



ATTN: Caitlin Cleveland, MLA Kam Lake

March 7 2022

RE: Modernizing the *Dental Auxiliaries Act* for Increased Access to Preventative Healthcare

Thank you for reaching out to the British Columbia Dental Hygienists' Association (BCDHA) for consultation. We are pleased to hear that broadening the scope of practice of dental hygienists in the Northwest Territories is a priority on your agenda. A healthcare system focusing on prevention-based care will protect the health of the people of the NWT against oral diseases, and in turn, overall health impacts. Dental hygienists are experts in prevention-based oral health care and are very capable of practicing autonomously and independently.

It might be most useful for us to have a phone or zoom discussion about some of the following suggestions or the direction you are heading, if you feel any of this is helpful. There is a lot to unpack here! For the moment, we would suggest you begin your work with the following considerations that have been helpful for us in BC:

- Establish vocabulary that builds equity amongst the oral health care professions. i.e. referring to all dental hygienists, dental therapists, dental assistants, and dentists as “oral health care professionals.” **Refrain from grouping non-dentists as the “dental auxiliary.”**
- Establish criteria for dental hygiene practice without restricting access to care. This could include:
 - o **Determining the number of clinical practice hours a dental hygienist must achieve before being able to practice independently.** Consider if hours while in dental hygiene training may be eligible, or if eligible practice hours are strictly obtained post-graduation from a dental hygiene program. We can help with this, if you are able to provide us with a sense of what would work – note that BC has five DH education programs, so assessing the value of education is potentially a bit different for us.
 - o **Determining the ability to practice dental hygiene independently or the eligibility to own an independent dental hygiene practice based on education credentials. i.e., if a dental hygienist holds a degree or a diploma.** As of 2020, there are two classifications of actively practicing dental hygienists in BC; Registered Dental Hygienist (RDH) and Dental Hygiene Practitioner (DHP). DHPs have completed a dental hygiene degree from an approved institution and may own an independent dental hygiene practice. RDHs hold a diploma and practice independently from dentists but cannot own an independent dental hygiene practice. However, if an RDH has completed a degree before or after obtaining their diploma (in a wide range of disciplines), they may apply with the College of Dental Hygienists of British Columbia to switch categories.
 - o Amending the requirement for three current letters of professional reference in the NWT application for a Dental Hygienist License to enable applicants to submit letters based on either relevance or chronology. An applicant may be able to provide more substantial reference letters if based on their most relevant experience rather than only chronological professional work experience.
 - o **We do not recommend establishing a prerequisite that clients seeking dental hygiene care must have recently seen a practicing dentist.** Dental hygienists can determine when to refer to a dentist for restorative-related needs, and access to preventative dental hygiene care must not be impeded. [BCDHA worked to remove the 365-Day Rule](#) in 2020 to decrease barriers for clients to access preventative dental hygiene care.

- Establish an outline for dental hygiene practice standards, limits, and conditions including restricted activities/reserved acts.
- Develop a Quality Assurance Program
 - o Develop criteria for demonstrating hours of continuing competency or professional development activities, and a timeframe/cycle for which to complete said activities.
 - o Consider a program that blends various models using an exam, a portfolio, modules...
- As the NWT does not have either an accredited or non-accredited dental hygiene program, many dental hygienists in the NWT may hold an array of practice backgrounds and skills from the province in which they obtained their education. Consider developing pathways or modules for dental hygienists to demonstrate competency in skills such as:
 - o Administration of local anaesthesia with or without epinephrine for dental hygiene care
 - o Self-initiation of radiography taking for dental hygiene diagnostic purposes
 - o Whether a dental hygienist has previously completed the orthodontic module in a different province
 - o Restorative dental hygiene involving use of interim stabilization therapy
 - o Consider partnering with the dental hygienists' corresponding province of training or previous licensing to verify competency in such skills.
- Establish boundaries that dental hygienists, dental therapists, and dentists are responsible for maintaining their own respective professional licenses.
 - o Require those previously considered "dental auxiliaries" (dental hygienists, dental therapists) to:
 - Maintain their own Professional Liability Insurance at a minimum of \$1 million for coverage.
 - Maintain membership with both the national and a provincial professional association for opportunities for professional development and support.

We anticipate that there may be several advocacy pieces that the NWT must undertake as they develop changes to the NWT Act (*Dental Auxiliaries Act*). These may include:

- Consulting all oral health care professionals about their vision to advance oral health in the NWT
- Educating the public about the roles of various oral health care professionals and differentiating preventative versus restorative oral care
- Educating oral health care professionals, particularly dentists, about the potentials and benefits of expanding the dental hygiene scope of practice
- Educating other health care professionals (nurses, doctors, etc) about the roles of various oral health care professionals
- Develop interprofessional training opportunities so that all health care professionals can learn with, from, and about each other's scopes to diversify and strengthen health care system response.

Over the years, BC dental therapists and certified dental assistants have reached out to the BCDHA for professional support. In recent months, BCDHA has expanded membership for dental therapists and has developed a pilot membership program for CDAs through our CDA Alliance. Thus, we speak not only for dental hygienists in BC, we also carry the voices of both dental therapists and dental assistants. We invite you to speak with us so that our parties can both connect and discuss our perspectives in greater detail.



Thank you again for reaching out. We truly hope for the modernization of oral health care delivery and the protection of health for all Canadians.

Sincerely,

Executive Director

Further Readings:

[College of Dental Hygienists of British Columbia Registration Classifications \(cdhbc.com\)](http://cdhbc.com)

[College of Dental Hygienists of British Columbia New Regulation & Bylaw Amendments \(cdhbc.com\)](http://cdhbc.com)

[Dental Hygiene - Province of British Columbia \(gov.bc.ca\)](http://gov.bc.ca)

[College of Dental Hygienists of British Columbia Quality Assurance \(cdhbc.com\)](http://cdhbc.com)