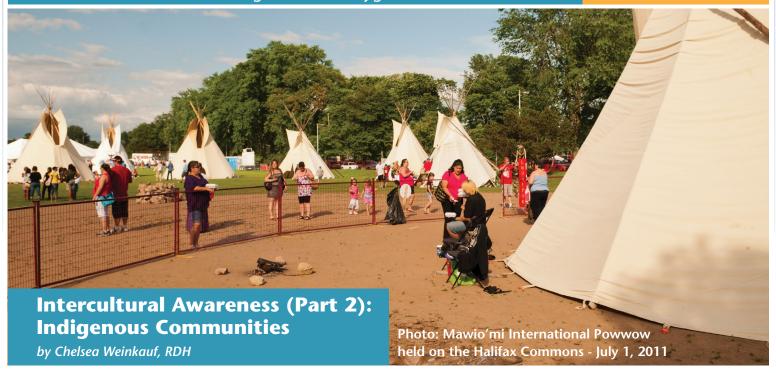


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Official Newsletter of the College of Dental Hygienists of Nova Scotia

Volume 49 Issue 1



When I first began to write this article, I asked myself, "Who am I to write about the challenges faced by Indigenous people when I, am not Indigenous?" In order to be transparent, I must acknowledge the privilege that I have, which stems from the colonization of Indigenous people by my own European ancestors. With that acknowledgement, I thought that it would be more impactful to write about the experiences that I have had working with First Nation and Inuit (FN/I) communities and how this job has challenged me to become more educated and aware of the inherent biases and lack of knowledge that Canadians have regarding their own history.

Prior to my role within Indigenous Services Canada, I was naïve to the challenges that Indigenous people within Canada face on a daily basis. I was also unaware of many facts that I am sharing with you in this article. The vision of Indigenous Services Canada is "to support and empower Indigenous peoples to independently deliver services and address the socio-

economic conditions in their communities" (Indigenous Services Canada, 2020). When I accepted this position, my goal was to improve the oral health of children by breaking down structural barriers and supporting healthy public policy, though my knowledge was lacking in regards to the complex historic, geographic and social factors that contribute to unique social determinants of health of Indigenous Canadians.

Quick Facts: Colonization forced many Indigenous peoples to become assimilated into Western European culture, which contributed to not only the loss of traditional culture, but impacts on physical, emotional and spiritual health. The introduction of the residential school system removed children from their homes in order to eliminate the use of traditional language, culture and spiritual beliefs (Wilk, et al. 2017). These children suffered physical, sexual and emotional abuse, including traumatic dental experiences. In conjunction with the trauma experienced, residential schools were underfunded, leading to malnourishment, poor living conditions and inadequate

the UNISON

is the official newsletter of the College of Dental Hygienists of Nova Scotia

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Publication of an ad does not necessarily imply that the CDHNS agrees or supports the claims therein.

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

If you currently receive your newsletter by mail and you would like to go paperless, please update your preference online in your Member Profile.

CDHNS Council Chair's Message

Shannon ONeill Chair



I am approaching the final few months as Chair of CDHNS with a feeling of gratitude. I am thankful for how the CDHNS works to serve and protect public interest and provide equitable access to oral health care for Nova Scotians.

In January, I had the opportunity to spend a morning with one of the dental hygiene study clubs. The conversation was rich with questions and answers about continuing competency, practice hours, and legislation. This demonstrates our unified commitment to the processes necessary to advance our profession for the public good. I am looking forward to spending time with more study clubs over the next few months! In the meantime, the CDHNS website is an excellent source for quality information regarding registration and continuing competency questions.



CDHNS is excited to soon reveal our **new LOGO**. The logo represents a holistic approach to oral health with the addition of a water droplet to the image of a tooth. Clean water is important to overall health and community water fluoridation, for those who have access, since it helps to keep teeth healthy and cavity free. The new logo integrates the purple (DH colour) from the previous identity while introducing the blue of the water. And finally, in the arch of the top of the identity there is a set-in infinity symbol which reflects ongoing practice of good hygiene

to teeth. Logos are important to convey an organization's <u>values</u> and help the public to get to know you better. I am thankful that the new logo does just that!

The Legislation Review Committee has been working diligently with the Registrar and legal counsel for quality improvements around self-regulation, authorization to prescribe, and other areas of the dental hygiene scope of practice, including orthodontics, restorative, and scaling. This work further demonstrates the CDHNS's ongoing commitment to oral health care for all Nova Scotians.

It continues to be an honour to serve as the Chair of the CDHNS, for the remainder of my term, which will end in July. I am grateful for the opportunity to assure the integrity of the Council's process and, secondarily, represent the CDHNS to outside parties. After that, I will be looking forward to new ways to contribute to the profession, the CDHNS and the oral health of Nova Scotians. There are many opportunities to contribute to CDHNS committees and Council. Orientation to the work is the first step when you join. I encourage you to contact the CDHNS to learn how you can participate. In my experience, you will be thankful for contributions that you will be able to make to the profession of dental hygiene and improved oral health outcomes of the public.

Shannon K ONell Shannon K ONeill, BA, RDH, Cert. public health Chair, CDHNS

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From the desk of the Registrar

Stacy Bryan Registrar



The year 2020 has certainly started with a bang. Thank you to all CDHNS registrants who took the time to complete the regulations survey by the December deadline. 115 participated in the survey, which is approximately a 15% participation rate. The feedback from CDHNS registrants was carefully considered by the Legislative Review Committee and the Council as the final regulation revisions submission to government was sent on Feb 3, 2020.

Respondents were requested to review material and then rate their level of agreement on a scale of 1-5 (e.g., 1 was strongly disagree; 3 was neither agree or disagree, and 5 strongly agree; there was an option to select "not applicable").

Below are a few of the survey highlights:

Area	Responses from DH Respondents	
Public Protection and Accountability	90% agreed or strongly agreed that public safety remains the CDHNS top priority.	
	95% agreed or strongly agreed that the proposed changes demonstrate accountability to the public.	
Practice Hours	78% agreed or strongly agreed that the practice hours requirement was achievable. 11% neither agreed or disagreed; 11% disagreed.	
Self-Initiation	87% agreed or strongly agreed with the removal of the self-initiation requirement. 5% disagreed.	
	90% agreed or strongly agreed it would not negatively impact safe dental care.	
Prescribing Drugs	90% agreed or strongly agreed that the proposed requirements for DH to prescribe drugs are reasonable. 4.35 % disagreed.	
	92% agreed or strongly agreed that the competency requirements for authorization to prescribe drugs will ensure DH are safe and competent before issuing any prescriptions.	
	88% agreed or strongly agreed that removing the restriction that prohibits DH from administering antibiotics will help to improve health outcomes for easily recognized conditions such as periodontal disease. 4% disagreed.	
Local Anaesthetic	95% agreed or strongly agreed to the removal of the requirement for a written order to administer oral anaesthetic agents would enable their clients to receive care in a timely manner.	
	86% agreed to strongly agreed that dental hygienists who are authorized to administer local anaesthetic already have the competencies to determine all aspects of administration. Only 2% disagreed or strongly disagreed.	

Novel Coronavirus: One world issue that has affected everyone, across the world and in Nova Scotia, including providers of oral health care in this province, is the emergence of the novel coronavirus, SARS CoV-2, which was characterized as a pandemic by the World Health Organization on March 11, 2020.

The spread of the virus across the world tested our local communication methods between the Office of the Chief Medical Officer of Health (OCMOH), the Department of Health and Wellness, and Nova Scotia's health care providers; and Dalhousie University. As I write this message, the CDHNS has circulated 5 OCMOH special bulletins to you, as registrants with the CDHNS. We continue to work with all parties and will provide further information and guidance as it becomes available.

Further, this situation caused many oral health care providers to evaluate their current infection prevention and control (IPC) practices to see if they were sufficient. The fundamental elements of IPC need to be in place, and followed, to prevent transmission of infectious agents in dental settings. This includes using appropriate screening practices, providing necessary supplies for practitioners to adhere to the routine practices (or standard precautions) and additional precautions, effectively reprocessing, and correctly selecting and using Personal Protective Equipment (PPE).

We are reminded that we must continue to perform appropriate hand hygiene (e.g., hand-washing or using alcohol-based hand rub) since it remains a critical first line defence for the practitioner and the client.

From the desk of the Registrar continued...

Know the facts and the science: Here is one good source for <u>Coronavirus information for dental healthcare settings</u>. Refer to the most recent OCMOH Special Bulletin in your email inbox or on your CDHNS Member Home Page for up-to-date information (log in required) for information on client screening tools, and steps to follow if someone needs COVID-19 assessment.

Many of you have contacted the CDHNS to ensure that you have the accurate information, including how and when to use PPE, particularly when faced with a mask shortage. The Federal Health Minister has assured Canadians that they are working with the health sector to identify organizations who may have challenges accessing these in the future.

There are many important components of an oral health professional's PPE, including masks. At the CDHNS, we have been able to provide you with accurate information that is grounded in evidence and is consistent with our <u>Standards of Practice</u>. We have confirmed the recommendations and requirements from the OCMOH and the IPC dept at the Nova Scotia Health Authority, as necessary.

Can we use our masks for more than one client? No. A disposable mask is not to be reused. You must continue to use PPE, including masks, appropriately. In 2003, the US Centre for Disease Control stated "change masks between patients, or during patient treatment, if the masks become wet". This is still considered a standard precaution in 2020.

- If a mask is used on more than one client, there is increased risk that you will cause cross contamination when you provide care to the next client.
- Masks are only effective until they become wet.
 Depending on the procedures you are performing
 (e.g., high aerosol production of some powered
 instrumentation), it may become damp and require
 changing even as soon as 20 minutes. Once a mask is
 damp/wet, it may allow for the wicking of moisture.

Did You Know? Airborne microorganisms can penetrate through the wet fabric by a process called "wicking." (Molinari and Nelson, 2016) As soon as a mask is wet, it must be changed. Wicking can also occur at other times and cause a break in the chain of infection, including removing instruments from a sterilizer when the packaging is still wet, and wearing gloves with undetected holes.

If I wear two Level 2 masks (ASTM) does that equate to a Level 3 mask? No. After consulting with IPC experts, we can confirm that there is no evidence to support that layering of masks (i.e., wearing two level 2 masks) will achieve the desired effect of increasing fluid resistant, filtration efficiency, and pressure to the Level 3 mask's minimum standards.

In fact, there is concern that wearing two masks might increase the risk of cross-contamination. For example:

- The inner mask may be worn for longer than it is supposed to be e.g., the outer mask could become damp/wet on the outside and go through to the inside, directly impacting the inner mask, allowing for wicking of moisture.
- Wearing two masks is awkward and the practitioner may adjust the masks more frequently, often with contaminated hands. Having contaminated hands near the practitioner's face could present a larger risk of transmission to the practitioner.

Want further information on the Levels of Masks (American Society of Testing and Materials, ASTM)? Here is one link that may help you determine what type of mask would be appropriate, based on the procedure(s) you will be performing.

Molinari and Nelson: Face Mask Performance: Are You Protected? (2016).

Ensure your PPE is effective: If you do not select the appropriate type of PPE, and/or you do not use it properly, it will be rendered ineffective.

To determine the PPE required, complete a *point of care risk assessment*, which includes evaluating the level of risk of the procedure being performed, the client's health history, including the screening tools provided by the OCOHM. (Remember to go on the link to obtain the expanded locations, that are being continuously updated.)

If the decision is that it is appropriate/necessary to treat the client, PPE is to be worn (and used) properly and it is to be selected based on the level of risk of the procedure being performed.

We will continue to work with relevant stakeholders and expert organizations to obtain timely, factual information that will help support the health and safety of your clients and you, as the health care professional. This will include any changes to protocols.

Council Nominations for 2020

The following CDHNS members have been nominated according to the rules set out and have accepted the nomination for election to the CDHNS Council at the AGM on May 9, 2020. Each nomineee was asked to submit a brief biography and a statement of intent. The following names have been offered for the three positions that will be open for Council.



Allison Craig: This will be Allison's third term on Council. She is a 1996 graduate from Dalhousie's dental hygiene diploma program. She has worked in Public Health for the past 16 years with her focus being oral health promotion. Her work involves partnerships to improve the oral health of populations with a focus on programs and policies.

Allison has served on the CDHNS Council for the past four years and is currently serving as an Executive member. She has also served as the Chair of the Ownership Linkage Committee for the past year. Outside her profession, she is on the School Advisory Council at her daughter's school and is an executive member and steward of her UNION local. On top of all that, she has coached soccer for many years.

Statement of Intent: I am standing for election to the Council for the CDHNS because I am interested in building on my past four years of experience with Council. I have expertise in community engagement, partnership development and population oral health that can enhance the work of the CDHNS Council to meet its ENDS. Having a rural Nova Scotia perspective is also important. The Council is a place of learning, growth and healthy debate and that is a place I want to be. I encourage others to consider this opportunity as well.



Shelby Devan: This will be Shelby's first term on Council. She is a 2015 graduate from Dalhousie's dental hygiene program. She obtained her Bachelor of Science degree in Nutrition from Acadia University in 2013. Shelby previously worked in a general practice setting and is currently employed in a periodontal practice.

Shelby is interested in expanding her involvement in her dental hygiene profession and is hoping this term on Council will help her accomplish this.

Statement of Intent: I would love to learn more and help our profession grow within the province.



Joyce Lind: Joyce received her diploma in dental hygiene in 1985 from Dalhousie University. She has spent her entire career working in public and community health. Her focus has been on improving the oral health of those who are less able to advocate for themselves.

Joyce has been very active with her profession. She served on the CDHNS Council for a total of three 2-year terms from 2011 to 2017, including a full term as Council Chair. She was elected as a School Board member for the Cape Breton Victoria Regional School Board in 2012 and served as a School Advisory Council member for the past two years.

Statement of Intent: I am interested in returning to the CDHNS Council, as a Council member, because I genuinely enjoyed my previous experience. It was a wonderful learning experience, one in which I gained a tremendous amount of insight to the profession, as a whole. I hope to bring a community-based focus to the Council discussions and will use my previous knowledge of policy governance to guide the work.

Three Year Notice: Requirements for Practice Hours

Notice is hereby given that Council has approved a requirement for licensing or licence renewal that for registrants who have graduated more than three years prior to their application for a licence or licence renewal the registrant must provide evidence of 600 hours of practice as a dental hygienist within the 3 years immediately preceding the date the Registrar receives a complete application (initial or renewal). **The 600 hours requirement will take effect**

The 600 hours requirement will take effect on November 1, 2020. For more information and background on this subject see Unison, Vol 43, Issue 3 Quality Assurance - Practice Hours. To provide feedback on this requirement, please contact the Registrar at registrar@cdhns.ca

CDHNS AGM and Continuing Competency Event



Location:

Mount Saint Vincent University-Rosaria Multi Purpose Room (R303) 166 Bedford Highway, Halifax, NS.

For full registration details and accomodation information, please refer to the information brochure that will be sent out to all members in late March. It will also be posted on our website under **AGM MAY 2020**.

Program at a Glance

8:15-9:00 am	Check-in/Breakfast	Credit	Category
		hours	
9:00-10:15am	AGM	1.25	3
10:30-12:30pm	CC Session:	2	1
	Trans Inclusion: Rethinking Gender, Nolan Pike		
	Please Note: For those individuals who register only for the CC Event, a separate check-in will be scheduled from 10:00-10:30am		

Please note: There is no on-site registration for this event. Please register in advance.

Notice of Annual General Meeting (AGM)

This is the second notice of the Annual General Meeting of the CDHNS.

Meeting Agenda

Chair's Address and Welcome

Greetings

CDHA NS Director- Wendy Stewart

Call to Order

Approval of Agenda

Approval of May 24, 2019 Minutes

Welcome from the Health Association of African Canadians

Annual Report/Audit Statement

Report of Quality Assurance Committee

Report of Nominations Committee

Election of Council Members

Awards and Recognition

Adjournment

The CDHNS is prepared to respond to a changing environment around this pandemic that may include limitations on gatherings, or other recommendations or requirements.

Saturday, May 9, 2020

8:15 - 9:00 am: Breakfast/Check-in

9:00 - 10:15 am: AGM (1.25 credit hours, Category 3)

Location: Rosaria MPR (R303) Mount Saint Vincent University, 166 Bedford Highway, NS, B3M 2J6

- **O** The AGM is open to all CDHNS members
- O There is no charge to attend
- Advance registration is required



Click here to

review the 2019 draft minutes to be approved at the AGM May 9, 2020. You will also find the minutes in the CDHNS Library on your Main Page under the sub folder AGM (Fiscal Year to Oct 31 2019).

Dalhousie's Faculty of Dentistry Continuing Professional Education

The following sessions may be of particular interest to dental hygienists. Unless noted otherwise, all courses listed are held in Halifax. For a full listing of the courses offered, go to https://www.dal.ca/faculty/dentistry/continuing-education.html:

Friday, March 27,2020 - **Dalhousie Student Dental Hygiene Presentations** (Cancelled with details to follow from Dalhousie)

The following courses may be postponed or cancelled given ongoing health recommendations. For further details, use the above link.

Saturday, March 28, 2020 - Knowing patient's TMJ complex baselines before doing any dental procedure (lecture and hands-on), Dr. Yang Gu

Saturday, April 4, 2020 - **Digital dentistry now! A hands-on introduction** - (lecture and hands-on),
Drs. Mohamed Gebril, Chris Lee, Robert Loney and
Richard Price

Friday, April 17, 2020 - **Medical emergencies for the dental office** (lecture and hands-on), Drs. Curtis Gregoire, Chris Lee, and Laurel Murphy

Thursday, April 30 to Sunday, May 3, 2020 - **Local anesthesia for the dental hygienist**, Drs. James Brady and JC Doucet

Saturday, May 2,2020, New Glasgow, NS - **Dental care for persons with intellectual disabilities and other special health care needs**, Drs. Tracy Doyle, Shannon Fitzpatrick and Evan Shaw

E M P O O M E R I I N College of Derital Hygienists An Employment Manual for Dental Hygienists Y O U R S E L F

Did You Know?

The CDHNS has an employment manual resource for dental hygienists. This was recently updated. You'll find it in the main folder of the Library on your Member home page

(member log in). (Thank you to the Dalhousie dental hygiene students for reviewing the previous version.)

You've Been Asking

Do I have to use the CDHNS certificate of attendance for all courses I attend?

No. You are only required to use this form if the course provider does not provide their own certificate of attendance or other document that verifies successful completion of the course.

As per the CDHNS CCP Requirements, you must also provide the following additional information for all courses that are not offered through the CDHNS, CDHA, Dalhousie University, or a Study Club registered through CDHNS: presenter name and qualifications (if not included in the attendance form), detailed course outline and learning objectives, subject matter of the activity, and documentation that supports the length of the presentation e.g., agenda that includes all major breaks.

Do clients have to remove insulin pumps before radiographs are taken?

No. It is not necessary to remove insulin pumps when taking dental radiographs, however, ensuring that the pump is covered by a lead apron is an added precaution that could be taken.

Thank you to Kim Haslam (Assistant Professor, Dalhousie University School of Dental Hygiene) and Dr. Anthea Senior (Associate Professor, Associate Chair, DDS Clinical Education, School of Dentistry, Edmonton, Alberta) for their input.

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 registrants 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 registrants 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.



CDHA

Dear friends and colleagues,

Summer is coming. It sounds like a far-off occasion to note, but as soon as the days start getting longer in late December, I start celebrating! Winters in Canada can be very cold, dark, and dreary, so why not take this opportunity to participate in some high-quality professional



development? I would like to draw your attention to our latest webinars that are free for members: "Clear the Air: Best Practices for the Management of Aerosols" and "Exploring the New AAP Periodontal Disease Classification." Both are available on CDHA's website.

My main activity for CDHA since our last board meeting held via teleconference in July 2019 has been reviewing monitoring reports which are submitted regularly by CDHA's chief executive officer, Ondina Love. These reports keep us updated on the progress being made by CDHA towards achieving our vision for the profession.

I also had a lot of reading to do before for our meetings in Ottawa, which were held from February 20 to 22. A highlight of this gathering for me was our lobby day on Parliament Hill. We spent a day meeting with various members of Parliament and senators with whom we shared our vision for the oral health of Canadians and asked for policies to increase access to $preventive\ or al\ health\ care,\ especially\ for\ our\ most\ vulnerable$ populations.

I hope you are all having a great start to 2020!

Wendy Stewart, RDH CDHA board director, Nova Scotia ns@cdha.ca

WHAT'S NEW AT CDHA?

PROFESSIONAL DEVELOPMENT

NEW webinars recently released:

Exploring the New AAP Periodontal Disease Classification, sponsored by Philips

Up in Smoke! The Vaping Trend, sponsored by Philips

Webinars coming soon:

Healthy and Respectful Workplace, April 15 CDHA Professional Liability Insurance, May 20 Controlling Caries, sponsored by Oral Science, June 17

www.cdha.ca/webinars

Save the date:

CDHA Summit: Leadership and Education, Whitehorse, Yukon, October 2-3

OTHER NEWS

2020 Superheroes

Our #dentalhygienesuperhero competition, sponsored by Sensodyne, is now open! Cash prizes plus travel grants to CDHA's leadership summit in Yukon to be won. Help us unmask the superhero dental hygienists across Canada who are integral members of the primary health care team. Nominate a colleague at www.dentalhygienecanada.ca/ healthcaresuperhero

CJDH Accepted for Inclusion in MEDLINE

The editorial board of the Canadian Journal of Dental Hygiene is thrilled to announce that the journal has now been accepted into MEDLINE, the world's premier online database of biomedical and life sciences literature. www.cdha.ca/cjdh

NDHW™ is Coming!

National Dental Hygienists Week™ will now be held annually on the same dates every year: April 4 to 10. We've got lots in store for #NDHW20 so mark your calendars, start planning your #dhpurplepride celebrations, and watch www.cdha.ca/NDHW as details unfold. #ihavepurpleplans! Do you?

Vaping Resources

Given the growing body of evidence of the dangers of vaping, dental hygienists are encouraged to learn more about e-cigarettes, their use and adverse effects on oral health, in order to provide expert advice to their clients. CDHA has just released a position statement on vaping along with a consumer friendly fact sheet to print and share.

www.dentalhygienecanada.ca/vaping









Notice from the Quality Assurance Committee



Sonya Bishop, CDHNS QAC Chair 2019/2020

The Quality Assurance (QA) Committee met on February 8, 2020 to perform the annual Continuing Competency (CC) audit for practising members whose cycle ended December 31, 2019.

A total of 42 members were audited. The following decisions were made: 7 members were <u>pending</u> (unable to determine if requirements were met, more information required), 1 member had <u>not met</u> requirements, and 34 members met requirements.

Congratulations to those members whose audits were found to be complete with no follow-up required.

Study Clubs: All Study Club annual reports submitted for 2019 were reviewed to determine eligibility for credits and category assignment.

On behalf of the QA Committee, a few points to remember in regards to CC cycles:

- Refer to the <u>CDHNS Continuing Competency Cycles</u>
 <u>Frequently Asked Questions</u> document, found in the
 Member Portal of the website. Click on the Library
 section and go to the Practice Protocols &
 Policies folder.
- It is often the case that the QA Committee requests additional information due to lack of documentation for CC courses. The lack of documentation makes it difficult to determine the eligible hours and/or appropriate category allocations. To eliminate these requests, please obtain (and provide) as much verification for your CC courses as possible. (e.g., an agenda with start/end times, detailed course outline/ description).
- The CDHNS Certificate of Attendance is available, if needed, to assist your recording needs. It is <u>not</u> required if the course provider already provides their own certificate of attendance or other document that verifies your attendance or successful completion.

• It is strongly recommended that members obtain their CC credits/hours over the entire course of their cycle to fulfill your professional responsibility.

At this point in the ongoing Continuing Competency Program (CCP) review, we enter Phase 2 of the survey process. Watch for the survey link in your inbox late March to early April 2020.

The QA Committee would like to remind all members that your feedback is important, and thanks you for your contributions thus far.

Sincerely,

Sonya Bishop, Quality Assurance Chair (2019/20)

Levy Casey Carter MacLean

November 6, 2019

College of Dental Hygienists of Nova Scotia c/o Stacy Bryan, Registrar 11-2625 Joseph Howe Drive Halifax, NS B3L 4G4

Dear Members:

We are the auditors of the College of Dental Hygienists of Nova Sootia and have been engaged to randomly select a sample of members to be audited with regards to their Continuing Competency requirements. We have only been engaged to select the sample and not to audit the member's compliance with their Continuing Competency requirements.

Stuart S. MacLean Inc. J.E. Melvin Inc. Greg T. Strange Inc. Tracey Wright Inc. Angela Kinley Inc. We are not aware of any relationships between the College and ourselves that, in our professional judgement, may reasonably be thought to bear on our independence. We hereby confirm that we are independent with respect to the College within the meaning of the Rules of Professional Conduct of the Institute of Chartered Accountants of Nova Scotia as at November 6, 2019.

We were provided a list of 205 member license numbers from the Registrar with no other information to identify the members to us. Using a random number generator in Microsoft Excel to select a number between 1 and 205 (inclusively), we randomly selected 41 license numbers; of which none were elliminated as duplicate numbers. The list of license numbers was not modified in any way and the first 41 non-duplicate random numbers generated were used for the sample. This sample was provided to the Registrar to be tested.

If you have any questions or concerns regarding this letter, please do not hesitate to contact our office.

Yours truly,

Levy Casey Carter MacLean Chartered Professional Accountants

211 Horseshoe Lake Drivi Suite 31 Halifax, NS B3S 0B Canadi Phone: (902) 445-444 Fax: (902) 443-484 www.lccm.c

Intercultural Awareness (Part 2) Indigenous Communities continued...

education (Wilk, et al. 2017, Bombay, et al. 2014). Children of residential school attendees have experienced intergenerational trauma. For example, if a residential school survivor saw a dentist during their time at school and was forced to have extractions for unnecessary reasons or without the use of general anaesthetic, they may pass down a dental fear to their own children. In Shubenacadie, the residential school only closed in 1968 (Walls, 2019). The socio-political context is an underlying factor that affects multiple health behaviours, such as, over and misuse of alcohol, excessive smoking, lack of exercise and poor diet, putting Indigenous people at an increased risk of poor health outcomes, including a poor oral health status, diabetes and cardiovascular disease (Reading and Wien, 2009, Bodirsky, et al. 2008).

Despite provincial and federal dental coverage, Indigenous children "bear a disproportionately higher burden of dental disease than other Canadian children" (Mathu-Muju, et al. 2016). 83.1% of Indigenous people, aged 6 years and over, require one or more dental treatments, compared to 33.9% of the non-Indigenous Canadians (First Nations Regional Information Governance Center, 2012).

The COHI Program:

In 2004, Health Canada partnered with First Nation and Inuit communities to create the Children's Oral Health Initiative (COHI) (Mathu-Muju, et al. 2016). COHI is a preventative dental program targeted for pregnant women, children aged 0 to 7, and their caregivers. A dental hygienist or dental therapist and a COHI aide, a community-based worker, deliver the care in FN/I communities. As of 2019, all the FN/I communities within the Atlantic Region have COHI programming, along with three dental hygienists and eleven dental therapists working within the four provinces.

COHI would not be successful without the COHI aide, as they are a direct contact for oral health and are a liaison between community members and oral health professionals. The COHI aide takes part in theoretical and clinical oral health training, focusing on oral health education, promotion and fluoride varnish application. I am constantly learning from them. They integrate innovative projects within their communities, including tooth brushing programs and sugar-free school policies, and are currently creating oral health books in traditional languages. One community has been hosting oral health sessions based on the Seven Sacred Teachings that are a set of teachings on human conduct towards

others. These teachings focus on Wisdom, Love, Respect, Bravery, Honesty, Humility and Truth (Seven Grandfather Teachings, 2020).

Opportunities to be involved: Opportunities for dental hygienists within Nova Scotia are infinite. In FN/I communities, there are always volunteer opportunities for community health fairs and screening days for the children, or providing dental expertise on various oral health promotion activities. Another opportunity is to become an NIHB provider which can allow you to be hired through a band and provide dental care in FN/I communities, especially remote and isolated communities, such as Natuashish, Labrador.

Be an advocate: It can be very difficult for some FN/I clients to receive dental services outside of their communities. Talk to your office about reducing barriers to care. Learn more about NIHB coverage and how to best utilize the services.

I challenge you to advocate for more inclusivity policies, increased access to care, and to increase your own knowledge on cultural competence. Expand your own level of understanding and awareness of the rich cultural history of First Nations and Inuit peoples in Atlantic Canada. There are several excellent resources, such as the Canadian Dental Connection, which provides online learning modules based on cultural competency, trauma-informed care and Indigenous settings

Conclusion: There are several important elements I learned in my role with Indigenous Services Canada.

- 1. Recognize that each person you see is an individual and must be treated in that manner. Everyone has a different story.
- 2. Recognize your personal biases that may be negatively impacting your ability to provide effective, competent, and compassionate care.
- 3. Be an advocate for your clients.

About the author: Chelsea Weinkauf graduated from the BDH program at Dalhousie University. After working in private practice for a few years, she began working as the Children's Oral Health Initiative (COHI) Coordinator with Indigenous Services Canada in 2018 with the goal of providing equitable dental care for First Nation and Inuit children.

Assigning Credit Hours for Online Courses

To support CDHNS registrants, the CDHNS Quality Assurance (QA) Committee evaluated a number of courses offered by online continuing oral health education providers. Following these reviews, the QA Committee determined that the number of credit hours allocated by some course providers is not always consistent with the content of the courses. Nor did all online learning activities meet the criteria. The Committee does revisit these course allocations on a regular basis to determine if changes are necessary. The Committee has reviewed the course providers identified and determined the following.

Courses from the providers below are eligible for 50% of the credit hours indicated by the provider*

, I		
Crest and Oral B (Proctor and Gamble)	www.dentalcare.com www.dentalcare.ca	
RDHU: Does not meet CDHN criteria unless it is one that includes a comprehensive post-test.	There is great variance in the courses offered through RDHU. Some that met the criteria are eligible for hour-for-hour credit, while others were only eligible for 50% of the hours. Please contact the CDHNS office directly for further information about the course(s) you intend to take.	
Courses from the providers below are eligible for the credit hours indicated by the provider*		

by the providei

Canadian Dental Connection	https://www.dentalconnection.ca/en/auth/login/?next=/en/dashboard/
Colgate Oral Health Network	https://www.colgateoralhealthnetwork.com/
DVD Quarterly	https://members.dentalhygienequarterly.ca/
Hygienetown	https://www.hygienetown.com/onlinece
Waterpik Oral Health for Professionals	https://www.waterpik.com/oral-health/pro/education/

Please note: There are many other online providers who 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 user name and password.



The Brushing up on Mouthcare program, first created in 2008, was re-launched in December 2018, with a new website containing resources to support daily mouth care for those who depend on others for care.

Dr. Mary McNally (Faculty of Dentistry) led the relaunch in collaboration with Caregivers Nova Scotia and Dalhousie's School of Dental Hygiene, Healthy Populations Institute, and Computer Science student outreach program. "Brushing Up" is user friendly and organized to help care-providers meet Nova Scotia's long-term care guidelines.

Go to www.brushingup.ca

You will also find a link to Brushing up on Mouth Care under the Tab Members on the CDHNS website. Select "Resources" on the dropdown options for that Tab.

Intercultural Awareness (Part 2) Indigenous Communities continued...

References:

- 1. Alberta Regional Consortia. (2020) Seven Grandfather Teachings. Retrieved from: http://empoweringthespirit.ca/cultures-of-belonging/seven-grandfathersteachings/
- 2. Bodirsky M, Johnson J. (2008) Decolonizing diet: healing by reclaiming traditional Indigenous foodways. Cuizine: The Journal of Canadian Food Cultures.
- 3. Bombay A, Matheson K, Anisman H. (2014) The intergenerational effects of Indian residential schools: implications for the concept of historical trauma. Transcult Psychiatry. 51(3): 320-38
- 4. First Nations Information Governance Centre (FNIGC). (2012) First Nations Regional Health Survey (RHS) 2008/10: National report on adults, youth and children living in First Nations communities. Ottawa: First Nations Information Governance Centre (FNIGC).
- 5. Indigenous Services Canada (2020). Retrieved from: https://www.canada.ca/en/ indigenous-services-canada.html

- 6. Mathu-Muju K. R., McLeod J., Walker M. L., Chartier M., Harrison, R. (2016) The Children's Oral Health Initiative: An Intervention to address the challenges of dental caries in early childhood in Canada's First Nation and Inuit communities. Canadian Journal of Public Health. 107(2): 188-193
- 7. Reading C., Wien F. (2009) Health Inequalities and Social Determinants of Aboriginal Peoples' Health. National Collaborating Centre for Aboriginal Health. https://www.ccnsa-nccah.ca/docs/determinants/RPT-HealthInequalities-Reading-Wien-EN.pdf
- 8. Wilk P., Maltby A., Cooke M. (2017). Residential schools and the effects on Indigenous health and well-being in Canada – a scoping review. Public Health Rev 38 (8): https://doi.org/10.1186/s40985-017-0055-6
- 9. Walls M. (2019) The Complex Truth: Intersections between Day Schools and the Shubenacadie Residential School [cited on March 1, 2020]. Retrieved from: http://activehistory.ca/2019/11/the-complex-truth-intersections-between-dayschools-and-the-shubenacadie-residential-school/

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.

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.

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).

Red Cross CPR

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

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 members, a <u>CPR section</u> of the website indicates providers who have notified the CDHNS that they will offer courses for members based on the licensing requirements.

Opportunity for Involvement

CDHA's Healthy Workplace Advisory Committee:

The CDHA is looking for a new member for their Heathy Workplace Advisory Committee. This Committee advises and provides feedback to the CDHA on resources being developed to support its members in attaining a healthy and respectful workplace. To maintain a balanced cross section of the profession, they are looking for a dental hygienist who has been in private practice 10 years or less and is registered as a practising RDH with the CDHNS. The Committee is currently composed of dental hygienists who are former Registrars, educators, ones employed in corporate dentistry, and health and wellness. There is also a registered nurse, with expertise in healthy workplace and an expert in ergonomics and mental well being. This new Committee member will need to be someone who is confident and able to communicate their thoughts.

Professional Corporation Permits: The Dental Hygienists Act (the "**Act**"), requires the College to govern and administer certain matters related to professional corporations that wish to carry on the practice of dental hygiene. This includes issuance of professional corporation permits to allow professional corporations to engage in the practice of dental hygiene.

Any member who carries on the practice of dental hygiene through a corporate body is **required** to obtain a permit for the corporation. Anyone who practices through a professional corporation but does not hold a permit may be subject to disciplinary action in accordance with the Act and Regulations.

If you are considering forming a professional corporation, please refer to the <u>CDHNS Professional Corporation Guidelines</u>. (You can also find the document in the Member's Library under: Professional Corporation Information.) You will find the requirements, the steps, and a link to the online application form in that document.

If you provide services through a <u>dentist</u> professional corporation, you do not need to apply for a professional corporation permit from the CDHNS. A professional corporation permit will have been issued through the Provincial Dental Board.

Did You Know? Under the Dental Hygienists Act of Nova Scotia, a person who wishes to work as a dental hygienist in Nova Scotia must be registered and licensed with the CDHNS. It is not sufficient for an individual to hold a practising licence in another Canadian province or territory. The practising licence in the original jurisdiction authorizes them to practice in that jurisdiction, not Nova Scotia. If you have individuals applying at your place of employment to practice dental hygiene, please direct them to contact the CDHNS directly, or send them to the CDHNS website for further details, and to access the online application. Practising dental hygiene in Nova Scotia without being registered with the CDHNS and without holding a Practising Licence is a punishable offence under the Dental Hygienists Act.

Dental Hygienists Making a Difference for Nova Scotians

Celebrating National Oral Health Month and National Dental Hygienists Week ™

National Dental Hygiene Week™ (NDHW™) takes place April 4-10, 2020 as part of Oral Health Month in Canada. This week emphasizes "Oral Health for Total Health". To support our registrants in getting out the message that oral health is important to overall health, the CDHNS Member Services Committee is undertaking the following activities:

Billboards: Billboards will be displayed again this year, focusing on the importance of dental hygiene care for the full month of April in Cape Breton and Halifax.

CBC Maritime Noon: On April 8, 2020, two CDHNS dental hygienists will participate in the call-in radio broadcast show that reaches all Maritime provinces. This interview will provide an opportunity to share the important messages that oral health is an integral part of overall health and that Nova Scotia dental hygienists are dedicated to being part of the solution to ensure that all Nova Scotians have equitable access to oral health care services. Once this broadcast is completed, you will be able to listen to this broadcast through a link on the CBC website. We will provide this information to registrants in another communication.

Commercial: The CDHNS will also be presenting a short 30 second commercial to highlight dental hygiene practice throughout Nova Scotia, from a regulatory standpoint. The focus will be on ensuring that the public receives safe, competent, ethical, and compassionate oral health care from Nova Scotia registered dental hygienists. This is being made possible from a very kind donation from a CDHNS member. It will be broadcast on CTV channels across the province during the week of April 20-26, 2020 (during National Oral Health Month).

Chance to Win! Read the CDHNS
Newsletter thoroughly and have a chance
to win. Complete seven questions on
the content of the newsletter using the
https://cdhns.in1touch.org/client/survey/survey.html?surveyId=173. All CDHNS
registrants who provide correct answers
will have their name put into a draw for a
prize.



From left to right: Stacy Bryan, Dianna Major, Patricia Grant, and Shauna Hachey

Presenting to the Provincial Standing Committee on Health (Committee) on Children's Oral Health

The CDHNS was requested to present to the Committee regarding Children's Oral Health, along with the Dept of Health. A special thank you to CDHNS members Patricia Grant, Shauna Hachey, and Dianna Major, who presented to this Committee, along with Stacy Bryan, Registrar. This group presented to the Committee using the CDHNS White Paper (2014) to help highlight the current challenges and recommendations for change. Patricia Grant and Francine Leach, RDH from the North East Health Clinic, were also interviewed for a news segment following this presentation.

For a full meeting transcript, go to: https://nslegislature.ca/legislative-business/committees/standing/health/ archive/health

Dental Hygienists Making a Difference for Nova Scotians continued

Dental Hygienists Community Outreach using Resource Centre Products



Tracey Kibble, NSCC Instructor (left) and Alma Wade, RDH (right)

"Another successful presentation to the students of the NSCC Achieve program. Thank you to Tracey Kibble for inviting me to talk with her class. A big thank you to the CDHNS for providing some toothbrushes and floss for the students. They were very pleased to walk away with some dental swag." Alma Wade, RDH

Get Involved in your study clubs!

Many of you are already part of a local study club, however, there are still many who have yet to get involved. We invite you to use this forum as a way to stay connected with your colleagues and keep informed on what's happening within your profession! Check out the website for a listing of study clubs registered with CDHNS.

Meet Your Colleague - Tasha Wile





- 1. What was your favorite TV show when growing up? The Smurfs and Saved by the Bell.
- 2. What was your favorite toy as a kid? A walking doll. I would pretend to brush her teeth, style her hair and apply makeup.
- 3. **Do you have any strange phobias?** June Bugs!! I even tried researching the sticky bugs to help alleviate my fear... it did not work!
- 4. If you could have any one superpower, which would you choose? And why? To be invisible. I love "people watching" and being invisible would allow me to do so more discreetly.
- 5. What is your favorite sport to watch? Basketball
- Name two things you consider yourself to be very good at. My calm demeanor and gentle debridement help very nervous patients through their dental appointments.
- 7. What is your favorite outdoor activity? Laying on a beach, listening to the waves crash and people watching.
- 8. Who would you like to exchange roles with? Princess Kate Middleton, but only for one week.
- If you didn't need a job, were healthy, and had plenty of time, what would you do? I would love to travel the world, visiting dental offices in different countries, seeing how they perform dentistry.
- 10. What do you consider your greatest achievement? Being a mom to my two teenage children and still have most of my hair!



DENTAL TEAM WEEKEND HIGHLIGHTS

CE FOR THE WHOLE DENTAL TEAM:

Composite Artistry — Masking a Discoloured Tooth (hands-on)

Speaker: Dr. Jenine Arab O'Malley

What's New and What to Review?

How to safely treat medicated patients throughout the process of care and an update about hot topics in pharmacology

Speaker: Dr. Ann Spolarich

Creating a Movement with your Dental Practice

Speaker: Susan Robichaud

Harness your Energy — Build your Resilience

Speaker: Beverly Beuermann-King

Examining Substance Abuse in Children and the Elderly

Speaker: Dr. Ann Spolarich

Stop Letting that Difficult Person Ruin your Day Effectively Handle Negative Attitudes and Difficult People for Better Productivity and Less Drama

Speaker: Beverly Beuermann-King

The Stakes are High. Two out of Three Dental Team Members Experience Chronic Pain.

Speaker: Nick Dua, Lifemark



OTHER HIGHLIGHTS:

Welcome Reception with interactive Digby scallops cooking demo

Yoga

with Dr. Kyla Romard

AGM Trade Show

Friday Night Dinner

PRICING:

CE for Non-Dentists (NS): \$300 per person Friday Night Dinner: \$95 per person

WATCH FOR MORE DETAILS AT **NSDENTAL.ORG**

AGM Weekend Presenting Sponsor



Official Newsletter of the College of Dental Hygienists of Nova Scotia

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Important dates to remember

March 27, 2020: NSCC Dental Assisting Table Clinic

March 27, 2020: Dalhousie Student Dental Hygiene Presentations

(Cancelled with details to follow from Dalhousie)

April 1-30, 2020: National Oral Health Month

April 4-10, 2019: National Dental Hygienists Week ™

May 9, 2020: CDHNS AGM/CC Event, Mount Saint Vincent University

September 1, 2020: Licence Renewal begins

October 17, 2020: Full Day CDHNS CC Event, Shining Waters,

Tantallon, NS

College of Dental Hygienists of Nova Scotia

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www.cdhns.ca



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