

Official Newsletter of the College of Dental Hygienists of Nova Scotia

Volume 53 Issue 3

WINTER 2024



As dental hygienists, one aspect of preparing for a healthcare workday requires a semblance of organizing what will be needed in our day - *what shall we bring to work and what shall we leave at home?* 

Work, as diverse as is our society, requires different preparation and planning, yet there is a commonality; an internal switch of 'being at' or 'doing work' occurs. Whether it is a coffee, meals, snacks, the scrubs we don, we all have some assembly of readying ourselves for our shifts in public healthcare.

An important reflective question I ponder with those in the fields of healthcare: What do we expect of ourselves, and others, with the grief we have become immersed in, or are experiencing ourselves? Do we pack it, or leave it?

The adage that we leave our personal lives at home requires some consideration, as we understand that this simple question involves some deeper reflection. For many of us approaching our workday, we are called upon for holding space for others, as they may share aspects of the complexities of the lives they live, as clients, families, and within communities. As healthcare providers, we too have had impacts of loss that we are working through, but often goes unrecognized. As a professional who has worked in the fields of death, dying and grief for over twenty years, I support the belief that grief is a normal reaction to any type of loss we experience, i.e. divorce, moves, loss of jobs, loss of health, death, and many others. As humans, we face change which involves a grieving process, and yet within that grief, we may find support, or we may be carrying our loss in silence.

Grieving reveals itself in all aspects of our lived experience. As we are integrating and working with grief, we see it emerge within various parts of our lives. Consider this person-centred framework when you meet a patient in your chair, or within yourself.

a) **Physically**, we have one heart and one brain - both of which we require interchangeably for work and home life. These biological organs are necessary to navigate our personal, professional, and private lives. We may notice grief revealing itself in sleep, eating habits, exercise, going to appointments, self-image, and sexuality. This grief work is on a continuum of how we manage, e.g. a desire to sleep a lot or difficulty sleeping.

# the UNISON is the official newsletter of the

College of Dental Hygienists of Nova Scotia

Editor-In-Chief: Kelly Hurlburt Contributing Editor: Rosemary Bourque

#### **CDHNS** Council

Kayla Leary-Pinch - Chair Bethany Boucher - Vice Chair Greg Glynn - Exec./Public Member Elizabeth Mann - Exec./Public Member Sonya Bishop Karen Fletcher Larissa LeBlanc Sydney Nelson Neala Spencer Leora Weatherhead Registrar: Stacy Bryan Deadline for next newsletter submission: March 1, 2025.

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## **AD RATES**

\$45.00
\$75.00
\$140.00
\$250.00

Rates are subject to change.

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We welcome your ideas, articles and letters. Submit to the Editor at *members@cdhns.ca* 

## CDHNS Council Chair's Message Kayla Leary-Pinch



Friends and Colleagues,

Winter is a time for comfort, good food, the crackle of a wood fire and spending time with the people you care about. It's time for home, and the CDHNS has a new location and neighbors (five other Health Regulators) to celebrate with this season at 202-1597 Bedford Highway (the Royal Bank Building). We're excited about the new space, future opportunities for collaboration, and the New Year ahead, which brings the commencement of the Amalgamated Regulator, the Nova Scotia College of Dental Hygiene, Dental Technology and Denturism.

The CDHNS has recently been advised by the Department of Health and Wellness that Regulators in Phase 1 will be migrated under the RHPA, in March 2025. As you will notice, there will be no call for nominations in the newsletter, as there typically would be at this time. As set out in the Regulated Health Professions Act (RHPA), the Initial Board was to be comprised of members from the three existing Regulatory Boards/Councils. In anticipation of the 2025 migration to the RHPA, the Joint Boards developed a voting process that was approved on August 26, 2024. The composition of the Initial Board includes up to six public members and nine registrants, including a minimum of two registrants from each profession. For additional information on the process, and slate of the Initial Board, see page 10 of this newsletter. The Transition Committee and Joint Boards continue to collaborate on the numerous tasks required for the Government mandated amalgamation and I extend my sincere appreciation to all members and staff for their dedication and commitment to this priority. We also appreciate your continued support, as registrants, while we navigate these changes.

You will have seen the <u>communication</u> circulated regarding the Draft Practice Standard for Sexual Misconduct and Sexual Abuse. Under the RHPA, all health regulators are required to adopt this mandatory standard of practice. All registrants and system partners are invited to provide their feedback by **December 20, 2024**. I would encourage you to review this <u>document</u> and provide your feedback by the required deadline to <u>registrar@cdhns.ca</u>, subject line: "Draft Sexual Misconduct Standard." If you have any questions, please do not hesitate to reach out to CDHNS, for more information.

I would like to take this opportunity to express my deepest gratitude to the staff of the joint regulators. Your knowledge, devotion, and unwavering support to the amalgamation, professions and Boards does not go unnoticed. A special note to our Registrar, Stacy Bryan, whose responsibilities have grown immensely but even still, she continues to work tirelessly to ensure daily and future operations are seamless.

As we settle into the final weeks of 2024, take time to reflect on the past,

## In this issue:

From the Desk of the Registrar	. 3
Continuing Competency Event	. 5
Awards	. 5
Dalhousie	. 6
CPR Requirements	. 6

present and all that the future has to offer. I hope you all have a safe and joyous holiday season.

Best regards,

Kayla Seary-Rind

Kayla Leary-Pinch, CDHNS Council Chair

## From the Desk of the Registrar

Stacy Bryan Registrar

This will likely be the last Registrar's Message in the newsletter, prior to our migration to the Regulated Health Professions Act, RHPA. The year 2025 will be another exciting year as we finalize the profession-specific regulations that will complete our migration to the RHPA and become a new regulatory body that represents three oral health professions — dental hygiene, dental technology, and denturism.

We anticipate the migration will be completed in March 2025. At that time, we will become the Nova Scotia Regulator of Dental Hygiene, Dental Technology, and Denturism (NSRDHDTD). I encourage everyone to remain current and up to date on any legislated requirements/ changes. Please continue to respond to communiques and other feedback requests.

Below is the information regarding this year's renewal:

CDHNS Registrants on November 1, 2024	
820	Practising Registrants
0	Provisional Practising Registrants
42	Non-Practising Registrants
862	Total

Below is the information regarding notices of removal from the CDHNS Register and practising and nonpractising licence expiries.

For individuals who wish to obtain a practising licence after the NSRDHDTD is established, who requested removal from the Register, they will be required to meet the registration and licensing criteria set out in the profession-specific regulations to the RHPA, NSRDHDTD bylaws, and any related policies. For those who requested their licences expire, but they remain on the CDHNS Register, they will be required to meet the licensing requirements set out, in accordance with relevant legislation and bylaws. **Please note that some of the registration and licensing requirements with the NSRDHDTD may differ from the CDHNS' current requirements.** 

## Notice of Removal from the CDHNS Register on Request (Individuals held a Practising Licence)

In accordance with the Dental Hygienists Act and Regulations, the following individuals have been approved by the Registrar to be removed from the CDHNS Register, following their submitted request. These individuals held a practising licence with CDHNS until October 31, 2024. These individuals are no longer authorized to practice dental hygiene in the Province of Nova Scotia.

First Name	Last Name
Gwen	Aucoin
Dana	Beram
Michaela	Bungay
Jodie	Cantarelli
Raymond	Cheng
Joanne	Crawford
Glenda	Fralic
Caragh	Gass
Amanda	Irving
Rhonda	MacVicar
Lauren	Smith
Heather	Sutherland
Barbara	Williams
Shelley	Williams

### Notice of Practising Licence Expiry, Registrant Submitted Intention to CDHNS

In accordance with the Dental Hygienists Act and Regulations, the following individuals have notified the CDHNS of their intention to remain on the CDHNS Register, but let their practising licence with CDHNS expire as of November 1, 2024. These individuals held a practising licence with CDHNS until October 31, 2024. These individuals are no longer authorized to practice dental hygiene in the Province of Nova Scotia.

First Name	Last Name
Odette	d'Eon
Rebecca	Dawson
Larissa	Gautreau
Mimi	Gillis
Ruthann	Goodwin
Nicole	Haddad
Kim	Haslam

## From the Desk of the Registrar continued...

#### Continued List

Sukhvir	Kaur
Elizabeth	Kerr
Naz	Khoshgoo
Jessica	Lavoie
Danelle	MacDonald
Sarah	Mershati
Samantha	Moses
Leah	O'Halloran-Perry
Kholud	Saleh
Leah	Sleigh
April	Stewart Joyce
Jeanette	Szmiett
Cayla	Walsh
Kayla	Williamson-Zannie
Allyson	Wood

### Notice of Removal from the CDHNS Register on Request (Individuals held Membership in the Non-Practising Class)

In accordance with the Dental Hygienists Act and Regulations, the following individuals have been approved by the Registrar to be removed from the CDHNS Register following their submitted request. Their names have been removed from the CDHNS Register and membership in the non-practising class expired on October 31, 2024. As a non-practising registrant, these individuals were not, and are not, authorized to practice dental hygiene in the Province of Nova Scotia.

First Name	Last Name
Grace	Cameron
Elizabeth	MacDonald
Zoe	Rolle

#### Notice of Non-Practising Class Expiry, Registrant Submitted Intention to CDHNS

The following individuals notified the CDHNS of their intention to let their CDHNS non-practising membership expire as of November 1, 2024. These individuals remain on the CDHNS Register and are not authorized to practice dental hygiene in the Province of Nova Scotia. As a nonpractising registrant, these individuals were not, and are not, authorized to practice dental hygiene in the Province of Nova Scotia.

First Name	Last Name
Cindy	Clancey
Glenna Lynn	Redding

#### Notice of Non-Practising Class Expiry, Registrant Did Not Submit Intention to CDHNS

The following individual did not notify the CDHNS of their intention to let their CDHNS non-practising membership expire, as of November 1, 2024. This individual remains on the CDHNS Register but is not authorized to practice dental hygiene in the Province of Nova Scotia. As a nonpractising registrant, this individual was not, and is not, authorized to practice dental hygiene in the Province of Nova Scotia. Since this individual did not notify the College of their intention not to renew, if they wish to obtain a practicing or non-practising licence, they will be required to pay reinstatement fees, in addition to the applicable late fee payment, as well as providing proof that they have met all the other requirements.

First Name	Last Name
Yasmine	Kasey

## What constitutes dental hygiene practice in Nova Scotia?

Section 22 of the Act provides details regarding dental hygiene scope of practice. In conjunction with the Regulations (including Sections 25 and 26: Scope of Practice), the practice of dental hygiene is defined. Only CDHNS members who hold a practising licence may engage in the practice of dental hygiene in Nova Scotia, whether as a volunteer or for remuneration. The practice of dental hygiene includes members who act as clinicians, educators, researchers, administrators, health promoters, and/or consultants. When asked to report your practice hours, do not just calculate the hours you spent providing clinical care, include hours where you provided dental hygiene care in any of the areas noted above — as an educator, researcher, administrator, health promoter, or consultant. This may include positions like dental supply company sales rep, infection prevention and control consultant, and hygiene department manager. All positions count towards accumulation of practice hours and all positions require a CDHNS practising licence.

## **CDHNS CC Event and Upcoming Information Session**

The CDHNS' virtual, full day, continuing competency event was held on Saturday, Nov 16, 2024 with 161 in attendance. The event was a big success and very well received.

Thank you to all those who participated in either the morning half day/afternoon half day or the full day sessions. Thank you to 87 (54%) of the CC Event attendees who participated in the post-event survey. Results of this survey are used to help assist the CDHNS in planning of future events.

- 99% rated the event good to excellent.
- 46% of respondents were rural; 53% were urban; and 1% were both.
- 79% attended all the sessions; 21% attended either the ½ day am or ½ day pm sessions.

Congratulations to Jody Waterfield of Bedford who was the winner of the early bird registration prize.



#### May 10, 2025

The NSRDHDTD (Nova Scotia Regulator of Dental Hygiene, Dental Technology and Denturism) will be offering a virtual information session (in place of the previous AGM). *More details to follow.* 

## Awards



#### Congratulations to Kim Haslam - CDHNS Life Membership Award Recipient

The CDHNS would like to congratulate Kim Haslam who was presented with Life Membership Status, on behalf of Council. This honour was announced at the Nov 16, CDHNS CC Event.

Kim has made many outstanding contributions to the CDHNS and the profession throughout her dental hygiene career. Kim graduated in May 1985 from Dalhousie University with a Diploma in dental Hygiene. She earned a Bachelor of Arts degree from Dalhousie in 2001 and a Master of Education from Acadia University in 2011. She worked as an RDH in general practice from 1985 to 2017. Kim embarked on her journey as an educator with part-time clinical teaching in 1992, transitioning to full-time clinical teaching in 2014. She achieved tenure in 2023. Kim has received the WW Wood Award for excellence in dental education in 2023; CDHA awards for best literature reviews in 2020, 2022, and in 2023, she won an Oh Canada award for an article she authored on radiation.

The CDHNS Council and staff wish Kim all the best in her retirement.

## Dalhousie's Faculty of Dentistry Continuing Professional Education

## **Certification Courses:**

#### **Dental Hygiene Refresher Course**

In the Spring/Summer of 2025, Dalhousie University will be offering a refresher course (DEHY 4000) that meets this requirement. Applications will be accepted until March 1, 2025. The first component, offered virtually through the University of Alberta, is self-paced, and individuals can register up to a week after the course begins, based on an individual basis.

#### January 11&12, 2025 Local Anesthesia for the Dental Hygienist Dr. James Brady and Dr. Jean-Charles Doucet

May 9, 2025 **Medical Emergencies Certification** Dr. Chris Lee and Dr. Laurel Murphy

For more information on all events listed, follow the link to the registration page or visit the <u>CPE website</u>. Alternatively, you can contact the Continuing Professional Education office at the Faculty of Dentistry, cde.dentistry@dal.ca or 902-494-1674.

## **Lecture and Live Webinar Courses:**

Saturday, January 25, 2025 **Applied Periodontics and Surgical Concepts for Dental Hygienists** Dr. Zeeshan Sheikh

Date to be confirmed – Winter 2025 **Recognize & Address Non-Financial Barriers to Oral Healthcare for Vulnerable Populations** Prof. Heather Doucette

Date to be confirmed – Winter 2025 **Classification of Periodontal and Peri-Implant Diseases and Conditions- Daily Practice** Dr. Zeeshan Shiekh

## **CPR Requirements**

To assist you in understanding which CPR meets the list of requirements set by Council, a summary is provided below based on the organization's current offerings and levels.

## performed within 2 minutes can or a victim's chance of survival.

Cardiopulmonary Resuscitation (CPR)

### Heart and Stroke Foundation

Based on the current course offerings and levels, the accepted course from the Heart and Stroke Foundation is Basic Life Support (BLS).

### **Lifesaving Society**

Based on current course offerings and levels, the accepted course from NS's Lifesaving Society is CPR Healthcare Provider/AED.

#### **Red Cross CPR**

Based on the current course offerings and levels, the accepted course from the Red Cross would be BLS for Healthcare (HCP).

## St. John Ambulance

Based on the current course offerings and levels, the accepted course from St. John Ambulance would be Health Care Provider (HCP) CPR.

CPR Offerings: There are a variety of organizations and providers across the province who provide CPR courses that meet the requirements for CDHNS renewal and initial licences in the practising class. As a courtesy to CDHNS registrants, a CPR section of the website indicates providers who have notified the CDHNS that they will provide courses for registrants based on the licensing requirements.

## Dental Hygiene and Grief: Is There a Connection? continued...

- b) **Emotionally**, there never truly is a 'switch', that we can 'shut off' to hide our grief. This can be an unrealistic expectation, especially as we process our own lived and felt experiences of loss and being human. Grieving is considered the cost of deep love. Often, we see that at this time of year, with holidays on the horizon, nostalgia for people, or aspects of our lives we may be grieving. A reminder that 'happy holidays' is not our only felt experience this time of year. Where we are in the business of highlighting people's smiles, we also have a wide range of emotions that are meant to be felt.
- c) **Mentally**, we understand that grieving is a process, a verb, which requires internal and external support and compassion to process. A sense of cognitive overwhelm can also impact us, and our clients, leaving us to feel a sense of overload or worry. For those whose losses are also intertwined with trauma, we recognize the need for nervous systems that require support for regulation. Our supportive trauma-informed approaches that allow for calm and connection can be mutually beneficial.
- d) **Spiritually**, we know, for many losses, our sense of peace and the life we knew can be shaken. We may be undergoing a process that is life altering, deepening or even disrupting the sense of who we were, will become, and importantly, how we view the world around us.
- e) Socially, we live in a world that has been reeling from some major disruptions. Our post-pandemic world has challenged many in finding our way through the significance of rituals and importantly, the need for connection during times of loss. At times, people's stories will spill out while they sit in our chairs, just because we have provided a safe and compassionate interaction.

Navigating the integration of grief in our lives, and workplaces, is a process we are tasked with as we, as healthcare providers (individuals and teams), witness, as well as experience, loss. Psychologically safe, trauma informed, and grief-friendly workplaces are needed. In fact, they have always been needed. Those who sit in our chairs often share glimpses of their lived experiences and we respectfully bear witness, sometimes in an attentive moment of silence, a gesture of empathy or through spoken words. Grief education, skills and improved literacy will be necessary for all of us, as we honestly face our collective past, our more complex present, and our understanding of required presence for the future. Beyond brief acknowledgement of condolences, we need to become a province that recognizes that grief is a part of us, our families, our communities and, yes, our workplaces.

Expanding on our understanding, knowledge, and skills of psychological safety at work includes understanding that we do bring our grief to work and we also carry our grief home from work. For all healthcare workers, these two are synonymous. As we proactively work with the disenfranchised aspects of grief in healthcare, we create space, skills and attendance to connection and healing.

Our shared humanity requires us to recognize the very premise of healing as an interactive, intentional, and compassionate process. May we find moments of peace, times of remembrance for those (people and/or experiences) we miss, as well as recognizing the privilege of being alive in these Nova Scotia winter days.



Serena Lewis is a registered MSW social worker, and an educator committed to values of social change. She received the Canadian and Nova Scotia Association of Social Work Distinguished Service Award in 2020 for her work in the field. Her career in Nova Scotia has

been diverse in non-profit, provincial, and federal systems. As a clinician who has specialized in the field of dying, death and grief, she has mentored, educated and presented with teams locally, provincially and nationally. She continues to elevate grief needs through proactive communication, education and support of individuals, families, communities, and those who work in health and social sector fields. She is the proud mother of two sons and a Bernese Mountain dog.

linkedin.com/in/serenalewis1

#### Links to Reference:

https://www.virtualhospice.ca/

**MyGrief** 

The Dougy Center for Grieving Children & Families | Portland, OR

## **Assigning Credit Hours for Online Courses**



## CDHNS Quality Assurance Committee Decisions re: Assigning Credit Hours for Online Courses

While the Quality Assurance Committee has reviewed sufficient offerings from the providers, below, to determine whether sessions are eligible for hour-for-hour or 50% credit, the QAC has not reviewed each <u>individual course</u>. Please ensure that you retain (and upload) each session's course outline, learning objectives, and presenter's name and qualifications. These are used by the QAC to determine category allocations (e.g., Cat 1 or 3) and if the topic meets the general requirements set out in the <u>CDHNS CCP Requirements document</u>. All online activities, including those offered by the providers listed below, must meet the criteria to be eligible for credit hours e.g., must have a post-test that adequately covers the material\*.

\*CDHNS registrants who complete virtual learning activities, on or after October 1, 2021, that <u>do not</u> have a post-test from the CE provider, may complete an alternate option, i.e., a Reflection document. Please see the sections noted above in the current CCP Requirements document.

Courses from the providers below are eligible for 50% of the credit hours indicated by the provider**		
Crest and Oral B (Proctor and Gamble)	www.dentalcare.com	
Colgate Oral Health Network (COHN)-CE	www.colgateoralhealthnetwork.com/	
related to article review	For COHN's courses that involve reviewing articles and completing the related post-tests, these are worth 50% of the credit hours stated.	
RDHU: ('RDH View' sessions)	www.rdhu.ca/the-rdh-view	
Courses from the providers below are el	igible for the credit hours indicated by the provider**	
Canadian Dental Connection	https://www.dentalconnection.ca/en/	
CDHA	www.cdha.ca Refer to the CDHNS website's <u>CC page</u> for the allocation of categories and hours for their virtual course offerings.'	
Colgate Oral Health Network (COHN)	www.colgateoralhealthnetwork.com/ Online webinars with post-tests	
Dental Hygiene Quarterly (Previously RDHQ)	www.rdhu.ca	
Hu-Friedy	www.hu-friedy.com/education/continuing-education-classes	
Hygienetown	www.hygienetown.com/onlinece	
Indigenous Canada: 12 Module Course: 3 hours – Cat 1; 9 hours – Cat 3	Offered through University of Alberta's Faculty of Native Studies www.coursera.org/learn/indigenous-canada	
Pulpdent Learning	www.pulpdentlearning.com/	
rdhu (live-streaming and on-site courses)	www.rdhu.ca (If you have questions about a specific course re: Category or hours, please contact the CDHNS directly)	
UBC – one specific course reviewed	Autism and Neurodiversity in Dentistry: 4 hrs; Cat 1 – must complete a reflection document	
Viva Learning	www.vivalearning.com/	
Waterpik Oral Health for Professionals	https://www.waterpik.com/oral-health/pro/education/	

*Please note:* Many other online providers offer continuing professional education. These are the ones that were submitted by registrants and/or most commonly submitted to the CDHNS. \*\*Providers may assess a user fee and/or require registration with a username and password.

**How Long Do I Have to Retain My CC Records?** All registrants are required to retain relevant records/documents for your current cycle and your previous cycle (as noted in Section 4.5 of the CCP requirements document). Even if you are not selected for audit, you must ensure that you keep all relevant documents for these time periods.

## You've Been Asking



## **Q:** How do I sharpen, chairside, while maintaining IPAC standards?

**A:** Sharpening of contaminated instruments presents a risk for disease transmission through accidental exposures. Sterilized instruments that require sharpening **must** be sharpened at point of care to maintain sterility using a sterilizable sharpening stone or card.

If using a non-sterilizable sharpening stone or card, instruments **must** be sterile prior to sharpening and reprocessed and sterilized after sharpening. These stones or cards **must** be cleaned after use and appropriately stored according to manufacturer's instructions.

Response taken from page 23 of IPAC document

#### Q: Can I administer HybenX<sup>®</sup>, Periostat<sup>®</sup>, or Atridox<sup>®</sup>?

**A:** You may administer HybenX<sup>®</sup>, as long as you have the competencies to do so. However, you <u>may not</u> administer Periostat<sup>®</sup> or Atridox<sup>®</sup>, since the active ingredients in these products are from the tetracycline class of drugs, which is an antibiotic.

Section 25 of the current Dental Hygienist Regulations prohibits dental hygienists from administering antibiotics. While we have asked for legislative changes that would allow dental hygienists to administer products that contain antibiotics like Periostat<sup>®</sup> or Atridox<sup>®</sup>, our current legislation does not allow dental hygienists to administer these products. We will update you when we migrate to the Regulated Health Professions Act and advise you if the new profession-specific regulations, and any related bylaws or Policies, will allow RDHs to administer these products.

### **Q:** Is information regarding the recent Continuing Competency Event sessions available to those who were not able to attend?

**A:** Yes, any material provided to the CDHNS by presenters has been added to the registrant 'library.' This information can be found in the folder entitled '*Nov 2024 CC Event Handouts'*.

# **Q:** Is there a cultural relevance to a patient/client being afraid of dental instruments? Are there any cultures where this is true?

**A:** We know that every ethnic group has its own set of beliefs and attitudes towards oral health care. However, there is little research on specific cultural beliefs, and what research there is very limited to immigrant and ethnicity-related identity within the USA. Further, the social determinants of health contribute significantly to attitudes and practices related to oral care.

Things to Consider:

- 1. Allopathic or "western" approaches are not universal: naturopathic, homeopathic, energy therapies, holistic mind-body approaches and others all have their adherent's and may fit alongside each other or not.
- 2. There are varying beliefs about the importance of "milk" or "baby" teeth.
- 3. Many people follow a problem approach, rather than a preventative approach and philosophy, either within cultural norms, or outside of them.
- 4. Previous experiences with traumatic oral care can overshadow even the deepest held beliefs.
- There are some belief systems that are well documented, like the vast range of Chinese approaches. Most systems are not well documented.
- 6. Every patient would benefit from a well thought out initial assessment, with which I would be happy to assist assembling, in the initial steps.

Response given by Paul Pickering from ISANS ppickering@isans.ca



For those registrants who listed "retirement" as the reason for their change in their registration or licensing status, the CDHNS would like to take this opportunity to thank you for your significant contribution to the oral health of Nova Scotians. Your service as health care providers and support for the dental hygiene profession has been appreciated. We wish you well in your retirement.

## Initial Board for New Regulator

This information is being provided to registrants of all three professions regarding the election of the Initial Board for the amalgamated Regulator, The Nova Scotia Regulator of Dental Hygiene, Dental Technology and Denturism.

You will have noticed that a call for nominations was not circulated in the newsletter, as has been the past process. As set out in the Regulated Health Professions Act (RHPA), the Initial Board was to be comprised of members from the three existing Regulatory Boards/Councils. In anticipation of the 2025 migration to the RHPA, the Joint Boards developed a voting process that was approved on August 26, 2024. The composition of the Initial Board includes up to six public members and nine registrants, including a minimum of two registrants from each profession.

All public members from the CDHNS and DLBNS will transition to the Initial Board. The NSDTA's current legislation does not allow for appointments of public members to their Council. Currently, there are two vacant public member positions on the CDHNS Council. If the NS Gov't appoints these public members to the CDHNS Council prior to migration, they will also become part of the Initial Board. The three Regulatory Boards voted on the Initial Board and the Initial Board voted on the Chair and Vice-Chair positions. The Initial Board was elected on September 12, 2024. The Initial Board will start their term on the first day of migration under the RHPA. The duration of the Initial Board is anticipated to be 12 months. Moving forward, all subsequent boards will be selected by an appointment process that will be in alignment with the RHPA, the Regulations, and Bylaws. This includes a competency skills matrix that will be developed in the first year by the Initial Board. The Initial Board composition is listed below.

Name	Public or Registrant Member	Organization
Paulette Anderson	Public Member	DLBNS
Beth Mann	Public Member	CDHNS
Brian Murray	Public Member	DLBNS
Betty Thomas	Public Member	DLBNS
Sonya Bishop	Registrant	CDHNS
Karen Fletcher	Registrant	CDHNS
Natasha Gillis	Registrant	DLBNS
Christian Hall	Registrant	NSDTA
Larissa LeBlanc	Registrant	CDHNS
John Lilly	Registrant	DLBNS
Benjamin Mueller	Registrant	NSDTA
Sydney Nelson	Registrant	CDHNS
Kayla Leary-Pinch	Registrant	CDHNS

#### Initial Board:

Chair: Kayla Leary-Pinch Vice-Chair: Betty Thomas

If you have any questions for the CDHNS, you can connect with the chair at: <u>cdhnschair@cdhns.ca</u>.

**Did You Know:** The CDHNS requires that each registrant's first and last name match those found on the CDHNS portal, CPR, PLI, as well as continuing competency certificates. This helps avoid delays in the approval/renewal process. *We appreciate your cooperation.* 



Official Newsletter of the College of Dental Hygienists of Nova Scotia

Volume 53 Issue 3

## Important dates to remember

April 1-30, 2025: National Oral Health Month
April 4-10, 2025: National Dental Hygienists Week<sup>™</sup>
May 10, 2025: Information Session, being held virtually

Our office will be closed Dec 24 to 27, and Dec 31 and Jan 1.



From all of us here at the CDHNS, we wish you and your family a peaceful, joyful, and safe time during this season.

**College of Dental Hygienists of Nova Scotia** 202-1597 Bedford Hwy Bedford, N.S. B4A 1E7

New Address as of August 26, 2024

www.cdhns.ca