



MILESTONES

College of Dental Hygienists of Ontario

Protecting your health and your smile

2020 | ISSUE 03

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.

MILESTONES

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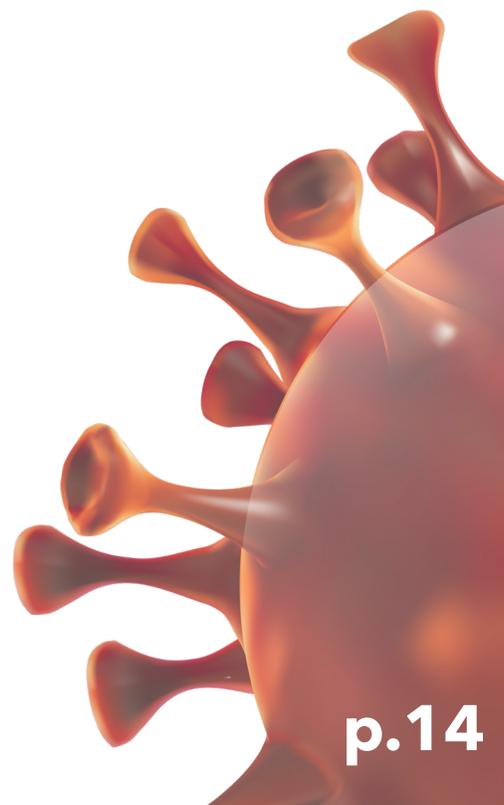
College of **Dental Hygienists** of Ontario
L'Ordre des **hygiénistes dentaires** de l'Ontario
Protecting your health and your smile / Nous protégeons votre santé et votre sourire

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PRESIDENT'S MESSAGE

CATHERINE RANSON RDH, BHA, MET

This is my ninth and final year as a Council member and closing my third year as the President of the CDHO. I am grateful for all the support I have been given by Council members and staff – thank you!

I hope you and your families are staying healthy.

The College of Dental Hygienists of Ontario (CDHO) is continuing to plan as best as we can for an uncertain future with the second wave of COVID-19 upon us. The College's mandate to protect the public remains unchanged and we recognize during this unprecedented event, it is more important than ever to ensure that dental practices remain safe for clients/patients and the entire dental team. The practice advisors have been working diligently to assist and guide registrants during this very stressful time.

This is my ninth and final year as a Council member and closing my third year as the President of the CDHO. I am grateful for all the support I have been given by Council members and staff — thank you! I am honoured to have worked with a dedicated group of people (Council and non-Council members, CDHO staff and Lisa Taylor, Registrar/CEO, who recently retired). Each Council member provides a distinct area of expertise and collectively, the Board works to ensure the public has access to safe, competent, and ethical dental hygiene services. My experience as a Council member has been very rewarding and I encourage dental hygienists in Ontario to become Council members in the future. The role as a Council member expands one's knowledge in regulation, policy governance, strategic planning, communication, discipline process, quality assurance, educating the public, and the overarching health sector.

The Council is actively working with Odgers Berndtson, Executive Search and Recruitment firm to hire a new Registrar/CEO. The position description has been posted on the CDHO website. Jane Keir has been the acting Registrar since October 1, 2020. It is Council's plan to have a new Registrar in place for January 2021. The Council continues to work on governance reform and will be participating in a workshop in December 2020.

In September, all registrants received an e-mail invitation to complete the *Dental Hygiene 2020 Total Quality Improvement Survey*. The survey intends to provide an overall picture of the nature and quality of dental hygiene practice in Ontario. The results of the survey will form the basis for advice and guidelines to the profession and facilitate total quality improvement for the practice of dental hygiene. This survey was conducted by a third party, Dr. Carlos Quiñonez and University of Toronto Research Staff at the Faculty of Dentistry. I hope you had a chance to complete the survey and be a part of future changes for the profession.

In November, elections for Council members are taking place in District 2 (Central Western – North Ontario) and District 3 (Central Western – South Ontario) as well as the selection of two Academic Council members.

The next CDHO Council meeting will be held virtually on Friday, December 4, 2020. The link to join the meeting will be available on the CDHO website. See you online.

Wishing you all a happy and healthy holiday season. Wear a Mask. Save Lives. Be Kind.

A handwritten signature in black ink that reads "Catherine Ranson".

FAREWELL MESSAGE

LISA TAYLOR RDH, BA, MEd, MCOB



Really, it is I who am grateful. Dental hygienists demonstrate every day that they are a caring profession that puts the interests of their clients first and foremost. I am proud to be part of this wonderful profession.

I attended my last Council meeting as Registrar and CEO of the College on September 18, 2020, and I welcomed the occasion to share my appreciation for having had the opportunity to serve the College and the public interest over the last 15 years.

For those who do not know my story, I graduated from dental hygiene in 1986. At that time, the promise of self-regulation was rumoured to be right around the corner. This was a very exciting time for a new dental hygienist who graduated with dreams of making a difference.

I was excited and intrigued by the regulatory world. I remember hosting evenings with other keen dental hygienists to review and comment on the proposed legislation that I thought was about to change the world. Remember, I was a new graduate who had visions of making a difference. That legislation was the *Regulated Health Professions Act* and *Dental Hygiene Act*.

Fast forward to 2005, I now had a few university degrees under my belt, and my mind set on finding a position at the CDHO. I was delighted to become the first Practice Advisor for the College. I said goodbye to Ottawa, clinical practice, my adult daughters and my family. I packed my bags, my little dog and moved to Toronto. I had taken the first step towards my dream job; it took another 10 years to finally land that job, as Registrar and CEO.

My time at the College has been everything I hoped it would be. I think, and I hope others will agree that I have made a difference. I would like to thank the Council for making my

dream a reality, for sharing my visions, and letting me lead this great organization.

Since announcing my retirement, I have heard from so many people, most of them dental hygienists who have expressed gratitude and said so many kind things to me. I have been so touched.

Really, it is I who am grateful. Dental hygienists demonstrate every day that they are a caring profession that puts the interests of their clients first and foremost. I am proud to be part of this wonderful profession.

As much as I am proud of my accomplishments during my time at the CDHO, my success is not mine alone. I would like it known that I am most appreciative of and grateful for the CDHO staff. My successes are their successes. I have had the pleasure to work with some of the most dedicated, intelligent, and talented people over my years at the College. I would have not made the difference I so desperately wanted to make, if not for those who not only shared my vision, but also put their every effort into making it happen. Thank you to all of you.

There are some really exciting times ahead for the College and Council. Although I am retiring, I will be watching with keen interest. Change is always an opportunity for growth and it will be exciting to see the College's continued growth under a new Registrar.

In closing, I wish Council all the best in the selection of the new Registrar and for the future. I thank you again for your support in making my dream a reality. It has truly been my pleasure.

A handwritten signature in cursive script that reads "Lisa Taylor".

COUNCIL HIGHLIGHTS

2020 COUNCIL MEETING DATES

Friday, December 4

VIRTUAL MEETINGS

The CDHO Council meetings are now virtual. They can be viewed on the CDHO YouTube channel.

SEPTEMBER 18, 2020

The September 18, 2020 Council meeting was held virtually and broadcasted live on CDHO's YouTube channel.

In her opening remarks, CDHO president, **Catherine Ranson**, welcomed Council members and guests. She announced that the Registrar, **Lisa Taylor** would be retiring on September 30, 2020 and congratulated her on her exemplary service to the CDHO over the past 15 years. During Ms. Taylor's tenure, she has implemented various initiatives aimed at improving College programs, regulatory processes and transparency.

Registrar, **Lisa Taylor**, addressed Council and thanked them for the opportunity to serve the College and the public. Ms. Taylor also thanked CDHO staff for their loyalty and dedication throughout her career. You can read Lisa Taylor's complete address on page 5 of this issue.

In their issue assessment, Council approved the **proposed amendments to the Examinations Regulation** and the **Registration Regulation** in principle and asked that proposed changes to both regulations be circulated to registrants and other stakeholders.

Maria Lee, Jenny Gibson and **Pauline Leroux** educated Council on the **2020 Govern for Impact Conference**.

The proposed **2021 Council meeting dates** were approved as follows:

- January 22
- March 5
- June 11
- September 24
- December 3

At the date of the report to Council, the **Inquiries, Complaints and Reports Committee** received 8 new complaints, and began 6 new Registrar's Reports investigations, and 1 new QA Referral. In total, the ICRC is currently investigating 54 matters including 24 formal complaints, 28 Registrar's Reports investigations, and 2 QA Referrals.

The **Quality Assurance Committee** reported on the 2020 Peer Assessment and 2020 practice reviews.

The **Registration Committee** reported that of the 85 new applications for registration received since the last report to Council, 2 applications required detailed review by the Registrar. Following review of information submitted by the applicants, a General Certificate of Registration was granted for both of them.

CDHO Registrar, Lisa Taylor, presented her report to Council with updates on topics such as the upcoming **CDHO Academic selection; Elections in Districts 2 and 3**; and a new **'Subscribe to Notifications'** tool on the Public Register. **CDHO**

NEW MEMBER OF COUNCIL

The CDHO is pleased to present one new public member appointed by the Lieutenant Governor in Council. The College extends congratulations to **Mr. Joshua Hollenberg**.

Joshua Hollenberg holds a Bachelor of Arts in Government from Harvard University, a JD from Western Law, and an MBA from Ivey Business School. He has worked as a Government Relations Consultant in boutique and multi-national firms and has worked for provincial and federal political parties. Joshua's community involvement includes serving as a President of a provincial riding association and as Vice-President, External of the Western Law Student Legal Society. Joshua was called to the bar in Ontario in 2020. **CDHO**

APPOINTMENT OF ACTING REGISTRAR

On behalf of the Council of the College of Dental Hygienists of Ontario, Catherine Ranson, President, would like to announce the appointment of **Jane Keir** as Acting Registrar and CEO of the College. The Council is currently conducting a search for our next Registrar/CEO, who will be announced in the near future. **CDHO**

2021 RENEWAL NOTICE

Renewals for 2021 will open on November 15, 2020. All registrants are required to either renew their Certificate of Registration or formally resign from the College on or before **January 1, 2021**. Log in to the Self-Service Portal using your six-digit registration ID number and password, and click the 2021 Renewal link to begin the process.

CHECK YOUR LIABILITY INSURANCE

You must hold valid professional liability insurance for the 2021 registration year *prior* to completing your renewal online. You will be asked during the renewal process if you have the required insurance. If you indicate that you do not have insurance, you will be prevented from completing your renewal. If you do indicate that you have insurance when in fact, you do not, you would be providing false or misleading information to the College, which is considered professional misconduct.

DO NOT LEAVE IT UNTIL THE LAST MINUTE

If you do not renew by the deadline of **January 1, 2021**, a \$100 late penalty fee is charged for renewals that have not been received by the deadline. There will be office closures around the holidays in December so there could be limited assistance available. If you run into any issues, the processing of your renewal may be delayed. Renewals open on November 15, 2020, so there is plenty of time to sort out your options and complete the process before the holidays.

Registrants who do not intend to renew for 2021 need to formally resign from the College by January 1, 2021, by logging into their Self-Service account and selecting the "Resign" link under the Registration heading. Not renewing is not the same as resigning and failure to inform the College of your resignation will result in the suspension of your Certificate of Registration.

If you fail to renew or resign, your Certificate of Registration will be **suspended** effective **February 9, 2021**. Suspensions are recorded permanently on the Public Register and this information will be published in *Milestones*. There is a \$500 fee to reinstate a suspended Certificate of Registration, in addition to any outstanding registration fees.

Forgotten passwords can be reset by using the *Forgotten Password* button on the Self-Service login page. Follow the prompts to restore your access. The College is not able to give out passwords over the telephone.

If you did not receive an email prompting you to renew, it is likely because the email we have on file for you is incorrect. Log in to your account on CDHO and correct your contact information using the "Address Information" link available in your menu. Remember, it is your responsibility to keep all of your information current. Registrants are required to update their contact information on file within 14 days of any changes.

Do not forget, we are here to help. If you have concerns or questions about your particular situation, please feel free to contact us. [CDHO](#)

RETRACTION FROM MILESTONES ISSUE 02 | 2020

The CDHO wishes to retract the comment in the Registrar's Message in the last edition of *Milestones* with respect to a case of COVID-19 linked to a dental office in Alberta.

The CDHO is not aware of any proven transmissions from patients to dental health care providers (DHCP) or from DHCP to patients in a clinical setting in the province of Alberta. On October 8, the CDHO received confirmation from Alberta Health Services that no dental offices have been closed by order of public health officials due to COVID-19 transmission.

We sincerely apologize for any impact the earlier message had on the perception of the safety of receiving dental care during the pandemic. [CDHO](#)

REGISTRATION REGULATION

STAKEHOLDER CONSULTATION

The College's Registration Regulation ensures that registration practices are transparent, objective, impartial, and fair. From time to time, and as necessary, the regulation is amended to reflect changes or improvements in standards, practices and policy, and goes through a rigorous process to make sure it meets the objective of protecting the public. The process includes feedback from stakeholders, such as practitioners and clients; an ongoing review by the Registration Committee; and feedback from the Ministry of Health. These results are used to inform the Committee's recommendations for amendments to the regulation with an eye toward meaningful change.

The last revision of the Registration Regulation was initiated in 2008 with the final version being proclaimed in April 2012. Items that were revised in 2012 focused on language clarity, graduation requirements, and labour mobility. In the fall of 2019, CDHO began the process of updating and clarifying the regulation to reflect current practices and standards.

The Registration Committee met to discuss the proposed Registration Regulation on November 15, 2019; May 4, 2020; and May 21, 2020. The Committee also surveyed registrants and engaged public opinion through the Citizen Advisory Group. The recommended changes are:

- Eliminate the specific titles of accrediting and certification bodies and allow the regulation to refer to the broader governing principles of these groups. A regulation tied to a named organization could potentially tie the hands of the Registration Committee. An organization's mandate and/or processes can evolve and may no longer be consistent with the needs of the College. Removing such references enables the Committee to select organizations as approved by the Committee, rather than restricting them to a single named organization;
- Renaming the Inactive Certificate to Non-Practising;
- Removing the Specialty Certificate from the Regulation and making it a standard to holders under the General Certificate: Authorized for Restorative Practice. This brings the current provision in line with the two other authorizations under the General Certificate (Authorized for Prescription, Authorized to Self-Initiate);
- Adding Visiting and Retired Certificates of Registration;
- Updating section 29 to be consistent with the RHPA; and
- Removing gender references.

Before adopting any changes to the regulation, the Registration Committee and the CDHO Council requested that a draft of the proposed amendments to the Registration Regulation be circulated to registrants and other stakeholders. **An email with instructions to review the proposed amendments to the Registration Regulation went out to all registrants and other stakeholders on September 25, 2020.** Council will consider your feedback prior to the March 2021 Council meeting. [CDHO](#)

EXAMINATIONS REGULATION

STAKEHOLDER CONSULTATION

MARY GOW RDH, BHA, MAEd
Practice Advisor

The Examinations Committee is responsible for overseeing the College-administered written and clinical entry-to-practice examinations; ensuring that the examinations are fair and consistent and that they assess agreed-upon standards of knowledge, skills and competencies; ensuring that examination appeals are handled in a timely manner; and ensuring that appeal policies and procedures are transparent, fair and consistently applied. The Committee is also responsible for making recommendations to Council regarding the written or clinical examinations and the Examinations Regulation. All College-administered examinations are legislated through the Examinations Regulation.

On November 29, 2019, the Examinations Committee met to review the Regulation. In the current **written** examination for entry to practice administered by the National Dental Hygiene Certification Board (NDHCB), the maximum number of times a candidate can attempt the exam is three (3). This is consistent across all provinces. In the current **clinical** examination for entry to practice administered by the regulators in each province, the maximum number of attempts is three (3) except for Ontario where our regulation currently permits candidates four (4) attempts.

Currently, each iteration of the clinical exam (CPEDH) gives equitable treatment to all candidates regardless of jurisdiction. All candidates are provided with the same opportunity to prepare and access information about the exam. A fair and standardized testing process gives each candidate an equal opportunity to demonstrate competence; however, this equality is negated by having different number of attempts between provinces.

The Committee put forward a recommendation to Council to seek revocation of the Examinations Regulation and to move the applicable sections into a policy. Following consultation with various stakeholders, it was suggested that there was no barrier to revoking the regulation and addressing the content in policy.

The CDHO Council will consider seeking the proposed revocation of the Examinations Regulation at the March 2021 Council meeting. Before doing so, the Examinations Committee and the CDHO Council have asked that the proposed changes to the Examinations Regulation be circulated to registrants and other stakeholders. **An email with instructions on how to review the proposed revocation of the Examinations Regulation went out to all registrants and other stakeholders on September 25, 2020.** Your feedback is important and will be considered prior to the March 2021 Council meeting. [CDHO](#)

UPDATE ON THE 2020 QUALITY ASSURANCE ASSESSMENTS

TERRI-LYNN MACARTNEY BA (HONS)
Manager, Quality Assurance Program

In 2019, notice was sent to 2,474 registered dental hygienists in the province requesting submission of their QA records for assessment due by January 31, 2020. Of these, 2,453 were selected because their number ended in a “0” or “1” (Regular Selection) and 21 were selected because they did not complete the mandatory 2019 Self-Assessment (Self-Assessment Selection).

Of the 2,474 records requested (as of September 23, 2020):

	Number of Registrants from Regular Selection	Number of Registrants from Self-Assessment Selection	Total
Met the assessment guidelines with initial submission	1,485	4	1,489
Assessed with deficiencies but met the assessment guidelines with an additional submission and/or remediation	451	3	454
Still in assessment phase: On-site practice reviews	108	1	109
Still in progress or in remediation	234	6	240
Resigned	161	5	166
Other: includes registrants currently suspended, revoked, referred to ICRC, currently under investigation, deferred to another assessment period, or deceased	14	2	16
Total			2,474

REMINDER: MANDATORY 2021 SELF-ASSESSMENT

The 2021 Self-Assessment Tool will be available in your SMILE Portal starting in mid-November and is due by **January 31, 2021**. As a reminder, the Self-Assessment is mandatory for **all** registrants, regardless of registration status or employment situation — this includes Active and Inactive registrants, whether you are working in dental hygiene or not, and those living outside of Ontario. If you are registered, you need to complete the annual Self-Assessment.

The 2021 Self-Assessment can be accessed in the SMILE Portal by choosing “**2021**” from the “Select Year to View” dropdown menu on the dashboard. You will need to complete Step One first by verifying your employment status and practice address(es) before you can move on to access the Self-Assessment in Step Two. In the table that appears in Step Two, click on the “#1: General” link to open the Self-Assessment. The word “General” here does not refer to the general registration category or a practising setting type, but to the general Standards of Practice relevant to all dental hygienists. Educators are required to complete an additional Self-Assessment that will appear as “#2: Educator”, which is based on the Standards of Practice for Dental Hygiene Educators.

Year	Standard of Practice Type
2021	#1:General
2021	#2:Educator

The General Self-Assessment contains 109 questions and the additional Self-Assessment for Educators contains 32 questions. The Self-Assessment should take approximately 15–20 minutes to complete. However, if you would like to save your work and return to complete the Self-Assessment at a later date or time, you can click “Save and Continue Working” and exit the SMILE Portal at any time. Once ALL of the questions are answered and you are satisfied with your work, you will need to click “I’m All Done” at the bottom of the page. This will complete your Self-Assessment and submit the completion status to CDHO. You should see a green checkmark next to Step Two and your dashboard will reflect completion of your Self-Assessment.

Select Year To View:

Self-Assessment Year: 2021
 Status: COMPLETE
 Self-Assessment Due:
 Jan. 31, 2021

WHAT HAPPENS WHEN A REGISTRANT DOES NOT COMPLETE THE SELF-ASSESSMENT?

The Self-Assessment is how we monitor whether registrants are participating in the Quality Assurance program annually, as required under the *Regulated Health Professions Act, 1991*. Failure to complete the annual Self-Assessment does have serious consequences. Per the Quality Assurance Committee's policy, any registrant who fails to complete the mandatory Self-Assessment by the January 31st deadline is added to the following year's QA selection and must submit their QA records for audit.

Depending on individual circumstances, some registrants in the past have also been subject to a \$50 fee for failing to respond to the College (per CDHO Bylaw No. 5). Failure to pay this prescribed fee can and has resulted in the suspension of some registrants for non-payment of fees. The fee to later reinstate a suspended certificate of registration is \$500. In other cases, registrants have been referred to the Inquiries, Complaints and Reports Committee for professional misconduct, as it is considered professional misconduct to fail to respond to a request from the College.

ARE YOU SUBMITTING YOUR QA RECORDS IN 2021?

For registrants who were selected to submit for the upcoming audit — either because your registration number ends in a “5” or a “7”, or because you otherwise received notice from the College that you would need to submit — your Quality Assurance records must be submitted via the SMILE Portal by **January 31, 2021**. The SMILE Portal will allow you to submit your records for assessment beginning on January 1, 2021. You need to have a green checkmark next to each of the steps in your dashboard, then you will be asked to read and check off a declaration before you are able to finalize your submission. The College will not receive your records until the declaration has been agreed to and your dashboard indicates that you have submitted everything. Please note, for those of you who complete the QA Test before the end of the year, you will still need to return to your SMILE Portal and finalize your submission in January.

ARE YOU SELECTED TO SUBMIT YOUR QA RECORDS IN 2022?

As we continue with the 5-year selection cycle, registrants whose registration number ends in either a “4” or a “9” will be required to participate in the 2022 QA audit. Your Quality Assurance records will be due by January 31, 2022. More information regarding the 2022 selection will be communicated in the College's E-Brief this coming January. By the end of January, your dashboard in the SMILE Portal will also indicate “QA Records Due: Jan. 31, 2022” if you have been selected. If you want to confirm whether you will need to submit your QA records in 2022, you can check your SMILE Portal or contact the College **after February 1, 2021**. Registrants who registered on or after July 1, 2019, will not be included in this selection cycle. **CDHO**

UPDATE ON THE CANADIAN PERFORMANCE EXAM IN DENTAL HYGIENE (CPEDH)

MARY GOW RDH, BHA, MAEd
Practice Advisor

With the declaration of state of emergency in Ontario due to COVID-19, the CDHO administrative plan to administer the CPEDH in the fall of 2020 was cancelled. We acknowledge that this was disappointing for you, as you rely on the exam to obtain registration and licences to practise dental hygiene. The administration of exam is dependent on community partners within Ontario and Canada. Two of the main partners are the Standardized Patient Program that provides clients for the exam and the school that provides the clinical setting for the exam. Both of these organizations were closed during the lockdown and have recently resumed operations. The CDHO is monitoring the COVID-19 pandemic closely and is planning to administer the CPEDH in February of 2021.

Please check the website regularly for updates, as applicants will be informed of the situation on the CDHO website: <https://www.cdho.org/become-a-dental-hygienist/examinations>

Thank you for your understanding and patience. Stay safe, and if you have any questions or concerns, please contact Mary Gow at 416-961-6234 ext. 238 or email at exams@cdho.org. **CDHO**



TESTIMONIALS, ARE THEY OKAY?

ROBERT FARINACCIA RDH, BSc
Case Manager, Complaints and Investigations

"My dental hygienist Mary is so gentle that I never feel any pain during my cleaning. I would highly recommend her services to anyone."

We have all seen similar posts, referred to as testimonials, on various social media platforms and websites. Receiving positive feedback is always gratifying to a health care provider, however, is it okay to advertise and share the positive comments received in hopes of attracting potential clients?

A testimonial can be defined as an advertised formal statement, which is solicited, either directly or indirectly, testifying to someone's character and qualifications. In advertising, many businesses use client testimonials to share client experience, inspire new potential clients, and increase sales. Testimonials can be effective as promotional tools but clients need to be cautious about how much stock to put in a testimonial. Have you ever seen a business voluntarily advertise, on its respective website or in a television or radio commercial that it produced, testimonials from clients indicating that, "The customer service was horrible", or, "The product I purchased broke after a couple of days"? Chances are that a company will choose to only use testimonials that it feels will help its bottom line and will refuse to post unfavourable testimonials. By doing so, is the company being objective? Can we be certain that the testimonials posted are reliable?

WHY TESTIMONIALS CAN BE PROBLEMATIC

Advertised testimonials cannot be verified and for this reason may be considered subjective, biased, false, misleading, and are prohibited by many regulated health professions. In fact, the first section of the Advertising Regulation of the *Dental Hygiene Act, 1991* ("Advertising Regulation"), specifically states that, "An advertisement with respect to a member's practice must not contain, ... a

testimonial by a patient or former patient or by a friend or relative of a patient or former patient." Advertising in health care differs from advertising a product or a business, since a dental hygienist's interaction with each client is unique and each situation will be different.

Dental hygienists create treatment plans based on their clients' individual needs, not on the experiences, personal feelings or opinion of others. Marketing companies hired by dental hygienists commonly recommend the use of testimonials; however, they are not always aware of the Advertising Regulation. The Advertising Regulation does not allow for the use of testimonials regarding a dental hygienist or her/his practice on the dental hygienist's respective website, social media, or on any other person's social media. Dental hygienists are responsible for informing the hired marketing company of the College's regulation.

THIRD-PARTY WEBSITES

There are websites that currently exist which allow clients to post ratings, reviews, and feedback regarding a particular health care provider, practice or clinic. Asking clients to post reviews or ratings on these third-party websites, with or without incentives, is considered soliciting testimonials and is **unacceptable**. The College realizes that there are some websites where dental hygienists may not have control over what content is being posted (i.e., if a client provides a review or rating on a third-party site). The College has no jurisdiction over third-party websites and does not expect dental hygienists to monitor social media, which is in the public domain. However, responding to posts on these types of websites by replying to the comments, reviews or ratings is considered advertising and the contents of a dental hygienist's responses are subject to the Advertising Regulation and jurisdiction.

All dental hygienists must ensure that any advertised information or the medium used to advertise her/his dental hygiene practice or services are not contrary to the Advertising Regulation. Dental hygienists must take reasonable measures to have testimonials, ratings or reviews removed if they have some form of control over the medium in which it is advertised. When a dental hygienist is not the business owner or the party responsible for publishing the final advertisement (e.g., a dental hygienist employed in a dental office), she/he is still accountable to the College for ensuring that an advertisement relating to, or directed at the dental hygiene services available from the business is appropriate and not contrary to the Advertising Regulation. Dental hygienists are strongly encouraged to contact a College Practice Advisor to address any concerns respecting testimonials or advertising in general. **CDHO**



IMPORTANT ANNOUNCEMENT



TO REGISTRANTS REGARDING THE SPOUSAL EXCEPTION REGULATION

In 2015, the CDHO submitted a Spousal Exception Regulation to the government which would permit dental hygienists to treat their spouses without it constituting sexual abuse as long as the dental hygienist was not engaged in the practice of the profession when the sexual conduct occurred. The regulation was passed by the Ontario government on **October 8, 2020**.

The definition of a “spouse” for the purposes of this regulation is very narrowly defined in the *Health Professions Procedural Code of the Regulated Health Professions Act, 1991* (RHPA), and includes **only**

- (a) a person who is the member’s spouse as defined in section 1 of the *Family Law Act* (i.e., a person to whom the member is married), or
- (b) a person who has lived with the member in a conjugal relationship outside of marriage continuously for a period of not less than three years.

The passing of this regulation into law means that dental hygienists are now permitted to treat their spouses but only

where the member’s spouse actually meets the statutory definition of “spouse” (i.e., is a person to whom the member is married or with whom the member has been living in a conjugal relationship continuously for at least three years) and where the sexual relationship is kept entirely out of the office setting. While treating a spouse, the dental hygienist must follow all of the professional formalities and maintain the professional distance that the dental hygienist would for any other client. Similarly, when the dental hygienist is out of the office (e.g. at home), the professional relationship must not be allowed to intrude on the personal relationship.

Treating a sexual partner who does not meet the definition of a spouse under the RHPA will continue to be considered sexual abuse.

For further information or if you have any questions, please call the CDHO and speak to one of our practice advisors. You can reach us at advice@cdho.org, or you can call us at **416-961-6234** (outside Toronto: **1-800-268-2346**), **Kyle Fraser** at ext. 226 or **Mary Gow** at ext. 238.



COVID-19 AND INFECTION PREVENTION AND CONTROL

YOUR QUESTIONS ANSWERED

ROULA ANASTASOPOULOS RDH, BEd
Investigator

COVID-19 has created many challenges within our personal and professional lives. Now that dental and dental hygiene practices have reopened, dental hygienists have been trying to navigate the critical changes to Infection Prevention and Control (IPAC) protocols required to protect staff and clients. The College of Dental Hygienists of Ontario (CDHO) has been inundated with inquiries; here are some of the most common questions we have received.

If there is a shortage of personal protective equipment during a pandemic, can the use of N95 respirators/masks be extended?

During a pandemic such as COVID-19, increased demands for personal protective equipment (PPE) may result in supply shortages as the demand is greater than the availability in the supply chain.

To mitigate shortages in the supply chain and maintain the health and safety of clinicians and the public, the following guidance is being provided on the extended use (use on more than one client) of N95 respirators/masks or the equivalent, as approved by Health Canada.

Dental hygienists wishing to extend the use of N95 respirators/masks when providing aerosol-generating dental procedures (AGDP) must strictly adhere to the following guidance when wearing the same respirator/mask to provide treatment to more than one client:

- A full coverage face shield must be worn over the N95 respirator/mask when any aerosol-generating dental procedure is performed.
- The N95 respirator/mask, protected with a face shield can be worn for prolonged periods, for multiple clients as long as the wearer does not touch or adjust the respirator/mask.
- The N95 respirator/mask must be fit-tested and seal-checked.
- The N95 respirator/mask must be removed and disposed of once it has been touched.
- Face shields must be used in accordance with manufacturer's instructions. If single-use, they should be changed for each new client. If the manufacturer permits multi-use, follow the manufacturer's instructions for cleaning and disinfection between clients. Take care not to touch the N95 when donning and doffing the face shield.

Extended use of N95 respirators/masks and face shields is inappropriate where a person is known or suspected of having COVID-19.

N95 respirators/masks are difficult to obtain during the pandemic, are there any suitable alternatives to using an N95 respirator/mask for aerosol-generating dental procedures?

An acceptable alternative to an N95 respirator/mask must be approved by Health Canada and be fit tested to ensure an effective seal at all times. You should contact Health Canada directly to see what, if any, masks have been approved as an alternative to N95 respirators/masks for non-essential services such as dental hygiene.

Is it an acceptable alternative to wear a level 3 mask over an N95 respirator/mask in order to extend the life of the N95 respirator/mask?

There are no recommendations and/or evidence for layering a surgical/procedure mask over an N95 respirator to extend the use or allow for the reuse of an N95 respirator. Dental hygienists wishing to extend the use of N95 respirators/masks when providing aerosol-generating dental procedures must strictly adhere to the *CDHO Guidance on the Extended Use of N95 Respirators/Masks During a Supply Shortage*¹.

What type of masks are suitable alternatives to an N95 respirator/mask?

The CDHO cannot approve or endorse any specific N95 respirator/mask alternatives and/or equivalents. When selecting an appropriate alternative/equivalent to an N95 respirator/mask, the following must be considered:

- The mask must be approved as an N95 alternative/equivalent by Health Canada; and
- The mask must be a single-use mask or have validated sterilization manufacturers instructions.

Which procedures are considered aerosol-generating dental procedures?

The following are considered aerosol-generating dental procedures:

- Any procedure which requires the use of the air/water syringe in any capacity (i.e., drying teeth, rinsing teeth)
- Use of ultrasonic or powered scalers
- Use of high- or slow-speed handpieces
- Air polishing
- Use of the ultrasonic in the reprocessing area

There are also some procedures that may create spray or spatter, but these are not considered aerosol-generating dental procedures. The following procedures are considered procedures that may create spray or spatter:

- Procedures which may induce coughing (i.e., radiograph taking, impression taking)
- Client self-rinsing

Here is a link you may find helpful regarding coughing and sneezes:

<https://www.publichealthontario.ca/-/media/documents/ncov/ipac/report-covid-19-aerosol-generation-coughs-sneezes.pdf?la=en>

Does a dental hygienist only have to perform hand scaling if they wish to return to work?

The CDHO guidance asks that dental hygienists limit/avoid aerosol-generating dental procedures by utilizing appropriate procedures with the least likelihood of producing aerosols. Dental hygienists are required to use their professional judgment to determine if this is possible on a case-by-case basis.

If working in an orthodontic office, does a new isolation gown need to be worn for each client if the dental hygienist is only doing an intra-oral assessment?

Currently, the CDHO guidance is that all procedures require an isolation gown regardless of practice setting.

If non-aerosol generating dental procedures are being performed, is there a minimum fallow time required after dismissing the client before the operatory can be cleaned and disinfected?

According to Public Health Ontario, there is no fallow time required for non-aerosol-generating dental procedures.

What is the fallow time requirement for aerosol-generating dental procedures?

The fallow time required for aerosol-generating dental procedures is 15–30 minutes as indicated in Public Health Ontario guidance, *COVID-19 in Dental Settings*².

Once dental hygiene services are completed (aerosol- and/or non-aerosol-generating dental procedures) should instruments be left in the operatory during the fallow period?

The dental hygiene instruments do not need to remain in the operatory during any fallow period. The dental hygienist can take the instruments to the sterilization area and begin instrument reprocessing using a puncture-resistant and sealed container as per CDHO IPAC guidelines.

If members of the same household come for consecutive dental hygiene appointments, can the fallow time be eliminated?

Fallow time should not be eliminated or modified if members of the same household are scheduled for consecutive dental hygiene appointments.

Without allowing for a fallow time between aerosol-generating dental procedures of potentially infectious (asymptomatic or pre-symptomatic) family members, the concentration of the COVID-19 virus in the air could increase if the preceding family member is infected, especially:

- in a poorly ventilated space; and
- as the number of infected family members undergoing aerosol-generating dental procedures increases.

In such a scenario, the lack of the fallow period following the aerosol-generating dental procedure may not allow for adequate clearance of the virus. This may result in the next client being exposed to COVID-19.

Although household members may already have prolonged, close, unprotected contact, exposure to mechanically induced aerosols (e.g., during a fallow period) may pose an additional risk for viral transmission.

What is the acceptable method of laundering reusable gowns?

The *CDHO Guidance on Isolation Gowns*³ lists the laundering requirements as follows:

- A dedicated laundering space, physically separate from other areas of the clinic and or laundering facility.
- Used gowns must be stored and labeled in closed laundry containers lined with a barrier (e.g. garbage bag).
- Dedicated laundering space must contain a sorting area for soiled items that is kept under negative pressure.
- Use hot water and an appropriate detergent. If the items are heavily soiled, a disinfectant (e.g. chlorine bleach) may be added.

It may be challenging for dental settings to comply with all of these requirements, therefore, the use of a third-party laundering service is another option. Household laundry equipment and laundromats would not meet the requirements for laundering of reusable gowns.

Is it appropriate to add a COVID-19 surcharge to each client's billing to cover the expense of PPE?

The CDHO cannot provide a response with respect to billing of the Ontario Dental Association (ODA) or Ontario Dental Hygienists' Association (ODHA) fee guides because it is not the author of these documents. The ODA and ODHA are the ultimate authority of their respective fee guides and any questions related to adding a COVID-19 surcharge should be directed to the ODA Practice Advisory Services Department at 416-922-3900 and/or the ODHA at 905-681-8883.

Please keep in mind, if you are an employee of a dentist and use the ODA fee guide, then you must use the ODA fee guide exclusively, even when the dentist is not in the office.

How many clients are allowed in the dental office at the same time?

When scheduling clients, you need to ensure that physical distancing can occur. You and the dentists can have clients in the facility at the same time, however, you may want to consider staggering start and end times of appointments so that clients are able to physically distance from each other upon arrival and dismissal.

Can a dental hygienist work in more than one practice location?

As long as the dental hygienist is following the *CDHO IPAC guidelines*⁴ and *CDHO Guidance on Returning to Dental Hygiene Practice*⁵, there is no concern with them working in multiple locations.

Registrants with any additional questions should contact the Practice Advisors, Mary Gow at mgow@cdho.org or at ext. 238, and Kyle Fraser at kfraser@cdho.org or at ext. 226.

RESOURCES

- 1 CDHO Guidance on the Extended Use of N95 Respirators/ Masks During a Supply Shortage: <https://www.cdho.org/docs/default-source/pdfs/reference/guidelines/gui-extended-use-n95-masks.pdf>
- 2 COVID-19 in Dental Settings: <https://www.publichealthontario.ca/-/media/documents/ncov/ipac/2020/07/covid-19-dental-care-settings.pdf?la=en>
- 3 CDHO Guidance on Isolation Gowns: <https://www.cdho.org/docs/default-source/pdfs/reference/guidelines/guidance-isolation-gowns.pdf>
- 4 CDHO IPAC Guidelines: <https://www.cdho.org/docs/default-source/pdfs/reference/guidelines/cdho-ipac-guidelines.pdf>
- 5 CDHO Guidance on Returning to Dental Hygiene Practice: <https://www.cdho.org/docs/default-source/pdfs/reference/guidelines/gui-returning-to-practice.pdf> **CDHO**

INFORMATION ABOUT RETURNING TO PRACTICE

If you are considering returning to dental hygiene practice and more than three years have elapsed since you last practised, you will be required to take extra steps before you can apply for a General or Specialty Certificate of Registration. There are two options: complete an approved refresher course or successfully pass the Professional Competency Assessment.

For 2020, one refresher course meets the requirements for registration. Facilitated by Evie Jesin, this course will provide current knowledge on practising dental hygiene in Ontario according to the *CDHO Standards of Practice (2012)*. This course also follows current CDHO guidelines, fact sheets and advisories. A course outline is available. If you would like a copy, please feel free to email the registration team at registration@cdho.org.

The other option is the Professional Competency Assessment, which is comprised of a written assessment and a clinical competency evaluation. The written assessment is a two-hour, multiple-choice examination written at the

CDHO office in Toronto that will give you the opportunity to demonstrate that you possess dental hygiene's current knowledge, skills and judgment. The clinical competency evaluation is a one-on-one practical evaluation in which you treat one live client. It allows you the opportunity to demonstrate that you are practising safely and competently, and within the scope of practice of dental hygienists in Ontario. For this evaluation, you will be responsible for obtaining a client that meets the suitability criteria outlined in the CDHO information guide. Preparation is important for these assessments. While you are allowed three attempts at the Written Assessment, you are **only** allowed **one attempt** at the Clinical Competency Evaluation.

The results from the refresher course or Professional Competency Assessment are valid for 18 months. If you wait longer than 18 months to register with a General or Specialty Certificate, you will be required to retake the refresher course or Professional Competency Assessment again. For more information, please contact the registration team at registration@cdho.org. **CDHO**

THE CDHO KNOWLEDGE NETWORK



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

6 NEW FACT SHEETS

- Acute Kidney Failure
- Cannabis
- Glucose-6-Phosphate Dehydrogenase Deficiency (G6PD)
- Huntington Disease
- Juvenile Arthritis
- Vaping

6 UPDATED FACT SHEETS

- Chronic Kidney Disease
- Chronic Obstructive Pulmonary Disease (COPD)

- Cystic Fibrosis
- Dementia
- Dental Abscess
- Hypertension

7 UPDATED ADVISORIES

- Anemia
- Chronic Obstructive Pulmonary Disease (COPD)
- Cystic Fibrosis
- Dementia
- Hypertension
- Juvenile Arthritis
- Kidney Disease and Kidney Failure



CDHO VISITS THE CITIZEN ADVISORY GROUP

The College of Dental Hygienists of Ontario (CDHO) recently asked the Citizen Advisory Group (CAG) for feedback on the Registration Committee’s review of the Registration Regulation. Formed in 2015, the CAG is a partnership of 18 colleges from the health regulatory colleges. Members of the CAG are from across Ontario, and recruited from all walks of life, including clients/patients and caregivers. The CAG provides advice from the clients’/patients’ perspectives on policies, standards of practice and public communications. The Group is an invaluable “voice at the table”.

The Group’s work is guided by the principle of protecting the public. They have worked with colleges to facilitate focus groups, get stakeholder feedback, and provide input into planning, social media, web design, policy, and other areas that impact clients/patients. The CAG provides advice on regulatory changes to ensure that they are in the interest of clients/patients.

CDHO asked the Citizen Advisory Group to review a proposal to change the titles of the Registration Certificates. CDHO asked them to consider the following titles and additions to clarify practice:

- RDH Clinical Practice (replaces General)
- RDH Non-Clinical Practice (new category)
- RDH Temporary (new category)
- RDH Non-Practising (replaces Inactive)
- RDH Authorized for Restorative Practice (replaces Specialty).

The Group had the following comments regarding the changes and additions:

- “RDH Clinical Practice” received Group support
- “RDH Non-Clinical” requires some fine-tuning in wording to make it clear to the public
- “RDH Temporary” was not clear to the Group, and “Visiting” was suggested
- “RDH Non-Practising” was a better description than “Inactive”
- “RDH Authorized for Restorative Practice” was supported.

Although the CAG represents only one voice in our collection of stakeholder information within our review of the Registration Regulation, the comments received were invaluable and helped shape the proposed revision. [CDHO](#)



THE CDHO KNOWLEDGE NETWORK:

A TOOL FOR POINT-OF-CARE DECISIONS

KYLE FRASER RDH, BComm, BEd, MEd
Practice Advisor

One might say that a hammer may be one of a professional carpenter's best tools. Similarly, the CDHO's Knowledge Network may be one of the best tools for point-of-care decisions in a dental hygienist's everyday practice.

The Knowledge Network assists registrants in exercising their professional judgment in providing care to clients with medical conditions that need to be considered before initiating dental hygiene care. It contains many advisories and fact sheets pertaining to numerous medical conditions that may present within dental hygienists' clients. Dental hygienists can use these advisories and fact sheets to help guide them in their everyday practice.

Introduced in 2009, the Knowledge Network contained only 23 advisories. It has grown substantially since that time. In 2013, fact sheets were added in addition to the advisories. To date, the Knowledge Network has 61 advisories and 125 fact sheets. The advisories provide current evidence-based medical research to dental hygienists in a well-organized and effective format so they can apply relevant medical knowledge to client care. The fact sheets serve more as a quick reference and provide less detail than the advisories, making them a "quick read" for dental hygienists and their clients who are collaborating on whether:

- a medical consultation is advised;
- medical clearance is required;
- antibiotic prophylaxis is advised; and
- postponing treatment is advised.

The fact sheets will also provide information on the signs and symptoms, oral manifestations and oral management implications associated with a particular condition. Both the

advisories and fact sheets can be accessed by visiting the Knowledge Network webpage on the CDHO website.

The CDHO Knowledge Network provides a forum for interprofessional collaboration. It has been created and is maintained by the College with the help of medical expertise. It is used by other health care professionals, as well as dental hygienists who often consult with each other in matters concerning oral health care and clients.

Although the Knowledge Network equips dental hygienists with a very useful and up-to-date tool for point-of-care decisions in everyday practice, it also provides public assurance that dental hygienists are able to take into account all relevant medical knowledge and integrate it into client care.

Some of the new and updated advisories and fact sheets in 2020 include:

ADVISORIES:

- Anemia
- Chronic Obstructive Pulmonary Disease (COPD)
- Cystic Fibrosis
- Dementia
- Disorders of the Pituitary Gland
- Epilepsy
- Gastrointestinal Tract Tumours
- Hypertension
- Immunosuppression
- Irritable Bowel Syndrome
- Juvenile Arthritis
- Kidney Disease/Failure
- Lupus

- Menopause
- Multiple Sclerosis
- Nutritional Disorders
- Oral Cancer
- Pregnancy
- Sickle Cell Disease
- Sjögren Syndrome
- Tuberculosis
- Viral Hepatitis

FACT SHEETS:

- Acute Kidney Failure **NEW**
- Cannabis **NEW**
- Chlamydia
- Chronic Kidney Disease
- Colorectal Cancer
- Chronic Obstructive Pulmonary Disease (COPD)
- Cystic Fibrosis
- Dementia

- Dental Abscess
- Epilepsy
- Fifth Disease
- Glucose-6-Phosphate Dehydrogenase Deficiency (G6PD) **NEW**
- Gonorrhea
- Head Lice
- Hepatitis A
- Hepatitis B
- Hepatitis C
- Hereditary Hemorrhagic Telangiectasia
- Herpes Simplex
- Herpes Zoster
- Human Papilloma Virus
- Huntington Disease **NEW**
- Hypertension
- Impetigo
- Influenza
- Juvenile Arthritis **NEW**

- Lupus
- Lyme Disease
- Molluscum Contagiosum
- Mononucleosis
- MRSA
- Multiple Sclerosis
- Mumps
- Oral Cancer
- Oral Candidiasis
- Oral Piercing
- Pregnancy
- Rubella
- Scabies
- Sickle Cell Disease
- Sjögren Syndrome
- Strep Throat
- Syphilis
- Thalassemia
- Tuberculosis
- Vaping **NEW**
- Xerostomia **CDHO**

CPR REMINDER

TERRI-LYNN MACARTNEY BA (HONS)

Manager, Quality Assurance Program

As a reminder, per the *Guidelines for Continuing Competency*, all CPR courses must include a hands-on component. A blended delivery method would also be suitable, where the theory may be completed online in advance, as long as it also includes an in-person component. Online-only courses are not acceptable, even while CPR courses are difficult to find or attend right now.

If you are having issues re-certifying at this time, please consider:

- Looking for alternative providers that may be set up to conduct courses with physical distancing measures in place; or
- Attending a course on your own rather than trying to bring a provider into the practice or doing it as a group.

Your CPR certification is considered “current” if the expiry date on the card has not yet passed. If the card includes only a date of issue and no expiry date, it is generally valid for a period of one year. Check with your course provider for their validity period.

Please be advised that CDHO does not set CPR requirements based on the name or level of certification. Rather, when you are selecting a CPR course, you should ensure that it includes all of the following elements:

- training in cardiopulmonary resuscitation (CPR) at the basic support level, including one-rescuer and two-rescuer CPR for adults, children, and infants;
- the relief of foreign body airway obstructions for adults, children, and infants;
- the use of an automatic external defibrillator (AED); and
- the use of ambu-bags (bag-valve-mask, or BVM).

If you are in clinical practice and you are selected to submit your QA records, you may be asked to provide documentation to verify that your CPR certification meets the requirements outlined above. **CDHO**

SEXUAL ABUSE AND THE DENTAL HYGIENIST

THE College of Dental Hygienists of Ontario (CDHO) is committed to providing dental hygienists with information and resources to assist them in treating their clients responsibly, and consistent with the *Regulated Health Professions Act, 1991* (RHPA), in a manner that reflects the profession's commitment to respecting the personal dignity of every individual who is entrusted to their care. The CDHO therefore has a zero-tolerance policy for sexual abuse of clients.

Sexual relations between health care practitioners and clients (patients) has long been considered to be unethical. Under the RHPA, any form of sexual relations between a regulated health professional and a client is considered to be sexual abuse.

KYLE FRASER RDH, BComm, BEd, MEd
Practice Advisor

In 2015, the CDHO submitted a Spousal Exception Regulation to the government which would permit dental hygienists to treat their spouses without it constituting sexual abuse as long as the dental hygienist was not engaged in the practice of the profession when the sexual conduct occurred. The regulation was passed by the Ontario government on **October 8, 2020**.

The definition of a "spouse" for the purposes of this regulation is very narrowly defined in the *Health Professions Procedural Code of the Regulated Health Professions Act, 1991* (RHPA), and includes **only**

- (a) a person who is the member's spouse as defined in section 1 of the *Family Law Act* (i.e., a person to whom the member is married), or
- (b) a person who has lived with the member in a conjugal relationship outside of marriage continuously for a period of not less than three years.

The passing of this regulation into law means that dental hygienists are now permitted to treat their spouses but only where the member's spouse actually meets the statutory definition of "spouse" (i.e., is a person to whom the member is married or with whom the member has been living in a conjugal relationship continuously for at least three years) and where the sexual relationship is kept entirely out of the office setting.

Treating a sexual partner who does not meet the definition of a spouse under the RHPA will continue to be considered sexual abuse.

With that being said, under the RHPA, it is an act of professional misconduct for a member of any regulated health profession to sexually abuse a client. The Act requires the reporting of sexual abuse by health professionals and provides for funding for therapy and counselling for clients who have been sexually abused by registrants.

SEXUAL ABUSE DEFINED

In the regulated health profession of dental hygiene according to the RHPA, "sexual abuse" by a dental hygienist would be defined as,

- sexual intercourse or other forms of physical sexual relations between the dental hygienist and the client;
- touching, of a sexual nature, of the client by the dental hygienist; or
- behaviour or remarks of a sexual nature by the dental hygienist towards the client.

Note: Touching, behaviour or remarks of a clinical nature appropriate to the service provided do not constitute sexual abuse.

DATING CLIENTS

If you are considering dating a client, you must first terminate the professional relationship and clearly document this termination in the client's chart. Arrangements should be made for another dental hygienist to take over the client's

treatment. Under the RHPA with the passing of Bill 187, **it is now prohibited to have any sexual interaction between a Member and a former client for a minimum period of one year after the end of the patient-provider relationship.** This will be considered the minimum amount of time required before contemplating dating a client.

If you terminate a dental hygienist/client relationship in order to date a client, it would be wise to never treat that client again, even in the event that your intimate relationship with that former client does not flourish or ceases.

PENALTIES FOR SEXUAL ABUSE

The RHPA defines the penalties for a registrant who has been found guilty of committing an act of professional misconduct by sexually abusing a client (section 51(5)). A Panel of the College's Discipline Committee must:

1. reprimand the registrant;
2. revoke the registrant's certificate of registration if the sexual abuse consisted of, or included, any of the following:
 - i) sexual intercourse
 - ii) genital to genital, genital to anal, oral to genital, or oral to anal contact
 - iii) masturbation of the registrant by, or in the presence of, the client
 - iv) masturbation of the client by the registrant
 - v) encouragement of the client by the registrant to masturbate in the presence of the registrant
 - vi) touching of a sexual nature including touching of a client's genitals, anus, breasts or buttocks.

In addition to the above penalties, a panel of the Discipline Committee may:

- require the registrant to pay a fine of not more than \$35,000 to the Minister of Finance of Ontario;
- require the registrant to pay all or part of the College's legal costs and expenses, the College's costs and expenses incurred in investigating the matter, and the College's costs and expenses incurred in conducting the hearing;
- require the registrant to reimburse the College for funding provided under the program for therapy and counselling for clients.

Further, an application for reinstatement by a person whose certificate of registration was revoked for sexual abuse of a client cannot be made until five years after the revocation. A finding of sexual abuse and a summary of discipline decisions are posted and remain on the CDHO website.

MANDATORY REPORTING

According to the RHPA, if a dental hygienist has obtained information while practising their profession that a regulated health care professional of the same or different

profession has sexually abused a client, it is mandatory that the dental hygienist file a 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 made 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. Failure by one regulated member to report the unprofessional conduct of another regulated member is considered a failure to meet their ethical responsibilities.

A mandatory report 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
- the name of the client, only with his/her consent. If the client does not consent, you cannot include the client's name.

Failure to report sexual abuse of clients is against the law and any regulated health care professional who fails to make a mandatory report can be penalized. Penalties include a fine of up to \$50,000 for a first offence by an individual and a fine of up to \$200,000 for corporations. The RHPA provides protection to a person who files a report in good faith, from actions or other proceedings being taken against that person.

FUNDING FOR THERAPY AND COUNSELLING

The College provides for funding for therapy and counselling to clients who have been sexually abused by registrants. **As per Bill 87, funding is now available as soon as there is an allegation of sexual abuse.**

The fund, originally established in 2006, is in place to reimburse potential applicants who have been sexually abused by a dental hygienist with the necessary funds for therapy and counselling. While the maximum amount may vary depending on specific circumstances, it is approximately \$16,000 (which is equivalent to 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist).

A person is eligible for funding under the program if:

- (a) there is an allegation that a patient/client was sexually abused by a registrant;
- (b) there is an admission made by a dental hygienist in a statement to the College or in an agreement with the College that they sexually abused the person while the person was a patient/client of the registrant;
- (c) a dental hygienist has been convicted under the Criminal Code (Canada) of sexually assaulting the

person while the person was a patient/client of the dental hygienist and the facts supporting the sexual assault constitute sexual abuse within the meaning of the *Health Professions Procedural Code*;

- (d) there is a statement, contained in the written reasons of a committee of the College given after a hearing, that the person, while a patient/client, was sexually abused by a dental hygienist;
- (e) there is sufficient evidence presented to the Patient Relations Committee to support a reasonable belief that the person, while a patient/client, was sexually abused by a dental hygienist; or
- (f) there is a finding by a panel of the Discipline Committee that the person, while a patient/client, was sexually abused by a dental hygienist.

CDHO PATIENT RELATIONS COMMITTEE

The CDHO Patient Relations Committee endeavours to meet the needs of the public and the profession by providing:

- registrants with an online *Jurisprudence Education Module*, a copy of the *Registrants' Handbook*, guidelines for the *Prevention of Sexual Abuse of Clients*, as well as guidelines for *Professional Boundaries for Dental Hygienists in Ontario*;
- educators with guidelines on *Preventing Sexual Abuse of Clients: Instructor's Guide for Ontario Dental Hygiene Educational Programs*; and

- the College's administration with education on how to communicate with members of the public who have been sexually abused by health professionals.

FINAL NOTE

A registrant cannot rely on colleagues to inform them on what is acceptable or not acceptable within the profession of dental hygiene. A registrant cannot simply say they did not know about the CDHO's sexual abuse policy. It is every registrant's duty to know what is expected of them at all times in terms of their own profession. It is every registrant's responsibility to apply the *CDHO Dental Hygiene Standards of Practice*, *CDHO Code of Ethics*, and CDHO regulations and bylaws to their dental hygiene practice at all times.

The College has created guidelines for dental hygienists aimed at preventing and dealing with sexual abuse including *Prevention of Sexual Abuse of Clients* and *Professional Boundaries for Dental Hygienists in Ontario*, which can be found on the College's website: www.cdho.org.

If you need clarification, or have any questions, please call the CDHO and speak with a practice advisor. You can reach us at advice@cdho.org. Or, you can call us:

Kyle Fraser at ext. 226 or kfraser@cdho.org,
Mary Gow at ext. 238 or mgow@cdho.org. 

2020 TOTAL QUALITY IMPROVEMENT SURVEY

As previously announced, CDHO is conducting a comprehensive survey of dental hygienists across Ontario. Similar surveys were conducted in 1995, 2002, 2008 and 2014. The College has retained a Research Team led by Dr. Carlos Quiñonez, DMD, MSc, PhD, FRCD(C), Associate Professor and Program Director of Dental Public Health at the Faculty of Dentistry, University of Toronto to conduct the survey and analyze the results. Dr. Quiñonez and his team of Violet D'Souza, BDS, MSc, MS, PhD, Kamini Kaura Parbhakar BSc, Dip(DH), RDH, MSc, Julie Farmer BSc, Dip(DH), RDH, MSc and Abdulrahman Ghoneim, BDS, RDH, MSc, FRCD(C) have extensive experience in conducting research.

Thank you to everyone who participated in part one of the TQI Survey, which was available from October 12 through November 3, 2020. Your answers, and those of your fellow dental hygienists, will form the basis for advice and guidelines to the profession and facilitate total quality improvement for the practice of dental hygiene. They will also be used to adjust the College's Quality Assurance Program. Therefore, your participation and cooperation are essential and greatly appreciated. Be assured that the information provided will go directly to the researchers and will be held in strictest confidence. No individual responses will be revealed to any College staff or Council Member. The data will be used for statistical and analytical purposes and presented to the College in aggregate form only. General findings will be published in the CDHO magazine, *Milestones*.

Part two of the survey features questions that focus on COVID-19 and will go out toward the end of November. Invitations to participate are sent by email directly from the survey team. 



CDHO VIDEO RESOURCES

As a part of our public outreach campaign, the CDHO has produced a series of **educational video resources** that are available to you and the public. These resources have been created with the intention of raising awareness and educating the public about a series of topics, such as practising good oral hygiene, public safety, the College's promise to dental hygiene clients, as well as news from the College.

The following are the latest in a series of videos that can be found on either one of the following:

YouTube channel (<https://youtube.com/channel/UCI8ShV6uguWUtFizxN9qycg>)

Video library on our website (<https://cdho.org/for-the-public/media/television-clips>)

WHAT IS THE PUBLIC REGISTER?



The "**Find a Registered Dental Hygienist**" function on the website (also known as the "Public Register") is required by law, and offers profiles of all dental hygienists registered in Ontario. The College has created this video to educate the public on how to use the Public Register, and to introduce a new subscription feature, which will allow members of the public, employers and others to sign up for notifications of status changes on the Public Register.

VAPING



With the rise of recent trends in **vaping**, a number of people are using e-cigarettes, among other vaping devices (e.g. vape pens and advanced personal vaporizers [mods]), as an alleged healthier alternative to smoking. Research on the long-term effects of vaping is still in the early stages, however, this video explains the possible risks and effects associated with certain chemicals and ingredients found in e-cigarettes in relation to health/oral health.

Certain educational resources are also available in **print** or **audio**, and can be found on our website in both French and English. Please visit <http://www.cdho.org/for-the-public/media> to access these resources. **CDHO**

NEW REGISTRANTS

JULY 16, 2020 – OCT. 15, 2020

Aejaz, Mavara	020887
Akerman, Polyanna	020892
Alcozay, Shabnam	020808
Al-Rodhan, Zainab	020788
Amozgar-Shahidi, Nazila	020876
Andrews, Sara	020902
Anggraini, Nana	020793
Armstrong, Sarah	020841
Attique, Hareesa	020781
Awan, Sabar	020806
Bassanello, Emma	020863
Beaulieu, Stéphanie	020795
Beaulieu, Alena	020868
Beaulieu, Brandy	020885
Benny, Angela	020891
Beydoun, Sarah	020774
Beyersbergen, Brooklyn	020840
Binguis, John	020851
Birkett, Karrie	020802
Bond, Kristen	020849
Boyce, Kim	020779
Bretzloff, Laurie	020780
Briscoe, Brittany	020853
Brozny, Joanne	020871
Bullock, Julia	020825
Byle, Halley	020848
Cao, Yi Hui	020898
Chalta, Christine	020770
Chandrakumar, Puwanalogini	020850
Chaudhary, Namita	020890
Conforti, Jessica	020896
Consorti, Sierra	020823
Dalal, Padmini	020842
Daya, Bhageshree	020895
DeCotiis, Stephanie	020897
Dhodi, Manasvi	020768
Dilliraj, Saraswathy	020816
Djibu Kalenga, Amane	020861
Doyle, Sabrina	020859
Duca, Viorica	020812
Duimering, Hannah	020883
ElKhair, Nouar	020782
Ellery, Taylor	020852
Felder, Kristina	020835
Ferreira, Kevin	020791
Fournier, Olivia	020798
Freestone, Mandi	020796
Ganjoo, Gaurav	020855
Giguère, Carl	020771
Gill, Mira	020882
Hall, Marissa	020809
Ham, Kakada	020783
Hariharen, Ramana	020836

Harwadekar, Deepti	020804
Hazeltine, Alissa	020819
Helm, Katrina	020894
Hennessey, Kerry	020773
Hishon, Amanda	020860
Hoeg, Tarah	020790
Jones, Kimberly	020777
Kabir, Nageen	020833
Kamara, Salamatu	020810
Kaneza, Cindy-Claudia	020877
Kaur, Pavitpreet	020813
Khavari, Najibeh	020807
King, Jennifer	020811
Krawec, Melissa	020785
Kutuzova, Elizaveta	020822
Labelle, Emily	020818
Laciste, Christine	020826
Larocque, Valérie	020867

UPDATES TO THE PUBLIC REGISTER

Lay, Kaitlin	020815
Lecompte, Maryse	020872
Lemke, Jessica	020884
Lineham, Hayley	020834
Locke, Veronika	020824
Maderazo St-Laurent, Joy	020786
Mageatsa Dongmo, Claire	020794
Mansour, Tony	020893
Martin, Samantha	020857
Martinez, Yolanda	020799
Masschaele, Rachel	020831
McIndoe, Philip	020801
Mongeon, Vanessa	020874
Motallebi, Nazli	020797
Nguyen, Kerry	020858
Nguyen, Lily	020864
Oliveira, Nicole	020817
Padayattil Sebastian, Reshma	020784
Palmer, Alyssa	020866
Pearcey, Jillian	020899
Plant, Billie-Jean	020862
Poghosyan, Radmila	020847
Polo, Emily	020873

Pond, Ellis	020805
Ramos, Francis	020878
Raxcaco-Menjivar, Michelle	020888
Rayner, Courtney	020870
Richards, Santana	020837
Rowsome, Chloe	020787
Samson, Christien	020869
Sana, Javaria	020838
Sandhu, Selina	020846
Sandhu, Harkiran	020879
Sawarkar, Prajyot	020775
Schottler, Kyra	020772
Schyff, Alicia	020800
Seguin, Melanie	020814
Shah, Keni	020827
Sharpe, Taylor	020856
Sheikhnezami, Arezoo	020832
Sheth, Prarthana	020829
Siddiqui, Samia	020844
Sikoryn, Lalita	020843
Silva, Barbara	020839
Sivanendrarajah, Nyrthyga	020881
Smart, Brittany	020769
Smolarek, Martyna	020889
Soetemans, Natasha	020865
Somani, Aniket	020789
Sonowal, Jahnvi	020845
St-Denis, Samantha	020904
Szeredai, Tunde	020886
Thomas, Jissa	020821
Tough, Hannah	020803
Trask, Alexandra	020778
Uppal, Kamaljeet	020830
Valcu, Ancuta	020903
Van Bommel, Cali	020854
Veigli, Jessica	020875
Vernelli, Sara Ann	020828
White, Tara	020776
Wiens, Alida	020901
Wilcox-Campbell, Kelsey	020820
Wilson, Lyndsi	020900
Yang, Shengnan	020880
Zavala Ortiz, Armando Jr	020792

AUTHORIZED PRESCRIBERS LIST

JULY 16, 2020 – OCT. 15, 2020

Cameron, Rena Raylynn	014740
Halley, Tabatha Christie Ann	017057
Jiang, Min	017335
Li, Lu	019716
Macleod, Amber	011131
Savard, Valerie Elizabeth	011555
Stamatovic, Marina	016415
Teutau, Leah	019373

AUTHORIZED FOR SELF-INITIATION

JULY 16, 2020 – OCT. 15, 2020

Angelone, Angela	007736
Beggs, Nicolena	016829
Birch, Jody	016722
Boissonneault, Stéphanie	018299
Boyce, Courteney	018553
Brand, Wendy Lynn	005591
Brown, Melinda Jane	015148
Cabrera, Olena	017357
Cangianiello, Alicia Rose	015802
Chase, Jennifer	017980
Choi, Jieun	019113
Cifuentes Alvarez, Yanneth Mireya	010550
Cohen, Melanie	018888
Crews, Lindsay Nadine	010308
Cruz, Patricia Ann	012154
De La Rosa, Jennifer	017287
Doucette, Caroline	015338
Dragomir, Viviana	013397
Drouin, Emilie	019431
Dwarka, Vineshri	010447
Fakhouri, Hala	010977
Fredette, Jessica	020154
Galindez, Bethany Joy	019293
Gill, Deepinder	018430
Good, Lindsay Erin	014252
Graham, Sterling MacMillan	010596
Gutierrez Suasnavas, Samantha	018371
Heu, Linda	013320
Hothi, Sundeep Kaur	010951
Husak, Dzana	016431
Hutt, Rachelle	017727
Ingham-Dimitriw, Mary	003708
Johnson, Katherine Elizabeth	016992
Judge, Aneet	017908
Kacmar, Ondrej	019164
Kaliszuk, Ilona	020761
Kalmiakov, Evhenia	018539
Karimi, Dina	019489
Klippenstein, Alannah Joanne	016936
Kristo, Deborah	006425
Kuzik, Jennifer	019902
Landry, Rebecca	017145
Liu, Mengyu	018979
Liu, Yan	018698
MacAdams, Jennifer Anne	006375
MacNamara, Megan Elizabeth	016770
Martino, Rosanna	009781
Maruya-Li, Sean	018227
McCleary, Kelsey	018155
McCubbin, Denise	003570
McDonell, Fiona Beth	011119

Miller, Kaitlyn Marie	015700
Molinari, Monica Laura	012769
Nguyen, Kathy	018935
Norris, Giedre K	009876
Pathak, Sherry	017563
Purba, Harmeet	019132
Rapp, Teresa	006873
Rashid, Lalarukh	016927
Rastogi, Charumita	017925
Robertson, Brooke Elizabeth	008839
Robidoux, Kimberly May	014480
Rodriguez Lugo, Ayme	018304
Serkan, Aida	019937
Silvaggio, Alyssa	019055
St. Pierre, Holly	015710
Theodore, Tracy Ann Nicola	012742
Unsworth, Lisa Anne	008632
Uzoni, Réka Terez	013286
Verreault, Abby-Gail	019477
Villanueva, Rio Rochel	019942
Wu, Lanxiao	019240
Yousufi, Halia	016496
Yumnu, Sabiha	017489
Zandbelt, Shannon	015901
Zhang, Zi Wei	016784

RESIGNATIONS

JULY 16, 2020 – OCT. 15, 2020

Ackerman, Nancy Marie	004935
Ahokas, Julie Lynn	010419
Anderson, Karen	002392
Bedard, Chelsea Tiffany	014133
Bedard-Robitaille, Josee C	004605
Blanchard, B Colleen	003771
Bowman-Coholan, Darlene Joan	003490
Byron, Tanya Irene	004649
Canaris, Selena	019075
Caruana, Giulia	015085
Casey, Angela	004295
Caverhill, Lisa C	002423
Chan, Wendy	017696
Collin-Demers, Talia	018441
Corrigan, Marilyn	001917
Cowley, Lana Joan	020626
Cristello, Dianne Elizabeth	006977
Deckers, Alison	005606
Dros, Kim Marlene	018167
Elliott, Marjon	002607
Ellis, Nuemia	009985
Foshay, Sarah	014061
Gerlock, Lea	004672
Gillis, Brenda	006710
Grenier, Lauri Jane	009804
Hamelin, Shelly Jane E	002057

Haqqi, Zainab	014717
Hartevelde, Donna	002540
Heinbuch, Jill Elizabeth	005201
Junop, Janice Lorraine	003817
Kemp, Tracy Sue	002757
Kerr, Mary	004152
Kim, Jenny Sung-Sook	005996
Long, Lora	004085
Lovell, Bruce Allan	005860
MacDonald, Kathleen Joyce	002726
MacDonald, Patti Anne	004117
MacVane-Moore, Ruth C	003323
Marriott, Veronica	004855
Matusiak, Carol Rachel M	004313
McNeely, Lisa Gail	003037
Melanson, Kelly	002447
Merzanis, Susan Alexandra	004261
Mierins, Karina	000999
Modafferi, Janet Lesley	005478
Murray, Martha	013487
Nicholas, Shelley	003593
Niemi, Joanne Marjatta	003221
Ogaick, Casandra Ann	012137
Orchard, Jeannie Margaret	000774
Pilas, Sally	000815
Power, Susanne Elizabeth	003008
Quesnelle, Leanne Patricia	008567
Richmond, Kayla Deborah	005005
Rideout, Leslie-Ann	001753
Rodgers, Sheila	001852
Scott, Nancy Edith	004338
Shramban, Iris	014113
St-Amour, Vanessa	015845
Taylor, Lisa Ann	002947
Trendle, Patricia Anne	000609
Whibbs, Lori Ann	002816

SUSPENDED/ REVOKED

In accordance with Section 24 of the Health Professions Procedural Code (Schedule 2 of the *Regulated Health Professions Act, 1991*), the following registrants have been suspended or revoked for non-payment of the annual renewal fee. These registrants were forwarded notice of the intention to suspend and provided with two months in which to pay the fee. If a registrant who has been suspended for non-payment does not reinstate her or his certificate of registration, that certificate is deemed to be revoked two years after the failure to pay the annual fee.

**SUSPENDED FOR
NON-PAYMENT OF
FEES**

JULY 16, 2020 – OCT. 15, 2020

Pereira-Purdon, Anna-Maria 007970
Danko, Sviatlana 012020

Leslie, Angela 001916
Pirrera, Alfonza Florence 011048
Assadifar, Mariam 009214

REINSTATED

JULY 16, 2020 – OCT. 15, 2020

Burton, Cynthia Pauline 007631

Gidda, Parmvir 014381
Giokas, Katelyn 014996
Grewal, Kuldeep 012773
Kanash, Manal Jamal 019643
McFadyen, Victoria 015262
Nugent, Jennifer Ann 010922
Rehel, Kayla Susan Arlette 016822
Stout, Courtney 016336

DID YOU KNOW? Respirators with exhaust valves are not intended for health care workers as they do not protect clients from the air exhaled through the vent by the wearer. Respirators with exhaust valves can make the mask more comfortable for the wearer, however, they also allow infectious respiratory droplets to be released outside the respirator. Therefore, the use of respirators with exhaust valves are **NOT** recommended to prevent the spread of COVID-19.

Please refer to the following Health Canada link for more information:
<https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/personal-protective-equipment/medical-masks-respirators/health-professionals.html>

CDHO also has a guidance document for the extended use of N95 respirators:
<https://www.cdho.org/docs/default-source/pdfs/reference/guidelines/gui-extended-use-n95-masks.pdf>

**COVID-19:
COLLEGE OF DENTAL HYGIENISTS
OF ONTARIO (CDHO) GUIDANCE ON
RETURNING TO DENTAL HYGIENE
PRACTICE**

If you're not sure where to find the latest guidelines on returning to dental hygiene practice, you will always find the up-to-date document at <https://www.cdho.org/my-cdho/guidelines/practice> by clicking on **CDHO Guidance on Returning to Dental Hygiene Practice**.

On that same page, you can also find the **Guidance on Isolation Gowns** and **Inclusion of Telehealth documents**.

