decisions; and where all dental hygienists remain proud of their profession, their registration with the CDHO and their relationship with the public of Ontario. We **can** get there. **It is our social responsibility to get there!**

Reference: Welie, J. (2004). Is Dentistry a Profession? Part 2. The Hallmarks of Professionalism. *Journal of the Canadian Dental Association*. 70 (9).





MESSAGE FROM THE REGISTRAR

Fran Richardson

TWO STEPS FORWARD, ONE STEP BACK?

Earlier in the year, the dental hygienists in Nova Scotia received word that the Act creating the College of Dental Hygienists of Nova Scotia had been proclaimed and that they could start registering applicants. In June 2009, New Brunswick became the eighth province to grant dental hygienists the right to govern themselves. Recently, on the request of the island's dental hygienists, the PEI Dental Board agreed to remove the requirement for supervision of dental hygienists by dentists in that province. The quest for self-regulation continues across the country. In addition, dental assistants in Alberta and Saskatchewan have achieved self-regulation and other provinces, including Ontario are seeking such responsibility.

This edition of *Milestones* also includes an article by the College's legal counsel Richard Steinecke in which he discusses the fact that self-regulation, as we now know it, is under siege in this province. As all of the Councils and administrative staff of the RHPA Colleges can attest, the amount of submissions and oversight by various components of the government have almost become overwhelming. That is not to say that we are not keeping up, we are, but that also means that the Colleges have to set priorities and often that means not doing some of the communication components with the public as quickly as we may like.

Enhanced accountability is not the issue – the Colleges want to be accountable to the public and to the profession that funds them. The issue is more that the various government bodies don't always communicate with one another thus putting the Colleges in a situation where they are stretching valuable resources to the limit. Of course,

all of the day-to-day activities still have to be maintained while the various government submissions are being made. This also puts a strain on the internal workings of the organization.

This is not to say that self-regulation isn't worth the time and effort – of course it is! Dental hygiene fought for too long to achieve self-regulation that we are going to do all in our power to retain that privilege. In addition, the eight provinces that have "made it" will definitely assist those other two to also become self-regulated when the dental hygienists in NL and PEI are ready to take on that challenge.

As noted in Mr. Steinecke's article, the government introduced Bill 155 enacting the *Ontario Labour Mobility Act (OLMA)* which mandates that regulators abide by the Agreement on Internal Trade (AIT). While the regulators in the health professions have implored their respective provincial governments to consider the implications of AIT, most of those concerns have not been heeded and Colleges will be required to register anyone who has been registered in another Canadian jurisdiction. Fortunately for the CDHO, graduates of non-accredited schools who have not been clinically evaluated by a regulatory authority will be exempt from the AIT ruling and will be required to undergo a clinical evaluation before being eligible to register in Ontario. However, once the OLMA is passed, Colleges will be required to register applicants who were registered in another province or territory, who are in good standing, without further examination even if the College has previously refused that individual. Of course, the question then becomes, who is responsible if that individual proves to be incompetent? Let us hope that scenario does not occur.

Accountability is a good thing! We are all accountable in many ways. However, an increased frustration for the CDHO is the number and quality of non-accredited dental hygiene programs currently operating in Ontario. The CDHO has met with representatives of MTCU, CDAC, NDHCB and most of the non-accredited schools to try to sort out the problem. Yet, while the CDHO is the regulatory authority in Ontario, the CDHO has no say on which programs may operate, the quality of the programs or who can teach in them. The CDHO is constantly being held accountable by stakeholders to do something! We are. A regulation is being proposed that will put a limit on when graduates from non-accredited schools in North America can apply to the CDHO for registration; the MTCU is putting a limit on how long a program may operate without being successful in the CDAC accrediting process; and the CDHO Quality Assurance Committee has produced Standards of Practice for Educators. Each of these measures should help raise the quality of dental hygiene education in Ontario.

The first decade of the twenty-first century is nearly past history. When we look back on these past ten years, will we recognize that self-regulation has progressed or will we see that progression has received setbacks along the way? Progress can be slow and often occurs in baby steps, but those baby steps need to be in the forward direction! To quote Richard Steinecke,

“Self-regulation is a form of participatory democracy. When it works, it is the best option. When it fails, everyone including the public is left with second best.”

Dental hygienists in Canada lived with second best when we were regulated by another profession. Now is not the time to settle back and relax. Self-regulation is a privilege and one worth fighting for, over and over again.

ADVERTISING

With the advent of additional practice options for dental hygienists also comes the opportunity to advertise to the public that preventive oral health services are now available in different ways, in various settings and from a variety of providers from which the client can choose. However, when any regulated health care professional chooses to advertise to the public they must do so in a tasteful, professional manner in accordance with their particular College’s advertising regulations and guidelines.

Public advertising is relatively new to the dental hygiene community and as with all things new, mistakes are being made. The CDHO has advertising regulations posted on our web site www.cdho.org that basically amount to saying that advertisements whether in print or electronic means, must be true and they must be verifiable. In addition, they must be tasteful and reflect the high standards of the profession and the College. Demeaning another profession, individual or group does not reflect these high standards.

Sometimes, in an effort to make a particular advertisement stand from out among others, an individual may choose to be “cute” or “funny” or to include a humorous quip or picture that in reality is neither.

Dental hygienists who choose to advertise their businesses would be wise to

- Refer to the CDHO advertising regulations
- Confer with the CDHO
- Remain tasteful and professional

The public wants to know that dental hygiene services are available, but the public also needs to be assured that dental hygiene is being delivered in a professional manner. The advertisement should reflect that professionalism.



PRACTICE STANDARDS FOR DENTAL HYGIENE EDUCATORS

► By Lisa Taylor, RDH, BA, B.Ed.

On May 29, 2009 the CDHO Council unanimously approved the Standards of Practice for Dental Hygiene Educators. These standards reflect the CDHO mission to regulate the practice of dental hygiene in the interest of the overall health and safety of the public of Ontario. The CDHO acknowledges by adopting these standards that dental hygienists are competent professionals whose goals include maintaining and improving their level of competence based on accepted standards of practice.

Background

Ontario educates more than half the graduating dental hygiene students in Canada. The rapid growth of dental hygiene programs in Ontario has created an unprecedented need for dental hygiene educators. The shortage of experienced educators means that some teaching institutions have hired minimally experienced dental hygienists and non-dental hygienists to teach dental hygiene specific curriculum. As we have seen from published NDHCB and CDHO clinical examination results, some dental hygiene students are not receiving adequate instruction and supervision. A number of dental hygiene program graduates will not reach CDHO entry to practice requirements until they have completed additional education. There is added concern that the clients receiving care in some teaching institutions are at risk of receiving inadequate dental hygiene care.

The Standards of Practice for Dental Hygiene Educators were created after extensive research and with the consultation of educators inside and outside the dental hygiene community. Research determined that while some health professions have created standards for teaching and supervising students, they are not evident in the dental hygiene profession nationally or internationally. The CDHO has taken a leadership role by establishing what may be the first standards of practice for dental hygiene educators.

Guiding Educators

The Standards of Practice for Dental Hygiene Educators articulate a shared vision for dental hygiene educators and were created in collaboration with educators within higher education, inside and outside the health professions. These standards are intended to

guide the professional judgment and actions of dental hygiene educators and inspire self-reflection and continuous professional development.

Ensuring Effective Education for Dental Hygiene Students

Dental hygienists as educators are role models for their students and as such, provide a positive influence that reflects a dental hygienist as a primary oral healthcare professional who works collaboratively with other members of the health care team to provide client-centered care. The CDHO believes that dental hygiene students can expect dental hygiene educators to provide an environment conducive to learning, utilize effective teaching strategies and reflect the principles of the CDHO standards of practice.

Dental hygienists who are educators are responsible and committed to students and student learning. They prepare themselves for their role as educators by ensuring that they are competent to provide instructional strategies and evaluation tools that are evidenced based and address the diverse needs of students. They strive to improve their practice by using on-going inquiry, reflection and dialogue to refine teaching practices and improve student learning.

In addition, dental hygiene students can expect to be taught by dental hygienists who have educational preparation and/or professional development that has adequately prepared them to teach the curriculum and assume specific teaching responsibilities. Students can also expect that educators have education or experience in the area that they teach that is beyond their original dental hygiene training. The Standards of Practice for Dental Hygiene Educators identify values, knowledge and skills that dental hygiene students in Ontario can confidently expect from their teachers.

The Standards of Practice for Educators recognizes that the learning environment needs to be a safe place for students to grow and expand their knowledge and skills. It acknowledges that educators are obligated to promote inclusive practices and to keep the classroom and clinic free from discriminatory acts, coercive behaviour and harassment. It guides educators to act on issues that affect the

integrity of student learning and/or the health and safety of students, dental hygiene clients, co-workers and communities.

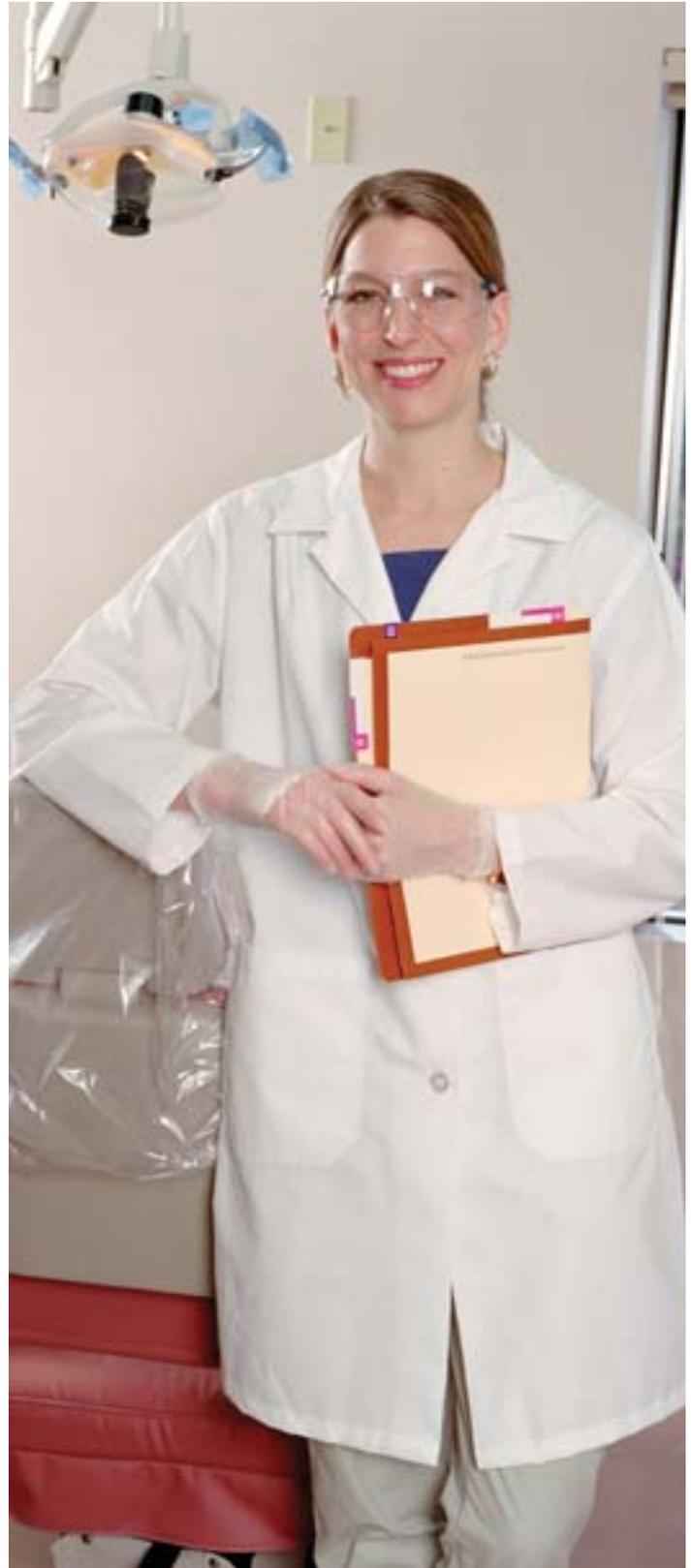
Client Care and Safety: Always a Priority

The Standards of Practice for Educators provides for the safe and effective supervision of dental hygiene students while they provide dental hygiene services to the public. Clients receiving dental hygiene care in a teaching facility do so under the supervision of registered dental hygienists who are accountable for all aspects of dental hygiene care assigned to the dental hygiene student. Prior to allowing dental hygiene students to provide care to clients, they are evaluated by their instructors and determined to have the knowledge, skills and clinical reasoning required to safely provide client care. Supervision of students providing dental hygiene interventions is always based on the consideration of the activities the student will perform and their individual skill level. Dental hygiene educators provide on-going direction and feedback to students aimed at knowledge and skill enhancement for the student and optimum care for clients. It is incumbent that dental hygiene educators withhold advancement of students who have not yet achieved appropriate milestones.

Quality Assurance

In 2008, the Quality Assurance Committee created professional portfolio forms that would allow dental hygiene educators to report more accurately what they do in their role as educators. To aid dental hygiene educators, it was determined that a benchmark was required so registrants would be able to measure their own practice and create learning goals and activities that would ensure their continuous competency aimed at meeting or surpassing indicators of competent practice. The new Standards of Practice for Dental Hygiene Educators provides this for registrants and provides the Quality Assurance Program a measure to assess the competency and effectiveness of educators who are selected to participate in the Quality Assurance Program each year.

The CDHO believes that dental hygiene educators have a profound impact on the students they teach and the profession they represent. With the growing number of dental hygienists in Ontario who identify as dental hygiene educators, the time has come to articulate the expectations the CDHO has for those dental hygienists who have the power to directly influence the future, quality and ethics of dental hygiene practice in Ontario and perhaps, Canada. The Standards of Practice for Dental Hygiene Educators can be accessed on the CDHO website at <http://www.cdho.org/PracticeGuidelines/StandardsofPracticeEducators.pdf>.



SELF-REGULATION UNDER SIEGE

► By Richard Steinecke

Earlier articles of this newsletter have observed that Canada is one of the few remaining jurisdictions in the world still using the self-regulation model for professions and industries (see: www.sml-law.com, Grey Areas, issue No. 126). However, recent events in Ontario raise questions about the commitment to self-regulation in Ontario.

In recent years a pattern has developed where the media raises concerns about the effectiveness of a particular regulator and the government makes changes or amends legislation to increase the accountability of the regulator (or sometimes many regulators). The nature and extent of the changes have cumulatively resulted in the erosion of the concept of self-regulation to the point that it is, in some circumstances, almost unrecognizable.

One trend has been that the number of public appointees to the governing Council or Board of regulators has increased. Two or three decades ago about 20-25% of the composition of the Council or Board, on average, were public appointees. Today it is just under 50% for most self-regulating bodies.

Another trend has seen the number and authority of independent “watch-dogs” increase significantly. Most regulators now have an independent body that reviews the handling of individual registration and complaints matters. The health professions also have the Health Professions Regulatory Advisory Council that conducts systemic reviews of some of the programs of the various health Colleges and regularly studies and makes recommendations on policy issues affecting them. In addition, the creation of the new Human Rights Tribunal has increased the number of complaints made against regulators. Of course, regulators have always been subject to the scrutiny of the courts.

The Office of the Fairness Commissioner is now heavily involved in all systemic registration matters including amendments to regulations, annual self-reports and regular external audits of registration practices. Bill 175 enacting the *Ontario Labour Mobility Act* has been introduced into the legislature giving the government the authority to require regulators to take action implementing the Agreement on Internal Trade (AIT), imposing administrative penalties if they do not and authorizing the recovery of any penalties paid by the Ontario government for breaches of the AIT.

Government ministries have always scrutinized regulations proposed by self-regulating bodies. However, until recently this review tended to be at a high level (ensuring there was nothing fundamentally contrary to government policy) and legal in nature. In recent years, there is a perception that the scrutiny has become much more intense, down to justifying why a regulation requires 14 days notice of public meetings as opposed to 7 or 30 days.

Many regulatory bodies find the burden of complying with these various requirements to be enormous. Some feel that they spend more resources justifying their regulatory actions than actually regulating.

Earlier this month the government introduced Bill 179 amending the *Regulated Health Professions Act*. Two of the proposed amendments will further undermine the concept of self-regulation. The first allows the Minister to appoint a Supervisor to take over the administration of a regulatory College. This would be similar to the power of the Minister to

take over the administration of a public hospital or a school board. The Supervisor would have the power of the Council, the Registrar and, it appears, the committees of the College.

The second amendment would allow the Minister to appoint auditors to examine the operations of the regulatory Colleges. The audit would not be restricted to financial matters, but of administrative and regulatory matters as well. The report would be made to the Minister and it would be up to the Minister to determine if a copy be given to the College.

These changes would significantly alter the concept of self-regulation. They would permit significant government involvement in regulatory matters without having to first enact legislation or even make a regulation. In addition, the implicit threat of exercising these powers could induce regulators to implement a government directive in order to avoid the alternative.

It is, of course, difficult to argue against enhanced accountability. On the surface it appears popular and sensible. And, sometimes it is. However, regulators need to defend the principle of self-regulation if they are to remain viable. Otherwise the cost of self-regulation will be too high for the profession or industry to bear and the profession will give up on its regulatory body.

Some strategies for defending self-regulation might include the following:

1. Articulate the benefits of self-regulation to the public. Professional buy-in to its public interest mandate is essential to prevent widespread and even condoned non-compliance as one sometimes sees with government regulation (viz. income and sales tax). In addition, self-regulation allows the most knowledgeable people to do the regulating.
2. Identify the costs of excessive accountability requirements. Regulatory action is delayed when staff are compiling lengthy and repetitive reports or preparing for extensive audits. Talented members of the profession will not volunteer or work for regulators if they perceive that they are little more than another government department.
3. Do a good job. Being fast, effective and fair removes the incentive for additional government involvement. Ensure that the entire organization accepts and adopts the public interest mandate of the regulator.
4. Engage in public relations. Communicate what the regulator is doing in a manner that might interest the media. When there is a crisis or criticism, respond quickly and appropriately.
5. Maintain good communications with one's Ministry. Good informal problem solving will remove the need for formal accountability structures.

Self-regulation is a form of participatory democracy. When it works, it is the best option. When it fails, everyone including the public is left with second-best.

SIGNIFICANT CHANGES ARE COMING TO THE REGULATED HEALTH PROFESSIONS ACT

Part 2 of 3 – The Register

If you don't like change, you're going to like irrelevance even less.
– General Eric Shinseki [Chief of Staff, U.S. Army]

The *Regulated Health Professions Act, 1991* ("the RHPA"), which is the legislation that governs Ontario's health regulatory Colleges is about to change significantly. These changes, which come into effect on June 4, 2009, will impact almost every area of the College's operations. Although many of these changes relate to College processes, a significant number of the revisions will have a direct impact on members. The purpose of this series of articles is to highlight some of the biggest areas of change and to explain the specific impact those revisions will have on members.

The majority of the legislative changes touch upon one of the following three subject areas: (i) mandatory reports; (ii) the register; and (iii) the Inquiries, Complaints and Reports Committee ("the ICRC"). A separate article will deal with each topic.

The Register

The public, including potential employers, obtain information about members through the College's register. The changes to the register affect both the amount of information available to the public as well as the overall accessibility of that information. Three of the most significant areas of change related to the register are as follows: (i) form; (ii) content; and (iii) permanence. In addition there are some new provisions protecting personal information about members in compelling circumstances.

Form

One of the biggest changes to the RHPA is the new requirement for every College to post its entire register on its website. This will allow the public to view all of the register information about every member directly through the internet. In addition, the new legislation will require the College to advise individuals who inquire about a member, whether in person, by phone, letter, email, or through the College's website, of all of the register information that is available regarding that member. In other words, the inquirer does not have to know what to ask for; the College must actively assist the inquirer to locate the information that will help him or her.

Content

In addition to the information already required for the register, several new categories of information will be added on June 4, 2009. These include the following:

- (i) referrals to the discipline committee (currently information only has to be included in the register after a finding is made although many Colleges posted the dates of upcoming hearings shortly before they commenced);
- (ii) a synopsis of every finding made against a member by the Discipline Committee or the Fitness to Practise Committee (currently only the actual sanction or order is recorded on the register and discipline summaries are found elsewhere on the College's website);
- (iii) findings of professional negligence or malpractice made against the member unless the finding is reversed on appeal (currently this information is not collected by the College or posted on the register); and
- (iv) a notation of the resignation and agreement where a member, during or as a result of an investigation, has resigned and agreed never to practice again in Ontario (currently this is only done if the member consents or the matter has gone to the Discipline Committee).

The amount of detail about the Additional information can be added by College by-law.

Permanence

One of the most significant changes to the current register requirements relates to the length of time that information is expected to remain on the register. Under the current RHPA, a significant portion of a member's history with respect to most discipline and/or fitness to practice proceedings would automatically be removed from the register after six years. Under the new provisions, however,

(continued on page 10)



all register information remains posted indefinitely, subject to a few limited opportunities for the member to ask for the information to be removed. In essence the member has to go through a pardon-like process asking for the information to be removed. The committee imposing the order would have to consider whether the removal of the information is consistent with the public interest. In discipline matters, a pardon is only available where the sole sanction was a reprimand or a fine. A pardon is not available for any finding of sexual abuse.

Personal Safety and Other Compelling Concerns

There are some exceptions to the duty of the College to post information about members on the public register. The major one is where the information would jeopardize the safety of any person. For example, if a member is being stalked, the Registrar can withhold contact information from the register and the public. Non-contact information would still be included on the register (e.g., any terms, conditions and limitations on the member's registration). However, the Registrar can only do this if he or she knows about the concern and has reasonable and probable grounds to support the request. It is important for members who feel that their safety, or anyone

else's safety, would be jeopardized by the public register provisions to notify the Registrar of this concern with any supporting documentation.

In addition, the College can only put on the register the minimum personal health information about members necessary to protect the public interest. For example, if a member is incapacitated, details of the nature of the incapacity are unlikely to be placed on the register. Often only the fact that there has been an incapacity finding made and the nature of the terms, conditions and limitations needed to protect the public interest (e.g., the member must work with a colleague) is sufficient to protect the public.

The Registrar also has the ability to withhold information from the register that is obsolete and no longer relevant to the member's suitability to practice. This is intended to be a narrow exception. An example might be removing from the register a finding against a member for conduct that is no longer prohibited (e.g., an old advertising infraction for a type of advertisement that is now permitted).

Members should appreciate that their professional lives will be more transparent than ever after June 4, 2009.

UPDATE ON PROFESSIONAL INCORPORATION FOR DENTAL HYGIENISTS

Bylaw No. 4 came into effect on June 4, 2009. Please see the CDHO web site at www.cdho.org for details. Section 20: Professional Incorporation has been amended as follows to reduce the fees and change the renewal date.

- 20.1 The fee for the issuance of a certificate of authorization, including any reinstatement of a certificate of authorization, for a professional corporation is \$750.
- 20.2 The fee for the annual renewal of a certificate of authorization is \$250.
- 20.3 The annual renewal date for a certificate of authorization is March 1st of each year.

The name of the corporation must contain the dental hygienist(s)'surnames and the phrase "***Dental Hygiene Professional Corporation***" i.e., "Jane Doe Dental Hygiene Professional Corporation".

The corporation may use a business name (e.g., ABC Dental Hygiene) so long as the key documents (e.g. letterhead, invoices, main office sign) indicate that the legal name of ABC Dental Hygiene is "Jane Doe Dental Hygiene Professional Corporation".

With regard to signage in this case, the prudent dental hygienist would have the sign read as follows:

ABC Dental Hygiene
Jane Doe Dental Hygiene Professional Corporation



QUALITY ASSURANCE

TOTAL QUALITY IMPROVEMENT SURVEY REPORT: ONTARIO 2008 – PART I

In keeping with the Quality Assurance Program the College periodically collects and analyzes information about the nature and quality of dental hygiene practice in Ontario. In 2008 the CDHO commissioned EKOS Research Associates to conduct a survey of registered dental hygienists who practise and reside in Ontario. This was the third survey of its kind carried out by the CDHO following those done in 1995 and 2002. In total, 9350 surveys were mailed out and 5789 completed surveys were returned resulting in a response rate of 62%. Those who registered in 2008 were not surveyed because they did not have sufficient clinical exposure or experience with the Quality Assurance Program. Typically, the College uses survey information and its analysis to prepare guidelines and advisory notices to the profession, to facilitate total quality improvement for the practice of dental hygiene and to adjust the College's Quality Assurance Program as required. Highlights from the 2008 study are discussed below.

Profile of the Profession

Keeping in mind that we did not include those who registered in 2008, the number of dental hygienists in Ontario had increased by 43% from 2002 to 2007. Over 90% of those who responded work full or part time in clinical practice. One percent was unemployed and seeking employment as dental hygienists.

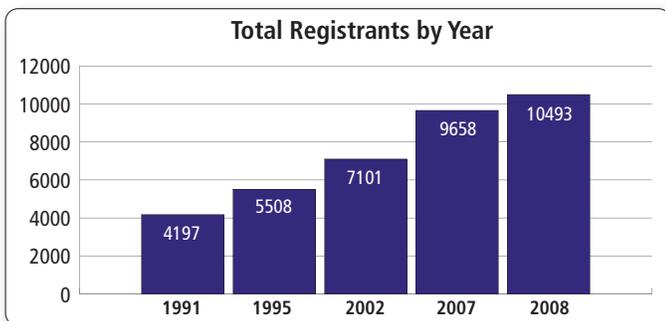


Figure 1 Total Registrants by Year

Ninety-eight percent of respondents indicated that the highest level of dental hygiene education obtained was a diploma or associates degree. A bachelor degree was reported by 1% of dental hygienists. However, when we asked about fields outside dental hygiene, 14% reported having at least one Bachelor degree and 1% reported obtaining at least one Masters degree.

When asked what additional training courses respondents had taken, 8% indicated restorative, 17% orthodontics, 5% local anaesthetic, 13% tobacco cessation and 6% laser therapy.

The average length of time respondents worked as dental hygienists was 14 years. Just over 1 in 5 is new to the profession having worked for three years or less. Almost 60% of respondents have worked in the field for more than 10 years.

Generally, respondents reported being very satisfied with their career. Sixty-five percent reported being very satisfied which represented a 5% increase from 2002. Only 2% reported being dissatisfied with their career.

Self Initiation

The 2008 survey asked dental hygienists to tell us if they had been authorised by the CDHO to self initiate. Twenty three percent have been authorised to self-initiate by the CDHO while a surprising 9% reported not knowing whether they have been authorised to do so. According to the survey results the likelihood of being self-initiating increased with years worked. About one-third of those working more than twenty years reported that they are authorised to self initiate while slightly over 6% of those working less than three years are authorised.

CQI Activities

Generally speaking there is a high level of participation in Continuing Quality Improvement (CQI) activities by Ontario dental hygienists. Given that participation in learning activities is mandatory for dental hygienists it was surprising to discover that 1% of dental hygienists indicated that they had not participated in any learning activities in the last 2 years.

Most dental hygienists reported that they engaged in a variety of activities covering a variety of dental hygiene related topics. The least reported activities were study clubs, hands on courses, and distance study. In comparison to the 2002 study, there was an increase in the number of dental hygienists who engage in self-study and a drop in the number who are attending conferences, continuing education courses and attending society presentations.

QUALITY ASSURANCE (CONTINUED)

The two main topics areas that dental hygienists pursued in the last 2 years related to soft tissue management and the dental hygiene process. In addition, 36% participated in learning activities related to the medically compromised client, approximately 25% pursued learning on self-initiation, pharmacology, tobacco cessation and computer skills. One in five pursued topics related to orthodontic procedures.

Interestingly, when looking at the group who scored high in their level of CQI activity, there was a direct correlation to authorisation for self-initiation. Those having a high level of activity were twice as likely as those with a low level to be authorised.

CQI Index

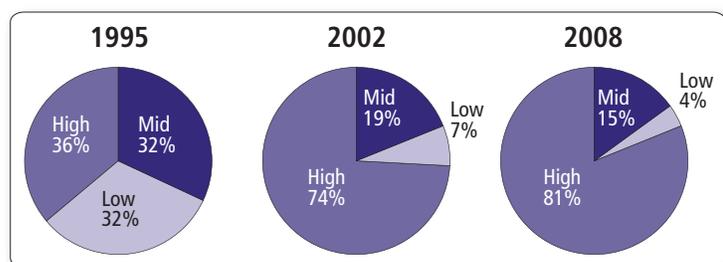


Figure 2 CQI Index by Year

Using a CQI index developed for the earlier studies, findings indicated that CQI activity for dental hygienists continued to increase over time since the first survey in 1995. Although the most dramatic increase was noted in the span of the first and second survey, the growth in activity rates was impressive from 2002 to 2008 as well. Overall, the number of learning activities dental hygienists participate in has increased.

Specifically, the group that scored high in CQI increased from 36% in 1995 to 74% in 2002 to 81% in 2008 and at the same time the low CQI group continued to decline from 32% in 1995 to 7% in 2002 to 4% in 2008. This marked increase in CQI activity can be directly linked to the introduction of the CDHO Quality Assurance Program.

Rating the Quality Assurance Program

In 2008, a new set of questions was added to identify the proportion of members who have been selected to participate in the professional portfolio/practice review. Of those who responded to the survey, 53% reported that they had submitted their professional portfolio for peer review. Of these 53%, 2% reported that they had had an on-site practice assessment. The likelihood to being asked to submit a professional portfolio increased with years working as a dental hygienist. Just 4% of those who had been working less than 3 years

were asked to submit their portfolio. This progressively increases to 71% for those working 11–20 years up to 85% for those who have been working for more than 20 years.

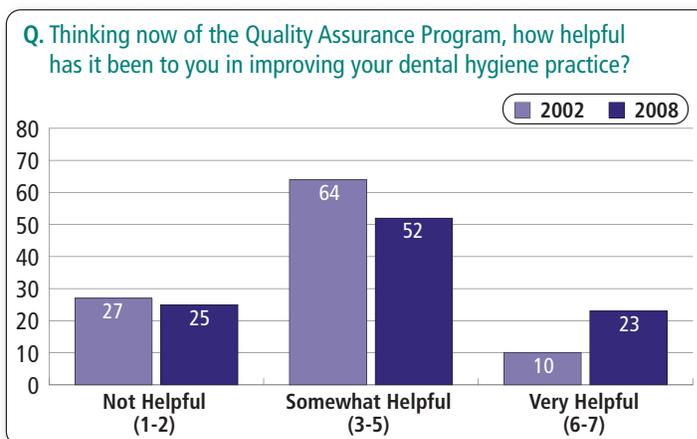


Figure 3 CDHO Quality Assurance Program Rating by Year

Survey participants were asked to think about the CDHO Quality Assurance Program overall and indicate how helpful it has been in improving their dental hygiene practice. Over the past six years, the overall perception of the Quality Assurance Program has become far more favourable. Almost 25% of respondents found the program to be very helpful (6–7 on a 7-point scale) and a little over 50% found it to be somewhat helpful. Comparatively, only 10% described the program as very helpful in 2002.

While there has been an increase in the intensity of favourable evaluations, one quarter of the respondents still think the program is unhelpful. Newer dental hygienists are considerably more likely than their more experienced colleagues to deem the Quality Assurance Program helpful.

Learning About the Portfolio and Quality Assurance Program

When asked about your preferred method of receiving information to assist in the completion of the professional portfolio, a substantial majority (over 2/3) indicated that you liked to get your information from the CDHO website. Notably, newer registrants were more likely to prefer the web. *Milestones'* articles were also cited as a preferred source for information about the professional portfolio. Fifty percent of reporting dental hygienists said they look to the *Milestones* for help with the portfolio requirements.

Part II to this report includes a look at the clinical practice of dental hygienists and will appear in the next issue of Milestones.

NOTICE OF UPCOMING ELECTION FOR ACADEMIC REPRESENTATIVE ON COUNCIL

The CDHO has a vacancy on Council for the position of Academic Member. In accordance with Bylaw No. 4 an election for an academic member will occur in the Fall of 2009. Those who wish to have their names included on the voters list and those who wish to run for the position must advise the College of their eligibility by September 30, 2009. Read below to find out if you are eligible to vote or run for the position of Academic Member to Council.

SCHEDULE IV

ACADEMIC SELECTIONS

As per clause 7(1)(c) of the *Dental Hygiene Act, 1991* (Ontario) two persons are to be selected for Council from among registrants who are faculty members of an educational institution in Ontario that is authorized to grant diplomas or degrees in dental hygiene. Bylaw No. 4, section 3.5 outlines who is eligible for selection.

The CDHO will conduct an election for the academic Council Members.

Selection system:

1. Each registrant who is teaching in an accredited dental hygiene program in Ontario as a full-time faculty member (minimum 20 hrs/week with at least 10 hours of contact time with students and/or other faculty members) is to notify the College of their eligibility by September 30th of the year preceding the designated term of the appointment. A notice will be sent to the academic institutions and will be posted in *Milestones*.
2. Only those faculty members who notify the College as per (1) will be placed on the list and are eligible for election and may vote in the election.
3. Eligible faculty members who wish to be considered for selection are to forward to the College by October 30th
 - a Statement of Intent (200 word maximum);
 - a current Curriculum Vitae; and
 - a current photograph.
4. The College will mail ballots to all eligible academic members as noted on the College list.
5. The College will count the ballots on a day and at a time specified on the ballot envelopes. Late ballots will not be counted.
6. The candidates with the two highest counts shall be elected, or if a by-election, one member for the remainder of the original term.
7. In the event of a tie, the elected members will be determined by lot.
8. The College will notify the selected candidates.

New Registrants – March 5, 2009 to July 10, 2009

Name	Reg ID	Name	Reg ID	Name	Reg ID	Name	Reg ID
Abbas, Nayyer	012941	Bumstead, Jenna Kathleen	013173	Ellis, Kathryn	013165	Grewal, Mann	013019
Abdalla, Mariam	012847	Caddey, Stefanie Elizabeth	013175	Emerson, Kim Ingrid	013220	Grewal, Puneet Kaur	012964
Abdulhamid, Samia	013070	Cadeau, Michelle	012932	Etmanskie, Amanda Sharon	013090	Grof, Melissa	012969
Abdulovski, Malvina	013206	Cakmak, Selvi	013005	Fabiszewska, Dominika	012973	Habib, Haneen	012982
Aboulouz, Hani	013098	Calaguiro, Jessica Adele	013181	Faiazza, Maria	012924	Hale, Amy	012929
Abraham, Irene Baaba Kwadjiriba	012983	Carl, Tina	013226	Fakhri, Farnaz	012885	Hall, Tara-Lee	013124
Abuzaid, Sahar	013266	Caron Castonguay, Elise	013046	Fance, Naomi	012998	Hanley, Megan Elizabeth	013015
Acorn, Danielle	013118	Carrières, Julie	012913	Farbota, Katie Rebecca	013252	Hanna, Noor	012857
Aedehalli, Latha	013185	Casteels, Denise	013072	Feltis, Keisha Elizabeth	012939	Harchand, Vaishali	012848
Agnew, Robin Jennifer	012942	Chamberlain, Chelsea	012903	Fennell, Sara Louise	012901	Heeralal, Nadia Lakshmi	012971
Agostino, Erin	013028	Chan, Long Yan	013140	Fernandes-Roberts, Susan	012997	Hicks, Natasha Paulina	013241
Agozzino, Anna Maria	013061	Chau, Thida	012877	Fernandez, Maricel	013138	Hill, Brittney Marleah	013245
Aiken, Carolyn Sachiko	013260	Choinska, Ewa	013254	Ferraro, Melissa	012915	Hillis, Kimberly	013035
Aikman, Amy Elizabeth	012886	Chung, Janenee	013215	Ferreira, Suzy	012844	Ho, Irene Hoi-Ling	013199
Alderton, Jennifer Louise	013191	Cloer, Shannon	012880	Fields, Meaghan	012895	Ho, Simon	012981
Algh, Aalam	012933	Colin-Thome, Richard	013151	Filion, Rachel	013105	Holmes, Vanessa Elizabeth	012916
Aliyeva, Nigar	013081	Collins, Melanie Dawn Glenda	013080	Fitzsimmons, Michelle Pauline	013074	Hundal, Harmit Kaur	013049
Allen, Jennifer Lisa	012893	Corbett, Angela	013164	Flintoff, Angie	013120	Hunt, Ryan	012858
Amina, Behnaz	012873	Cornish, Ersie Abigail	013067	Fojtova, Eva	013029	Hutchinson, Talisa Laura	013114
Arevalo, Gissell Erika	013210	Coté, Elisha	012868	Forrest, Nicole Frances	013179	Iaccheo, Andrea	013023
Arjmandi, Reza	012889	Courtney, Melissa Annamarie	013163	Foster, Brittney	012989	Jackson, Kayla Lane	013064
Armitage, Amy	013039	Couto, Nidia	013115	Foster, Holly Florence	013222	Jacob, Suby	012894
Arnold, Lynnette	013155	Croft, Ashley	013160	Fox, Renée	012856	Jacobson, Mona-Lisa	013026
Arora, Neha	012927	Cuthbert, Shannon Jill	012892	Franceschini, Tasia Helen Gina	012849	Jain, Jyoti	012970
Arunaparan, Mathu	013157	Cuzzolino, Emily Felicia	013221	Freake, Marilyn	012888	Johnston, Stefanie	012975
Attardi, Ivana Grazia	013086	Cvetkovik, Sonja	012926	Friesen, Christy	012928	Jones, Devon Amber	013126
Aversa, Maria Carmela	013055	Daraban, Diana Daniela	013237	Fuenzalida, Marie Helen	013088	Jones, Sandra	012935
Awadia, Zahara	012910	Dayot, Jacqueline	013012	Furlong, Heather Elizabeth	013025	Jordan, Jennifer	012948
Ban, Emma	012861	Dedman, Tanya Marie	013257	G B Reddy, Suchitha	012947	Kalmo, Andrea Diane	013209
Banks, Sarah	013211	Dela Cruz, Sheila	013234	Gagné, Christine Sylvie	012953	Karbarz, Monika	012865
Barber, Jason	013223	Demarco, Natalie	013112	Gagné, Nancy Andrea	013159	Keller, Sarah Ann	013202
Barone, Daniela	012921	Deming, Misty Ann	013123	Gagnon, Janine	013152	Kellezi, Holta	013194
Basic, Maria	013031	Derks, Stephanie Mitzi	013110	Gallerno, Shannon Rebecca	013100	Kelly, Melanie Marie	013147
Bazzi, Rana	013068	Desai, Pooja	013043	Gamo, Ronald Glen L	012990	Kenny, Caroline	013143
Beaudrie, Julie Michelle	012934	Desmarais, Lisa	013062	Garcia, Sofia Araceli	012841	Kerr, Rebecca	013047
Belanger, Stephanie Joyce	012925	Deti, Anaida	013121	Gardner, Brooke	013144	Khaghani, Pirayeh	012952
Bélanger, Marie Claude Kim	013235	Dhesi, Raj	012972	Geneta-Freeman, Jacqueline	013040	Khurana, Jasleen	012909
Belovari, Jessica	013154	Di Bartolomeo, Andrea Christine	013117	Ghahremany, Anahita	013177	Kim, Sarah	013250
Bennett, Candice	013051	Di Ilio, Stephanie Anne	013141	Gibson, Christina Dianne	013244	Knapp, Katie	013265
Bergin, Julie Krista	012902	Di Simone, Elena	012914	Gilchrist, Jessica Nicole	013050	Kotsopoulos, Roula	012968
Betancourt, Yordanka	013253	DiCarlo, Amanda	013162	Gill, Amandeep	012955	Kotsopoulos, Stephanie Lyn	013013
Birss, Erin Elizabeth	013075	Dilshad, Rahima	013103	Giovannone, Sandra	013142	Kouvelas, Angelica	012930
Bliss, Karla Joy	012887	Dingman, Kim Danielle	013240	Girard, Alisha	013196	Kramarenko, Elena	012899
Bloom, Leslie Ann	012911	Downey, Amanda G	012936	Gnanendran, Ananthavi	012912	Kremer, Brittany Catharina	013214
Boersema, Ashley	012882	Dudley, Shannon	012940	Gomez, Jasmin	013139	Ku, Hsiao-Wen	013057
Boland, Jennifer	013002	Duguay, Jenn	013169	Gómez de Rogriguez, Gladys Judith	013032	Kulmala, Alicia Lauren	013096
Borges, Stephanie	012951	Dumelod, Irma	012875	Good, Monica Lee Violet	012991	Kulyk, Tetyana	012922
Borgh, Josie-Ann	013172	Dumont, Jaime Leanne	013082	Gordon, Ashley Dawn	013156	Kwok, Chloe	012937
Bowden, Lindsey	012961	Dunbar, Raelyn	013077	Gorges, Torees	012896	Labadie, Teaha Adele	013148
Box, Sarah	013083	Duncan, Bobbie	013044	Gorrie, Karen	012897	Labrosse, Beverly	013190
Brahimi, Elda	013216	Dupuis, Elaine	013084	Goullich, Konstantin	012867	Lacroix, Krystal	013255
Brighton, Jen	013166	Durand, Stacey	013259	Gowanlock, Courtney	013188	Lacroix, Nicole	013094
Brunton, Katherine	013153	Dyack, Andrea Marie	013183	Grabau, Katherine Anne	013076	Laferrière, Mireille	013178
Buffett, S. Jane	013045	Eailey, Keshia	013010	Gretzky, Nicole	013016	Lafèche, Anik	013109
Bujold, Janie	013208	Effenberger, Melanie	012840	Greves, Lauren Nicole	013145	Lalonde, Jennifer	013038

STATUS UPDATE

New Registrants – March 5, 2009 to July 10, 2009 (continued)

Name	Reg ID	Name	Reg ID	Name	Reg ID	Name	Reg ID
Lambert, Krista Ann	012988	Nguyen, Caroline	012846	Roy, Anne	013137	Truong, Linh	013014
Langille, Jennifer Kathleen	013262	Noye, Stacey Dawn	013022	Rynard, Holly	012963	Tsitsos, Angela	012918
Lapointe, Natalie	013193	Ogden, Mandi	013213	Sakkas, Faye	012905	Turakovic, Lillian	012879
Larabie, Julie	013036	Ogden, Shelley Ann	012876	Saludares, Maricel	012986	Turner, Tammy Lea	012977
Lavoie, Mana	013168	Paquette, Jennifer	012984	Sananes de Reines, Lissette	012938	Urbanczyk, Kinga	013207
Lawrie, Katherine Margaret	013200	Parrington, Anya	013089	Sayre, Janet	013129	Vacirtzoglou, Joanna	012883
Lawson, Lucy	012878	Pawelczyk, Christine Jennifer	013225	Schiefer, Rachel	013170	Valela, Elizabeth	012965
Le, Emily (Mien)	012999	Payne, Jennifer Ann	013233	Scissons, Heather Marlene	013056	Valiquette, Jenna	013182
Leal, Maria	012850	Pearson, Megan Marie	013131	Seon, Kate	013085	Van Arkel, Neia	013174
LeBlanc, Katrina Pauline	013231	Pelgone, Geraldine Sabino	012923	Serio, Francis	013219	Van Doren, Breanne	012891
Lecuyer, Emily	013149	Pellerito, Susan Lorraine	013136	Severino, Stacey	012946	VanKroonenburgh, Natasha	013229
Legault, Chantal	013113	Penner, Charity	013258	Shah, Sima	013001	Vermeulen, Laura Lynn	013134
Liddar, Gurpreet	012874	Penteliuc, Diana	012978	Shaikh, Mahwish	013201	Villacorta-Siegal, Nelly	013232
Lipa, Besa	013053	Pepper, Cindy	013127	Sharma, Kavita	013217	Villanueva, Judy Lynn	013247
Lofranco, Christina	012931	Peters, Margaret	013218	Shefkiu, Mirieta	013230	Vokrri, Suzana	012852
Logan, Courtney Ida Joy	012853	Phan, Thuy Thi Thu	012954	Shelley, Bethany	012843	Vriend, Courtney Laura	013073
Lungu, Nicolae	013021	Piazza, Natalina	013101	Shettigar, Sharmila Dinesh	012898	Vrublevsky, Irina	012851
Lynch, Nicole Marie	013119	Pilon, Carolyn	012993	Shturmak, Vasyl	012994	Wakunick, Katie	013212
MacDonald, Kendra Lauren	013065	Pizzacalla, Michelle	012863	Shuttleworth, Katherine	013261	Walach, Michael	012956
MacPherson-Kenny, Daneene	013195	Plante, Line	013135	Silva, Sandra	013059	Wang, Isabel Yi-Hsuan	013176
Magennis, Michelle	012919	Playfair, Emily	012904	Simoes, Sandra Rodrigues	012845	Watson, Iona	013189
Mahoney, Angela	012900	Plouffe, Véronique	013060	Singer, Christina Nicole	012944	Watson, Sue	012996
Maia, Marlene	012917	Poliziani, Catherine	012949	Sirbu, Liliana	012855	Weeks, Sheena	012987
Mailloux, Dana Renee	013095	Pomerleau, Valérie	013171	Smith, David	012862	Wells, Donna Suzanne	013071
Mangan, Chelsea	013087	Porter, Maryann	013106	Smith, Lori	013009	Wenzel, Jason	013107
Maramag, Angelita	012995	Porto Goncalves, Humberto	013102	Smith, Rebecca	013104	Wheeler, Cathy	013020
Martins, Debbie	013197	Posner, Suri	012976	Sohi, Balbir	012945	White, Ashley Lynn	013122
Maurovic, Melissa	013128	Post, Jodi Lynne	013093	Speak, Lynette	013256	Wilkins, Cathi	013034
McBrien, Kathryn Louise	013187	Potter, Samantha Helen	013078	Stanley, Melissa Louise	012985	William, John Okello	013236
McIntyre, Carine	013242	Poulin, Julie	013246	Stepanova, Olesya	013003	Woja, Agnes	013092
McLaughlin, Hélène	013048	Preszcator, Megan Rose	013097	Stoeva, Villy	012958	Wolgemuth, Jenna	013248
McLaughlin Brown, Jessa	012908	Prinsen, Amy	012907	Su, Xiao Tao	012872	Wooldridge, Megan	013150
McMahon, Julie	012842	Pyefinch, Sarah	013037	Sullivan, Trina	013111	Wright, Krista	012870
McQuatt, Barbara	013041	Quercia, Francesca	012881	Sundholm, Kimberly Joanne	013180	Wygergangs, Amy Margaret	013125
McWhirter, Sarah Ann	013238	Quilao, Norma	013205	Syed, Amina	012906	Yellowlees, Sara	013058
Mechail, Ghada Yousif Gad	012871	Quinn, Andrea	013228	Tano, Diana Rae	013227	Yousif, Eman	012950
Melo, Mandy	012962	Racette, Natalie	013192	Tedesqui Oblitas, Claudia Ines	012957	Yu, Lily	012960
Melville, Jennifer Anne	013203	Radetz, Anna	012884	Thandi, Rajneet	013011	Zahradka, Vanda	013224
Melvin, Kelly	013000	Radoncic, Elizabeth	013267	Thannikkotu, Jo	012854	Zanatta, Krista Brianne	013146
Mesfin, Lihem	013249	Raimondo, Alexandra	012864	Thomas, Jenn	013108	Zannella, Elena	012980
Metcalf, Leanne	012860	Raja, Farah	013243	Thomas, Nicole Marie	013132	Zetchus, Kristina	013042
Michael, Dalia Nasr Ghatas	012890	Rajan, Natasha	013017	Thompson, Alicia Delores Nancy	013186	Zhao, Madeleine	013063
Miller, Ashley Megan	012966	Ranger, Tara	013264	Timler, Lara	013133	Zhu, Xiao Ping	013004
Min, Susan	012979	Ranitsky, Julia	013099	Tomic, Gloria	013184		
Mohamed, Shabana	012992	Rashed, Roya	013024	Tourville, Anne-Marie	013239		
Mokha, Avneet	012974	Rattenbury, Janet Louise	013130	Townsend, Erin Kimberley	013052		
Monk, Alicia	013007	Raveendran, Sumathy	013008	Townsend, Stephanie	013263		
Monterroza, Johanna	013204	Regaudie, Josée	012959	Trachsler, Tara Nicole	013116		
Motaghi, Lili	013006	Regimbald, Sophie	013054	Tran, Ann	012920		
Mueller, Sarah Lynn	013167	Reis, Katrina	013066	Tran, Janette	013198		
Nand, Vineeta	013027	Renaud, Catherine	013251	Tran, My Thu Thy	013158		
Nawaz, Saba	013018	Reynolds, Donna-Marie W	012943	Tran, Oanh (Annie) Ngoc	012967		
Neilands, Jill Elizabeth	013079	Rivera, Nicole	012869	Tranchemontagne, Jasmine Yvette	013030		
Nelson, Katrina Elizabeth	013069	Robichaud, Joséé Léona	012866	Treasure, Amanda Robin	013033		
Neufeld, Eva	012859	Rohr, Monica	013161	Tremblay, Cindy	013091		

Authorized for Self-Initiation – March 5, 2009 to July 10, 2009

Name	Reg ID	Name	Reg ID	Name	Reg ID	Name	Reg ID
Allman, Sophie Melanie	006864	Eidukas, Rita Annie	001520	Louisseize, Roxanne	005546	Rankin, Karen Elizabeth	004588
Armstrong, Susan Eve	003731	Elliott, Marion Kathleen	000896	Louttit, Sherri Ann	003432	Ranu, Amanpreet	011953
Baillie, Janet Jacqueline	003212	Fernandes, Custodia Barros	005620	Lucas, Erika	003109	Rees, Maureen Dawn	009651
Bainard, Cheri-Anne	009994	Ferris, Kari Ann	004919	Mair, Laura	002292	Richards, Deborah Colleen	001935
Baker, Sandra Lynn	007441	Fitzpatrick, Cheryl Tracy	007340	Malatesta, Mirella	008017	Richer Favell, Sylvie Danielle	003239
Barriffe, Raymond Arthur	006062	Forzley-Paquette, Donna M	002546	Manakis, Toulia	003800	Ripley, Vanessa Elaine	008051
Barros, Diana	009198	Fournier, Teresa Leonora	007641	Manalili, Marina	010517	Roberts, Kelly Lynn	009323
Beausejour, Judith Mae	005121	Freeman, Lauralee Evelyn	004533	Mannella, Deanna Francesca	007811	Robichaud, Diana Elizabeth	008675
Belarde-Chan, Teresa	010243	Frey, Margaret Elizabeth	007010	Marano-Worley, Rosanna	009414	Rosaasen, Cathy	004695
Bly, Melissa Marie	008586	Fruscella, Marylou	008581	Marchand, Marlene	010319	Rosenzwaig, Marianna	010856
Boddy, Darlene Ann	002163	Gielen, Kristina Lynne	006532	Marrelli, Lydia Diana	006804	Royal, Loretta Lynn	005126
Booker, Laurie Ann	004842	Gillani, Ferzana	008720	Martinez, Maria Elena	010572	Salman, Ghada Victoria	002580
Booroff, Julia Christine	002437	Goldband, Sara	002178	Massie, Krista Michelle	007145	Sanasie, Lisa	007230
Boryskina, Olha	011102	Gosselin, Mona Denise M	004031	Mastronardi, Artemis	009984	Sandhu, Parneet	010979
Bougie, Kathleen Melodie	005270	Graham, Michelle A	006765	Mathieu, Suzanne	010667	Scalamogna, Carmelina	006382
Bourgeois, Lynn M	005549	Griffin, Lowell	010448	McAskill, Tracey Lee-ann	006890	Shouldice, Janelle	010818
Bown, Louanne	008544	Grochowska, Natalia	011086	McDade, Elizabeth Anne	005653	Silva, Paula Roxanne	005164
Brinklow, Cynthia Louise	008893	Gueye, Amy	008787	McFadden, April Ann	007291	Simone, Bernadette	008678
Britton, Heather Diana	008389	Guilbeault, Gwyneth May	002970	McIntyre, Jessica	010028	Singh, David	005337
Brown, Angela R	008101	Gupta, Reetika	010323	McKnight, Nancy Ann	001405	Skorzewski, Margret	007806
Brown, Bridgette L	008198	Hearn, Colleen Regina	002795	McMullan, Patricia Ruth	002249	Smallwood-Bagg, Gayle Elaine	003070
Brown, Ruthann Elizabeth	007027	Helmer, Christine	003828	McNaughton, Monica Elizabeth	004903	Staresinic, Marianne	006592
Browne, Angela Michelle	007944	Hofkirchner, Jackie	010305	Michalik, Susanna Jane	001606	Steinberg, Marni	009466
Burke, Carrie Anne	005635	Huynh, Nancy Mei-Ling	010092	Misner, Stephanie Anne	005356	Stevenato, Tina Marie	006264
Chan, Lynne Yen-Long	008722	Iasalvatore, Giulia	008510	Mistry, Sunita	008112	Stover, Sandra Lillian	002124
Chandler, Susana Jane	002403	Jasnich, David Vincent	004417	Molinelli, Elisa	010184	Stupar, Jelena	009616
Chartrand, Christina Patricia	007076	Jin, Ming (Minnie)	012497	Moore-Pearse, Kimberly Ingrid	003010	Sullivan, Shannon Ruth	010480
Chekhnova, Tetyana	009344	Karayan, Rosalina	010796	Mosli, Susanna	010971	Thibault, Michelle Lynne	008090
Chen, Olivia Ping	006130	Kishinevsky, Irine	006473	Munro-Yousif, Lucie Elizabeth	008631	Touma, Samia	005519
Chiaromonte, Helen Therese	006436	Kita, Brenda Jean	004864	Munshaw, Nora	001257	Tran, Lily	010734
Churchill, Heather	003071	Klug, Christine Marie	008406	Nabess, Tanya	009833	Trevail, Jane Catherine	001961
Clark, Barbara	010261	Ko, Joy Chih-Yi	010647	Nelischer-Millar, Anita Irene	000314	Turpie, Michelle H	007663
Commisso, Mirella	008410	Koserski, Lynda Joan	002975	Nicholson, Jennifer Ruth	010855	Turrini, Sonia	010918
Cortes, Michelle Lorena	010614	Kowall, Nadine Ann	001846	Nikitopoulos, Helen	011017	Vaillant, Rosemary G	001980
Couteiro, Fabrizia Nicole	007286	Krebs, Wendy Jane Louise	010142	Ocampo, Noreen-Jill	011052	Valentine Griffith, Althea	012472
Craig, Carrie-Ann	010182	Krisman, Lisa	009077	Overland, Leslie Sarah	009722	Van Den Akerboom, Lisa	006194
Craig, Sharon	002052	Laewetz, Maria	006494	Palomares, Cleopatra	010191	van der Veen, Andrea Frances	009944
Craveiro, Griha Katharyn	004678	Langenberg, Carla	009413	Panaligan, Monica Charis	009750	Vasey, Lori Anne	002268
Craven, Dayna Kae	006082	Languedoc, Eleanor Jane	010518	Parker, Kristina V	006748	Viana, Maureen	010312
Dhaliwal, Beatriz	009577	Larmond, Suzanne Marie	008464	Parray, Michelle Alicia	005654	Vopni, Carolyn Joan	001803
Dhamrait, Bindi	003766	Lavoie, Pauline Cecile M	004378	Petersen, Roxane-Marie	010347	Wallace, Sonya M	006907
Diego, Elizabeth	008906	Lawrence, Meaghan Maria	010118	Pfuetzner, Teresa Joan	005415	Wansbrough, Janine Ruth	001362
Diverty, Lisa Marie	008150	Leaver, Leslie Anne	011610	Pidvalna, Kateryna	010172	Whalen, Vicki Lynn	004606
Dizon, Mariel	010245	Lebel, Jennifer Suzanne	005105	Pozzebon, Josee Suzanne	004754	Winick, Deborah Ann	009510
Dobrowsky, Katrinna Nadine	008771	Lee, Linda Mary	011025	Preston, Brenda Ann	004724	Yacks, Candice Marie	010913
Drouillard, Sharon Michelle	008107	Li, Furong	010811	Quinton, Christine Anne	005245	Yang, Xiao Xin	012447
Duguay, Anne M	002652	Lin, Jian	009425	Radtke, Heather Elizabeth	009055	Yorki, Dee-Ann Catherine	007270
Dunford, Danielle	007796	Linton, Heidi	002455	Raidl, Jacquie E	005112	Young, Barbara Jean	006937
Dwyer, Virginia Lee	003942	Logee, Alison	009550	Rainey, Valerie	006721	Zuschlag, Donna Louise	005157

STATUS UPDATE

Suspended/Revoked/Resigned Registrants

In accordance with section 24 of the *Regulated Health Professions Act* (Code), the following registrants have been suspended/revoked for non-payment of the annual renewal fee. These registrants were forwarded notice of the intention to suspend and provided with two months in which to pay the fee. If a registrant who has been suspended for non-payment does not reinstate her/his certificate of registration, that certificate is deemed to be revoked two years after the failure to pay the annual fee. Some registrants choose to resign from the College at renewal time.

Resignations – March 5, 2009 to July 10, 2009

Name	Reg ID	Name	Reg ID	Name	Reg ID	Name	Reg ID
Blaser, Sonja Lynne	000047	Farley, Danielle Nicole	012245	McDowell, Barbara Anne	000071	Smith, David Lucas	008677
Buchanan, Marla Wynne	012236	Graham, Andria	011454	McIntosh, Melissa	010475	Tripp, Jessica Anne Evelyn	012162
Daigle, Alicia	010722	Kravets, Svitlana	011485	Passafiume, Lorna Mary	000148		
Dumas-Theberge, Sheena Nadine	011564	Liss, Elayna Mari	003481	Reid, Melinda Tracey	008951		

Reinstated – March 5, 2009 to July 10, 2009

Name	Reg ID	Name	Reg ID	Name	Reg ID	Name	Reg ID
Al-Khoja, Gheed	011327	Colledge, Corinne	007832	Kosmadia, Rina	011673	Rajan, Nadia	011583
Bastien, Caroline Angele	004101	Daher, Marianne	012321	Lauzon, Jeannine	002881	Rayner, Joanna Sandra M	003626
Birrell, Corinne Margaret	003533	Elyas, Natalie	012313	Luczak, Aleksandra	010372	Roulston, Lindsey Dawn	008928
Bustos, Frederlyn F	010679	Enriquez, Patricia May	009670	Montoya, Diane Elizabeth	011565	Singh, Gurjeet	011055
Campbell, Jonathan Bruce	012012	Ferreira, Diana	011907	Plumb, Ruth Chi-Chung	007561		

LIST OF DENTAL HYGIENE ASSOCIATIONS

- **Canadian Dental Hygienists Association** www.cdha.ca 613-224-5515
 - Provides national support and initiatives; professional liability insurance; Canadian Journal of Dental Hygiene; national perspectives; liaison with insurance companies, federal government
- **Ontario Dental Hygienists' Association** www.odha.on.ca 905-681-8883
 - Provides provincial support and initiatives; professional liability insurance; FOCUS Newsletter; provincial perspective; dental hygiene fee guide; lobbying with provincial government
- **Dental Hygiene Practitioners of Ontario** 613-205-0555
 - Support for independent dental hygiene practitioners in Ontario; provide a realistic overview of dealing directly with the public; public awareness of direct access to preventive oral health care

AIT IMPLEMENTATION

There will be a separate process for registration under the Agreement on Internal Trade, Labour Mobility Chapter and Bill 175 *Ontario Labour Mobility Act* (OLMA), a specific application form will be available. Please watch the web site at www.cdho.org/registration

SUMMARY OF DECISION & REASONS FOR DECISION - EMILY FORBES

In a hearing held on February 20, 2009, a Panel of the Discipline Committee of the College of Dental Hygienists of Ontario found Ms. Emily Forbes guilty of professional misconduct for contravening a condition imposed on her certificate of registration, failing to reply appropriately or within a reasonable time to a written enquiry by the College, contravening the legislation, and disgraceful, dishonourable or unprofessional conduct.

The Notice of Hearing contained the following statement of allegations:

1. Ms. Emily Forbes was a duly registered dental hygienist registered to practise in Ontario.
2. On or about April 15, 2005, Ms. Forbes first became registered with the College of Dental Hygienists of Ontario (the "College").

Discipline Order

3. On or about December 17, 2007, Ms. Forbes was disciplined by a Panel of the Discipline Committee of the College for conduct involving engaging in the practise of dental hygiene while not being registered with the College, engaging in the practise of dental hygiene without liability insurance and for falsifying documents relating to her liability insurance. The penalty ordered by the Discipline Panel included:
 - a. A reprimand;
 - b. A suspension of her certificate of registration for five weeks;
 - c. The imposition of a term, condition and limitation on her certificate of registration requiring her to successfully complete, within six months of the Panel's order becoming final, an ethics and jurisprudence course;
 - d. The imposition of a term, condition and limitation on her certificate of registration requiring her to provide to the Registrar, within 30 days of the Panel's order becoming final, an apology/acknowledgement of her conduct acceptable to the Registrar for publication in the College newsletter;
 - e. The imposition of a term, condition and limitation on her certificate of registration requiring her to provide to the Registrar, at the time of annual renewal of her certificate of registration for the next five years, documentary proof of her liability insurance; and
 - f. Costs to be paid to the College in the amount of \$2500.00 payable at a rate of approximately \$139.00 per month for 18 months beginning the month after the completion of her suspension.
4. It was alleged that Ms. Forbes failed to meet the deadlines relating to the following components of the Discipline Panel's Order:
 - i. the preparation of the apology;

- ii. the completion of the ethics course; and

- iii. the payment of costs.

Failing to Respond to College Representative

5. On or about March 27, 2008, the College wrote to Ms. Forbes asking her if the wording of the apology, which had been slightly revised by the College, was acceptable to her. Ms. Forbes failed to respond to that letter.
6. On or about April 22, 2008, the College again wrote to Ms. Forbes asking her to confirm whether the wording of the apology was acceptable to her and also asking for an account of the criminal offence with which Ms. Forbes indicated on her annual renewal form she had been charged. Ms. Forbes failed to respond to that letter.

Quality Assurance Portfolio

7. On or about May 14, 2008, Ms. Forbes was advised in writing that she had been selected to submit her professional portfolio to the College for the year 2007. The deadline given to submit her professional portfolio was June 18, 2008.
8. Under the Quality Assurance regulations, registrants of the College are required to comply with the requirements of the College's Quality Assurance Program. Those requirements include the following:
 - a. developing and maintaining a professional portfolio,
 - b. during every year participating in continuing quality improvement activities sufficient to indicate that the member continues to have and to apply in his or her dental hygiene practice the knowledge, skills, judgment and attitudes required to practise dental hygiene in compliance with the College's standards of practice and ethics.
 - c. accurately and completely documenting those activities in the member's professional portfolio, and
 - d. cooperating with an assessment of her professional portfolio, quality improvement activities and practice to evaluate the member's knowledge, skills, judgment and attitudes.

9. Those requirements are set out in ss. 19-23 of Ontario Regulation 218/94, as amended and s. 82 of the Health Professions Procedural Code.
10. Ms. Forbes failed to meet the June 18, 2008, deadline for submission of her professional portfolio.
11. On or about July 4, 2008, the College wrote to Ms. Forbes again requesting her professional portfolio and asking her to submit it to the College by July 18, 2008, failing which the matter would be brought to the Registrar's attention.
12. Ms. Forbes failed to meet the July 18, 2008, deadline given to her.
13. It was alleged that Ms. Forbes is ungovernable.
14. It was further alleged that the above conduct constituted professional misconduct pursuant to paragraph 1 (contravening a term, condition or limitation imposed on the member's certificate of registration); and/or paragraph 30 (failing to reply appropriately or within a reasonable time to a written enquiry by the College); and/or paragraph 42 (contravening the Act, the *Regulated Health Professions Act* or the regulations made under either of those acts); and/or paragraph 47 (disgraceful, dishonourable or unprofessional conduct) of section 15 of Ontario Regulation 218/94, as amended, under the *Dental Hygiene Act, 1991*.

Ms. Forbes did not attend the hearing, although duly served with the Notice of Hearing. An Affidavit of Service was filed with the Panel showing that she was personally served on November 10, 2008. Accordingly, the Panel proceeded with the hearing in her absence. A plea of "not guilty" was entered, given Ms. Forbes' failure to attend the hearing. When a registrant refuses or fails to appear at a discipline hearing, when duly served, the Discipline Panel has the jurisdiction to proceed with the hearing in her/his absence. A registrant cannot avoid the discipline process by a failure to respond to the Notice of Hearing.

The College filed a Book of Documents and called two witnesses to support the allegations in the Notice of Hearing. The Panel considered the documentary evidence and oral testimony and found that the allegations were supported by the information presented and by the testimony of the witnesses. The Panel found that Ms. Forbes exhibited disgraceful, dishonest and unprofessional conduct, by her breach of the terms, conditions and limitations on her certificate of registration, by failing to respond reasonably and appropriately to College correspondence, and for her failure to comply with her obligations under the Quality Assurance Regulation. Additionally, she failed to pay costs as ordered by the Discipline Panel on December 18, 2007 and did not provide any explanation for that failure.

The Panel considered the continued failure to respond to the numerous communications from the College, conduct that clearly indicated that Ms. Forbes was ungovernable and her absence from the hearing and failure to respond to the Notice of Hearing and made the following order on penalty and costs:

1. Ms. Forbes shall be required to appear, on a date to be set by the Registrar, before a Panel of the Discipline Committee to be reprimanded, the fact of which shall be recorded on the register.

2. The Registrar shall suspend the certificate of registration of Ms. Forbes until such time as she has provided proof, acceptable to the Registrar, that she has complied with the original order of the Discipline Committee made December 18, 2007 and that Ms. Forbes has complied with the requirements of the Quality Assurance Program.
3. Ms. Forbes shall pay to the College the amount of \$5,000.00 in costs, payable in accordance with a schedule agreed to in writing between the College and Ms. Forbes, or failing such agreement being reached, within 60 days of the date of this Order.

The Panel was satisfied that the Order made upheld the principles for public protection, general deterrence, and specific deterrence. Ms. Forbes was required to comply with the Quality Assurance Program to ensure public protection. For that and her other failures to comply with the order of a previous Discipline Panel, Ms. Forbes' certificate of registration was suspended until such time as she has established to the satisfaction of the Registrar that she is in compliance.

The penalty satisfies the principle of general deterrence. It sends a message to the profession that such acts of professional misconduct by a registrant will not be tolerated. The principle of specific deterrence is satisfied. A suspension is a serious penalty. It will deter Ms. Forbes from similar misconduct and allow her sufficient time to reflect upon her actions during the period of suspension, which continues until compliance is achieved.

The Panel heard evidence that the cost of the Hearing was approximately \$14,000.00. Ms. Forbes was ordered to pay costs of \$5,000.00 to the College. The Panel believed that the payment of this amount was fair and reasonable. Ms. Forbes failed to comply with the original costs order made at the December 18, 2007 hearing and put the College and therefore the registrants, to the cost of prosecuting her in this matter. A higher cost penalty might have been ordered, but Ms. Forbes' personal circumstances were taken into account.



PANDEMIC PLANNING

Health Profession Regulatory Colleges have an important role to play in a consistent coordinated provincial response to an influenza pandemic. In fulfilling that role, they do so in a partnership with government agencies.

A pandemic is a global outbreak of influenza that occurs when a new influenza type virus emerges for which there is little or no immunity in the human population, the virus is present all over the world and infects a large proportion of the population.

The recent outbreak of H1N1 provided an opportunity for Pandemic Planners to implement the Pandemic Plan for Ontario. As the phase of Pandemic Preparedness was raised to Level 5, the Emergency Preparedness alert rose accordingly. Representatives of the Ministry of Health and Long-Term Care met daily by teleconference. The information was then relayed to the various health organizations, including RHPA Colleges, so that registrants and other stakeholders would have the most up-to-date information.

The CDHO Pandemic Plan was enforced and all administrative staff had a refresher on how to implement the CDHO plan for operation during the phases of the alert. The role of the College is to provide:

- Effective communication with registrants
- Advice on regulatory issues and standards of practice
- Maintain a mechanism to register qualified professionals
- Conduct business as required to address regulatory issues

CDHO placed information on the home page of the web site at www.cdho.org where links to agencies are provided.

Centers for Disease Control and Prevention
<http://www.cdc.gov/h1n1flu/>

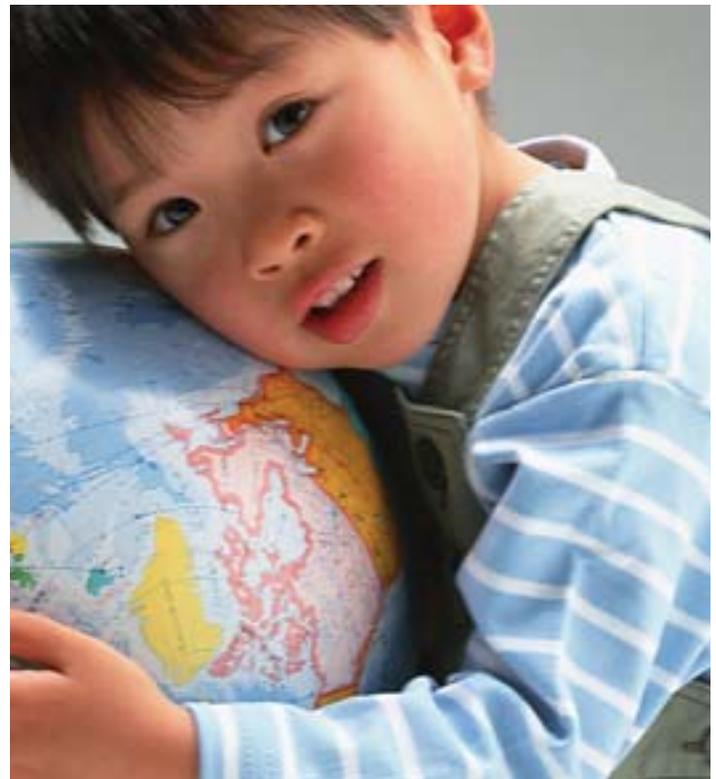
Public Health Agency of Canada
<http://www.phac-aspc.gc.ca/index-eng.php>

Ministry of Health and Long-Term Care (Ontario)
<http://www.health.gov.on.ca/english/providers/program/emu/ihn.html>

Registered Dental Hygienists are advised that in the event of a pandemic they will receive information on the web site. Please make it part of your daily routine to visit the web site for the latest information during a pandemic alert.

Or call the **HEALTH CARE PROVIDERS HOTLINE: 1-866-212-2272**

The *Milestones* editions March 2009, June 2007, and November 2006 contain articles on Pandemic Planning. Dental hygienists should take the time to educate themselves on this topic and prepare yourself and your family for a pandemic. Develop good infection control practices and discuss with employers the organisation's pandemic plan and guidelines.



BYLAW #4 NOW IN EFFECT, INCLUDES:

- notations on the web site including suspension of non-payment of fees
- only 30 days, not 60 days for suspension for non-payment of fees
- notations on the web site of court findings, incapacity, professional misconduct, professional negligence inside or outside of Ontario
- fee for non-response to the College
- requirement to provide both business addresses and telephone numbers
- requirement to update both home and business addresses



CDHO Public Council Member Sam Laldin and the Honourable John Gerretsen, MPP Kingston and The Islands and Minister of the Environment, Ontario visit registered dental hygienist Deborah Steacy in her independent office, "Kingston Dental Hygiene".

Photo by: Calvin White, SNAP Kingston Newspaper

FABRICATION OF MOUTHGUARDS

Dental hygienists may fabricate and fit mouthguards for sports purposes. They may also fabricate and instruct the client on the insertion of whitening trays. Dental hygienists who work in collaboration with a dental technologist and/or a dentist may provide bruxism appliances to clients. However, such appliances must be fitted by a dentist.



COUNCIL MEETING HIGHLIGHTS, May 29, 2009

CDHO President, Linda Jamieson opened the meeting by discussing the responsibilities of a profession charged with a social contract with the government (see President's Message in this issue). She welcomed Mr. Shori Katyal as the new public member appointed on May 26, 2009.

The Registrar provided the Administrative Report, highlighting the fact that the office renovations were nearly complete. In addition, she welcomed Lorraine Sequeira and Spring Shen as Administrative Assistants with the College. Registration statistics as of May 1, 2009: General – 9,395; Inactive – 715; Specialty – 490 and authorized to self-initiate – 2,401. The Registrar also noted that there were now over 100 independent dental hygiene practices listed on the CDHO web site; 53 provide mobile services. The Registrar stated that both Derrick McLennon and Samuel Laldin had been reappointed as public members for a further three-year term.

The Chair of the Regulations & Bylaws Committee introduced Bylaw No. 4 which comes into effect on June 4, 2009 to accompany the proclamation of the *Health System Improvements Act, 2007*. Council approved Bylaw No. 4 and the Chair moved that since the work of the Committee was complete, that the Regulations & Bylaws Committee be dissolved. Council agreed and thanked the Committee for their work.

As Chair of the Executive Committee, the President stated that both Council and Non-Council Members had participated in a governance workshop on the preceding day. In addition, she noted that the College had hosted an Educators' Workshop on May 2, 2009 to which Program Directors from each of the Ontario Dental Hygiene Colleges had been invited. The President indicated that the CDHO was still considering the implications of several Bills that had been tabled in the Legislature and Richard Steinecke, legal counsel, provided an overview of the proposed *Acts*. Due to the number of submissions received in response to the circulated *Draft Standard of Practise: Delegation: Clinical Competency Preparatory Courses* the Executive Committee decided to do a more in-depth analysis of the issue and report to Council in October.

The Executive Committee completed its investigation of seven cases. In one case, the matter was referred to the Discipline Committee. Three cases dealt with failing to comply with the requirements of the Quality Assurance Program. In two of these cases, the registrants subsequently complied with the requirements. In the other case, the registrant was suspended for non-payment of fees. Therefore, the Committee directed that no further action be taken with respect to these matters. Two cases dealt with registrants who were charged with criminal offences. In both cases, the Committee determined that the matters did not affect the registrants' suitability to practise dental hygiene. In another case, the Committee determined that there was no substance to the allegations brought forward against a registrant and agreed to take no further action.

The Audited Financial Statements for 2008 were presented by the auditors and accepted by Council. The auditors were reappointed for the 2009 financial audit.

Gail Marion of Thunder Bay was appointed as a non-Council Member to the new Inquiries, Complaints and Reports Committee (ICRC) that replaces the

Complaints and Executive II Committees by way of the amendments to the *RHPA, 1991* as of June 4, 2009. In addition to the members of the Complaints Committee, Council appointed Anne Venton, Shirley Silverman and Carol Barr Overholt to the ICRC.

The Quality Assurance Committee indicated that a total of 992 registrants had been selected in two sections for the 2008 Professional Portfolio Peer Review. In addition, the Committee brought forward *Standards of Practise for Dental Hygiene Educators* which the Council approved.

The Chair of the Registration Committee reported that the Committee had considered an appeal from an applicant for registration who had been unsuccessful four times on the clinical evaluation. The applicant was requesting to undertake a fifth attempt on the clinical evaluation. Under the current Examination Regulation, the maximum number of attempts is four, after which an applicant must successfully complete another dental hygiene program. The Committee found that no irregularities had occurred during the clinical evaluation and denied the appeal.

The Committee reviewed and agreed to an updating of the equivalency process for applicants applying for a specialty certificate of registration in restorative dental hygiene. They also reviewed the results of the latest clinical evaluations which are posted on the CDHO web site. Council reviewed and approved the *Proposed Amendments to Regulation 218/94, Part VII – Registration* for circulation to registrants and stakeholders. The proposed amendments include requirements for the Agreement on Internal Trade, Chapter 7, Labour Mobility as proposed by the Ontario government in Bill 175, *An Act to enhance labour mobility between Ontario and other Canadian provinces and territories*.

The Complaints Committee reported that they had completed its investigation of one complaint and determined that the matter be referred to the Executive Committee for incapacity proceedings. There are currently twelve complaints outstanding.

The Discipline Committee reported that a discipline hearing was held on February 20, 2009 respecting Ms. Emily Forbes. A summary of the proceedings can be found elsewhere in this issue of Milestones and on the CDHO web site.

The Patient Relations Committee reported that the CDHO Communications Plan was moving into the next phase. The CDHO's pandemic plan, which included orientation for Administration, was tested during the H1N1 concern and at this point everything ran smoothly.

The President presented Jane Rowe, public member from Timmins, with a plaque of appreciation. The President also presented a plaque of appreciation to Susan Raynak, academic member, who is retiring from teaching at Confederation College in Thunder Bay at the end of June and will subsequently be ineligible to remain on Council. Linda Jamieson thanked both Council Members for their service to Council and to the Public of Ontario.



Left to right: Linda Jamieson (President), Jane Rowe (Public member), Susan Raynak (Academic member), Fran Richardson (Registrar).



Susan Raynak (Academic member) receiving a plaque of appreciation from Linda Jamieson (President).



Linda Jamieson (President) presented Jane Rowe (Public member) with a plaque of appreciation.

COUNCIL MEETING DATES



2009 Council Meeting Dates:
October 30, 2009

The next meeting of Council is scheduled for **October 30, 2009**. The location is yet to be determined. All are welcome to attend. For further information please contact Jane Cain at **416-961-6234** or outside the Toronto area at **1-800-268-2346 ext. 226** or e-mail jcain@cdho.org.



PROFESSIONAL PORTFOLIO TUTORIAL

Professional Portfolio Tutorial

http://www.cdho.org/QualityAssurance/QAPackage_En/PortfolioTutorial.pps

Tutoriel – Formulaires du portfolio professionnel

http://www.cdho.org/QualityAssurance/QAPackage_Fr/PortfolioTutorial_Fr.pps

Health Canada has Produced a Booklet

*Help your Child Stay Smoke-free:
A Guide to Protecting your Child
Against Tobacco Use.*

<http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/quit-cesser/kids-enfants/index-eng.php>

REMINDER

All requests for a duplicate certificate of registration, tax receipt or a certificate of professional conduct (letter of good standing) must be in writing to the attention of Heather Boucher.

Requests can be faxed to **416-961-6028**; e-mailed to hboucher@cdho.org or mailed to **69 Bloor Street East, Suite 300, Toronto, Ontario M4W 1A9**.

**PLEASE INCLUDE YOUR REGISTRATION
NUMBER ON ALL CORRESPONDENCE**

For Your Information

The Self-Initiation course for dental hygienists is now available online at the CDHA website. For more information or to register, please visit the CDHA website at www.cdha.ca. Direct all phone enquiries to the CDHA at 1-800-267-5235.

The registrant is responsible for notifying the College of an address or name change within seven (7) days of that change.

Milestones is published periodically by the College of Dental Hygienists of Ontario, 69 Bloor Street East, Suite 300, Toronto, Ontario M4W 1A9
Telephone • 416-961-6234 Toll Free • 1-800-268-2346 Facsimile • 416-961-6028

Milestones is the official publication of the College of Dental Hygienists of Ontario.

Comments or Questions on issues relating to the dental hygiene profession are welcome.

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