

CDHO

COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

# Annual Report 2025

# Who We Are

The College of Dental Hygienists of Ontario (CDHO) is the regulatory body for Registered Dental Hygienists (RDHs) in Ontario.

We set **requirements** for becoming an RDH so only qualified individuals can practise.

We set **standards** to ensure RDHs provide safe, ethical care.

We keep a **Public Register** so you can verify if your RDH is registered and in good standing.

We have a **Quality Assurance Program**, which supports continuous professional development.

We **investigate complaints** and **take action** when standards aren't met.



# Message from our Chair



I’m delighted to share my first message as Council Chair and to present our 2025 Annual Report.

This past year marked an important milestone for CDHO with Council’s approval of a Strategic Plan for 2025–2027. Thanks to months of thoughtful dialogue, listening and collaboration, we have clear direction that will allow us to improve our effectiveness in a rapidly evolving environment. The Strategic Plan outlines four goals:

1. Enhance collaboration with the public, profession and system partners
2. Support professionalism, quality care and continuous learning
3. Advance commitments to equity and inclusion
4. Modernize governance practices

These goals reflect the insights, experiences and aspirations shared with us throughout the planning process. I appreciate everyone who provided input so that we could develop a plan that is forward-looking, responsive and grounded in the needs of Dental Hygiene clients.

I’d also like to thank my fellow Council members for their support as I stepped into this role for the first time, and for their continued dedication to our public interest mandate. I’m grateful to Dr. Glenn Pettifer, our Registrar/CEO, for his leadership and strategic insight, and the entire CDHO staff, whose commitment to excellence ensures we fulfill our mandate with integrity.

This has been a rewarding first year as Chair, and I look forward to the work ahead.

**Michelle Atkinson,** RDH, BA

# Message from our Registrar



This past year was a milestone year for setting CDHO's strategic direction and for continued improvement in how we support the continuing competence of Registered Dental Hygienists in their delivery of care to the people they serve.

I'd like to thank Council for their commitment to developing and adopting a Strategic Plan to guide the College's work from 2025 – 2027. The plan articulates a clear organizational direction and is another way for the public, Registered Dental Hygienists, and our system partners to understand and measure how we're protecting the public's interest in accessing safe, competent oral hygiene care. We've already made great strides in achieving our strategic objectives, and CDHO staff and I look forward to working with Council to build on this progress in the coming year.

Supporting Registered Dental Hygienists continued to be a priority in 2025. This was the first year Peer Circles were offered as a Path option for those participating in the Quality Assurance Assessment. An impressive 552 RDHs participated in this assessment through Peer Circles. It has been a remarkable journey to develop and launch this initiative. I would like to sincerely thank everyone involved. The level of interest and support from the profession in the development and delivery of Peer Circles – whether through an optional event or through the assessment process – speaks volumes to how engaged the profession is and how willing RDHs are to reflect on and improve their practice. We look forward to our continued strong collaboration with RDHs in supporting the high quality of care they provide.

In 2025, CDHO formed a policy Working Group that has started the journey of developing a Standard of Practice for Cultural Safety, Humility and Anti-Racism. We look forward to this continued work in 2026. Additionally, through a Bursary program administered by Indspire, Council committed to continued support of Indigenous students registered in Dental Hygiene educational programs in Ontario.

This year, College staff and Council were pleased to support the Ontario government's consultation on proposed scope of practice enhancements for Registered Dental Hygienists that would permit RDHs to prescribe X-rays, be designated Radiation Protection Officers, and prescribe and administer local anaesthetic by injection in the orofacial complex. CDHO is pleased to support these efforts that improve access to oral health care for Ontarians and allow RDHs to practise more fully within their Scope of Practice and expertise.

There are many reasons to be thankful and optimistic as we close another successful year. I'd like to thank Council for their continued vision and the entire CDHO team for their commitment and tireless efforts! It is a continuing honour for me to work with all members of the Dental Hygiene profession, and I look forward to what the future holds!

**Dr. Glenn Pettifer**
Registrar/CEO

# The Year in Review



## Strategic Plan Approved

In March 2025, CDHO's Council approved a Strategic Plan for 2025–2027. The plan highlights our dedication to continuous improvement, evidence-based decision-making and system collaboration. It builds on CDHO's successes and regulatory leadership, emphasizing engagement with RDHs and partners to address the changing needs of Dental Hygiene clients.

Over several months, Council engaged in a comprehensive process of reflection, discussion and active listening. This involved assessing CDHO's achievements and leadership role, considering the evolving regulatory landscape, and gathering feedback from the public, partners and the profession.

**ENHANCE** Collaboration with the Public, the Profession and System Partners

Enhance awareness of the role of the College of Dental Hygienists of Ontario, the practice of Dental Hygiene, and support integrated care solutions that improve patient outcomes and experience.

**SUPPORT** Professionalism, Quality Care and Continuous Learning

Support a culture of professionalism and continuing competence that ensures adherence to standards of practice and the delivery of safe, ethical and evidence-based care.

**ADVANCE** Commitments to Equity and Inclusion

Advance equity and inclusion by embedding principles into organizational and regulatory policy development and implementation, standards, practice support, and decision-making. Initiatives promote cultural safety, trauma-informed care, and accessible care for diverse communities.

**MODERNIZE** Governance Practices

Modernize governance to improve transparency, accountability, and strategic and operational oversight. This includes ensuring alignment with good governance practices, risk mitigation and decision-making in the public interest.

## New Self-Service Portal and Public Register

In 2024 we began upgrading our registrant database, which powers the Self-Service Portal and Public Register. We launched the new system in March 2025, with improved functionality, security, and ease of use for the public and RDHs. The Self-Service Portal and Public Register were re-designed with a modern, streamlined look, and the way RDHs log in to the Portal changed. View the Public Register.

## Peer Circles, Second Volunteer QA Assessment and a Risk-Based Approach to QA

2025 was the first year we offered Peer Circles as a Path option for those participating in the QA Assessment. In 2024 we asked for volunteers to be assessed in 2025 and 552 RDHs chose Peer Circles as their preferred assessment Path. We continued offering optional Peer Circles, with more than 300 RDHs participating in an in-person or online session. The feedback from those who were assessed and those who participated in the optional sessions was overwhelmingly positive.

In July 2025, we informed RDHs of the selection criteria for the 2026 Quality Assurance Assessment. We randomly selected 500 RDHs for assessment and created space for 300 volunteers. RDHs once again stepped up and the response exceeded our expectations, with 228 volunteering for assessment.

Recognizing that modern regulation focuses on reducing the risk of harm to clients, we conducted several focus groups with RDHs to better understand risks to continued competence and risks in Dental Hygiene practice. Learnings from these focus groups helped us incorporate discussions of risk into Path 4 to ensure we're capturing what matters most in our conversations during the Peer Circle and coaching conversations. In early 2026 we will engage with Dental Hygiene clients to hear their perspectives. This data will help us ensure that the QA Program evolves to focus on high-risk areas, so that we can improve client safety and reduce the risk of harm.



## Proposed Enhancements to the Scope of Practice and Changes to Regulations

In September the Ontario Government announced that it was seeking feedback on proposed enhancements to the Scope of Practice for RDHs. The **proposed changes to Scope would permit RDHs** to:

- Order X-rays,
- Be designated Radiation Protection Officers (RPO) under the *Healing Arts Radiation Protection Act*, which would allow independent RDHs to own and operate dental x-ray machines, and
- Prescribe and administer local anaesthetic by injection in the orofacial complex.

The feedback period closed in November. There are no changes to Scope currently and we are waiting to hear next steps from the Ontario Government. Learn more about the proposed enhancements.

The Ontario Government approved changes to CDHO's **Registration Regulation**. We submitted proposed changes related to registration and examination matters to bring certain provisions in line with modern regulatory practices. Learn more about the changes.

The Ontario Government also introduced legislation that, if approved, would permit several regulated health professionals from other Canadian jurisdictions to practise in Ontario for up to six months while their application for registration is being processed by their regulatory college. We were pleased to learn that RDHs were included in these **"As of Right" rules**, which are expected to come into effect in January 2026. Learn more about "As of Right".

## Development of a Cultural Safety, Humility and Anti-Racism Practice Standard

In 2025 we established a working group to support the development of a practice standard on cultural safety, humility and anti-racism. The group includes RDHs who have extensive personal and professional experiences in this work.

In November 2025, we hosted the working group to begin drafting this practice standard. They engaged in rich discussions around minimal expectations for culturally safe Dental Hygiene care and reconciliation efforts in regulation. The new standard will specify the requirements for RDHs to provide culturally safe care to persons and communities and help address Indigenous-specific racism in service delivery. We are grateful to the working group members for their participation:

- Carrie Banning
- Linda Douglas
- Trish Goulet
- Jen Kulik
- Joan Pelletier
- Lisa Rogers
- Ashley White
- Myrtle Wong



## Development of Guidance on Artificial Intelligence

Artificial Intelligence (AI) is changing the way healthcare is delivered, and that includes Dental Hygiene practice. In 2025 we began developing a new practice guideline and checklist on the use of AI. These resources:

- highlight existing professional obligations for RDHs,
- identify potential risks associated with AI use, and
- provide risk mitigation strategies to protect the public's interest.

The practice guideline and checklist are expected to be published in January 2026.

## Raising Awareness of CDHO

CDHO began an Ontario-wide public awareness campaign in 2024, which continued until the end of 2025. The campaign was developed in response to low awareness reported by patients in the annual Voice of the Patient Survey.

The campaign featured ads on Google, YouTube, Facebook, Instagram and Reddit. To reach Indigenous, rural and traditionally under-served communities, digital ads were accompanied by radio and newspaper advertising in select communities. The campaign garnered over 166,000 clicks to www.cdho.org. We will analyze this data to inform future campaigns.





# Practice Advice Stats

**1,087** Calls

**804** Emails

**1,891**
Total Enquiries

## Top 5 topics

1. **Regulations** (Record keeping, contraindications)
2. **Standards of Practice** (Process of care)
3. **Infection, prevention and control** (Monitoring, PPE)
4. **Scope of Practice** (Use of lasers, restorative procedures)
5. **Independent practice** (Start-up information)



# Registration

## Registration Process

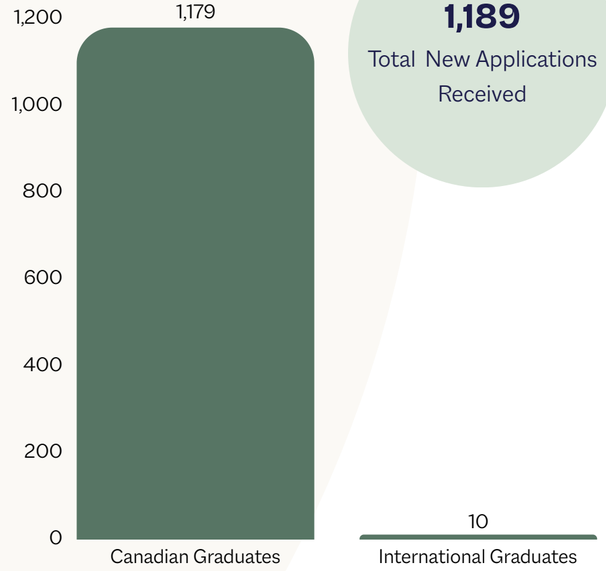
CDHO aims to process and approve completed applications within 10 business days of receipt. In 2025, **99%** of completed applications were approved within that timeframe.

## Registrar-reviewed Applications

In 2025, the Registrar reviewed 14 applications, and four applications were referred to the Registration Committee for review. Reasons for referral can include a positive result on a criminal record check and academic misconduct.

## Registrant Experience Survey Results

We are committed to improving our application and registration processes. All recent applicants are sent a voluntary survey so they can provide feedback on the application process and identify any areas for improvement. Applicants' overall satisfaction with the registration process increased from 90% in 2024 to 93% in 2025. These results are published in the Registration Experience Dashboard.

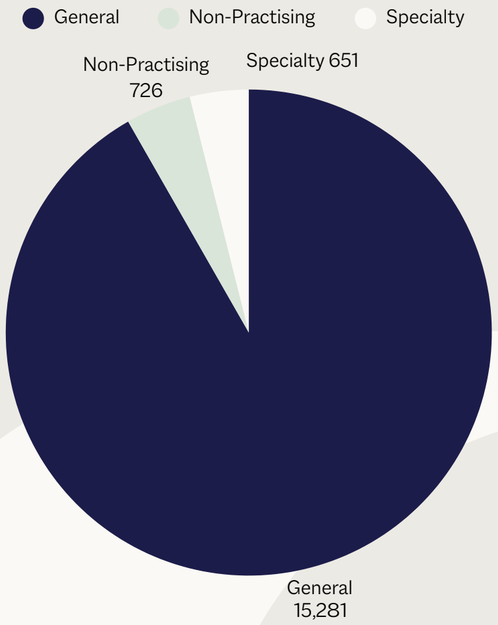



**1,189**
Total New Applications Received

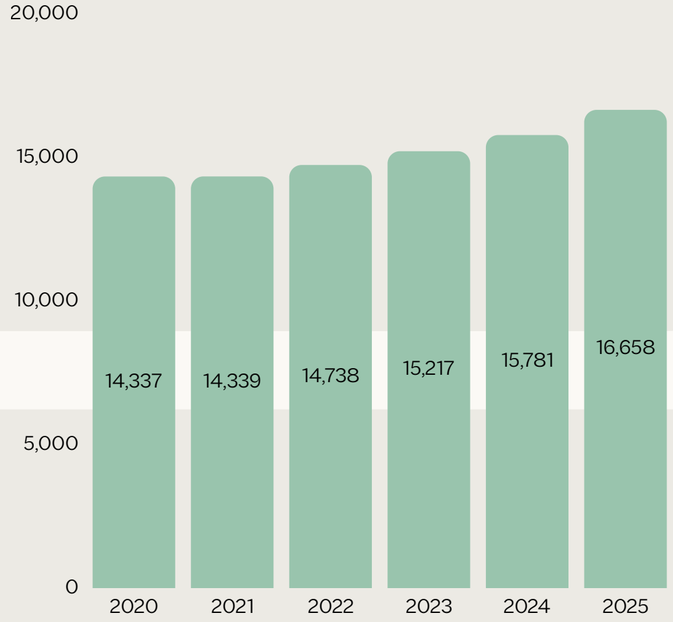
# Snapshot of the Profession

**16,658**
**Total Number of RDHS**

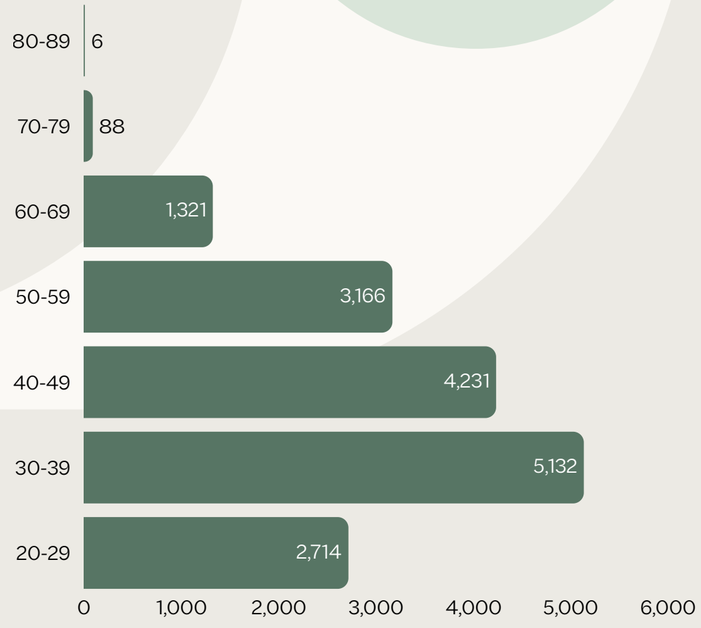
## Total Number of RDHs




## Registration Growth from 2020-2025




## Age



## Top 5 Countries of Initial Education

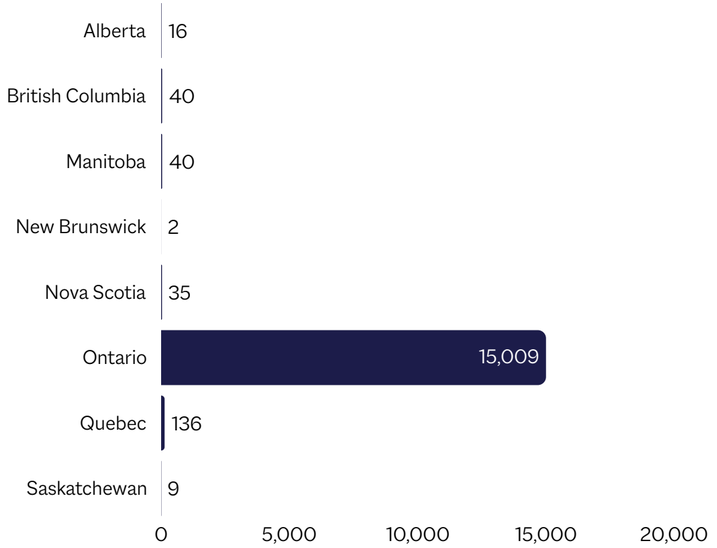
- Canada
- United States of America
- United Kingdom
- Colombia
- Israel



## Top 5 Languages of Service

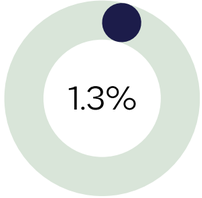
1. **English**
2. **French**
3. **Hindi**
4. **Punjabi**
5. **Urdu**

## Initial Education in Dental Hygiene by Province

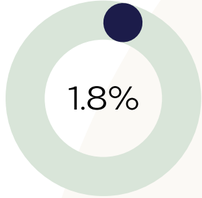



## Demographics

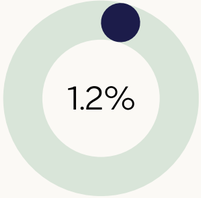
*Individuals can self-identify in multiple categories.



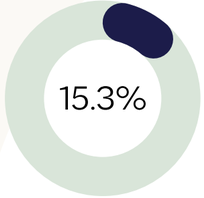

Identify as LGBTQ2+




Identify as Indigenous




Identify as having a disability




Identify as a visible minority

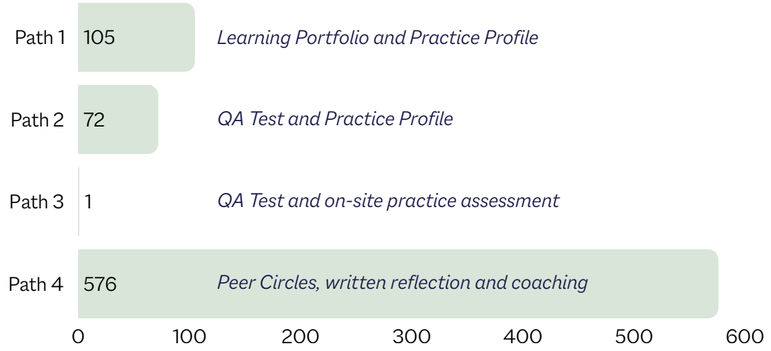


# Quality Assurance

CDHO's Quality Assurance (QA) Program helps RDHs maintain their knowledge and skills so that they can provide safe and ethical care.

## Annual QA Assessment

In 2025, 729 RDHs volunteered to participate in the QA Assessment process and another 25 RDHs were required to participate. When participating in an assessment, RDHs can choose one of four possible paths, or the Quality Assurance Committee can assign a path.




As of December 31, 2025, 88% of the 754 QA assessments met the assessment guidelines. The remaining RDHs are participating in activities to help enhance knowledge and skills, or the review is still in progress.

## Committee-directed Assessments

Depending on the results of an assessment, the Quality Assurance Committee may direct an additional practice assessment to address areas of concern. In 2025, the Committee directed nine additional assessments. These may include an on-site practice review, chart audit or a clinical competency evaluation. As of December 31, 2025, four of the directed practice assessments met the assessment guidelines, while the remaining five were participating in activities to help enhance knowledge and skills.

## Continued Development of Peer Circles

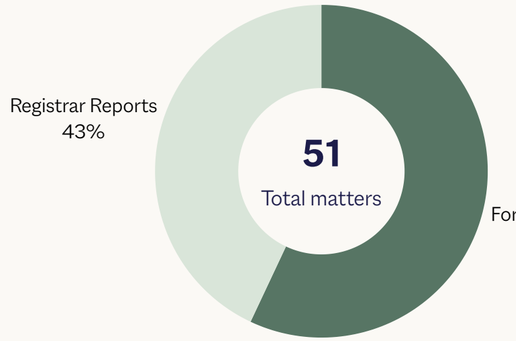
In strong collaboration with RDHs, CDHO continued developing Peer Circles and Path 4. Path 4 launched in spring 2025 and includes participation in two Peer Circles, followed by a written reflection and one-on-one coaching conversation after each session.

Additional work was undertaken to improve the educational and reflective components of Path 4. Two case writing sessions were held to update the Peer Circle case template, which now includes a dedicated section for identifying and discussing risk. The written reflection was enhanced with additional prompts and guidance to support deeper reflection on the risks discussed during Peer Circles and to help RDHs connect these discussions to their own practice and professional development.

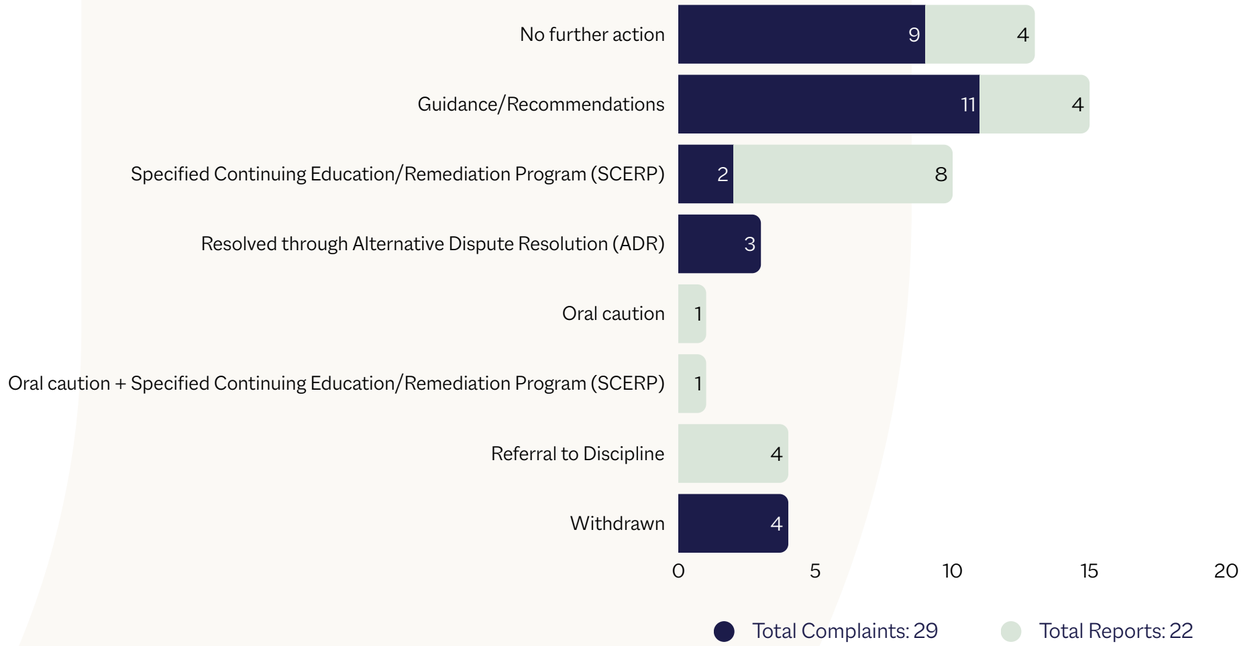
Facilitators will receive additional training focused on the updated cases, enhanced written reflection expectations and approaches to supporting risk-informed discussion during Peer Circles. The training will also address how these elements can be integrated into one-on-one coaching conversations with participants, particularly in supporting meaningful goal setting and action planning.

# Inquiries, Complaints & Reports

In 2025, the Inquiries, Complaints and Reports Committee (ICRC) reviewed 78 matters. Of the 78 matters, 57 were new and 21 were carried forward from 2024. The ICRC completed its investigation into 51 matters, and 27 matters will be carried into 2026.




## Decisions and Outcomes of Completed Matters




## Top 5 Concerns Raised by Complainants

- **Communication** (e.g., rude behaviour, insensitive or inappropriate comments)
- **Failure to provide adequate treatment** (e.g., unsuccessful treatment, damage caused to teeth/gums and/or surrounding tissues, painful treatment)
- **Inappropriate billing** (e.g., charging excessive fees for services provided)
- **Ethical concerns** (e.g., offensive or discriminatory conduct, dishonesty)
- **Boundary violations** (e.g., conflicts of interest, breach of professional relationship)

## Timelines

All Colleges are required to complete complaint matters within 150 days. If the investigation exceeds that time and at the 150-day mark, a letter is sent to both parties explaining that the ICRC will not meet the deadline. At 210 days, CDHO must notify the parties and the Health Professions Appeal and Review Board (HPARB) of the delay, and the reasons for the delay. After 210 days, either party can apply to HPARB seeking relief for the delay. In the interest of fairness and safety, CDHO aims to complete all matters, not just complaints, within 150 days.

| Matters | Completed in 150 days or less | Completed in more than 150 days, but 210 days or less | Completed in more than 210 days |
|---|---|---|---|
| Formal complaints | 17* | 9 | 3 |
| Registrar Reports | 2 | 6 | 14 |

*Includes 4 matters that were withdrawn and 3 matters resolved through ADR.

## HPARB Reviews

Both the complainant and the RDH who was the subject of the complaint may request a review of the ICRC's decision by HPARB. Decisions to refer specified allegations to the Discipline Committee or referrals for incapacity inquiries cannot be appealed to HPARB.

- Matters appealed in 2025: 6
- Decisions in 2025 from 2025 appeals: 0
- Pending decisions from 2025 referrals: 6
- Pending decisions from 2024 referrals: 1
- Decisions in 2025 from previous year referrals: 0

# Discipline & Fitness to Practice

The **Discipline Committee** holds hearings to determine whether an RDH has committed an act of professional misconduct or is incompetent. It also holds reinstatement hearings to determine whether a former registrant whose Certificate of Registration was revoked should be re-admitted to the profession. There were no hearings before the Discipline Committee in 2025. Four matters referred to the Discipline Committee in 2025 remained open as of December 31, 2025 and will be scheduled in future.

The **Fitness to Practise Committee** holds hearings and makes decisions about allegations of incapacity against an RDH. There were no referrals to the Fitness to Practise Committee in 2025.





# Patient Relations

CDHO is required by law to have a Patient Relations Program. The program incorporates measures for preventing and dealing with sexual abuse of patients, including:

- educational requirements for RDHs on sexual abuse and boundary issues;
- guidelines for the conduct of RDHs with their clients aimed at preventing and dealing with sexual abuse, such as the Guideline — Prevention of Sexual Abuse and Maintenance of Professional Boundaries;
- training for CDHO's staff; and
- providing information to the public.

The program is overseen by the Patient Relations Committee, which also oversees the program to provide funding for therapy and counselling for people alleging sexual abuse by an RDH. In 2025, no applications for funding for therapy were received.

# College Council

## Registered Dental Hygienists

Michelle Atkinson **Chair**

Terri Strawn **Vice-Chair**

Carmen Adebar

Anne-Marie Conaghan *(Academic member)*

Jennifer Cooper *(Academic member)*

Krista Dufour

Juli Kreutner

Liisa Moore

Tiffany Murray

Vanessa Pereira

Balbir Sohi

## Public Appointees

Loree Beniuk

Erin Betts

Nella Chiappetta *(term began in June 2025)*

Derek Gartshore *(term began in October 2025)*

Pella Giabanis

Candace Herod *(resigned in January 2025)*

Jeny Jovanov *(term began in January 2025)*

Christina Lee-Rotstein

Amit Sethi

Margaret Wade



# College Committees

CDHO's work is not possible without the hard work and dedication of our committee members. Thank you for your contributions!



## Executive

Michelle Atkinson **Chair**
Terri Strawn **Vice-Chair**

Erin Betts
Vanessa Pereira
Amit Sethi

## Inquiries, Complaints and Reports

Michelle Atkinson **Chair**

Anne-Marie Conaghan
Jennifer Cooper
Pella Giabanis
Jeny Jovanov
Liisa Moore
Christina Lee-Rotstein
Amit Sethi

**Non-Council Members**
Roxane Hopton
Alicia Howery
Christina Mitas
Pooja Sarda

## Patient Relations

Jeny Jovanov **Chair**

Carmen Adebar
Loree Beniuk
Juli Kreutner
Amit Sethi

**Non-Council Member**
Devon Bedford

## Quality Assurance

Terri Strawn **Chair**

Pella Giabanis
Vanessa Pereira
Balbir Sohi
Margaret Wade

**Non-Council Members**
Fatma Eldesouki
Wendy Wardlaw

## Registration

Terri Strawn **Chair**

Erin Betts
Anne-Marie Conaghan
Tiffany Murray
Christina Lee-Rotstein

**Non-Council Member**
Lisa Frisch

## Discipline

Erin Betts **Chair**
Amanda Acker (Non-Council) **Vice-Chair**

**All Council Members**

**Non-Council Members**
Siobhan Brennen
Rowena Javier

## Fitness to Practise

Christina Lee-Rotstein **Chair**

**All Council Members**

## Ownership Linkage

*(Committee dissolved in June 2025)*

Krista Dufour **Chair**

Jeny Jovanov
Vanessa Pereira
Margaret Wade

## Governance

Michelle Atkinson **Chair**

Erin Betts
Terri Strawn

# Financial Statements

View the summary financial statements

CDHO
COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

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