

COLLEGE OF DENTAL HYGIENISTS OF MANITOBA

Ensuring the public has access to safe, competent dental hygiene care and expertise that contributes to improved oral and overall health.

Issue 24		January 2017
Inside this issue:		CDHM 2017 Renewal of Registration is Complete!
CDHM 2017 Renewal of Registration is Complete!	1	The College of Dental Hygienists of Manitoba (CDHM) 2017 wall certificates for approved <i>practising registrants</i> were mailed out on Thursday January 19, 2017. If you have not received your wall certificate by Thursday February 9, 2017, please call (204) 219-2678 or email <u>cdhm@cdhm.info</u> to let a staff member know.
		Locating your CDHM Wallet Card and Income Tax Receipt for Practising and Non- practising Registrants:
REGISTRAR'S REPORT	2	As the CDHM changes to more cost effective and environmentally friendly processes, practising and non-practising wallet cards and receipts are now available on your online profile at <u>www.cdhm.info</u> . This process will enable accessibility at any given time for the registrants.
Chair's Message	3	Similar to renewing your online registration, login using your four digit registration number and password. Once logged in, look for the heading Wallet Card / Receipt and press the link on the underlined status. A pop-up box where you would
Deputy Registrar's Update	4-5	print/download the receipt will then appear. It is that easy!
Notice of Formal Censure	5-6	
HR CORNER— BABY BOOMERS, GEN-XER, & MILLENIALS: WORKPLACE FRIENDS OR FOES?	7	
Message from the President of the Manitoba Dental Hygienists Association	8	
Quality Improvement and Patient Safety Conference	8	CDHM 2016-2017 Council Members at the 2016 CDHM Annual General Meeting Members in Attendance (from L to R): Kim Boyce, Terri Archibald, Raymond Wang, Karina Hiebert, Emily Walker, Joan Todd, Kelly Tye-Vallis, Lisa Grayson, Saima Klippenstein and Betty Ann Zegarac.

CDHM Connections



Registrar's Report - Stephanie Gordon

A Pregnant Pause, or is it?

The College receives daily inquiries with regard to dental hygiene status and how this classification will be impacted while on a maternity/parental leave.

As our renewal of registration timeframe has just concluded, the first point that comes to mind with regard to registration status is that the CDHM registration year encompasses the annual timeframe **of January 15 to January 14**. This has been the timeframe for the preceding 8 years. That being said, when applying for renewal, whether you chose practising, non-practising or decide to cancel your registration, this is the time period you are making a decision about.

If you are on the practising register while being on maternity leave, you are legislated to meet all of the CDHM requirements for registration. Most specifically this includes the annual CPR Level C or HCP provider hands-on course, appropriate liability insurance, and all CCP requirements. Additionally, you may not have considered this, but in actual fact, you are able to practice your profession while on maternity leave. However, this employment could negatively impact your Employment Insurance benefits.

When you work

- If you work while receiving **EI maternity benefits**, EI will deduct the **entire** amount you earn dollar for dollar from your benefits.
- Normally if you work while receiving El parental benefits, you can earn up to \$50 per week or 25% of your weekly benefit, whichever is higher. El will deduct any money earned above that amount dollar for dollar from your benefits. The Government of Canada currently has in place a pilot project which changes the way weekly El parental benefits are treated should you work. This pilot project is in place until August 11, 2018.

I encourage you to visit the Government of Canada website for further information on maternity/ paternity leave benefits and current initiatives affecting these benefits such as the El pilot project which is currently in effect. These programs change from time to time, so you should review these programs frequently if you are under the El programs to ensure you are meeting requirements of those programs and to determine current deductions from El. The website link is:

https://www.canada.ca/en/employment-social-development/programs/ei/ei-list/reports/maternity-parental.html

It is important to remember that there is a practice hour requirement that needs to be met in order to receive or maintain practising registration in Manitoba. As per Regulation subclause 9(1)(d)(i) and clause 19(1)(b), it is a requirement that the applicant has practised dental hygiene for a minimum of 600 hours in the three-year period immediately preceding the year for which registration is sought. As well, section 9(2) indicates that if the applicant has graduated in the last 24 months, she or he must practice for a minimum of 400 hours in that 24 months to obtain registration.

Transferring from practising to non-practising during a maternity/parental leave is an option, however, there are caveats to this decision that you may want to consider. Such as the length of time it may take to transfer back, approval by the Board of Assessors for transfer to the practising register and a potential transfer fee.

If you are unsure of which register to choose, please feel free to contact me at the CDHM office and I would be happy to explain your options and their rationale to you.

Sincerely,

Stephanie Stephanie Gordon BA, RDH CDHM Registrar/Executive Director

UPCOMING MEETINGS

MANITOBA ALLIANCE OF HEALTH REGULATORY COLLEGES MEETING: JANUARY 31, 2017

FLUORIDATION STRATEGY COMMITTEE MEETING: FEBRUARY 27, 2017



Chair's Message - Karina Hiebert

Hello Registrants and warm winter greetings to you all. I write to you now as CDHM Chair, after a year of working closely with past Chair Alayna Gelley.

As I learn more about the CDHM, its beginnings and growth, I am proud to be a part of the continued work we are doing for the self-regulation of the profession of Dental Hygiene in Manitoba. I am reminded that the work started long before the first hygienists were registered with the CDHM. I would like to extend my appreciation to the many people who have contributed their time, effort and talents over the years to make our college what it is today.

At our 2016 AGM, we had the opportunity to hear from an expert and highly respected leader in the field of self-regulation, Deanna Williams B.Sc.Phm, CAE, C. Dir., former Registrar of the Ontario College of Pharmacists and President of Dundee Consulting Group Ltd. In 2012, Ms. Williams was appointed by the Ontario government to act as supervisor for the College of Denturists of Ontario after an audit revealed several complaints and concerns regarding that College's operations, resulting in the temporary loss of their self-regulation. Her mandate was to address the complaints and concerns, and to manage the college until they were brought to a point where it was ensured the organization was fully effective in its operations and its ability to safeguard the public interest.

UPCOMING MEETINGS

COUNCIL: FEBRUARY 27, 2017

ANNUAL GENERAL MEETING: OCTOBER 28, 2017 In her presentation "Self-Regulation: Do We Take It For Granted?", Deanna discussed the following issues which can cause problems for a regulatory body, and possibly lead to loss of self regulation:

1. **Insufficient finances.** An effective regulatory body requires a certain budget to operate and fulfill its mandate. Also vitally essential is having a sufficient contingency fund to protect the organization.

2. Inability to demonstrate sufficient separation between the regulatory body and the member association. This can raise doubts about who is being protected: the public or the professional members, thus putting the reputation and credibility of the regulatory body at risk.

3. Insufficient performance of duties by council, staff or committees. Every staff and council member has a role to fulfill. If it is not done, or not done properly, the college suffers.

4. **Blind trust.** It is the responsibility of council to ask questions of their staff and be satisfied with the answers. If not, it is the duty of the council to find a solution.

5. How the Act/legislation and by-laws are executed. For example, the College of Denturists ran its own entry to practice exam with no psychometric supports. Entrance exams are high stakes, since they decide who gets to practice, and who is safe, competent and ethical. Without psychometric supports, you can't guarantee that an exam is valid, reliable, and defensible.

6. **Conflict of interest and conflict of roles.** This is another issue that compromises the integrity of a college.

7. Loss of public trust or reputation. Having the trust and confidence of the public is important, as these are the people we are supposed to be protecting. Deanna compares it to building a credit rating; it takes years of good actions to build trust but only one bad action to ruin it. The Denturists of Ontario got their self-regulation back in 2013, but are still working on building up their reputation.

Deanna cautioned that these issues can happen to anyone. Self regulation requires work and resources. It is a privilege to be earned, not a right. As self-regulated health care professionals, we can be proud when we know the public trusts our profession to provide safe, competent, and ethical dental hygiene care. From the first efforts for self-regulation through to our current established college, the CDHM continues to work with this as our goal and mandate.

Sincerely,

Karina Karina Hiebert, BSc(DH), RDH CDHM Council Chair •

Deputy Registrar's Update - Sheryl Sloshower

A brand new year is once again upon us. It's a time to reflect and be thankful for the past year and to be proud of all our past achievements. At the same time, the 2017 New Year is a time to start fresh, to start strong, and yet another chance to set our goals for the current year.

As the 2017 Continuing Competency Program (CCP) audit is about to begin, I would like to emphasize some of the important CCP regulations:

- All registrants on the Practising Register as of April 30th must satisfy the required components of the CCP, with the following forms/documents:
 - o Continuing Competency Record (CCR) for each competency goal identified, and if applicable:
 - o Professional Activity Record (PAR) describing participation in professional activities
 - Registrants must keep a personal copy of the forms and associated documents for 5 years.
- The CCP declaration of honest reporting located on the CDHM registration renewal form must be completed yearly. Providing false or misleading information will be considered misconduct and may be subject to a Complaints/ Disciplinary Committee Review.
- A predetermined randomly selected proportion of the registrants will undergo a full assessment/audit.
- Additionally, new practising registrants for the current CCP year, and registrants who have applied for transfer to the Practising Register will undergo a full assessment/audit.
- The registrants who have been selected for the full assessment/audit will be contacted by registered mail one month prior to the reporting period deadline defined as April 30th for the current CCP year.
- Only those registrants will have to submit their CCP documents.
- All CCP forms must be type written; hand written forms will not be accepted.
- All journal/study group topics and members must be registered with the Deputy Registrar.

I am often asked by registrants who are on maternity leave what is expected of them as far as the requirements of their CCP submission. The best place to look is on the website at the CCP FAQ Section, questions 5 and 6 found on the website at: <u>http://www.cdhm.info/quality-care/ccp-faq/</u>

Q: I am on the Practising Register and will be going on the Non-Practising Register, what are the CCP requirements?

A: All members on the Practising Register as of the reporting deadline, April 30th of the current CCP year, must satisfy the required components of the CCP.

Q: I am a Non-Practising RDH, what are the CCP requirements for transfer to the Practising Register?

When applying for transfer from the Non-Practising Register to the Register of Dental Hygienists – Practising, members must provide evidence of completion of continuing competency requirements. One of the two following situations will typically apply (the CDHM reserves the right to make accommodations for members under unique circumstances):

A: Non-Practising members wishing to transfer to the Register of Dental Hygienists – Practising between May 1-October 31, are required to submit full CCP requirements on April 30th of the following year

A: Non-Practising members wishing to transfer to the Register of Dental Hygienists – Practising between November 1-April 30, are required to submit partial CCP requirements (one CCR/goal)

The above reporting policies also apply to new members in their first reporting period.

Dental hygienists play a critical role in supporting parents, children and caregivers in enabling the healthy development of children, particularly their oral health. Being on maternity leave may be a perfect time to become an expert on these topics so that you can educate and guide your clients who are expectant mothers, children, or caregivers on topics such as:

1. Oral Health Care During Pregnancy

• Changes they might experience during pregnancy



- 2. How to Brush Their Baby's Teeth
 - Parents have an integral role in keeping their children's teeth healthy
- 3. Starting Good Oral Health Habits Right from Birth
- 4. How to Check For Tooth Decay
- 5. Protecting Your Child's Mouth from Injury

One other question that is asked of me by Non-Practising registrants who switch to the Practising Register is how they can complete a CCP submission if they have not been practising. Most important to remember is that the only question on the CCR that relates to implementation is question #4.

Did you implement these improvements/enhancement into your dental hygiene practice?

You have the option of answering yes, no or in process with a brief explanation. You may also anticipate how the learning will impact your practice and answer accordingly.

Participating in the CCP allows us to reflect on our practice and develop a plan to enhance our practice. When selected for the CCP audit, it also gives us a chance to take pride in our self-directed professional development and to receive beneficial feedback and support from our colleagues who graciously volunteer their time to the College. Above all, the CCP demonstrates to the public that we as a profession are committed to providing the best care possible for our clients.

Sincerely, Sheryl Sheryl Sloshower, RDH, BSc(DH) CDHM Deputy Registrar



(From L to R) Stephanie Gordon, Deanna Williams and Sheryl Sloshower 2016 CDHM Annual General Meeting

Notice of Formal Censure

A complaint was filed with the College of Dental Hygienists of Manitoba Complaints Committee in March of 2016 regarding a falsified CPR card being uploaded as a supporting document for a member's 2016 Renewal of Registration. The member's registration renewal was received online in November 2015 and upon review by the Board of Assessors, questions arose regarding the member's CPR certification. Upon further questioning, the member said the original CPR card was misplaced and the original course instructor was not responding to the member's calls to request a new CPR card. With the fast approaching renewal deadline, the member concealed a colleague's name on her CPR card and wrote in her own name. She then submitted this CPR card with her own application for renewal in order to meet the 2016 Renewal of Registration requirements.

By knowingly falsifying an unsuspecting colleague's CPR card and uploading this falsified CPR card as a document supporting her 2016 Renewal of Registration, this member was found in direct contravention of The Dental Hygienists Act/Dental Hygienists Regulations and the Code of Ethics.

This conduct is in breach of The Dental Hygienists Act, the Dental Hygienists Regulation 19(1), and the Principles of Integrity and Accountability under the CDHA Code of Ethics (2012).

Notice of Formal Censure Con't

The Registration Renewal form under "Applicants Declaration" states:

"I, _____, certify that to the best of my knowledge that the information provided on this form and in its attachments is correct, complete, and true in every respect. I understand that this declaration has the same significance as giving one under oath.

Subsection 61(3) of the Dental Hygienists Act provides that "A person who obtains or attempts to obtain registration as a member of the college under this Act by making false or fraudulent representation or declaration, either orally or in writing, and a person who knowingly assists in making such a representation or declaration, is guilty of an offence and is liable on summary conviction to a fine of not more than \$10,000.

If granted registration, I agree to abide by the Dental Hygienists Act, Regulations and By-laws of the College of Dental Hygienists of Manitoba."

Upon signing, the applicant is certifying and giving an oath that the form and its attachment are correct, complete and true. The CPR card submitted by the member was not correct and true based upon her own admission as she acknowledged that she concealed a colleague's name and presented the CPR card in support of her own registration.

It is a requirement of renewal under The Dental Hygienists Regulation that in order to have his or her registration renewed, an applicant must provide evidence of current cardiopulmonary resuscitation certification at a level required by council. The Dental Hygienists Code of Ethics (2012) Principle: Integrity under Responsibilities for Integrity (1) states:

1) Dental hygienists uphold the principles and standards of the profession with clients, colleagues and others with whom they are engaged in a professional relationship.

The Dental Hygienists Code of Ethics (2012) Principle: Accountability under Responsibilities for Accountability (1) states:

1) Dental hygienists accept responsibility for knowing and acting consistently with the principles, practice standards, laws and regulations under which they are accountable.

Prior to this complaint being received by the Complaints Committee, the Board of Assessors (BOA) had put restrictions on this member's license and certain obligations had to be met by said member to continue to practice as a Registered Dental Hygienist as she had been unable to meet the renewal requirement related to CPR.

In coming to a decision on this complaint, the Complaints Committee took into consideration the obligations and restrictions the BOA has placed on the Renewal of Registration for this member. As well, said member was very remorseful for her actions and complied willingly with the obligations required of her by the BOA to maintain her Renewal of Registration for 2016.

The Complaints Committee has decided the appropriate disposition of this matter was that the member be censured.

According to The Dental Hygienists Act section 26(2), the complaints committee may publish the fact that a member has been censure, and publication may include the member's name and a description of the circumstances that led to the censure. The complaints committee has decided not to publish the member's name but it does wish to publish the description of the circumstances that led to the censure and the fact that a member has been censured.

The Complaints Committee has decided not to order costs to pay for all or part of the costs {according to 26(3)} incurred by the censure process, because it is the first finding against her by the Complaints Committee.

The member agreed to accept the Formal Censure and the censure was signed in November of 2016 by the member, the Chair of the Complaints Committee and a witness. The Formal Censure is a record of disapproval of this member's conduct and will remain on her file.

Sincerely, *Lisa* Lisa Grayson RDH, Complaints Committee Chair

Page 6

CDHM Connections



HR Corner - Donna Dowie



Baby Boomers, Gen- Xer, & Millennials: Workplace Friends or Foes?

'For each generation must find the wisdom of the ages in the form of its own wisdom.' Erik H. Erikson, 1964

As the renewal of registration period has come to as end for another year, I would like to congratulate all the registrants who completed their 2017 registration on the computer management system. With valuable feedback from an emailed survey on the strengths and weaknesses of the system that was sent out on January 11th and closes on February 15th 2017, the CDHM is striving to improve all processes of the renewal of registration. Thank you for your input and suggestions.

The dynamics of the workplace are changing and therefore so is the behaviour between team members. There are currently three main generation types that are not only in the profession of dental hygiene but are in all areas of the workforce. Each individual has their own ideas, abilities and work ethic. The following is a brief breakdown of each generation type which indicates the variances that affect each of our roles and responsibilities at the workplace:

- 1. **Baby Boomers** (born 1943 to 1960): When it comes to being a productive part of the organization, Boomers are known to be hardworking, team players, and are great mentors to others. Baby Boomers have less respect for rank than their forerunners but still have admiration for the order of leadership, particularly when they share it. They have a lot to offer businesses with their knowledge, abilities, and life experience.
- Gen-Xer (born 1961 to 1981): X-ers tend to be more independent and enjoy working alone. They tend to be entrepreneurial thinkers and results-oriented, therefore they may not tell you how to do every task step by step. X-ers tend to be hands-off, low face-time managers. Gen Xs are very concerned about life balance and severely protective of family time.
- 3. Gen Y or Millennial (born 1982 to 2002): Known as the technological whiz kids in the generation world, Gen Ys are very entrepreneurial and are constantly on the lookout for a job that provides more "meaning". Millennials are excellent multi-taskers but they are impatient and require instant gratification as they have always had all the information they need via the Internet and social media.

While generational diversity in the workforce can encourage a wider range of talent, it can often mean conflicting ideas and labeling. The key is to know how to use the generation gaps as a strength and not a fault. By distinguishing and understanding generational differences, it can help all professionals to learn to work together more effectively and transform workplaces from a generation combat zone to a productive team environment. I wish you all the best in 2017!

Available from: https://axerosolutions.com/blogs/timeisenhauer/pulse/302/14-foolproof-tips-for-managing-generational-age-gap-in-the-workplace

Sincerely, Donna Donna Dowie Executive Assistant to the Registrar



CDHM Connections



Message from the Manitoba Dental Hygienists Association

It's Manitoba, it's January, and it's cold ... it's not my favorite time of year. But, I really do look forward to the MDHA mid-winter meeting! This year, exclusively for MDHA members, we will be having a "Mix and Mingle" information and networking event at the MDA convention on Friday, January 27^{th} from 8:30 – 9:30 AM. Join us to hear the latest from the board of directors, check out the student displays, CDHA

and MDHA resources, enter the draw for door prizes, catch up with old friends (maybe even make a few new ones), and more! Breakfast will be available in the trade show area and we will be providing coffee and tea in our meeting room.

Following the Mix and Mingle we look forward to welcoming our keynote speaker, Dr. Wenche Borgnakke. Her presentation, "Oral Systemic and Periodontics and Diabetes", is highly anticipated and is open to everyone. Dr. Borgnakke is an engaging, dynamic speaker and we are sure that everyone who attends will find her session informative and beneficial.

Places are still available for upcoming MDHA professional development events. "Know Your Employment Rights" presented by Terra Welsh, part of the MDHA lecture series will be presented on Wednesday, February 8th from 7:00 – 9:00 PM at the Schwartz Lecture Theatre. The Workshop "Top 10 Medically Compromised Clients in 2017" presented by Jennifer Turner and sponsored by Oral B will be held on Saturday, March 4th from 10:00 AM – 1:00 PM in Theatre E of the Faculty of Dentistry. And, "Ethical Dilemmas" presented by Laura Macdonald at Brandon University (Louis Riel Room) on April 8th from 10:00 AM – 1:00 PM is also open to non MDHA members. Come and take advantage of these great PD opportunities at a very reasonable cost! You can register or request more information by contacting Amanda using the information below.

If you have any questions, comments, or just want to say "hi!" please contact us at <u>info@mdha.ca</u> or (204) 981-7327 – we'd love to hear from you!

Keep warm, enjoy what the winter has to offer, and I look forward to seeing you at the Mix and Mingle!

Sincerely, *Heather* Heather Sirkovsky, RDH President—Manitoba Dental Hygienists Association

The Manitoba Institute for Patient Safety and the Winnipeg Regional Health Authority is pleased to present:

Quality Improvement and Patient Safety Conference

TALK IS CHEAP, Communication is Priceless

April 25, 2017 Canad Inns Polo Park

0745 hrs to 0830 hrs – Registration & Breakfast 0830 hrs – 1615 hrs – Conference \$175.00, or \$150 early bird rate until March 25th

Registration information will be posted in the near future at <u>http://www.mips.ca/</u> OR <u>http://www.wrha.mb.ca/quality/index.php</u>