

Strategic Planning for Quality Assurance

A. CONTEXT

Under the *Regulated Health Professions Act* (RHPA), all regulated health professions are required to develop mechanisms to provide public assurance of ongoing competency of registrants to provide safe and effective care. The ACT does not prescribe or mandate specific mechanisms and instead recognizes that each profession and professional context is unique; as a result, competency assurance mechanisms need to be tailored to the circumstances and needs of individual professions and professionals, in a manner aligned with the spirit of the RHPA.

The dental hygiene profession has several unique features that are integral to understanding concepts such as “quality”, “safety”, and “effectiveness” in clinical practice. The vast majority of RDHs practise in a dependent employment relationship, with registrants of another regulated health profession (Dentistry). This has been identified as an important feature that may limit the capacity of individual RDHs to be truly autonomous professionals. Further, across the dental health professions, there are multiple regulatory bodies and multiple professional contexts, each of which has unique, sometimes different, and sometimes unaligned competency standards and expectations.

In 2022, the College of Dental Hygienists of Ontario (CDHO) commissioned a report to review the current quality assurance/competence maintenance mechanisms used to achieve RHPA objectives. Importantly at the time of this review, there was a very low level of public complaints leading to disciplinary cases (<0.2% of registrants) compared with other professions in Ontario, suggesting that competency-related concerns were not a significant issue for patients. Key findings from this report included:

- ~60% of registrants agreed that the current program supports competency efforts and continuous learning requirements.
- ~50% thought the current systems were moderately, somewhat, or not important to their own professional development.
- ~60% felt they had a clear understanding of Quality Assurance (QA) program expectations.
- Key issues of concern reported by respondents include costs, time commitments, lack of clarity of purpose, lack of supports, problematic web tools/interfaces, and a punitive/judgmental tone to assessments.

The report also highlighted current strengths of the QA system at CDHO, including: i) psychometrically developed assessment instruments; ii) a menu of options to allow individual registrants choices in the ways in which they could meet CDHO requirements; iii) procedural flexibility in completing requirements. Concerns regarding the current QA process expressed by registrants included: i) inconsistent and non-specific feedback; ii) lack of clarity in terms of what the focus of “competency” was; and iii) general belief that (given the time and resources invested by both CDHO and individual registrants) the QA program could be more impactful.

B. PROCESS

In late 2022, a Strategic Planning Process for Quality Assurance was launched within CDHO. This process involved three key stages:

Phase 1a: Environmental Scan and Literature Review

Phase 1b: Key informant interviews and data synthesis

Phase 2: Strategic plan development and formulation with Steering Committee and QA Committee

Phase 3: Validation with Registrants and Ratification by Council

Presentations to CDHO committees and Council in mid-2023 highlighted key findings from Phase 1a/1b including:

- a) Recognition that the current measurement-intensive QA process was suboptimal for both practitioner development and for regulatory objectives.
- b) Unique feature of the DH Profession and individual's workplaces needed to be more fully integrated within QA programming.
- c) A learning-focused rather than testing-focused QA process would be more valuable for registrants and for achieving regulator objectives.
- d) A strong desire for opportunities for greater engagement with the Regulator and across the profession.

As one participant noted in the key informant interviews, a central focus of quality assurance in dental hygiene could be framed as: *"Help us to be excellent — not just afraid of you calling us incompetent"*.

In summer 2023, an online consultation process was undertaken with registrants, to determine their perspectives on the evolution of the Quality Assurance program and to confirm findings from previous phases of the process, and to engage them in the development of strategic planning priorities. Data from the consultation process reinforced key findings from the previous phases and led to the initial framing of the strategic plan, presented to the QA Committee.

C. STRATEGIC PLAN HIGHLIGHTS

Vision: Public protection through professional engagement

Mission: Assuring safe and effective dental hygiene practice through commitment, continuous learning, communities of practice, and collaborative conversations

Core Values:

- Safety of the public and of practitioners
- Equitable access to care
- Engagement
- Collaboration
- Respect
- Openness
- Practitioner-centred
- Progressive

Focus (3–5 years):

- **Enhance** collegial interactions with CDHO (including website, interactions with assessors and staff, etc.).
- **Shift** towards registrant-centred model focused on individual learning needs, building commitments, encouraging reflection, integrating workplace context issues.
- **Increase** opportunities for peer-to-peer interactions to support benchmarking, peer support.
- **Prioritize** continuous, purposeful, intentional learning and application to practice.
- **Utilize** conversational/interactional methods to engage registrants and support commitment building.

Goals (Short term — next 3 years):

1. Enhance collegial communication channels with registrants.
2. Expand peer-based learning and benchmarking options.
3. Create new tools to support individual-focused learning and professional development commitments.
4. Enhance role of “Assessor” to “Peer Coach.”
5. Provide professional leadership in practice-relevant, non-technical areas (e.g., trauma-informed care, EDI, public) to support emergent practices.
6. Support registrants in their continuous, purposeful, intentional learning.
7. Generate data about the profession for QA program evaluation and improvement.

Goals (Mid-term — 3–5 years):

1. Build capacity of Peer Coaches across the profession
2. Create validated tools to support greater integration of Code of Ethics into QA practices and processes.

3. Lead and respond to evolution of profession and practices ensuring public protection.
4. Identify priority areas for alignment of QA activities with other oral health regulators and employers and enhance inter-professional learning, development, assessment, and collaboration opportunities/options.
5. Utilize QA system to support registrants in practising to maximum scope.

Goals (Long-term — >5 years):

1. Develop mechanisms for QA program to support ongoing scope of practice evolution.
2. Develop mechanisms for QA program to support career-laddering within profession.
3. Develop mechanisms to support greater alignment of CDHO QA activities with those in other oral health professions, including data sharing.
4. Create an internationally significant repository of data and research focused on the dental hygiene profession.

Objectives (Short term — next 3 years):

1. Develop a secure, single, user-friendly portal interface to allow registrants rapid and easy access to information, documentation, requirements, assessments, etc.
2. Support collegial engagement in College and registrant interactions, focused on learning, professional development, and empowerment.
3. Develop and expand in-person and virtual peer-to-peer learning and benchmarking opportunities and events.
4. Create tools to better align individual's practice-relevant learning objectives with authentic assessments, learning resources, coaching supports and benchmarking opportunities to support implementation in practice.
5. Support evolution of assessor role to peer coach role through education and training programs.
6. Lead consortia of education providers to develop and signpost high-quality learning supports aligned with registrants' self-identified needs and interests with embedded authentic assessments.
7. Develop impartial, transparent, and fair data collection and analysis systems to support evolution of a research program of relevance to the profession.

Objectives (Mid-term — 3-5 years):

1. Build capacity and establish a sustainable cadre of peer coaches to support registrant-focused continuous professional intentional learning activities.
2. Align updating of Code of Ethics with quality assurance programming and activities to support practice improvements.
3. Lead development (in collaboration with educators and others) of a menu of learning and assessment opportunities focused on non-technical priority areas of professional development including trauma-informed oral care, public health, education, conflict management, EDI, etc.

4. Identify priority areas for co-development of education and quality assurance tools and programming with other oral health regulators and employers, including IPAC, ethical business practices, delegation protocols/dental directives, etc.
5. Create learning opportunities and tools that support self-assessment and self-directed learning to assure registrants are practising to maximum current scope.

Objectives (Long-term — > 5 years):

1. Use “nudge techniques” to support profession-wide learning and development related to anticipated scope of practice evolution (prepare profession for anticipated changes).
2. Provide alternative learning and assessment options aligned with different career trajectories and aspirations to provide for life-long growth and evolution within the field.
3. Create a menu of learning and assessment options focusing on interprofessional quality assurance, reinforcing team-based oral care principles.
4. Establish a sustainable infrastructure for ongoing data collection and analysis to support a productive research program to guide regulatory and public interest decision making related to the dental hygiene profession.

D. IMPLEMENTATION PRIORITIES

Engagement of registrants in the Quality Assurance process is central to the strategic plan. Currently, piloting of a Peer Circle model of registrant engagement is underway and has highlighted the value and impact of this approach to continuous learning, professional development, and quality improvement. To enact short-term goals and objectives of the strategic plan over the next three years, several implementation priorities have emerged:

1. ***Update/enhance usability of the online System for Managing Individual Learning (SMILE) Portal:*** Registrants, assessors, and staff have all noted opportunities for improvement to the SMILE Portal to make it more user-friendly, seamless, and integrated into daily professional practice. Navigation of the current portal is cumbersome, and completion of mandatory self-assessment is time-consuming and of marginal value to registrants. A more modern, user-friendly, streamlined, and practical portal would support greater engagement with the self-assessment process and provide more valuable data for both registrants and CDHO.
2. ***Expand the current number of options available to registrants to demonstrate their competence:*** Currently, CDHO provides registrants with three options/routes to demonstrate their maintenance of competency. The principle of providing registrants with choices in the process is essential and should be expanded to build upon the success of the Peer Circle Pilot Project currently underway, to foster more collaborative, conversational models of quality assurance.

	Option 1	Option 2	Option 3	Option 4 (NEW)
	Mandatory Self-Assessment	Mandatory Self-Assessment	Mandatory Self-Assessment	Mandatory Self-Assessment
Allows for demonstration and verification of knowledge	Learning Portfolio	Written Assessment (QA Test)	Written Assessment (QA Test)	Peer Circle Activity #1 + coaching session
Allows for demonstration and verification of skills and judgement	Practice Profile	Practice Profile	On-site Practice Review	Peer Circle Activity #2 + coaching session

Peer Circle Activities: During the Peer Circle Pilot project undertaken in 2022–2023, processes for developing, convening, and facilitating peer circles were refined. These case-based conversationally focused circles provide registrants with opportunities for peer benchmarking, reflective self-assessment, and facilitated learning. Assessment of learning in peer circles has been substantially formative, providing registrants with opportunities to receive feedback from the facilitator and peers, as well as engage in authentic self-reflection. Going forward, the general structure and process of the Peer Circle activities would remain the same, with evolution of the assessment format to support enhanced learning outcomes: i) formalize the self-assessment element by requiring registrants to complete a reflective statement highlighting their learning from the Peer Circle and the ways in which this learning will be applied to their daily practice; ii) develop a mechanism to provide Peer Circle participants with anonymized peer assessment feedback from other participants in the Circle, to formalize peer benchmarking; iii) develop a system to formalize facilitator assessment of the registrant's performance in the Peer Circle, focused on coaching and quality improvement principles rather than on punitive approaches; iv) require all participants in Peer Circles to engage in a 30–45-minute post-activity coaching session focused on continuous learning and establishing personal commitments to ongoing professional development; v) establish a route by which individuals in Option 4 who are not engaging in the process or whose performance raises concerns can be redirected to either Option 1, 2 or 3 as necessary to confirm maintenance of competence.

Currently, the plan for Peer Circles includes continuation of the experience for volunteer participants through 2024; this will permit further development and refinement of processes, and building of capacity and skills for facilitators and peer coaches. Following implementation of Option 4, a voluntary, non-assessed version of Peer Circles could continue for those interested in the peer circle experience without the need for summative assessment linked to Quality Assurance requirements.

3. **Develop and implement an educational program to support evolution of the Assessor role to a Peer Coach Role:** Engagement of registrants in the Quality Assurance process is essential: for this program to succeed, it needs to be grounded in the realities of day-to-day practice and not be seen as an ivory-tower or academic exercise. Rather than having professional educators or experts involved in the assessment of Quality Assurance activities and options, a model in which peer-based assessment is used is both less intimidating for registrants and more engaging for learning. Already, CDHO relies upon the profession to support QA activities as Assessors: going forward reframing the Assessor role

as one of Peer Coach will be important to support Strategic Plan priorities. To this end, a formal education program for all “assessors”, “facilitators” and individuals involved in QA (including staff and committee members) should be developed focused on three core topic areas: i) Educational Psychology/Learning Styles Theory; ii) Principles of Effective Assessment; and iii) Coaching-for-Improvement Skills. A standardized curriculum will help support implementation of the strategic plan by upskilling those involved in the process, will enhance reliability/standardization of assessment practices, and support evolution of the QA program.

E. TARGETS AND KEY PERFORMANCE INDICATORS

Activity	Target	Key Performance Indicators	Timelines
<i>Update SMILE Portal</i>	New Portal for 2025 QA cycle		2023 – Diligence and commissioning 2024 – Revision 2025 – Completion
<i>Introduce Option #4 for QA Process</i>	30% of registrants selected for QA choose Option #4 (n = 150)	<ul style="list-style-type: none"> - Introduction of Option 4 to profession - Development of cases and facilitation support tools - Development and validation of self-, peer- and coach assessment instruments - Playbook for development and implementation 	2024 – Planning, development, preparation 2025 – Implementation
<i>Peer Coaching Educational Program</i>	50 trained peer coaches (assessors, staff, peer circle facilitators, etc.)	<ul style="list-style-type: none"> - Number completing program - Program Satisfaction - Change in learning - Change in behaviour as Peer Coach 	2024 (early) – Needs Assessment, curriculum development, planning 2024 (late) – Delivery of programming