

# CDHM Connections



COLLEGE OF DENTAL HYGIENISTS OF MANITOBA

Issue 1

June 2009

## Official Home for the CDHM



### New Contact Information:

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After a lengthy search, the CDHM has found a home!

On July 1, 2009, the College will proudly open the doors to a facility that will provide formal offices for employees, a meeting space for Council, committees and working groups. It will also be a place where courses, focus groups and information sessions will be held, and a location where information, documents and forms can be picked up or dropped off.

The space will consist of 1300 square feet and house a reception area, two offices, a board room, storage space and kitchen area.

Parking is available on Des Meurons directly in front of the office on either side of the street. There is also a parking lot on the south side of the building and in the back of the building (east side).

We welcome you to visit the CDHM office after July 1st. Office hours have not yet been determined, so please call ahead prior to a visit.

## Congratulations 2009 Dental Hygiene Graduates

The CDHM would like to congratulate the 2009 graduates of the University of Manitoba, School of Dental Hygiene program and welcome them to the dental hygiene profession in Manitoba.

All graduates of the program are capable of administering local anesthetic and many have completed additional training on orthodontic and restorative skills.

Effective January 15, 2009, the CDHM joined the majority of other dental hygiene regulatory bodies by requiring all new applicants to have either completed the National Dental Hygiene Certification Examination (NDHCE) or been grand-parented by

the NDHCB, prior to being granted registration.

The NDHCE exists so that Canadian Regulators have reliable and valid testing mechanisms for assessing current dental hygiene competencies.

New graduates are eligible to begin employment once confirmation of successful completion of the NDHCE is received by the CDHM. Anticipated employment start dates will be mid-July 2009.

*Welcome to the profession!*



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## Chair's Message, Mickey Emmons Wener



I look forward to your participation at our 2nd annual AGM!

Following the voting in of the new CDHM Council at the first AGM on September 27, 2008 we immediately made plans to meet and begin the process of becoming an operational Council. We have held four full day council meetings on December 13, January 11, March 10, and May 4 that have focused on electing officers, establishing CDHM policies and dealing with any matters of concern or business. The first decision of the Council was to hire Susan Rogers of ROGERS Leadership Consulting as our governance consultant who is our guide as we climb the steep learning curve of how to govern responsibly.

The role of the governing body, the CDHM Council, is to ensure accountability for everything that goes on in our organization, including deciding on who has the power to make what decisions and take what actions for what purposes. Our new Act and By-laws began this process, but having a comprehensive safety net of policies in place is crucial to being able to effectively operate any organization.

The CDHM Council has chosen to embrace the Carver Policy Governance™ model, the same model that is used by CDHA and the NDHCB. The essence of this principle based model is that the Council creates policies in 4 different areas of organizational operations which help to clearly define the roles, responsibilities and limitations of the Council and the Registrar. A critical set of policies are the ENDS policies. These are strategic outcomes or goals that are important for the organization to attain. The Registrar is responsible for carrying out a 'reasonable interpretation' of

those ENDS/goals, and for regularly reporting on progress. We now have a growing manual that outlines our policies to date.

The Council has engaged in many interesting discussions, including:

- Agreeing to and signing a code of conduct for CDHM Council members
- Establishing the owners, stakeholders and customers of the CDHM
- Translating ambitious dreams into realistic ENDS
- Identifying the 'winds of change' that impact upon the practice of dental hygiene in Manitoba

The CDHM is working diligently to build the foundation for continuing competency, for re-entry to practice and for mobility between provinces. Establishing a physical foundation, a new office, is also on our immediate agenda. These are all significant steps to laying the groundwork for our continued growth and development as a responsible regulatory body.

These continue to be exciting times for dental hygiene in Manitoba and Canada. As Chair, I encourage you to show your responsibility as a health professional...be familiar with the CDHM web site, our legislation and our new policies as they begin to emerge.

Let me take this opportunity to offer a sincere thank you to the Council, the Registrar, our governance consultant and committee members for your commitment of time, passion and expertise. Much appreciated!

### UPCOMING MEETING DATES:

#### COUNCIL:

AUGUST 31, 2009

#### AGM:

SEPTEMBER 26, 2009

### Council Members:

Norma Bonnici and Betty Ann Zegarac (Public reps), Mickey Wener, (Chair). Barbara Belcher, Joanna Asadoorian, Salme Lavigne, Kathy Griffiths, Patricia Hawthorn (Vice-chair), Gayle Halas (appointed to replace Joanna Asadoorian who resigned, January 2009)



## Regulated Health Professions Act (RHPA)

The Regulated Health Professions Act (Bill 18), also referred to as 'umbrella legislation' was introduced in the legislature on April 16th, 2009.

This Act has been proposed by the government as a single common statute to govern all regulated health professions. It will replace all the individual statutes, which currently govern health professions, such as The Dental Hygienists Act or the Dental Association Act.

Within the last two years, representatives from the CDHM have participated with the other 21 regulated health professions in consultations with government on the intent, content and impact of this legislation.

Three other provinces –British Columbia, Alberta, and Ontario, also have a common statute for all or most regulated health professions, with similar key objectives. Manitoba Health is attempting to

learn from their regulatory model and experiences, to create a "made in Manitoba" statute for regulated health professions.

There will be many similarities between this proposed legislation and the current Dental Hygienists Act, considering ours has been proclaimed so recently. However, there will be some significant changes with the implementation of the new RHPA.

The key objectives for this new legislative framework are to:

- further strengthen patient safety by ensuring all regulatory bodies establish standards of practice, codes of ethics and competency standards;
- improve patient safety by regulating more clinical procedures;
- create consistent and fair complaint and disciplinary processes across all professional colleges;
- increase public representa-

tion on the boards of self-governing professions;

- provide improved accountability between the regulatory bodies and the government;
- establish a process to review requests from unregulated professions that wish to become self-governing; and
- allow health professions to continue to be self-regulating.

In summary, some points of note:

**A.** The CDHM will remain the regulatory body for dental hygienists.

**B.** A list of reserved acts has been introduced; these are called 'controlled acts' in some provinces. This is a list of activities that are considered high risk and harmful to the public if carried out by unskilled or untrained individuals.

**C.** Prior to the implementation of the new Act, through the creation of regulations;

- each reserved act will be assigned to one or more health profession(s);



- The CDHM will determine how the reserved act will be applied within the scope of practice for dental hygienists;

- new regulations will be introduced to further define the RHPA; and

- the current Dental Hygiene Regulations will be amended to incorporate some of the changes in the new RHPA.

For more information about the RHPA, please visit the Manitoba Health website at [www.gov.mb.ca](http://www.gov.mb.ca).

## CDHM Committees Appointed

Since the AGM in September 2008, two committees have been formed. The work of these committees is invaluable to the College and in protection of the public. The following individuals have been appointed to each:

### Continuing Competency:

- Alayna Gelly, Chair
- Mireille Fiola-Hein
- Marcia Rushka
- Sheryl Slosower

### Complaints:

- Cindy Isaak-Ploegman, Chair
- Lisa Grayson
- Kelly Tye-Vallis (public rep.)

Council will be appointing members to the Inquiry Committee very soon.

Thanks to all of the members who have dedicated their time and effort.





The Board of the Manitoba Dental Association allows registered dental assistants who have successfully completed the scaling module from an approved program to perform the following procedures:

1. Removal of calculus and stain with hand instruments up to 2 mm subgingivally; and
2. Use of explorer, periodontal probe, air and transillumination to locate and detect calculus.

All patients must be examined by a dentist prior to a dental assistant performing any procedures. Dental assistants may only perform scaling on patients identified by the examining dentist as having:

1. Healthy periodontal tissues with no overt clinical or radiographic sign of bone loss;
2. Plaque associated gingivitis; and/or
3. Calculus limited to 2mm subgingivally.

Dental assistants may not use sonic or ultrasonic instruments to remove calculus or stain.

## Scaling Dental Assistants: Information and Scope of Practice

As a registered dental hygienist (RDH) in private practice, you may work with a scaling assistant in your career. It is important that dental hygienists be informed and educated as to the history and rationale for the development of scaling assistants and their scope of practice, so that clients receive appropriate and safe treatment and are educated accordingly.

The goal of including limited scaling under the supervision of a dentist in the scope of practice of dental assistants began in 2003. It was believed that there was increasing consumer needs for preventive oral health services that dentists and dental hygienists were unable to meet.

After much consideration, the Manitoba Dental Association (MDA) Board approved the Preventive Dentistry Scaling Module (PDSM) with the basic principle of preparing registered dental assistants (formerly referred to as Level II Dental Assistants) to perform the clinical skills of scaling on a limited population.

The PDSM is divided into two components:

- 1. Theoretical Home Study Component:** The home study component includes a review of the existing registered dental assistant's knowledge as well as new knowledge presented in the home study materials. The components of the home study section helps the dental assistant in developing the knowledge base necessary to begin the clinical section of the module.

- 2. Clinical Component:** The educational institution prepares registered dental assistants in the necessary skills to scale teeth 2mm subgingival. The clinical section includes three components: pre-clinical, clinical patient care, and clinical assessment of the required competencies.

Currently in Manitoba, the PDSM is offered at Red River Community College and CDI. A total of 49 dental assistants have completed the scaling module and are registered to perform limited scaling.

The requirements and limitations described in the sidebar of this article are those approved by the Manitoba Dental Association. As professionals, dentists and dental assistants are expected to comply with those limitations.

As dental hygienists, devoted to promoting optimal oral health, it is important that collaboration occurs with the dentist, scaling dental assistant, and other staff members to ensure that an effective program is established within your practice that allows for proper selection and treatment of clients.

Spend time educating your clients on topics such as:

- Oral health being an integral part of a person's overall health, well-being, and quality of life;
- The profession of dental hygiene being devoted to promoting optimal oral health for all;
- Dental hygiene having an identified body of knowledge and a distinctive expertise which dental hygienists use to serve the needs of their clients and promote the public good;
- Details of the treatment he or she is receiving and that it be appropriate to their needs;
- The Difference between minor/limited scaling and periodontal therapy.

The collaboration of all oral health professionals within a dental practice is critical for patient safety, the promotion of oral health, and is a priority for the CDHM and the profession of dental hygiene.

*If you are aware of an individual or practice that performs or allows scaling beyond the scope of practice indicated, please contact the CDHM and MDA. In addition, if you are aware of an individual implying or representing themselves as a dental hygienist, please contact the CDHM.*

## Continuing Competency Program

By the Continuing Competency Committee (Alayna Gelley, Mireille Fiola-Hein, Marcia Rushka, Sheryl Slosower)

Dental Hygiene in Manitoba, with the achievement of self-regulation, has shifted from an occupation, to a regulated health profession. With this new achievement comes the requirement and responsibility of providing and monitoring competent, ethical, safe and appropriate health care for the public.

Public protection has been the impetus behind establishing Continuing Competency programs amongst dental hygiene professionals across Canada. However, Continuing Competency does not exist solely in the realm of Dental Hygiene. Nursing, Physiotherapy, Occupational Therapy, Massage Therapy, Midwifery, and Registered Dietitians, to name a few, have already established mandatory Quality Assurance programs for their practitioners.

As the Continuing Competency Committee of the CDHM, we are seeking to establish a strong, effective and evidence-based Continuing Competency program, specific and suitable to our members.

During the last 5 months, we have spent many hours researching the Continuing Competency programs of Dental Hygiene jurisdictions across the country, as well as our allied health professions in Manitoba. We have been guided by research in the field and the assistance of our colleagues with advanced knowledge and expertise in this area.

We are extremely fortunate to be able to access and use the extensive work of other professional committees. We are by no means breaking new ground, but rather building on what has been established and successful elsewhere.

The 2007 CDHM Competencies set out by Council state that the dental hygienist “develops a written plan to address continuing competence/quality assurance goals,” and “assesses own continuing competence/quality assurance (e.g. through reflective practice, formalized self-assessment, mentor relationships, peer review, supervisor feedback, etc.)”.

We will use this and all information at our disposal to propose a Continuing Competency program to Council that is effective and relevant to our profession and province. Our ultimate goal is to advance the collective knowledge and quality of care offered by all hygienists in Manitoba, thus assuring protection of the public’s interest.

A presentation is planned for the AGM in September. This will allow for discussion around the work of the Committee thus far, and any decisions made by Council regarding the details and requirements surrounding the Continuing Competency Program. Please come out to gather information, provide feedback or ask questions.

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## Notice of Censure

On May 20, 2009, the Complaints Committee of the CDHM censured two members with respect to their conduct during the 2009 renewal.

Both members were found to have knowingly submitted a false CPR certificate to obtain registration renewal. The Complaints Committee found that the members were in breach of the declaration that stated the application form and attachments be correct, complete and true in

every respect. The members were also in breach of subsection 61(3) of the Act by attempting to obtain registration by false or fraudulent representation.

Based on these facts, the Complaints Committee recorded its disapproval of the lack of professionalism and responsibility in failing to adhere to the ethical values and standards of practice, by censuring these members. A Censure forms part of a member’s disciplinary record,

and under subsection 45(2) of the Act, a past censure may be taken into account by any future inquiry panel.

In consideration of it being the first renewal period, the Complaints Committee did not order the individuals to pay any fees associated with the review (approximately \$2,700.00 - legal fees only).

However, future members being investigated will be subject to the fees associated with the review.

As individuals and as a profession, it is important to remember what it means to be a dental hygienist - responsible, professional and accountable.

Please take the time to read College correspondence and legislation. Requirements for registration and renewal are mandatory and reviewed very carefully upon submission. Thank you.

## 2009 AGM



Saturday, September 26, 2009  
Canad Inns Polo Park

We would like to thank everyone who attended the inaugural AGM last year. We had a great turnout and hope for the same this year.

The 2009 AGM is scheduled for the morning of September 26, 2009 and will be held at the Canad Inns Polo Park.

For those traveling from out of Winnipeg, a special room rate will be provided by the hotel.

An official meeting notice, with the agenda, annual report and presentation information will be mailed out by mid-August. Elections for the two (2) vacant Council posi-

tions will occur at this time.

If you have items that you would like to discuss at the meeting, in addition to the normal business and reporting scheduled, please email the office at: [CDHM@cdhm.info](mailto:CDHM@cdhm.info). Looking forward to seeing you there!!

## Call for Nominations

The CDHM Council is looking for two individuals to fill the vacancies created by the one-year terms expiring for Patti Hawthorn and Gayle Halas. Patti and Gayle both served one-year terms beginning in September 2008, and have devoted their time and expertise over many years. Our profession has benefitted tremendously from all their work! Our sincere thanks.

In accordance with our By-Laws, individuals who are now elected to Council will serve three (3) year terms.

CDHM Council's responsibilities include:

- Providing governance and leadership to the College through administration of the Act, Regulations and By-Laws;
- Exercising the rights, powers and privileges of the College;

- Establishing and monitoring registration and continuing competency requirements;
- Appointing and overseeing the work of the Complaints and Inquiry Committees;
- Establishing and monitoring Regulations, By-Laws, Standards of Practice and Competencies; and
- Providing direction to the Registrar.

If you or someone you know would like to contribute energy, experience and wisdom through a position on CDHM Council, please submit a nomination and biography form by July 24, 2009.

Please find enclosed with this newsletter, the Call for Nominations forms. They are also available online at [www.CDHM.info](http://www.CDHM.info).

VOLUNTEERING  
YOUR TIME AND  
EXPERTISE TO THE  
DENTAL HYGIENE  
PROFESSION CAN  
BE REWARDING  
AND VALUABLE -  
TO YOU, THE  
PROFESSION AND  
THE PEOPLE OF  
MANITOBA.

## Proposed By-Law Change for Upcoming Renewals

The CDHM Council would like to inform you of a proposed By-law change that will be voted on at the upcoming AGM on September 26, 2009, that will affect the deadline date for renewal documents/requirements each year. In addition to this By-law change, other By-laws may be brought to the membership at this venue. The CDHM Council will be reviewing all the By-laws by mid-July to highlight those that need revision.

In regards to By-law 3.7 and 3.9, in order to process the renewal forms and have registra-

tion in place by January 15, and also to avoid the holiday season, The CDHM Council is proposing a change in the renewal date to December 1st. Renewal forms and **ALL** supporting requirements would need to be received or postmarked by December 1st. Forms and documents that are received after this date are considered late and subject to a late registration fee.

Please plan on attending the AGM to voice your opinion on the proposed changes.

December



## Registers Online

In accordance with The Dental Hygienists Act and Regulations, the Register of Dental Hygienists, Practising and Non-Practising must be available for members, employers and the public to view.

Because the registers essentially represent a snapshot of the dental hygienists registered at a certain time and are constantly changing, the CDHM has decided not to mail hard copies of the registers to each employer, as was done in previous years.

Instead, the registers are posted on our website at [www.CDHM.info](http://www.CDHM.info) and are updated as new applicants register or as changes in registration



status of current members occur.

This way, the registers remain current, valid and accurate throughout the year. Contact can also be made with the CDHM by email or phone with regards to the registration of a particular individual.

The individuals listed on both registers have met the requirements for registration and are permitted to use the title, Registered Dental Hygienist (RDH). However, only the individuals listed on the Register of Dental Hygienists - Practising have the ability to practise dental hygiene and be em-

ployed as dental hygienists in the Province of Manitoba.

Also included on the Practising register are the dental hygiene skill rosters an individual may be included on: Extended Practice, Local Anaesthetic, Orthodontic and/or Restorative.

Please check the registers to verify your registration and encourage your employers to do the same to verify the registration status of a new employee.

## Registration Statistics

We are pleased to announce that renewal of registration for dental hygienists has been completed for the 2009 registration year.

The following individuals' registrations have been cancelled upon request, in good standing:

- Diane Michelle Allard: 0232
- Sharanpreet Brar: 0477
- Jackie Elliott: 0113
- Tracie Dawn Grech: 0596
- Mahsa Hashemian: 0150
- Leanne Linda Martin: 0258
- Marsha Morris: 0115

The following individuals' registrations have been cancelled for failing to submit renewal requirements and therefore are currently not registered with the CDHM:

- Arlene Gail Alexis: 0202
- Cristiana Burns MacGregor: 0410
- Jonathan Bruce Campbell: 0461
- Kenny Ka-Wen Cheung: 0262
- Brad Eveleigh: 0564
- Elaine Fay Kinchen: 0464
- Rhonda Lee Plett: 0357
- Kateryna Pustovoytova: 0567
- Debra Sue Sahulka: 0302
- Yvonne Marie Smith: 0545
- Katheline Von Niebelschutz: 0556

EFFECTIVE  
MAY 15, 2009:  
  
PRACTISING: 555  
NON-PRACTISING: 59  
STUDENT: 53

### **Representation as a Dental Hygienist and Use of Title:**

No one other than a dental hygienist registered with the College of Dental Hygienists of Manitoba may call themselves a dental hygienist, oral hygienist, registered dental hygienist or any variation or abbreviation or an equivalent in another language. The legal language for this can be found in subsections 3(1) and 3(2) of The Dental Hygienists Act. This also means that a person who has a diploma or degree in dental hygiene but is not currently registered with the College may use their academic credentials (e.g., Diploma in Dental Hygiene, BScDH, etc.) but may not use the title "Dental Hygienist" — that is restricted to CDHM registrants. In addition, as the title "Dental Hygienist" is restricted, it is important that registrants use the full title and not just the term hygienist as there are many other occupations that include that word in their particular title.

## Renewal Requirements

Please watch for renewal documents in your mailboxes in October.

As discussed on page 6 of the newsletter, the CDHM Council is proposing a change to the renewal deadline date. In order to process the renewal forms and have registration in place by January 15, and also to avoid the holiday season, a change in the renewal date to December 1st, is being proposed. Renewal forms and **ALL** supporting requirements would need to be received or postmarked by December 1st. Forms and documents that are received after this date are considered late and subject to a late registration fee.

**CPR:** In order to meet the annual CPR requirements, please plan on having CPR courses completed between January 1, 2009 and December 1, 2009. If CPR courses are scheduled after this date, and copies of cards are received by the CDHM office after the renewal deadline date (proposed December 1st), renewals will be deemed late.

**Liability Insurance:** Proof of insurance for the 2010 registration year must be received by the renewal date as well. Any evidence submitted should state that insurance is effective

from January 2010 to December 2010. To ensure that evidence of liability insurance is available to submit by December 1st, it will be imperative that this requirement is addressed with the respective carriers earlier than in past years.

- For CDHA members:
  - Please submit a Certificate of Insurance that can be printed from the CDHA, Members Only site.
  - Request that CDHA send us an email confirmation of insurance.
- For CDSPI subscribers:
  - Please submit a Memorandum of Insurance provided by CDSPI.
  - Request that CDSPI send us an email confirmation of insurance.
  - The invoice That CDSPI has sent you, or a copy of the cheque written to pay for the insurance is not valid evidence of insurance being in place for 2010.



## Practice Hour Requirement

During the Transitional Council's discussion with government, it was decided that a practice hour requirement would contribute to ensuring competency.

This requirement was to begin with the upcoming January 15, 2010 renewal. Its implementation was delayed to allow more than two years for all members to make plans for the future.

On registration and renewal forms, all practising dental hygienists were asked to declare practice hours for 2007 and 2008. These hours will be totaled with 2009 hours and must meet the minimum required (see sidebar information).

Notices will be sent to individuals very soon who have a current total of less than the required amount in this designated timeframe. This will allow ample opportunity to provide the appropriate information to the College or meet the practice requirement prior to January 2010.

If practice hours do not meet the minimum required, and an individual would like to be registered on the Register of Dental Hygienists - Practising, further evaluation of knowledge and skills may be required in the form of a Competency Assessment and possible re-entry program.

Please contact the CDHM for more information or to inquire as to whether this may apply to you.

### **Minimum practice hours are as follows:**

- If you graduated within 12 months of renewal, there are no minimum practice hours.
- If you graduated within 24 months of renewal, 400 practice hours are required.
- If you graduated more than 24 months of renewal, 600 practice hours are required.



## The Use of Lasers for Dental Hygiene Care: Policy Established

At the request of members, the CDHM has researched and considered the use of lasers for periodontal treatment in Manitoba.

There is a constant evolution of methods of treatment, as well as an understanding of the pathogenesis of periodontal disease. It is the CDHM's responsibility to ensure that those methods used are not only safe for the public, but also that the procedures performed are effective.

Current policies of the dental hygiene jurisdictions across Canada were reviewed with a wide variance in policy observed. As a result, a working group was struck that consisted of experts from the School of Dental Hygiene and the department of Periodontology at the Faculty of Dentistry.

The group reviewed the policies of the other jurisdictions, a manual provided by a laser course attended by a CDHM member, and current research in the field (AAP Commissioned Review – Lasers in Periodontics: A review of the Literature - Charles M. Cobb).

After discussion and a review of the literature, the position of the working group is as follows:

- Research on effectiveness of lasers is inconsistent: no additional advantage to the patient over traditional techniques or instruments. No significant evidence that supports the use of lasers in periodontal treatment.

- Research is questionable: In vitro studies used primarily vs. in vivo. Research and training completed on animals (pig mandibles)
- Lasers cannot be used alone as a replacement for traditional therapies (scaling/RP) – will still require further treatment
- There is potential damage to root surfaces and cementum at certain wavelengths.
- Being used primarily to increase billing – similar to Soft Tissue Management
- Training not consistent: Some are offered didactic and some clinical, but question as to how training is assessed, reviewed and approved for RDH to practice skills would be extremely difficult. It was felt that if proper training was not provided, treatment could be dangerous to patient.

The above recommendation was provided to Council, with policy developed. It was decided that at this time, the CDHM would not allow the use of lasers for periodontal treatment.

It is the intent of Council that the research be reviewed at a later date to investigate whether future results supported laser usage for periodontal treatment.

Please contact the CDHM office if you have further questions or concerns.

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## Competency Assessment and Re-entry Program Being Developed

Since August 2008, the Prior Learning Assessment and Recognition (PLAR) Committee has been meeting to discuss the needs and goals for the Competency Assessment and Re-entry Programs. The committee is currently composed of: Alayna Gelley, Diane Girardin, Salme Lavigne, Laura MacDonald and Mickey Wener.

These programs are being developed in order to assess and ensure competence for:

- Individuals who have been out of dental hygiene practice for more than three years;
- Individuals who have not met the minimum practice hours required in a three year period; or
- Graduates of non-accredited or international dental hygiene programs.

The Clinical Competency Assessments and Re-entry programs from other jurisdictions have been reviewed, as

well as courses offered by the Canadian Dental Hygienists Association (CDHA), to assess the suitability and effectiveness for use in Manitoba. As with the Continuing Competency Program, we are fortunate to have other provinces' programs to consider in the development of our own.

If an individual falls into one of the categories described, he/she will be required to complete the Competency Assessment. This assessment will be composed of both a didactic and clinical component with evaluators assessing the competence of the candidate. If an individual is deemed incompetent, and further re-training is recommended, successful completion of the Re-entry program will be required.

It is our goal to have both the programs operational by the end of 2009.

## A Message from the MDHA

Top 5 Reasons to Join the

# Manitoba Dental Hygienists Association

1. Reduced Fees on CE courses
2. Professional Updates & Communications
3. Membership has it's Benefits\*
4. Stay Connected with Alumni
5. Give back to your Profession & Community

Find out more!  
www.mdha.ca  
email: info@mdha.ca



www.cdha.ca

\*Members have access to a comprehensive insurance program, designed specifically for hygienists, plus our growing partner discount with savings on technology, uniforms, personal & auto insurance and much more!

### **MOVING??** Change of Name and Address Notification

It is essential that members of the College of Dental Hygienists of Manitoba (CDHM) ensure that their mailing address is always current. Incorrect or out of date addresses can lead to missed mailings which may include important notices and documents. Name and address changes must be submitted in writing, or by email and should include the following information:

<hr/>		
<b>Name (in full)</b>	<b>CDHM Reg. Number</b>	
<hr/>		
<b>New Name (in full, if applicable)</b>	<b>Old Address</b>	
<hr/>		
<b>New Address</b>	<b>Home Phone</b>	<b>Email</b>
<hr/>		
<b>Effective Date</b>	<b>Signature</b>	

Registrants are welcome to copy or cut out this name/address change card and use it to submit a name change or address change. Please contact the CDHM if you require further information. Telephone: 204-219-2678 Fax: 204-219-2679 or email: cdhm@cdhm.info