MILESTONES

A Publication of the College of Dental Hygienists of Ontario / 2016 | Issue 3



Renewals Open November 14th

Council Elections – Districts 1, 5 and 6

Protecting Clients: What You Need to Know About the College's Sexual Abuse Prevention Plan and Upcoming Changes to the Law

College of
Dental Hygienists
of Ontario

Protecting your health and your smile

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.

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.

IN THIS ISSUE



MILESTONES

President's Message 3
Registrar's Message 5
CDHO Council Highlights 7
Council Elections to Be Held in Districts 1, 5, 6 8
The Do's and Don'ts of Advertising 10
WARNING! Don't Treat Your Spouse 12
Quality Assurance Matters 13
Protecting Clients: What You Need to Know About the College's Sexual Abuse Prevention Plan and Upcoming Changes to the Law 15
CDHO's Whistleblower Policy 18
CDHO's Guideline – Interprofessional Collaboration 20
Registration 2016 23
Lifting the Curtain on Discipline Hearings 24
We'll Be Checking That You're Covered 25
Professional Liability Insurance Requirements 25
What Is Professional Misconduct? 26
Updates to the Public Register 29

CONTACT US

Address and Telephone

69 Bloor Street East, Suite 300, Toronto, Ontario M4W 1A9
t: 416-961-6234 • tf: 1-800-268-2346 • f: 416-961-6028 • admin@cdho.org

Hours of Operation

Monday to Friday • 8:30 a.m. to 4:30 p.m.

Senior Management

Registrar/Chief Executive Officer: Lisa Taylor • ltaylor@cdho.org
Director, Professional Practice/Deputy Registrar: Jane Keir • jkeir@cdho.org
Director, Professional Conduct: Gillian Slaughter • gslaughter@cdho.org
Director, Corporate Services: Suzanne Fox • sfox@cdho.org

CDHO COUNCIL

District 1
Michele Carrick (RDH)

District 2
Roma Czech (RDH)
Marlene Heics (RDH)

District 3
Jennifer Turner (RDH)

District 4
Evie Jesin (RRDH)
Pauline Leroux (RDH)

District 5
Bev Woods (RRDH)

District 6
Cindy MacKinnon (RRDH)

District 7
Heather Blondin (RDH)

District 8
Gail Marion (RDH)

Academic
Janet Munn (RRDH)
Catherine Ranson (RDH)

Public Members
Michael "Mike" Connor
Fernand Hamelin
Vinay Jain
Beatrix Kau-Lui
Julius Nathoo
Anne Venton
Saeed Walji
Yvonne Winkle

RDH = Registered Dental Hygienist
RRDH = Reg. Restorative Dental Hygienist

For more information on Council and Council Meeting Dates, please go to www.cdho.org.

Design: CDHO/Amy Kitchen and Denise Lalande • **Editor:** Lisa Taylor • **Cover Photo:** © Corepics VOF/Shutterstock.com

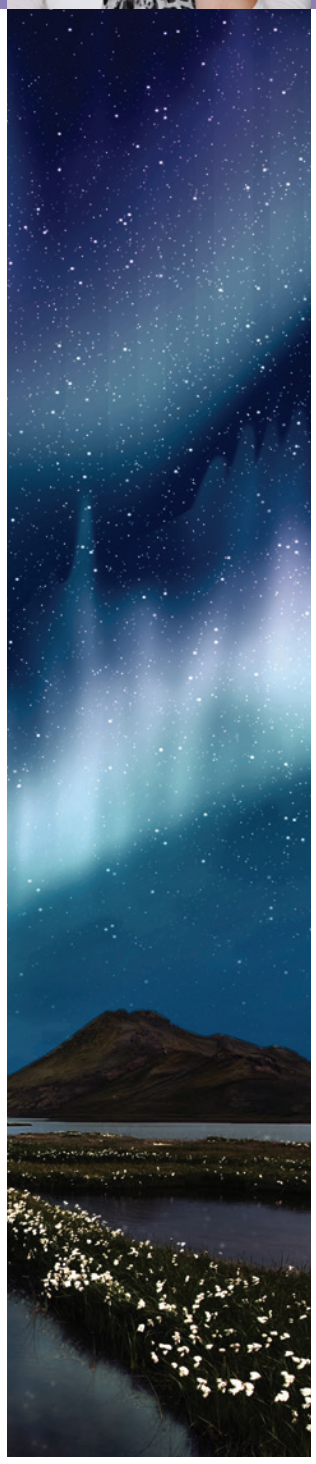
© College of Dental Hygienists of Ontario, 2016 • Material published in *Milestones* may be reprinted without permission, provided that credit is given to the publication and to the College of Dental Hygienists of Ontario.

Publications Mail Agreement No. 40026784. Return undeliverable Canadian addresses to:
College of Dental Hygienists of Ontario, 69 Bloor Street East, Suite 300, Toronto, ON M4W 1A9



President's Message

Jennifer Turner RDH, BSc



Anywhere I go these days, a common question keeps coming up, and I certainly do not mind, but I thought I would address it in my President's message. Why did Council raise the registration fees?

In a previous *Milestones* article, the following information was prepared for the publication. On March 4, 2016 Council voted to amend Bylaw No. 5, Article 16.2 as follows: annual fees for a general or specialty certificate will be $400.00 and annual fees for an inactive certificate will be $200.00. These changes will come into effect for the registration period starting January 1, 2017. Council struggled with the timing of this increase after hearing from a number of registrants who felt that fees should have been increased earlier and at a more gradual rate. It was obvious that Council did not do a good job over the past six years in letting registrants know that we were subsidizing fees with money we had kept in reserve. This reserve money was left over from the money that was placed in investment funds 20 years ago that grew in times of higher interest rates. This money was set aside in reserve in 1994 in anticipation that the College might have to use it to fight the "order" issue. We have been very fortunate that our College has managed its money very well as this is the first fee increase since the beginning of time with the College, twenty-three years. There was one fee reduction of $50.00 in the year 2000.

On a positive note, we are clearly aware of the future projections for the next ten years on what our registration fees will be. This proposal also sees an increase to the general and speciality certificate by an additional $15.00 in 2020 and $20.00 in 2023. Council is invested in self-regulation and recognizes the cost of meeting its regulatory obligations and is confident that the ten-year projection plan will support the College's needs. If you go back and visit your previous *Milestones* issues, which are also available on cdho.org, you can review the breakdown of the registration fee, what other regulated health professions fees are and how our fees allow the College to be able to meet its mandate. Council reviewed all options for how and when a dental hygienist could pay their fees. Did you know that the majority of the 13,000 dental hygienists pay their registration fee to practise dental hygiene in Ontario within the two weeks prior to the deadline of January 1st even though registration opens up 45 days prior to the deadline date?

...continued on next page

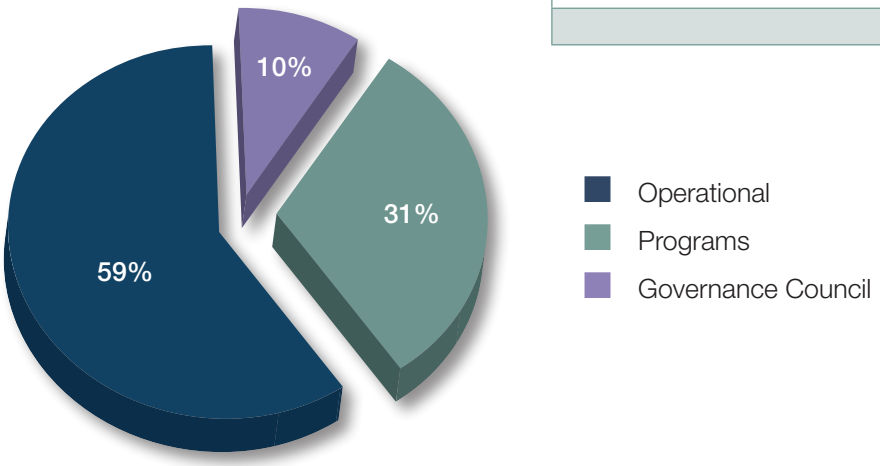
Where Do Fees Go?

In 2017, with inflation being taken into account, we have carefully determined that fees will need to increase to $400.00.

Operational	Amount spent per registrant	Budget %
Operations (Business Costs)	26.04	59%
Human Resources	163.94	
Rent	19.20	
Information Technology	24.82	
	$234.00	

Governance Council	Amount spent per registrant	Budget %
Consulting	6.60	10%
Training	4.50	
Honorariums and Expenses	27.00	
	$38.10	

Programs	Amount spent per registrant	Budget %
Exams	1.10	31%
ICRC & Discipline	21.95	
Public Education	37.52	
Quality Assurance	11.64	
Registration including Jurisprudence	18.68	
Registrant Resources (*Milestones*)	3.60	
Other Projects	5.25	
CDHO Knowledge Network	4.69	
Translation	1.50	
Fran Richardson Award	0.37	
Contingency Fund	7.50	
Survivors Fund	1.20	
Commission on Dental Accreditation (CDAC)	6.90	
	$121.90	



I have been asked if the fees were increased because of the Quality Assurance Program being too strict for dental hygienists. In Ontario, the *Regulated Health Professions Act, 1991* (*RHPA*) requires all health regulatory colleges under the Act to develop and to maintain a Quality Assurance Program to ensure the provision of optimal quality care to the public and to promote continuing quality improvement among its members.

The CDHO regulates the dental hygiene profession by setting the requirements to be registered as a dental hygienist and establishing practice standards for safe, ethical care for all Ontarians through:

- Rigorous certification;
- Ongoing knowledge building;
- Quality assurance activities;
- Articulating and promoting practice standards;
- Establishing requirements for entry to practice; and
- Enforcing practice standards and professional conduct.

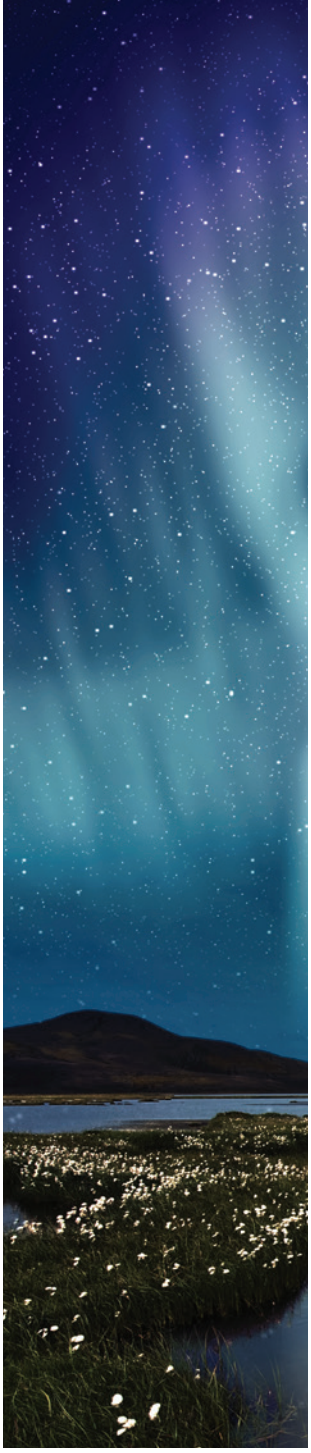
Council has and will continue to read and review feedback from consultations that are put out by the College Bylaw and changes will be implemented as necessary. Keep in mind the mission of the College of Dental Hygienists of Ontario is to regulate the practice of dental hygiene in the interest of the overall health and safety of the public of Ontario. CDHO

Sincerely,
Jennifer Turner



Registrar's Message

Lisa Taylor RDH, BA, MEd, MCOD



As many of you know, The Ministry of Health and Long-Term Care appointed a task force in December 2014 to look at the issue of patient/client sexual abuse and identify ways to better prevent and respond to these incidents. The task force report was received by the government this summer and the ministry has recently released the recommendations resulting from the report. While there are a good number of details yet to be worked out, I can tell you that the task force's recommendations can be grouped into six key themes:

1. **Empowering patients in the health regulatory system** through added supports for legal counselling, therapy, and creating a patient bill of rights.
2. **Strengthening requirements under the *Regulated Health Professions Act, 1991*:** (e.g., expanding the sexual acts that would require mandatory revocation of a certificate of registration).
3. **Strengthening leadership and accountability** throughout the health regulatory system (e.g., create quality indicators linked to sexual abuse; establish oversight mechanisms for unregulated providers).
4. **Increasing transparency throughout the health regulatory sector** via greater public disclosure of information.
5. **Improving the complaints, investigation and discipline processes for sexual abuse cases** (e.g., establishing an independent tribunal for sexual abuse hearings, independent investigatory body for sexual abuse cases).
6. **Enhancing knowledge and education** around sexual abuse through changes to professional education.

At this point, the ministry is accepting all the recommendations in principle and will be taking action over the next few months on specific initiatives.

...continued on next page

The ministry intends to bring forward legislative amendments later this year that, if passed, would:

- Expand access to counselling and therapy by allowing the funding for these services to begin when a complaint of sexual abuse is made;
- Expand the list of acts of sexual abuse that will result in a mandatory revocation of a regulated health professional's licence;
- Remove the ability of a college to impose 'gender-based restrictions' on a regulated health professional's licence in response to disciplinary findings involving sexual abuse of a patient;
- Increase fines for regulated health professionals and facilities that fail to report a suspected case of sexual abuse involving a patient to a college;
- Increase transparency by adding to what colleges must report on their public register and websites; and
- Clarify the boundaries of the patient-provider relationship.

What the recommendations and the ministry have not addressed is whether the clarification of the boundaries of the patient-provider relationship will permit regulated health professionals to provide care to spouses. We have been told, however, that the regulations for spousal exemptions that this College and some of the other colleges have submitted are on hold for the time being while the ministry focuses on the implementation of the recommendations of the Task Force.

The ministry has also let us know that it will be engaging an expert to work with government and health regulatory colleges to create consistent, transparent and impartial processes that all colleges must follow when dealing with complaints, investigations and disciplinary matters involving the sexual abuse of a patient. We have been told that this is an interim response to the recommendations regarding the creation of independent organizations to investigate, prosecute and adjudicate sexual abuse cases. We do not know at this point what the government's long-term response might be.

We have also been told that a second phase of work will begin in 2017 and will focus on responding to the remaining recommendations of the task force. Many of the recommendations involve significant changes to colleges' operations, and we have been told that we will have to respond within tight timeframes.

I know you have heard me say before that this College is committed to finding ways to improve our regulatory effectiveness and transparency. Let me tell you today that we stand firmly in this commitment.

The CDHO has always taken the sexual abuse of clients seriously and has spent time and resources on our sexual abuse prevention plan aimed at educating dental hygienists on what constitutes sexual abuse and the College's zero tolerance policy. To that end we have been successful. In the history of this College, only one sexual abuse complaint has come before the Discipline Committee and the decision of that Committee clearly demonstrates this College's understanding of, and adherence to, the mandatory provisions of the *RHPA*.

From all we know, the government intends to work quickly on implementing the recommendations. Indeed, in the last few weeks, *RHPA* registrars have already had a teleconference with the ministry and have been asked for additional information regarding our sexual abuse prevention programs, policies and procedures. I would like to assure you that our response was swift and fulsome and we are ready when called upon, to "step up to the plate" and be part of the collective working towards better processes and outcomes.

The CDHO's primary role is the protection of the public and as such, takes the sexual abuse of clients very seriously. I am confident that together with the ministry and other regulators, we will build a framework that will better prevent and respond to incidents of sexual abuse. CDHO

CDHO | Council Highlights

September 30, 2016

Council met on **September 30, 2016** at the One King West Hotel. Council approved the **Registrar's monitoring reports** on Financial Condition and Human Resources Parameters as evidence of compliance with the policies.

The **Executive Committee** reported that public appointee Tote Quizan will complete his final term on Council October 4, 2016. Tote has served on Council for ten years and served as a member of the Executive Committee in 2015 and 2016. Council will formally recognize Mr. Quizan's contributions to Council at the December Awards and Recognition luncheon.

The **Quality Assurance Committee** reported that for the 2016 Assessment year, of the 759 QA records requested, 743 had met the assessment guidelines, 5 were still in the assessment process and 11 are participating in directed learning activities.

The **Registration Committee** reported that since its last report to Council, 279 new applicants were registered to practise, 15 resignations were accepted and 125 registrants were authorized to self-initiate.

The **Inquiries, Complaints and Reports Committee** (ICRC) reported that since the June 3, 2016 report to Council, it has completed its investigations in ten (10) cases resulting in the following outcomes: three (3) no further action; two (2) no further action with Undertaking; one (1) written caution; two (2) SCERP and Caution-in-person; and two (2) referrals to Discipline.

ICRC has confirmed receipt of nine (9) complaints, eight (8) Quality Assurance referrals and began three (3) Registrar Report investigations.

The **Registrar** reported that the College has received the report and the recommendations coming from the Sexual Abuse Task Force and welcomes the opportunity to work with the Ministry and other *RHPA* regulators to find ways to better prevent and respond to client/patient sexual abuse cases.

The College has been advised that the **Proposed Spousal Exception** regulation that was submitted to the government in October 2015 is being put on hold by the Ministry as it puts its attention and resources to the Sexual Abuse Task Force Report and Recommendations. Dental hygienists cannot treat their spouse under current legislation.

The Registrar reported that plans are underway for the **College to visit the districts** in 2017 to provide updates and dialogue with registrants and will be accepting invitations from local societies. CDHO

Council Elections

To Be Held in Districts 1, 5, 6

Why Regulation Matters

The regulation of health professionals matters because it protects the public's right to quality health care services.

Ontario's 26 health regulatory colleges have been granted the privilege of self-regulation to help ensure excellence in care delivery. With this privilege comes the responsibility and legal authority to protect the public by:

- Setting and enforcing standards and guidelines for the practice and conduct of their members.
- Making sure that regulated health professionals meet their training and educational standards before they can practise or use a professional title.
- Developing programs to help members continually improve their skills and knowledge, upholding the quality of care.
- Acting when the members of the public have a concern about their health care.

What Is Your Role in Self-Regulation?

For self-regulation to work, members of the profession must, without the influence of the profession or their own personal/professional interests, govern the profession by putting public interest first and foremost. The *Regulated Health Professions Act* provides for each of the 26 health professions to have a governing Council that is made up of members of the profession and the public. As a member of this College, you can take an active role in protecting the public by serving on Council. Each year, elections are held in rotation in the electoral districts. This year an election will take place in districts 1, 5 and 6.

Participate Two Ways

If you are on the electoral list for a district where an election is being held, you will be notified by either email or mail, depending on your preferred contact method. Registrants in the districts where an election is being held can participate in two ways: as a candidate who stands for election and/or by casting a vote.

Registrants who wish to stand for election to Council must register, by the nomination deadline, by submitting the nomination papers that include the names and signatures of five nominators who are registrants of the College with eligibility to vote in that district. More information can be found on the College website under the Council tab.

You are eligible for election if you meet the following criteria:

- ✔ Hold a certificate of registration;
- ✔ Are principally engaged in the practice of dental hygiene in the electoral district for which you have been nominated or, if you are not engaged in the practice of dental hygiene, you principally reside in the electoral district for which you have been nominated;
- ✔ Are not in default of any fees made under the Act or this bylaw;
- ✔ Are not in default of any requirement to provide information to the College made under the Act or this bylaw;
- ✔ Are not the subject of any disciplinary or incapacity proceeding;
- ✔ A period of at least six years has elapsed since you complied with all aspects of an order of the Discipline Committee;
- ✔ Your certificate of registration is currently not subject to a term, condition or limitation imposed by the Quality Assurance Committee or the Fitness to Practise Committee;
- ✔ You have not, within the last three years, been found guilty of an offence under the Criminal Code (Canada) or any other criminal offence in any jurisdiction, and a period of at least three years has elapsed since you fully complied with any penalty imposed as a result of that finding;
- ✔ A period of at least one year has passed since you have been an officer, director or employee of any Professional Advocacy Association;
- ✔ You are not an employee of the College and have not been an employee for at least one year;
- ✔ Council has not disqualified you from sitting on Council or serving as a non-Council member during the three years before the date of the election, selection or appointment;
- ✔ You are not a member of the Council of any other College created or governed under the Act;
- ✔ You are not a candidate for election in another electoral district;
- ✔ You have not initiated, joined, continued or materially contributed to a legal proceeding against the College or any Committee or representative of the College within one year from the deadline for the receipt of nominations; and
- ✔ You do not have a conflict of interest to serve as a member of Council or have agreed to remove any such conflict of interest before taking office.

Voting for a candidate has never been easier. Each registrant who is eligible to vote will receive an invitation to vote using our electronic ballot system from our secure third-party provider that will include a link to the electronic voting site. Once there, voters will be asked to authenticate their identity. If authentication is successful, the voter will be presented with a list of any ongoing elections. If the voter hasn't yet voted, s/he may click on the election and a tamper-proof electronic ballot will appear. When s/he submits a ballot, the results are encrypted and kept anonymous. The voter is issued a receipt and is now blocked from voting for this election again. Thanks to a responsive web design that adjusts according to the type of device being used, the voting website delivers an optimal viewing and interaction experience on a desktop computer, tablet, and smartphone.

The College encourages the registrants of districts 1, 5 and 6 to get involved in the upcoming elections. By participating, either as a candidate or through voting, you are demonstrating your commitment to self-regulation and the protection of the public. CDHO

What Does a Council Member Do?

Council members contribute to the self-regulation of the dental hygiene profession in a host of meaningful ways.

They participate in decision making about:

- standards of practice and professional conduct,
- competencies for entry to practice and ongoing practice,
- the development of governance policies, regulations and bylaws.

Members of Council also fulfill a critical role through participation on statutory Committees, including:

- Inquiries, Complaints and Reports Committee
- Discipline Committee
- Registration Committee
- Quality Assurance Committee
- Executive Committee
- Fitness to Practise Committee
- Patient Relations Committee

In addition, there are other specific expectations that potential candidates should be prepared to fulfill, which include:

- placing personal and professional interests aside in favour of public interests,
- maintaining confidentiality,
- arranging personal and professional schedules to meet Council's time commitments,
- reviewing preparatory materials in advance of meetings,
- participating in discussion and decision making,
- implementing and supporting Council and Committee decisions and directives,
- demonstrating accountability to the public through transparent decision-making processes.



DID YOU KNOW?

Council Member meeting attendance is tracked and reported on the CDHO website. The practice of publishing attendance records was put in place in 2016 as part of the College's transparency agenda. Visit the Council tab to see statistics for 2015 and 2016.

CDHO Council Elections Timetable 2016

Nominations/Ballots	Dates
Call for nominations sent to all eligible registrants in Electoral Districts 1, 5 and 6	Friday, September 16
Nomination deadline for Electoral Districts 1, 5 and 6	Monday, October 17
Ballots sent to all eligible registrants in Electoral Districts 1, 5 and 6	Wednesday, November 2
Election Day (deadline for ALL ballots to be received)	Wednesday, November 16

Professional Members' Term of Office

District	Name	District Encompasses
1	Southwestern	The counties of Bruce, Grey, Elgin, Essex, Huron, Kent, Lambton, Middlesex, Oxford and Perth.
5	Central Eastern	The counties of Frontenac, Peterborough, Hastings, Lanark, Lennox and Addington, Prince Edward, Victoria, Haliburton, Northumberland, and the regional municipality of Durham.
6	Eastern	The counties of Dundas, Glengarry, Leeds and Grenville, Prescott and Russell, Renfrew and Stormont and the Regional Municipality of Ottawa-Carleton.



The Do's and Don'ts of Advertising

by **Robert Farinaccia** RDH, BSc

Adapted from the June 2011 *Milestone*'s article titled "*The Do's and Don'ts of Advertising*"

Since the introduction of self-initiation in September 2007, dental hygienists have had an increase in practice options, allowing the public to have better access to preventive oral care. These different practice options have also allowed dental hygienists the opportunity to advertise their services. The Oxford Advanced Learner's Dictionary defines the word advertising as "telling the public about a product or a service in order to encourage people to buy or to use it." Nowadays, there are many mediums which an individual may use to tell the public about their particular product or service. However, one must keep in mind that registrants of a health profession, regulated under the *Regulated Health Professions Act, 1991*, must advertise in accordance with their College's advertising regulations and guidelines. Often times, a dental hygienist will work for a company/corporation that will advertise on the dental hygienist's behalf. It is very important to understand that even in this situation the dental hygienist is responsible for ensuring the College advertising regulations are followed.

Over the last few years, the CDHO has received numerous phone calls raising issues with dental hygienists' websites, pamphlets, and newspaper advertisements. Previously when these issues were brought to our attention, if not filed as a formal complaint, the CDHO practice advisors were giving courtesy calls to the dental hygienists whose advertisements were of concern to notify them of the issues. However, due to the overwhelming amount of calls it has become impossible to give courtesy calls any longer. Concerns raised respecting advertisements which contravene the regulations will be dealt with by the Inquiries, Complaints and Reports department.

With that being said, registrants are urged to consult the CDHO advertising, professional misconduct and conflict of interest regulations prior to publishing any materials. In 2014, the College also created advertising guidelines to provide some assistance to dental hygienists and these guidelines should be consulted as well. The CDHO practice advisors are available to offer advice on the interpretation of these regulations and guidelines. Registrants are also welcome to forward a copy of their advertisements to the practice advisors to review content for advice prior to publishing. The CDHO will not approve an advertisement, but will alert you to areas which may pose potential problems or concerns.

The following is a list of some of the most common issues found in registrants' advertisements:

- Stating things that are false or misleading (e.g. stating that one's services are CDHO approved) — (the CDHO does not approve or endorse any service).
- Stating things that cannot be verified because of their nature (e.g. the use of subjective words like 'gentle', 'affordable', 'relaxed' and 'comfortable' can be problematic. Your interpretation of these words will no doubt vary with how your clients interpret them, and that makes them unverifiable. This would also include making cost comparisons without supporting your statement. Be sure to include the cost of the entire service, including any additional services or products associated with the product or service whose price you are advertising).
- Making guarantees to treatment outcomes, as the advertised treatment may not be suitable for all clients and may in fact be contraindicated or unnecessary. This may create false expectations (e.g. 'tooth whitening – 20 shades brighter').
- Having a testimonial by a client or former client, or by a friend or relative of a client or former client (e.g. "My dental hygienist Mary is so gentle that I never feel any pain during my cleaning. I would highly recommend her services"). Testimonials are contrary to the advertising regulation, and this is true of many regulated health professions advertising regulations.
- Demeaning another profession (e.g. asking "Why see a dentist when you can see a dental hygienist?").
- Implying your services, products, or equipment are superior or unique compared to another dental hygienist's (e.g. stating that one offers advanced sterilizing equipment or one offers superior whitening techniques).
- Holding oneself out to be something they are not by offering services that are not within their scope of practice (e.g. stating that you offer weight loss counseling as part of your dental hygiene treatment).
- Using the terms "New Client Exam" or "Oral Assessment" as these terms may imply that a dental diagnosis will take place instead of a dental hygiene diagnosis. It is preferable to use the terms New Client Dental Hygiene Exam or Oral Dental Hygiene Assessment, that way clients will not be misled.
- Making guarantees to treatment outcomes, as the advertised treatment may not be suitable for all clients and may in fact be contraindicated or unnecessary. As well, this may create false expectations (e.g. "tooth whitening – 20 shades brighter").
- Advertising with a name different than the one you are registered with (e.g. You are registered with the College as Jane Smith but using Jane Doe, your former surname, on your advertisements).

...continued on next page

- Having distasteful terms or tag lines in advertisements that may affect the credibility of dental hygiene services or may be offensive to the public. Business names are also subject to the same regulations and guidelines as advertisements, and may be subject to review by the College (e.g. Foxy Roxy's Dental Hygiene Services).
- Using agencies like Groupon, WagJag, etc., to promote a dental hygiene practice or sell coupons to attend the practice. This can be problematic if the agency is receiving a share of the cost of the coupon. This is contrary to the advertising regulation because you are paying (the agency) for the referral of a client.

What if a dental hygienist notices that another dental hygienist's advertising may be contrary to the College's advertising regulations? Like anyone else, the registrant always has the option to file a formal complaint with the College. The complaints process is readily available on the CDHO website. However, it has been the practice advisors' experiences that inappropriate advertising has been, for the most part, unintentional and a courtesy call is usually appreciated. A call to your peers to give her/him a professional "heads up" and suggest that s/he contact one of the College's practice advisors who can help them interpret the College's regulations and guidelines would be a welcomed and professional courtesy.

In conclusion, the practice advisors are glad to review any content before it is printed. Please keep in mind that while they can offer advice on how to adhere to regulations, they do not approve any advertisements. The ultimate responsibility of the content of any advertisement falls on the individual registrant. CDHO



WARNING!
Don't Treat Your Spouse

Registered dental hygienists **CANNOT TREAT THEIR SPOUSES**.

It's considered **PROFESSIONAL MISCONDUCT**.

A law, called the Regulated Health Professions Act, which regulates the practice of dental hygienists, nurses, massage therapists, doctors, physiotherapists, optometrists, pharmacists and many other health professionals, says that health professionals are **NOT PERMITTED** to treat their spouses. It is considered to be **SEXUAL ABUSE**.

(Right now, only dentists can treat their spouses. An exemption was passed that permits this. **NO OTHER** profession can.)

If you treat your spouse, your practice could be investigated. The case could be put before the Discipline Committee of the College and your certificate of registration could be revoked – taken away – for a minimum of **5** years. This means that you could not practise as a dental hygienist or state that you are a registered dental hygienist for at least five years.

A note explaining the revocation and the reason for the revocation would be published on the College's public register (Find a Registered Dental Hygienist).

The College cannot say this strongly enough: **DO NOT** treat your spouse.

Quality Assurance Matters

by Robert Farinaccia RDH, BSc

Update on 2016 Quality Assurance (QA) Assessments

In January of 2015, notice was sent to 757 registered dental hygienists in the province (whose registration number ended in a "5" or "7") requesting submission of their QA records for assessment due January 31, 2016.

Here is the status of the 757 records requested as of September 9, 2016:

Met the assessment guidelines	564
Met the assessment guidelines with an additional submission	113
Still in assessment phase	0
Resigned	68
In remediation	12
Deferred to another assessment period	0
Assessed with deficiencies	118

2017 Mandatory Self-Assessment

The 2017 Self-Assessment Tool will be available in the SMILE Portal in mid-November and is mandatory to complete for every dental hygienist registered in Ontario, regardless of their registration status or employment situation (i.e., active, inactive, suspended, working in dental hygiene, not working in dental hygiene or living outside of the province). It must be completed before January 31, 2017.

You can access the 2017 Self-Assessment by selecting "2017" in the "Select Year To View" drop-down menu on the dashboard. You will be asked to verify your employment status and practice address. Once this step is completed, your 2017 Self-Assessment will become available as Step 2.

Completing the Self-Assessment Tool not only shows the College your compliance with the Quality Assurance Program, but the tool will also create suggested learning goals for you to consider for 2017 (based on your answers). Your responses to the questions are NEVER submitted to the College. The College will only receive a report from Skilsure (the third-party site that houses the SMILE Portal) notifying us that the 2017 Self-Assessment has been completed by you. You are welcome to use, modify or delete any or all of the suggested learning goals. The Self-Assessment contains 109 questions and takes approximately 15–20 minutes to complete. Once ALL of the questions are answered, you must select the **I'm all done** option on the bottom of the page to complete it. The College or Skilsure will not send email confirmation for completion of your 2017 Self-Assessment. Your dashboard in the SMILE Portal will reflect completion of your Self-Assessment.

As per the Quality Assurance Committee's decision, those registrants who fail to complete their 2017 Self-Assessment by the January 31st deadline can expect notification from the College that they will be asked to submit their Quality Assurance records for the 2018 Quality Assurance Peer and Practice Assessment period.

Are You Submitting Your Quality Assurance Records in 2017?

For registrants who were selected to submit in January of 2017 (i.e., your registration number ends in either "4" or "9") you are required to submit your Quality Assurance records via the SMILE Portal by January 31, 2017. The SMILE Portal will allow you to submit beginning January 1, 2017. You will be asked to read and check off a declaration before you are able to submit your records to the College for assessment. The College or Skilsure will not send email confirmation of the submission of your 2016 Quality Assurance records. Your dashboard in the SMILE Portal will reflect the submission of your records.

2018 Selection

The Quality Assurance Committee will draw two numbers, by a highly scientific random selection process (the numbers are drawn out of a hat), from the remaining numbers 0, 1, 2, 3, 6, or 8 (i.e., these numbers were not chosen in 2015 or 2016). If your registration ID ends in either of the two numbers that are drawn, you will be notified in January by mail or email (depending on the preference of correspondence you selected with the College) of your requirement to submit your Quality Assurance records for the 2018 Peer and Practice Assessment (due January 31, 2018). If you are not sure which preference you have indicated, you can go to www.cdho.org and click on the "Self Service" button on the top right of our main page to verify this. More information regarding the 2018 selection will be communicated in the College's e-brief in January 2017. As well, the dashboard of your SMILE Portal will indicate **QA Records Due: Jan. 31, 2018**, if you have been selected. CDHO



Cathy Goldberg, Manager, Programs and Exams, giving her presentation "Using Mentorship to Increase the Public's Access to Care" at the Council on Licensure, Enforcement & Regulation's Annual Educational Conference in Portland, Oregon on Thursday, September 15, 2016.

Coming Soon!

The CDHO Jurisprudence Education Module updates are nearly completed. The update includes an all-new self-build study guide to help you successfully complete the exam. This module is not only for new registrants – combined with the Registrants' Handbook, it is a great (and free) source of continuing education for all dental hygienists wanting to refresh their knowledge. You will be able to access the Jurisprudence Education Module, Examination and Study Guide directly from your Self-Service Portal. Watch your e-briefs for more details and the release date.

DID YOU KNOW?

The Zika virus is in Ontario…

For more information, visit the **CDHO Knowledge Network** to find the Zika Virus Fact Sheet.

The CDHO Knowledge Network

Find the clinical information you need at:
www.cdho.org





Protecting Clients:

What You Need to Know About the College's Sexual Abuse Prevention Plan and Upcoming Changes to the Law

by **Robert Farinaccia** RDH, BSc

Public attention to the issue of client/patient safety has increased significantly in the last few years and the ability of regulatory colleges to adequately address professional misconduct issues have been questioned in a very public forum by the media. Especially matters dealing with sexual abuse of clients/patients. According to some media reports, there has been a decrease in public confidence in the current system's ability to deal effectively with these cases. In response to this, Health Minister Eric Hoskins commissioned a special task force to address ways to prevent and better respond to the sexual abuse of clients/patients.

The task force report "*To Zero: Independent Report of the Minister's Task Force on the Prevention of Sexual Abuse of Patients and the Regulated Health Professions Act, 1991*" and its recommendations released in September says that Health Regulatory Colleges must do more to shield clients from sexual abuse.

What Constitutes Sexual Abuse?

Under the *RHPA*, the definition of sexual abuse is not as simple as it sounds. When one thinks of sexual abuse, immediately the notion of forced or undesired sexual behaviour may come to mind. However, this definition takes on a broader meaning and can include any of the following conduct with respect to a client:

- Having sex of any form with a client
- Touching a client in a sexual way
- Making comments of a sexual nature* to a client or in the presence of a client
- Behaving in a sexual way towards a client

*Sexual nature does not include touching, behaviour, or remarks of a clinical nature appropriate to the services being provided.

Sexual Abuse Prevention Program

The College has a long-standing sexual abuse prevention program that falls under the scope of the Patient Relations Committee. Each year the plan is evaluated to ensure it complies with the requirements under the *Regulated Health Professions Act, 1991* (*RHPA*) aimed at preventing and/or dealing with the sexual abuse of clients. The Patient Relations Committee takes its responsibility for developing and implementing measures to prevent and address sexual abuse very seriously and is preparing to revise its current plan to include any changes that may be made to the *RHPA* resulting from the task force report.

Currently the College's Sexual Abuse Prevention Plan includes:

1. Educational Requirements for Students

The College publishes an *Instructor's Guide to the Prevention of Sexual Abuse of Clients* that is sent to all dental hygiene programs annually to be incorporated into their Ethics and

...continued on next page



Jurisprudence course. As well, new applicants are required to successfully complete the online jurisprudence course and score 100% on the online examination, which includes references to the College's Sexual Abuse Prevention Plan and a registrant's obligations under the *RHPA*.

In 2015, a Practice Advisor from the College visited dental hygiene institutions in Ontario in an effort to introduce future dental hygienists to the College and the programs and resources it offers. Sexual abuse prevention, boundary crossings, the importance of good communication skills and roles and responsibilities of health care professionals are topics that were covered.

2. Education and Guidelines for the Conduct of Registrants

The College publication "Registrants' Handbook" is an educational resource that stresses the professional obligations of dental hygienists practising in Ontario, including boundary crossing and sexual abuse. The College published guidelines entitled *Prevention of Sexual Abuse of Clients and Professional Boundaries for Dental Hygienists in Ontario*. These resources are available on the CDHO website under "My CDHO".

The online jurisprudence course and online examination which includes references to the College's Sexual Abuse Prevention Plan and a registrant's obligations under the *RHPA* are also educational tools included in the Sexual Abuse Prevention program.

Articles such as this are published annually in *Milestones*, informing registrants about sexual abuse prevention, requirements of mandatory reporting and any provisions in the legislation regarding sexual abuse of clients, and are part of the program.

3. Training for College Administration

Members of administration attend educational and information sessions which deal with the sensitivity of handling complaints of sexual abuse.

4. Provision of Information to the Public

Information about the College's role in preventing sexual abuse is available on its website. The College has a document titled *Understanding Boundary Violations and Sexual Abuse* available to the public. This document can be found by selecting "For the Public" under the "Public Education Program" heading.

The College also distributes public interest articles to local newspapers for publication, and utilizes opportunities to work with other organizations involved in public education.

5. Funding for Therapy and Counselling

The College maintains a fund for dental hygiene clients who have experienced sexual abuse by a registrant of this College for therapy and counselling. Currently, this is deemed to be equal to approximately $16,060. Survivors of sexual abuse are currently eligible once there has been a finding of guilt by a panel of the Discipline Committee against the dental hygienist.

6. Evaluation

The Sexual Abuse Prevention Program is evaluated on multiple levels. The evaluation of registrant education initiatives includes surveying registrants every five years to determine registrants' awareness of client/provider boundaries and sexual abuse, statutory obligations under the RHPA and knowledge of the complaints process. Evaluation also includes incorporating questions relating to what constitutes sexual abuse and what zero tolerance means into interactive presentations (given by the College throughout Ontario) and webinars such as "Setting the Record Straight". In addition, the College engages in ongoing evaluation by monitoring the investigation and processing of sexual abuse complaints.



New Action by the Province to Prevent Sexual Abuse of Patients

In fall 2016, the Ontario government intends to introduce legislative changes (in response to the task force report) that would:

- Add to the expanded list of acts that will result in the mandatory revocation of a regulated health care professional's licence.

- Remove the ability of a college to allow a regulated health professional to continue to practise on patients of one gender after an allegation or finding of sexual abuse.
- Increase fines for health professionals and organizations that fail to report a suspected case of patient sexual abuse to a college.
- Increase transparency by adding to what colleges must report on their public register and website.
- Clarify the time period after the end of a patient-provider relationship in which sexual relations are prohibited.
- Fund patient therapy and counselling from the moment a complaint of sexual abuse is made.[1]

The Ministry will be engaging with health regulatory colleges, patients, clients and other key partners to make legislative, policy and program changes within the next several weeks.

It is anticipated that additional initiatives will be introduced in 2017. The College will keep dental hygienists informed of any of these changes. CDHO

[1] Ministry of Health and Long-Term Care, "Ontario Taking Action to Prevent Sexual Abuse of Patients – Changes to Legislation to Protect and Support Patients", September 9, 2016, https://news.ontario.ca/mohltc/en/2016/09/ontario-taking-action-to-prevent-sexual-abuse-of-patients.html

What Should a Dental Hygienist Do if they Believe a Health Care Professional Has Sexually Abused a Client (under the RHPA's definition of sexual abuse)?

If a dental hygienist has obtained information, while practising their profession, that a regulated health care professional may have committed an act of sexual abuse, then according to the RHPA, the dental hygienist must submit a written mandatory report within 30 days to the Registrar of the offending health care practitioner's College. If there is reason to believe the abuse will continue or abuse of other clients may occur, the report must be submitted immediately. If the dental hygienist does not know the name of the alleged health care practitioner, there is no requirement to submit a mandatory report.

Writing a Mandatory Report

The mandatory report related to a possible case of sexual abuse must contain:

- the name of the dental hygienist filing the report;
- the name of the practitioner who is the subject of the report;
- an explanation of the alleged sexual abuse; and
- when consent is given by the client, the name of the client who may have been sexually abused.

Ensure that the client gives permission to include her/his name in the report and get written consent as an indication. If the client does not agree to have her/his name in the report, the dental hygienist must still submit the report but must not include the client's name. The fact that the dental hygienist tried to obtain consent but the client refused, should be included in the report as well.

If a mandatory report is brought to the attention of the College and a dental hygienist is found guilty by the Discipline Committee of sexually abusing a client, the mandatory penalty is revocation of the dental hygienist's certificate of registration for a minimum of five years. Failing to report sexual abuse of clients/patients is an offence under the RHPA and has a punishable fine of up to $25,000 for a first offence and up to $50,000 for a second offence. CDHO

College of Dental Hygienists of Ontario

Protecting your health and your smile



Whistleblower Policy

Policy Statement

The College of Dental Hygienists of Ontario (CDHO) is committed to high ethical standards. Employees and representatives of CDHO are expected to conduct themselves with honesty and integrity in fulfilling their responsibilities and to comply with all applicable laws and regulations. CDHO encourages employees, Council members and/or stakeholders to raise concerns they have in regard to the subjects identified as Reportable Matters covered by this Policy. When raising such a concern in good faith, an employee, Council member and/or stakeholder takes on the role of "Whistleblower". CDHO assures that a Whistleblower will be protected from harassment or victimization to the greatest extent possible.

The ***Whistleblower Policy*** covers instances where an employee, Council member and/or other stakeholder has evidence of and reports a concern about any CDHO staff, Council member, Non-Council member and/or retained consultant (including external auditors) that involves one or more of the following Reportable Matters:

- Accounting, auditing or other financial reporting misconduct or fraud;
- Receiving gifts from vendors which could create a bias or a conflict of interest (perceived or actual);
- Unethical conduct in violation of CDHO policy;
- Disclosure of confidential CDHO information;
- Violations of federal and/or provincial laws that could result in fines or civil damages payable by CDHO, or that could otherwise harm CDHO's reputation; or
- Danger to the health and safety of employees, Council members, stakeholders and the general public.

Reporting by a Whistleblower that is not made in good faith will be considered a serious offence and the individual will be subject to discipline up to and including termination for cause in the case of employees, and severing the relationship, in the case of others.

Purpose

To encourage employees, Council members, and stakeholders to make a formal statement or report to CDHO about Reportable Matters.

Procedure

A Whistleblower may submit their report in writing to the Registrar/CEO or Deputy Registrar by completing a ***Whistleblower Incident Form***. This form can be emailed, mailed or hand-delivered.

A Whistleblower may wish to remain anonymous. CDHO will treat all reports received from Whistleblowers in confidence to the greatest extent possible. In all cases, the person who is alleged to have committed the Reportable Matter(s) will be made aware of the incident at the appropriate point in the investigation.

Whether a Whistleblower chooses to remain anonymous or not, they should give as much detailed information in their report as possible. Information that should be included:

- Where and when the Reportable Matter(s) occurred;
- Name(s) and title(s) of all individuals involved;
- How and when the Whistleblower became aware of the Reportable Matter(s);
- All relevant details that will assist in a complete and thorough investigation.

Upon receipt of a report about a Reportable Matter, one of the following processes shall occur:

Reportable Matters Involving Staff, Agents of the College or Vendors

The Registrar/CEO or Deputy Registrar shall be responsible for promptly conducting an investigation and for resolving most types of reports made under this Policy. In certain circumstances, the Registrar/CEO or Deputy Registrar may refer the investigation of the matter to an employee or a third party depending upon the nature of the Reportable Matter. Under no circumstances will a matter be investigated by an employee of CDHO who is involved in the Reportable Matter.

At the conclusion of each investigation, all related documentation will be maintained for safekeeping in a confidential manner by Human Resources.

Reportable Matters Involving Council Members and Non-Council Committee Members

The Registrar/CEO or Deputy Registrar shall be responsible for promptly bringing the reportable matter to the President and or the Vice-President who will take actions described in the College's Bylaw No. 5.

Questions relating to the Whistleblower Policy should be directed to:

Lisa Taylor
Registrar/CEO
College of Dental Hygienists of Ontario
69 Bloor Street East, Suite 300
Toronto, ON M4W 1A9

Tel: 416 961-6234, ext. 239

Email: Registrar@cdho.org

Jane Keir
Deputy Registrar
College of Dental Hygienists of Ontario
69 Bloor Street East, Suite 300
Toronto, ON M4W 1A9

Tel: 416 961-6234, ext. 235

Email: DeputyRegistrar@cdho.org

August 2016

College of **Dental Hygienists** of Ontario
GUIDELINE



Interprofessional Collaboration

Dental hygienists are primary oral health care providers and play an integral role within a patient's/client's circle of care. With a well-documented link of oral health to overall health, there is a need now, more than ever, for dental hygienists to participate in interprofessional collaboration. As such, dental hygienists have a responsibility to develop and maintain professional relationships with other health care professionals to ensure optimal patient/client care outcomes, safe practices and mutual respect and trust.

Interprofessional collaboration can be defined as:

> "the process by which professionals reflect on and develop ways of practicing that provides an integrated and cohesive answer to the needs of their client/family/population. This process involves continuous interaction and knowledge sharing between professionals, organized to solve or explore a variety of education and care issues all while seeking to optimize the patient's participation".[1]

All health care professionals must strive to understand, appreciate and respect the roles that they each play in improving a patient's/client's health and well-being. This document is intended as a guide to help dental hygienists work effectively and collaboratively with members of health care teams to ensure that mutual patients/clients are receiving the most complete and optimal care possible.

Respect your role and the role of others in interprofessional client care

Successful collaboration occurs when health care professionals understand one another's disciplines and embrace and support the roles of each profession toward patient/client health. In a healthy interprofessional collaborative relationship, health care professionals set aside egos and communicate respectfully in order to learn from one another.

- Listen, respect and acknowledge the diversity, expertise and contributions of all health care professionals and encourage a client to have other health care professionals involved in their care and decision-making process.
- Use your expertise and knowledge to benefit other health care professionals in helping them establish and meet mutual patient/client goals.
- Understand your limitations.

1 Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, D.C.: Interprofessional Education Collaborative

- Share information that addresses the patient's/client's wishes, needs, and best interests as criteria for informing both their perspective, and yours.
- Welcome a second opinion if your patient/client is unsure about treatment options and use this opportunity to learn from hearing a different perspective.

Whatever your role is, in terms of the therapeutic relationship, the patient/client will be counting on you to have a full understanding of his or her treatment plan.

Communicate with each other in a collaborative, responsive and respectful manner

Effective communication and teamwork are essential for creating a "culture of safety"[2] that supports the safe delivery of patient/client care. Respectful interprofessional communication fosters an environment where a patient/client is able to make well-informed decisions regarding their health care.

- Discuss with your patients/clients, the benefits of sharing information with other health care professionals within their circle of care.
- Use effective and secure communication techniques when requesting or replying to a consultation. Ensure privacy and confidentiality is maintained.
- Respond to requests for copies of reports and records in a professional timely manner. Charging the patient/client a fee for the copies may be acceptable, but the fee should be limited to the actual cost of the copies. Consider providing a copy of the chart for free or at cost.
- When requesting a consultation, recognize that all health care professionals are as busy as you. Set aside time for consultation and provide guidance as to what is the best time to get in touch with you.
- Ensure that consultations run smoothly and efficiently by being prepared before communicating with another health care professional (e.g. client file accessible).
- At the end of each interaction with another health care professional, evaluate how the interaction went and reflect on what could be improved to facilitate or make subsequent interactions more efficient and effective.

Delegation

Delegation can address evolving health care needs by extending authority to perform controlled acts within existing legislative frameworks. Some health professions have the ability to delegate authorized acts to others within their legislation.

- (Giving) Ensure a delegate's performance readiness, competence and ability to manage outcomes before providing a delegation.
- (Receiving) Ensure you are competent before accepting a delegation.

2 Teamwork and Communication Working Group. Improving patient safety with effective teamwork and communication: Literature review needs assessment, evaluation of training tools and expert consultations. Edmonton (AB): Canadian Patient Safety Institute: 2011.

Referrals

Health care professionals work with their patients/clients to establish a plan that includes disease prevention, therapeutic interventions, and overall well-being. Referring to other health care professionals allows all health care needs to be met and ensures optimal outcomes.

- Make a prompt referral to the most appropriate health care professional for diagnosis and treatment when something is beyond your scope of practice or outside your area of knowledge.
- Respect a patient's/client's autonomy and choice when making referrals. If a patient/client has a health care professional they would like to be referred to, respect their wish.
- Include with referrals, appropriate and relevant documentation outlining reasons for the referral.

Be prepared for potential difference of opinion

Differences of opinion may occur in interprofessional collaboration when health care professionals bring their own experience and knowledge to the table. All members of a patient's/client's circle of care have a common goal to provide the best and most effective care possible. Each professional bears the same responsibility to engage collaboratively to determine the treatment that is most appropriate and in the patient's/client's best interests.

- Appreciate that differences can be enriching and can enhance decision making and patient/client care.
- Maintain a respectful dialogue, asking and listening to one another's point of view, always putting the patient's/client's needs first.
- Use this opportunity to educate about your scope of practice and be educated about the other health care professional's scope of practice.

If a difference of opinion cannot be resolved to your satisfaction, do not take any action that you feel will compromise the patient's/client's best interests. You may need to seek additional input from a third party. Document all clinical decisions in the patient/client record in accordance with the CDHO Standards of Practice.

September 2016

College of **Dental Hygienists** of Ontario
L'Ordre des **hygiénistes dentaires** de l'Ontario
www.cdho.org 69 Bloor Street East, Suite 300, Toronto ON M4W 1A9 416-961-6234 1-800-268-2346

Registration 2016

by Terri-Lynn Macartney

2017 Renewals

Renewals for 2017 will be available online by mid-November and your renewal is due on or before January 1, 2017. To access the online renewal, log in to your Self-Service Portal using your six-digit registration ID number and your password. Once logged in, you will see the link to renew available in your menu under the Registration heading.

Resigning from the College

If you do not intend to renew for 2017, you **must** resign your certificate of registration by January 1, 2017. Failing to renew is not the same as resigning from the College, so be sure to complete your resignation in your Self-Service Portal by clicking on the Resign link available under the Registration heading in your menu.

Late Renewals

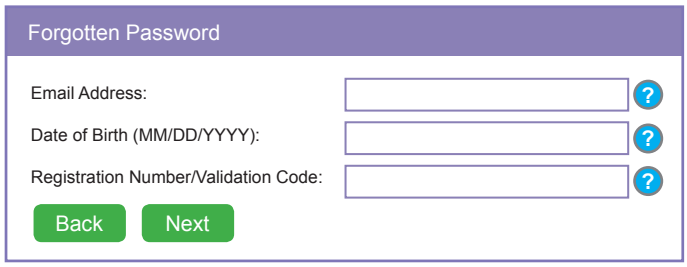
If you do not renew on time, a $100 late penalty fee will apply effective January 2nd.

Suspension for Non-Payment

Failure to either renew or resign will result in the suspension of your certificate of registration. A suspension for non-payment is displayed permanently in your registration history on the Public Register. You are not permitted to practise dental hygiene in Ontario while your certificate is suspended. There is a $500 penalty fee for reinstating a suspended certificate of registration.

Forgot Your Password?

This is the most common reason registrants contact the College during the renewal period, even though the College is not able to give out passwords by telephone! If you do not remember your password, use the Forgotten Password button on the Self-Service login page and follow the prompts on screen to have a temporary password emailed to you.



1. Enter the email address that we have on file for you.
2. Enter your date of birth in the format it is showing – including the slashes.
3. Enter your six-digit registration ID number. Your registration number is your validation code.
4. Click 'Next'.

A temporary password is on its way to you! If you do not see the email in your inbox, be sure to check your spam/junk folder. Once you have found the email, return to the Self-Service login page and log in using the temporary password. Enter the temporary password exactly as it is shown in the email, including any symbols and keeping in mind that letters are case sensitive. After you have logged in with the temporary password and completed your online renewal, you can change your password to something you will remember using the Change Password link in your menu. CDHO



DID YOU KNOW?

You are required to update your information with the CDHO within 14 days of any changes to email address, business and residence addresses and telephone numbers. To do so, go to cdho.org and log in to your Self-Service Portal.



Lifting the Curtain on Discipline Hearings

by Gillian Slaughter BA, MBA, LLB

The CDHO holds discipline hearings which are open to the public. Most hearings are held in the Council Chamber at the College of Dental Hygienists of Ontario, 69 Bloor Street East, Toronto, Ontario.

All matters currently set for a hearing before a panel of the Discipline Committee are listed on the College's website under **Upcoming Hearings**.

Sometimes, hearings do not proceed on the date indicated. If you plan to attend, or for further information, please contact us at:

The College of Dental Hygienists of Ontario
69 Bloor St East, Suite 300
Toronto, ON M4W 1A9
Toll free: 1 800 268-2346
hearings@cdho.org

The College is required to publish the results of public hearings held by its Discipline Committee. The College publishes summaries of decisions and provides links to full-text versions of its decisions under the member's profile on **Find a Registered Dental Hygienist** and on its **Discipline Decisions** webpage.

Recent Discipline Hearings

The College recently held two discipline hearings, the first of which was held on August 23, 2016. A panel of the Discipline Committee of the College (the "panel") held a public hearing to decide whether Ms. Christine Plasaj had engaged in professional misconduct by failing to:

1) comply with a direction of a College Committee; and
2) cooperate with a College investigation.

Ms. Plasaj did not attend the hearing. At the conclusion of the hearing, the panel delivered its finding and penalty order orally and in writing, with written reasons to follow. The panel determined that Ms. Plasaj had engaged in professional misconduct, and ordered that her certificate of registration be revoked effective immediately. The panel also ordered $9,500 costs payable to the College within 30 days of the hearing, on or before September 23, 2016.

The written Decision and Reasons of the panel will be published once it is finalized.

On September 8, 2016, a panel of the Discipline Committee of the College (the "panel") held a public hearing to decide whether Ms. Nicole Barnett had engaged in professional misconduct by:

1) failing to comply with a direction of a College Committee to complete a specified continuing education or remediation program; and
2) practising while her certificate of registration was suspended, using the title dental hygienist and holding herself out as a dental hygienist.

Ms. Barnett attended the hearing, and admitted that she engaged in professional misconduct. At the conclusion of the hearing, the panel delivered its finding and penalty order orally and in writing, with written reasons to follow. The panel determined that Ms. Barnett had engaged in professional misconduct, and ordered that:

1) She appear before a panel of the Discipline Committee immediately following the hearing to be reprimanded, with the fact of the reprimand and a summary of the reprimand on the public register of the College;

2) her certificate of registration be suspended for three (3) months, to commence on the date that Ms. Barnett's certificate of registration with the College is reinstated; and
3) her certificate of registration be suspended until Ms. Barnett successfully completes three (3) courses, at her own expense, as described below:
   a) the Professional / Problem-Based Ethics Program ("ProBE") offered by the Center for Personalized Education for Physicians;
   b) the College's online Jurisprudence Education Module; and
   c) a Quality Assurance Course pre-approved by the Registrar.
4) The panel also ordered $1,000 in costs payable to the College within six (6) months of the hearing, on or before March 8, 2017.
5) The written Decision and Reasons of the panel will be published once it is finalized.

For information about the College's discipline process, please see the College's website at http://cdho.org/for-the-public/complaints-about-a-dental-hygienist/discipline.

CDHO



DID YOU KNOW?

A **fair** and **transparent** complaints process is available to help clients who feel they may not have received the care they had the right to expect.

We'll Be Checking That You're Covered

What? The College will soon be conducting routine professional liability insurance audits.

Why? To protect the public, and ensure that all registered dental hygienists have professional liability insurance that complies with the requirements set out in the College's Bylaw.

When? In the next few months.

How? The College will randomly select a percentage of registrants to verify that they have the requisite professional liability insurance.

How Does This Affect Me? If you are contacted by the College, you will be asked to provide a copy of your professional liability insurance certificate to the College within a certain period of time.

If you have any questions or concerns, please call us. We can be reached at: 416-961-6234 or toll free at 1-800-268-2346.

Professional Liability Insurance Requirements

1. minimum of no less than $1,000,000 per occurrence;
2. annual aggregate coverage of no less than $5,000,000;
3. a deductible of no more than $4,000 per occurrence;
4. run-off coverage (sometimes called enduring or tail coverage) for a minimum of two years;
5. provided by an insurer licensed with the Financial Services Commission of Ontario or the office of the Superintendent of Financial Institutions Canada; and
6. a sexual abuse therapy and counselling fund endorsement that,
   a. provides coverage for therapy and counselling for every person eligible for funding under subsection 85.7(4) of the Code; and
   b. provides coverage, in respect of each such eligible person, for the maximum amount of funding that may be provided for the person under the Act, for therapy and counselling as a result of sexual abuse by the Registrant.

What Is Professional Misconduct?

by Eva Rosenstock

Professional misconduct is one of those terms that everyone has some idea of what it means, but may not fully know the details. Summaries of discipline cases offer a partial view into some of the ways in which professional misconduct may be defined, but do not offer a full picture. So what is "professional misconduct" in dental hygiene? Do you know where to find a list of the acts of professional misconduct?

"...the College encourages you to review the RHPA, all Regulations and the Standards of Practice from time to time."

You can find them in two places. They are detailed in the *General Regulation* under the *Dental Hygiene Act,* Part V, titled Professional Misconduct. The regulations detail 53 separate acts of professional misconduct that apply to the practice of dental hygiene.

They are also found in the law that governs the College, called the *Regulated Health Professions Act, 1991* (or *RHPA*). The *RHPA* details that it is an act of professional misconduct to sexually abuse a patient (or client), to fail to cooperate with the Quality Assurance Committee or any assessor appointed by that committee, to have been found guilty of an offence relevant to a dental hygienist's suitability to practise and to have been found by another regulator to have engaged in an act of professional misconduct that would also be considered to be professional misconduct by the CDHO.

Legislation and regulations can be hard to read, but the College encourages you to review the *RHPA*, all Regulations and the Standards of Practice from time to time. You are also encouraged to call a practice advisor if you have a question. **And remember, until a Regulation is actually passed it is not law**. Currently this applies to the treatment of one's spouse. As of the date of writing, it is still considered sexual abuse to treat your spouse even though a change to the regulations has been proposed.

The College recognizes that being under investigation is a troubling experience. The College's mission is to regulate the practice of dental hygiene in the interest of the overall health and safety of the public of Ontario. This means all matters of concern – complaints and any reports (such as mandatory reports from employers, and mandatory self-reports from dental hygienists) must be investigated.

Here are some of the most common areas of professional misconduct that the College investigates:

1. Inappropriate Billing

Inappropriate billing can include submitting or helping with the submission of false or misleading accounts, charging or accepting excessive or unreasonable fees, failing to advise a client of the fee upon request, failing to itemize an account if requested and refusing to perform a service urgently required unless all or part of the fee is paid before treatment.

If the records demonstrate that the dental hygienist has reasonably and accurately billed for services, then it is unlikely that the committee which reviews issues about alleged professional misconduct, called the Inquiries, Complaints and Reports Committee (ICRC), would direct that any action be taken. However, the ICRC considers it an extremely serious risk to the public if there is any indication that a client was intentionally and/or carelessly billed inappropriately. In those circumstances, the ICRC might direct remediation, that a dental hygienist be cautioned in person (called an "oral caution" or "caution-in-person") or refer specified allegations to the Discipline Committee.

2. Informed Consent and Record Keeping

While the College assumes that all dental hygienists know they should "inform before they perform" and assumes they do, if the records do not state that informed consent was received, it

is presumed not to have been. Failing to keep records in accordance with the General Regulation–Part III, Records, and failing to maintain a standard of practice of the profession (i.e. obtaining informed consent) are both acts of professional misconduct.

> *"It is your responsibility to ensure that any client or member of the public can look your name up on the public register."*

Continuity of care among all health care professionals is extremely important. The ICRC takes poor recordkeeping seriously.

3. Providing Information and Your Practice Name

Using a name other than what is set out in the public register or failing to identify yourself and provide your registration number are also acts of professional misconduct. Occasionally, the College receives information that a registered dental hygienist is advertising under a different name than that provided to the College. **It is your responsibility to ensure that any client or member of the public can look your name up on the public register**. The College must have your current name and contact information. It is an act of professional misconduct not to provide the address and telephone number of the College if requested.

4. Breach of College Rules/Requirements

The acts of professional misconduct also include acts related to the obligations registrants have to the College. For example, failing to pay any money owing to the College, failing to ensure information provided to the College is accurate, failing to reply appropriately and responsively within the time specified (or within 30 days) and failing to comply with an order or a direction of a Committee of the College are all acts of professional misconduct. This particularly comes up on occasions when registrants do not comply with an order or direction of the Quality Assurance Committee. **You must always respond to a College inquiry or requirement in a timely manner**.

Even if you are suspended for non-payment of fees, you are considered a registrant of the College and subject to all rules and regulations. Any registrant that wishes to resign from the College must do so either through the online portal or by writing to the College.

The College must investigate all areas of concern whenever there is a complaint or a report. However, if there is no indication that an act of professional misconduct occurred, it is unlikely that the ICRC would take any action.

Where can you find a copy of the *Regulated Health Professions Act and the Dental Hygiene Act* (and regulations)? The easiest place to locate them is on the Government of Ontario e-laws website (https://www.ontario.ca/laws), and they can be accessed by using the links on www.cdho.org. If you ever have any questions about professional misconduct, please contact our practice advisor or our investigations and complaints staff. CDHO

RDH Expertise for RDHs

CDHO practice advisors provide confidential consultations to dental hygienists who seek assistance with issues that directly or indirectly affect the delivery of safe, competent, ethical dental hygiene care.

To reach a CDHO practice advisor by phone or e-mail:

416-961-6234 or 1-800-268-2346

Cathy Goldberg RDH

ext. 238 ■ cgoldberg@cdho.org

College of **Dental Hygienists** of Ontario
L'Ordre des **hygiénistes dentaires** de l'Ontario

the College's promise
to dental hygiene clients



You can expect to receive quality preventive oral hygiene care from health professionals who are registered with the College of Dental Hygienists of Ontario (CDHO).

how we keep this promise

- ✓ All dental hygienists must be **registered** with the CDHO to practise in Ontario.
- ✓ Only persons currently registered with the CDHO may use the title "dental hygienist" or any variety of translation of "**dental hygienist**" including the initials RDH (Registered Dental Hygienist).
- ✓ Every dental hygienist in the province **must** meet the CDHO's entry-to-practice requirements.
- ✓ A list of currently registered dental hygienists is **available** to the public.
- ✓ The College provides Standards of Care and Practice Guidelines to guide dental hygienists and **inform** the public.
- ✓ The continuing competency of your dental hygienist is **monitored** and **supported** by the College throughout her/his professional career.
- ✓ Information about oral health and **access** to dental hygiene care is promoted to the public.
- ✓ A **fair** and **transparent** complaints process is available to help clients who feel they may not have received the care they had the right to expect.
- ✓ The College collaborates with the Ontario Government, other health Colleges and consumer groups to promote access to **safe** and **effective** oral health care.

Updates to the Public Register

New Registrants

June 16 to September 15, 2016

Abbott, Brooke	018214
Akkacha, Mariam	018406
Ali, Carine	018322
Alimirza, Yalda	018275
Allen, Jamie	018205
Al-Ramahi, Razan	018294
Althabteh, Dania	018412
Anderson, Jennifer	018248
Audet, Annike	018429
Augustave, Ludovic	018401
Ayoub, Lara	018287
Bagnall, Casey	018228
Ball, Amanda	018220
Beauvais, Emilie	018301
Bedi, Ramneek	018225
Belkabir, Salma	018354
Benton, Brooke	018195
Bhatti, Sanaa	018251
Bhinder, Shoaiba	018374
Bhugaloo, Zeba	018419
Bilyea, Danielle	018297
Boissonneault, Stéphanie	018299
Bonneville, Haley	018284
Bonnier, Stacey	018355
Boschi, Natalia	018229
Bossers, Katherine	018198
Botosh, Ashley	018257
Boudreau, Hilary	018400
Brka, Dzelila	018362
Brokers, Hillary	018313
Brown, Kristen	018261
Broza, Hayley	018323
Calvo, Maria	018241
Caravatta, Briana	018324
Caravellos, Georgia	018408
Cassidy, Brittany	018188
Cecchetto, Nikki	018244
Chae, Lauren	018345
Chapman, Megan	018394
Charette, Crystalle	018217
Chowhan, Corey	018312
Churchill, Mackenzie	018208
Ciarma, Amanda	018453
Cilbiyikoglu, Marsella	018411
Claudino, Danielle	018350
Collin-Demers, Talia	018441
Contractor, Marzoon	018238
Copland, Shallane	018226
Cordick, Brianna	018189
Costello, Kacee	018397
Coyne, Alexandra	018237
Crocker, Devyn	018210
Croisier, Cora	018209
Cullen, Jennifer	018403
Cummings, Erin	018268
Curnow, Megan	018280
Czelenski, Lana	018365
Dacosta, Alexandra	018410
Dallaire, Jessica	018191
David, Gloria	018252
Décary, Natalie	018378
Defayette, Robin	018422
Degawan, Adrienne	018331
Dhanani, Ravindrakumar	018347
Di Rocco, Chiara	018392
Do, Phuong Sophia	018389
Dokis, Candace	018318
Dolynchuk, Ashley	018204
Dombrovschi, Chantal	018302
Doucet, Kayla	018221
Duench, Jaimie	018254
Duncan, Emma	018265
Dunn, Holly	018333
Dutee, Salma	018409
Eagles, Kaitlin	018336
Early, Katelyn	018231
Edworthy, Theresa	018395
Escobar, Kateryn	018296
Feng, Ying	018286
Ferguson, Alex	018376
Fernandes, Candice	018239
Fetesko, Olga	018202
Fielding, Jocelyn	018423
Filiatreault, Anne	018273
Fong, Jasmin-Lin	018277
Fortier, Stephanie	018398
Fotinos, Mercini	018325
Frank, Jacklyn	018230
Fratia, Chantelle	018343
Frost, Alexandria	018247
Fullum, Dawni	018451
Gallucci, Victoria	018346
Gariepy Gibson, Taylor	018332
Geronimo, Mary	018186
Giang, Kelly	018319
Gill, Amandeep	018377
Gill, Deepinder	018430
Gillanders, Brenley-Ann	018384
Gillis, Rainy	018425
Gionet-Duclos, Alexandra	018307
Giorgi, Melissa	018342
Girard, Marie Christine	018308
Girard, Valérie	018197
Goetz, Christa	018190
Guirguis, Veronica	018298
Gutierrez Suasnavas, Samantha	018371
Hajdarevic, Nizama	018306
Han, Haejin	018449
Hana, Alexander	018372
Hanna, Alicia	018311
Hartwig, Zachary	018211
Hasany, Mena	018300
Ho, Jessica	018361
Horner, Sarah	018396
Hounkpè, Anihougbè	018218
Humphrey, Andy	018435
Hurtubise, Naomi	018443
Huston, Brooke	018339
Huynh, Amanda Ann	018358
Insorio, John Henry	018270
Jagodic, Shanel	018272
Jarvis, Jessie	018357
Jensen, Brittany	018258
Jewell, Jessica	018366
Ji, Suzanne	018328
Johnson, Caitlin	018444
Julien, Hayley	018314
Kaleem, Safa	018240
Kang, Sooji	018316
Kanwar, Harpreet	018249
Kassab, Bisan	018363
Keating, Amanda	018436
Kenny, Emma	018192
King, Kahlan	018187
Ko, Hanna	018393
Koloshuk, Lilya	018259
Koot, Stephanie	018383
Kowlessar, Michelle	018281
Kuehni, Lauren	018407
Kwok, Florence	018290
Laflamme, Julia	018200
Lafleche, Dayna	018246
Lambie, Jessica	018215
Lane, Kennedy	018236
Lanigan, Ashley	018375
Larocque, Mariah	018434
Lau, Margaret	018330
Le, Jacqueline	018373
Le, Tra	018274
Lecours, Gabrielle	018414
Legg, Kellianne	018415
Lemieux, Michelle	018437
Leslie, Erika	018223
Long, Kyla	018196
Lyle, Jessica	018385
Mabee-Smelt, Samantha	018288
Machacek, Brittany	018232
Mackie, Andrea	018418
Malek, Shagofa	018344
Maniacco, Courtney	018305
Mann, April	018193
Maruya-Li, Sean	018227

Masshoor, Zohal	018349
Maurice, Cailey	018310
Maydo, Jessica	018222
McChesney, Mia	018405
McFadyen, Brock	018432
McRae, Katie	018326
Mete, Elif	018420
Miller, Alisha	018428
Minhas, Gurpreet	018340
Mishak, Daniella	018199
Moore, Ashley	018335
Morin, Erika	018303
Murphy, Lee-Ann	018388
Murray, Janice	018426
Nash, Kayla	018424
Nazare, Sarah	018327
Newell, Kaitlyn	018348
Nguyen, Hoang	018359
O'Neill, Britanni	018317
Ong, Bernice	018351
Pacheco, Lauren	018262
Paraiso, Claire Marie	018413
Parameswaran, Chanjutha	018291
Pare, Megan	018292
Parent, Jamie	018382
Parikh, Jayanaben	018293
Parsons, Tami	018234
Patel, Mansi	018352
Patrick, Hillary	018364
Patton, Sarah	018245
Pereira, Justine	018235
Persaud, Savatri	018250
Peterson, Kim	018320
Petrina, Gabrijela	018431
Petts, Brittany	018315
Piccirilli, Sabrina	018454
Pilgrim, Bronwen	018421
Pisek, Kaley	018402
Poitras, Julie	018445
Polivyanaya, Elena	018438
Pollesel, Jennifer	018224
Portillo Palomino, Janet	018334
Potter, Freya	018380
Proper, Alicia	018452
Prost, Rosemary	018386
Radoman, Vanja	018433
Ramesha, Harishni	018233
Ramirez, Amy	018360
Ramsey, Shannon	018201
Rankin, Rebecca	018213
Rashotte, Julia	018207
Redecop, Natalia	018256
Redekop, Maggie	018390
Reza Khanloo, Fariba	018387
Riazati-Kesheh, Mina	018289
Robinson, Carmen	018427
Rodriguez de Cormier, Eiryn	018194
Rodriguez Lugo, Ayme	018304
Rowe, Victoria	018219
Ruggeri, Vanessa	018283
Rustad, Katherine	018321
Saad, Michele	018255
Sadachcharam, Jeevanthy	018338
Sahraoui, Malika	018185
Saidani, Marzouk	018216
Saini, Ravneet	018309
Santos, Dannielle	018341
Scarr, Ashley	018329
Serran, Cathleen	018440
Seth, Hawa	018399
Shah, Palak	018369
Shantz, Helaina	018203
Shi, Manshi	018267
Simbirski, Shannon	018260
Simpson, Kathryn	018353
Sran, Sharandeep	018404
St-Onge, Nathalie	018242
Szoke, Thomas	018370
Tannous, Michelle	018285
Taraf Hajjaoui, Naoual	018446
Tattrie, Danielle	018381
Taylor, Lindsay	018368
Thompson, Mariah	018266
Thompson, Nicole	018447
Timms, Lisa	018448
Toman, Krista	018439
Tomash, Bianca	018337
Tonin, Rachel	018263
Trambadia, Pooja	018391
Tseng, Beverly	018264
Ugirumurera, Nicole	018278
Vail, Ashley	018269
Van Minnen, Kaitlyn	018206
Voldock, Shelby	018356
Vorano, Kelsey	018243
Wall, Kerri	018295
Weedmark, Bethany	018279
Wieczorek, Anna	018450
Wight, Deanna	018212
Wilcox, Lindsay	018253
Wilson, Alli	018417
Wolf, Kaitlyn	018367
Wollmann, Stephanie	018442
Woon, Nicolette	018416
Wu, Po Shan	018271
Yaghini, Laleh	018282
Yates, Amanda	018379
Zou, Jia Yi	018276

Authorized for Self-Initiation

June 16 to September 15, 2016

Akar, Bulent	011507
Aleixo, Carla Sofia Costa	015056
Alfie, Ana	010885
Alousis, Alexandra Lauren	015513
Azoulay, Lucy	005658
Bantten, Samantha	016773
Baranova, Marina S	008100
Bell, Robynne Katherine	015158
Bennett, Meaghan Grace	017037
Bidzinska, Monica Maria	017373
Blake, Jennifer Jane	007991
Boudreau, Hilary	018400
Burns, Courtney Lee	011019
Campbell, Chantel Anashia	012282
Campbell, Danielle Kathleen	017602
Campbell, Diana Lynn	015575
Campbell, Lisa Margaret	005428
Cardona, Graziella Grace	011112
Chahal, Amreen Kaur	016659
Cherry, Elisa Saane	015977
Clayton, Carmen Ann	014097
Cohen, Carolyn Sachiko	013260
Da Ponte, Melissa Antonietta	014498
Damiano, Melissa Filomena	016748
Delavari, Bita	013831
Derue, Tabbitha Marie	016548
Dilts, Haleigh Cassandra	016436
Dimaculangan, Gina	011079
Donato, Sheena Selena	015613
Doucette, Melanie Jean	009435
Duhaime, Chantal	015979
Fernandes, Anahita	013177
Gauthier, Lisa Elizabeth	010133
Harper, Alison Renee	009656
Hemington, Chantel Ashley	017462
Hill, Jerrica	016424
Hofteig, Kristin Brianne	014275
Jacques, Frédérique	015344
Keenan, Kristy Violet	017631
Landry, Stephanie	010791
Le Sieur, Isabel	014239
Ling, Chia-Hui	011540
Lodwick, Cheryl Ann	004418
Mak, Amber Marie	015274
Manseau, Kelley	015213
Marino, Jenna Louise	016663
Mason, Amanda Catherine	013290
McCrea, Amy Melissa	015323
McLeod, Emily	015075
Mellikov, Kendra Anne	012755
Mendoza, Wilhelmina Torres	016601
Mihalco, Shai Leigh	016162
Moretti, Bianca Michelle	015497
Nascimento, Tharita Sealbert Oliveira	015462
Nguyen, Lien-Trang	012846
Nichols, Anne Christine	012273
Nugent, Jennifer Ann	010922
Oliviero, Rosanna Marie	015859
Pellerito, Susan Lorraine	013136
Pereira, Vanessa	014198
Peter, Tia	013478
Petrova, Preslava Cenkov	015896
Ramsumair-Rambalie, Sarasvati	016439
Regimbal, Stephanie Ann	016912
Rico, Rosanna	015472
Santi-Bonner, Andrea Daniella	004405
Sedore, Anne Michelle	006867
Smith, Morgan Leigh	014021

Spallino, Matteo	008201
Stanley, Melissa Louise	012985
Stanley, Rebecca Lee	016789
Stepanova, Olesya	013003
Stevenson, Lindsay Marie	012609
Stojowska, Jadwiga Bronislawa	013975
Tawfeek, Bann	014910
Torchia, Carissa	015183
Truong, Loan Thanh	010901
Truong, Thuy Thanh	011318
Tykolis, Kim Elizabeth	004127
Vazquez Maya, Katia Itzel	017699
Veltri, Samantha Maria	016369
Villacorta-Siegal, Nelly Margaret	013232
White, Ashley Ann	018033
White, Lori Anne	008643
Winter, Lara Elizabeth Dawn	012763
Zanatta, Krista Brianne	013146
Zuberi, Nida Jayna	016592

Reinstated

June 16 to September 15, 2016

Alfie, Ana	010885
Barrett, Holly	013743
Bolton, Jennifer	017762
De Ciantis, Jennifer	012608
Dominguez Murillo, Maria	015355
Dorzilme, Primerose	015661
Garrett, Kayla	013731
Martin, Taija	013382
Pink, Laura	006131
Spallino, Matteo	008201
Trudell, Kelsey	017457
Vashisth, Anjali	009711

Resignations

June 16 to September 15, 2016

Cross, Adrienne C	002123
Dumont, Alison	007881
Evenden, Joanne Carolyn	010219
Fenner, Debbie	002788
Fitton, Susan Leigh	008636
Gonzalez Salas, Luis Orlando	017226
Knight, Katrina Ann	009206
MacDonald, Ann	006680
Molina, Normita	014840
Neudorf, Nicolette T	004523
Polkki, Cheryl Amber	016146
Rogers, Kim Allison	005414

Revoked with Cause

Effective August 23, 2016

Plasaj, Christine Lynn	011316

Suspended with Cause

Effective September 9, 2016

Barnett, Nicole Marie	012547



DID YOU KNOW?

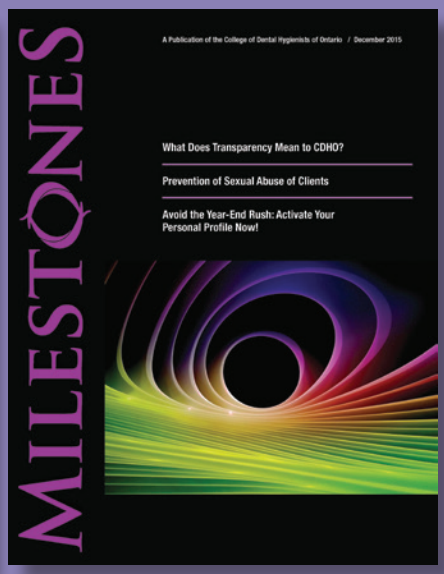
The **Public Register** contains information about all College Members. This information is made public in accordance with the Regulated Health Professions Act (RHPA) and College Bylaws. Maintaining the public register fulfills the College's mandate to regulate the dental hygiene profession in the public interest and demonstrates the profession's commitment to transparency and accountability.

For more information on how to use the **Public Register**, go to the College's website and click on the tab 'For the Public / Public Register / How to Use the Public Register'.









You can find the current and past issues of our magazine *Milestones* on the CDHO Website **www.cdho.org**



© wititorn onkhaw/Shutterstock.com