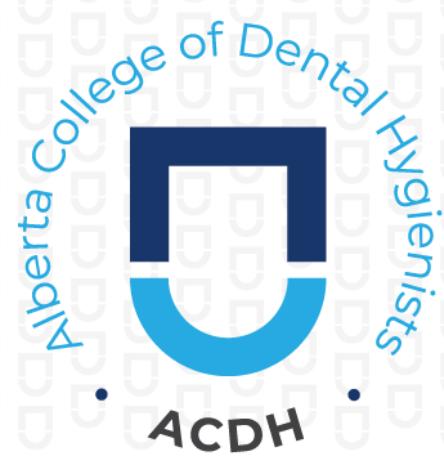


Standards of Practice



CLINICAL THERAPY

This standard applies to a dental hygienist providing clinical therapy to a patient.

STANDARD STATEMENT

The dental hygienist applies professional knowledge, training, and experience to competently provide **patient-centred** clinical therapy safely and effectively.

PERFORMANCE EXPECTATIONS

The dental hygienist must...

1. Obtain the patient's ongoing **informed consent** for proposed **dental hygiene services**.
2. Apply appropriate assessment strategies, techniques, tools, and/or indices, considering the patient's historical and current assessment data (e.g., obtaining and interpreting radiographs as needed).
3. Detect any findings that are abnormal, atypical, or unhealthy, and inform the patient.
4. Use critical thinking and professional judgment to interpret assessment data, determine a **diagnosis** and prognosis, and inform the patient.
5. Identify patients for whom the initiation or continuation of dental hygiene services is contraindicated based on interpretation of the patient's health history and/or clinical data and refer appropriately.
6. **Collaborate** and communicate effectively with the patient to plan care using a patient-centred approach. This includes involving the patient in prioritizing and sequencing dental hygiene services.
7. Consider all aspects of a patient's overall health and well-being, including **determinants of health** and risk factors, when planning and implementing **evidence-informed** dental hygiene services.
8. Based on the patient's assessment data and diagnosis, deliver dental hygiene services that are clinically appropriate for the patient and are consistent with the patient's informed consent.
9. Recognize and manage the patient's discomfort and/or pain.

10. Monitor and evaluate the patient's response to dental hygiene services and adjust services, implement alternatives, or discontinue services accordingly.
11. Make clinically appropriate **referrals** when the patient's needs for assessment, diagnosis or treatment are best addressed in collaboration with or by another health professional.

PATIENT EXPECTATION

The patient can expect the dental hygienist to assess relevant data, make an informed diagnosis, partner with the patient to develop and implement patient-centred goals and plans, and evaluate dental hygiene services.

GLOSSARY

COLLABORATE: To work in partnership with the patient and/or others while maintaining a focus on the needs and goals of the patient. Collaboration may include consultations, referrals, or other relationships that benefit the patient.

DENTAL HYGIENE SERVICES: Any service that falls within the practice of the profession of dental hygienists as outlined in the *Health Professions Act* (Schedule 5, section 3).

DETERMINANTS OF HEALTH: The broad range of personal, social, economic, and environmental factors that determine individual and population health.¹

DIAGNOSIS: Identification of an oral health condition informed by assessment findings, clinical judgment, professional knowledge, and the best available evidence.

EVIDENCE-INFORMED: The integration of best available evidence with clinical expertise and patient values.² This approach involves identifying, searching for, and interpreting the result of the best available evidence to inform decision-making processes.³

INFORMED CONSENT: Receiving the patient's written or verbal permission to proceed with a proposed service following a process of decision-making leading to an informed choice. Informed consent involves ongoing communication between the parties involved. In the case of a minor or others who do not have the capacity to provide informed consent, the agreement must come from a legal guardian or substitute decision-maker legally authorized to act on behalf of a patient.

¹ Government of Canada. (2022) Social Determinants of Health and Health Inequalities. Accessed from: www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html

² Straus, S. E., Glasziou, P., Richardson, W. S., & Haynes, R. B. (2019). Evidence-Based Medicine: How to Practice and Teach EBM (5th ed). Elsevier.

³ Federation of Dental Hygiene Regulators of Canada. (2021) Entry-to-Practice Canadian Competencies for Dental Hygienists. Accessed from: www.fdhrc.ca/wp/wp-content/uploads/2021/12/EPCCoDH_FDHRC_November_2021.pdf

PATIENT-CENTRED: This approach recognizes the partnership and sharing of power between the patient and health care providers to improve clinical outcomes and satisfaction with care. It includes demonstrating attitudes and behaviours that are respectful of the whole person and their preferences.⁴

REFERRAL: An explicit request for another health professional to become involved in the care of a patient. Accountability for clinical outcomes is negotiated between the health professionals involved.⁵

⁴ Registered Nurses' Association of Ontario. (2015) Person- and Family-Centred Care. Accessed from: rnao.ca/sites/rnao-ca/files/FINAL_Web_Version_0.pdf

⁵ Nova Scotia College of Nursing. (2018) Nurse Practitioner Standards of Practice. Accessed from: cdn1.ns scn.ca/sites/default/files/documents/resources/NP_Standards_of_Practice.pdf