

## **APPENDIX A**

### ***National Competencies & Standards for Canadian Dental Hygienists***

In January 2010, the Canadian Dental Hygienists Association (CDHA) released a two-part document entitled *Entry-to-Practice Competencies and Standards for Canadian Dental Hygienist*, to replace the previous Practice Standards. This document is a collaborative project involving the major stakeholders responsible for the profession in Canada. This document defined a national perspective on the knowledge and abilities dental hygienists require to practise competently and responsibly.

The SDHA has since adopted the *Entry-to-Practice Competencies and Standards for Canadian Dental Hygienists* as our new practice standards and are what dental hygienists are required to comply with in Saskatchewan. The principles and standards within this document will guide members to ensure ongoing learning and competence, and will be used within our Continuing Competency Program (CCP) and Personal Learning Tools to guide our learning goals.

As mentioned, the Competencies and Standards is a two-part document; Part A, used primarily by educators to assist in the development of curricula, and Part B used primarily by regulatory bodies to define how dental hygienists must practice in order to be competent, safe and responsible.

The Competencies and Standards are defined within each:

- 1. Professionalism**
  - 1.1. Responsibility
  - 1.2. Accountability
  - 1.3. Knowledge Application
  - 1.4. Continuing Competence
  - 1.5. Professional Relationships
  - 1.6. Dental Hygienist-Client Relationship
- 2. Practice Environment**
  - 2.1. Health & Safety
  - 2.2. Practice Management
- 3. Dental Hygiene Services and Programs**
  - 3.1. Assessment
  - 3.2. Diagnosis
  - 3.3. Planning
  - 3.4. Implementation
  - 3.5. Evaluation

The Competencies and Standards described have been numbered for application within the CCP.

## 1. **PROFESSIONALISM**

Professionalism within dental hygiene encompasses those abilities required of all dental hygienists. Dental hygienists demonstrating professionalism will maintain the confidence of the public and promote respect for the profession. This domain reflects standards related to responsibility, accountability, knowledge application, continuing competence and relationships that define the practice and profession of dental hygiene.

### 1.1. **Responsibility**

Each dental hygienist has a responsibility to promote delivery of and access to quality dental hygiene services.

Competencies related to *Responsibility* include the ability to:

- 1.1.1. Apply evidence-based decision making approaches to the analysis of information and current practices.
- 1.1.2. Apply the behavioural, biological and oral health sciences to dental hygiene practice decisions.
- 1.1.3. Promote healthy behaviours of self, colleagues, clients and the public.
- 1.1.4. Act as a knowledge source for clients, professionals and the public seeking information about oral health and access to oral health care.
- 1.1.5. Contribute to actions that will support change and facilitate access to care; particularly for vulnerable populations.
- 1.1.6. Assist in the prevention and management of outbreaks and emergencies.
- 1.1.7. Advocate for oral health programs and policies.
- 1.1.8. *Promote social responsibility to advance the common good.*
- 1.1.9. *Support community partners in their efforts to improve quality of life.*
- 1.1.10. Adhere to current jurisdictional legislation, regulations, codes of ethics, practice standards, guidelines, and policies relevant to the profession and practice setting.
- 1.1.11. Recognize client rights and the inherent dignity of the client by obtaining informed consent, respecting privacy, and maintaining confidentiality.
- 1.1.12. Use a client-centred approach, always acting or advocating in the client's best interest.

### 1.2. **Accountability**

Each dental hygienist is accountable to the client/public; responsible for ensuring that her/his practice and conduct meets legislative requirements and adheres to the accepted standards of the profession.

Competencies related to *Accountability* include the ability to:

- 1.2.1 Practice within personal limitations and legal scopes of practice including federal, provincial and territorial laws and regulations.
- 1.2.2 Apply Codes of Ethics in all endeavors while acting with personal integrity.
- 1.2.3 Report unethical, unsafe and incompetent services to the appropriate regulatory organizations.
- 1.2.4 Facilitate confidentiality and informed decision-making in accordance with applicable legislation and codes of ethics.
- 1.2.5 Maintain documentation and records consistent with professional practice standards and applicable legislation.

### 1.3. Knowledge Application

Each dental hygienist uses current and relevant information to inform client care and practice decisions.

Competencies related to *Knowledge Application* include the ability to:

- 1.3.1. Access relevant and credible resources through various information systems.
- 1.3.2. Apply evidence-based decision making approaches to the analysis of information and current practices.
- 1.3.3. Critique literature findings to determine their potential value to dental hygiene practice.
- 1.3.4. Support conclusions based on a variety of resources with sound rationales.
- 1.3.5. Integrate new knowledge into appropriate practice environments.
- 1.3.6. Disseminate findings to colleagues and other professionals.
- 1.3.7. Apply critical thinking to decision-making processes and make choices to ensure optimum client outcomes.

### 1.4. Continuing Competence

Each dental hygienist maintains and continually improves her/his competence in response to changes in health care, scientific information, technology, and professional expectations.

Competencies related to ensuring *Continuing Competence* include the ability to:

- 1.4.1. Initiate positive change based on supporting literature and practice standards.
- 1.4.2. Self-assess professional performance in relation to standards of practice.
- 1.4.3. Create personal plans for continuing competence and professional development.
- 1.4.4. Seek opportunities to mentor colleagues and to access mentors for guidance.
- 1.4.5. Bring educational opportunities into own practice settings.

### 1.5. Professional Relationships

Each dental hygienist establishes and maintains relationships with colleagues, other health professionals, employers and the regulatory authority to ensure improved client care and safety, mutual respect and trust.

Competencies related to establishing Professional Relationships include the ability to:

- 1.5.1. Share information with other professionals about the dental hygienists' scope of practice
- 1.5.2. Clarify her/his role in inter-professional care.
- 1.5.3. Use effective verbal, non-verbal, visual, written and electronic communication.
- 1.5.4. Promote team relationships to support client services.
- 1.5.5. Function effectively within oral health and inter-professional teams and settings.
- 1.5.6. Promote actions that encourage shared workplace values and respect.
- 1.5.7. Disseminate oral health information to colleagues and other professionals.
- 1.5.8. Collaborate with community, health care professionals and other partners in providing, maintaining and advocating for oral health care programs.
- 1.5.9. Collaborate with community, health care professionals and other partners to achieve health promotion goals for individuals and communities.
- 1.5.10. Demonstrate commitment to the profession through community service activities and affiliations with professional organizations.

## **1.6. Dental Hygiene-Client Relationship**

Each dental hygienist ensures client-centred care by establishing and maintaining positive, professional relationships with clients, families and significant others which are focused on client needs and based on respect, empathy, and trust.

Competencies related to maintaining Dental Hygienist-Client Relationships include the ability to:

- 1.6.1. Assess, diagnose, plan, implement and evaluate services for clients.
- 1.6.2. Use effective verbal, non-verbal, visual, and written communication when working with clients, family members, substitute decision makers and stakeholders.
- 1.6.3. Demonstrate active listening and empathy to support client services.
- 1.6.4. Respect diversity in others; to support culturally sensitive and safe services.
- 1.6.5. Respect the autonomy of clients as full partners in decision-making.
- 1.6.6. Select communication approaches based on clients' characteristics, needs, and linguistic and health literacy level.
- 1.6.7. Accept the views of clients about their values, health and decision-making.
- 1.6.8. Convert oral health information in a manner relevant to clients using the principles of health literacy.
- 1.6.9. Support clients in using community resources when needed.
- 1.6.10. Communicate with clients in an open, honest, clear and timely way.

## **2. PRACTICE ENVIRONMENT**

Dental hygiene is practiced in a variety of settings. Regardless of the practice setting, each dental hygienist must ensure that she/he has the autonomy to practice dental hygiene consistent with legal, professional, and ethical responsibilities.

### **2.1. Health & Safety**

Each dental hygienist is responsible for ensuring her/his practice environment meets or surpasses accepted standards for client safety and infection control and supports the wellbeing of self, clients and other team members.

Competencies related to workplace *Health and Safety* include the ability to:

- 2.1.1. Apply current knowledge regarding infection prevention and control.
- 2.1.2. Respond to medical emergencies based on CPR and first aid standards.
- 2.1.3. Apply principles of risk reduction for client, colleague and practitioner safety, health and wellbeing.
- 2.1.4. Integrate principles of body ergonomics to support clinician's health.
- 2.1.5. Apply quality assurance standards and protocols to ensure a safe and effective working environment.
- 2.1.6. Take responsibility for maintaining equipment used for services, including service records.
- 2.1.7. Protect the environment by responsible use of consumables and disposal of waste products including biohazardous wastes.
- 2.1.8. Contribute to a healthy work environment for individuals involved in the practice.

## 2.2. Practice Management

Each dental hygienist is responsible for ensuring her/his practice environment supports the efficient and appropriate delivery of dental hygiene services.

Competencies related to the Management of a dental hygiene practice include the ability to:

- 2.2.1. Manage dental hygiene services individually and as part of a team.
- 2.2.2. Manage time and other resources to enhance the quality of services provided.
- 2.2.3. Use computer technology to access electronic resources and enhance communication.
- 2.2.4. Use information systems and reports for collection, retrieval and use of data for decision making.
- 2.2.5. Initiate positive change based on supporting literature and practice standards.
- 2.2.6. Support the financial aspects related to the provision of dental hygiene services.
- 2.2.7. Work with budgets related to dental hygiene practice settings.
- 2.2.8. Promote actions that encourage shared workplace values and respect.
- 2.2.9. Model the mission, vision and priorities of the organization in the practice context.
- 2.2.10. Use principles associated with strategic planning to support change.

## 3. DENTAL HYGIENE SERVICES & PROGRAMS

As primary oral health care providers, dental hygienists provide a variety of services for the purpose of improving the oral health of the client and the public. The delivery of dental hygiene services/programs requires the ability to determine the needs of the client/public, select and implement the most appropriate services/programs and evaluate the outcomes achieved. The Dental Hygiene Process, a problem solving, critical thinking framework is the accepted professional standard for decision making by dental hygienists.

**Dental Hygiene Services** include all interventions performed within the dental hygiene scope of practice directed toward attaining and maintaining optimal oral health. In this context the Dental Hygiene Process of Care is utilized to assess, diagnosis, plan, implement and evaluate client care. In the provision of these services the dental hygienist provides therapeutic/preventive therapy, oral health education, and health promotion interventions.

### • **Therapeutic/preventive therapy:**

- The primary, interceptive, therapeutic, preventive, and ongoing care procedures that help to enable people to achieve optimal oral health that contributes to overall health (CDHA Scope & Definition).
- Methods used to arrest or control oral disease; prevent oral disease; and promote oral health (Darby & Walsh 2010).

### • **Oral health education:**

- The application of teaching and learning principles to facilitate the development of specific attitudes, knowledge, skills, and behaviours with particular emphasis on oral health and its relationship to general health (CDHA Scope & Definition).
- Methods used in both preventive and therapeutic aspects of clinical dental hygiene care to explain concepts regarding oral disease and health; to demonstrate self-care

techniques; to reinforce learning; to evaluate understanding; and to determine ability to perform desired behaviours (Darby & Walsh, 2010, p.2).

• **Health promotion:**

- The process of enabling people to increase control over, and to improve their current and future health. It not only embraces actions directed at strengthening the skills and capabilities of individuals, but also action directed towards changing social, environmental and economic conditions so as to alleviate their impact on public and individual health (Darby & Walsh, 2010).

**3.1. Assessment**

Assessment involves the systematic collection and analysis of data to identify client needs, and oral health problems involving medical and dental histories, vital signs, extraoral and intraoral examinations, radiographs, indices, and risk assessment (Darby & Walsh, 2010, p. 15).

Competencies related to a Dental Hygiene Assessment include the ability to:

Therapeutic/Preventive Therapy

- 3.1.1. Collect accurate and complete data on the general, oral, and psychosocial health status of clients.
- 3.1.2. Use professional judgment and methods consistent with medico-legal-ethical principles to complete client profiles.
- 3.1.3. Identify clients for whom the initiation or continuation of treatment is contra-indicated based on the interpretation of health history and clinical data.
- 3.1.4. Identify clients at risk for medical emergencies and use strategies to minimize such risks.
- 3.1.5. Use appropriate oral health indices for the identification and monitoring of high risk individuals and groups.
- 3.1.6. Recognize the influence of the determinants of health on oral health status.
- 3.1.7. Discuss findings with other health professionals when the appropriateness of dental hygiene services is in question.

Oral Health Education

- 3.1.8. Elicit information about the clients' perceived barriers to and support for learning when planning clients' education.
- 3.1.9. Elicit information about the clients' oral health knowledge, beliefs, attitudes and skills as part of the educational process.
- 3.1.10. Assess the clients' motivation for learning new and for maintaining established health related activities.
- 3.1.11. Assess clients' need to learn specific information or skills to achieve, restore, and maintain oral health and promote overall wellbeing.
- 3.1.12. Assess the individual client's learning style as part of the planning process.

Health Promotion

- 3.1.13. Use information systems and reports for collection, retrieval and use of data for decision making.
- 3.1.14. Identify barriers to access to oral health care for vulnerable populations.
- 3.1.15. Identify populations with high risk of diseases including oral diseases.
- 3.1.16. Analyze health issues in need of advocacy.
- 3.1.17. Recognize political, social, and economic issues in the interest of the public.

### 3.2. Diagnosis

A dental hygiene diagnosis involves the use of critical thinking skills to reach conclusions about clients' dental hygiene needs based on all available assessment data (Darby & Walsh, 2010, p.15).

Competencies related to a Dental Hygiene Diagnosis include the ability to:

#### Therapeutic/Preventive Therapy

- 3.2.1. Formulate a dental hygiene diagnosis using problem solving and decision-making skills to synthesize information.

### 3.3. Planning

Planning involves the establishment of realistic goals and selection of dental hygiene interventions that can move a client closer to optimal oral health (Darby & Walsh, 2010).

Competencies related to Planning Dental Hygiene interventions include the ability to:

#### Therapeutic/Preventive Therapy

- 3.3.1. Prioritize clients' needs through a collaborative process with clients and, when needed, substitute decision makers and/or other professionals.
- 3.3.2. Establish dental hygiene care plans based on clinical data, a client-centered approach and the best available resources.
- 3.3.3. Design and implement services tailored to the unique needs of individuals, families, organizations and communities based on best practices.
- 3.3.4. Revise dental hygiene care plans in partnership with the client and, when needed, in collaboration with substitute decision makers and/or other professionals.

#### Oral Health Education

- 3.3.5. Negotiate mutually acceptable individual or program learning plans with clients.
- 3.3.6. Develop educational plans based on principles of change and stages of behaviour change.
- 3.3.7. Create an environment in which effective learning can take place.
- 3.3.8. Select educational interventions and develop educational materials to meet clients' learning needs.

#### Health Promotion

- 3.3.9. Select and implement appropriate health promotion strategies and interventions for individuals and communities.
- 3.3.10. Recognize the role of governments and community partners in promoting oral health

### 3.4. Implementation

Implementation of dental hygiene interventions involves the process of carrying out the dental hygiene care plan designed to meet the assessed needs of the client (Darby & Walsh, 2010, p.2).

Competencies related to Implementation of Dental Hygiene services include the ability to:

#### Therapeutic/Preventive Therapy

- 3.4.1. Provide preventive, therapeutic and supportive clinical therapy that contributes to the clients' oral and general health.

#### Oral Health Education

- 3.4.2. Incorporate educational theories, theoretical frameworks and psycho-social principles to inform the educational process.



- 3.4.3. Include clients, family and care providers as appropriate in the education process.
- 3.4.4. Provide health advice and assist clients in learning oral health skills by coaching them through the learning process.

Health Promotion

- 3.4.5. Use a holistic and wellness approach to the promotion of oral health and optimal general health.
- 3.4.6. Apply appropriate theories to initiate change at an individual and community level.
- 3.4.7. Apply principles of health protection through prevention and control of disease and injury.
- 3.4.8. Advocate for healthy public policy with and for individuals and communities.
- 3.4.9. Apply knowledge of common health risks to inform public policy and educate practitioners and the public.
- 3.4.10. Strengthen individuals' abilities to improve health through strategies that focus on community development and capacity building.
- 3.4.11. Participate in the development and delivery of social marketing message.

### **3.5. Evaluation**

Evaluation is the measurement of the extent to which the client has achieved the goals specified in the plan of care (Darby & Walsh, 2010, p. 2).

Competencies related to the Evaluation of Dental Hygiene Care include the ability to:

Therapeutic/Preventive Therapy

- 3.5.1. Evaluate clients' health and oral health status using determinants of health and risk assessment to make appropriate referral(s) to other health care professionals.
- 3.5.2. Evaluate the effectiveness of the implemented clinical therapy.
- 3.5.3. Provide recommendations in regard to clients' ongoing care including referrals when indicated.

Oral Health Education

- 3.5.4. Evaluate the effectiveness of learning activities and revise the educational process when required.

Health Promotion

- 3.5.5. Use measurable criteria in the evaluation of outcomes and solicit feedback from stakeholders regarding results.
- 3.5.6. Communicate findings to stakeholders and the public.