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BCDHA

OUTLOOK

British Columbia Dental Hygienists' Association

Your connection to a growing, vibrant professional community

Independent BC Dental Hygienists show their hearts!

On February 9, 2013 independent dental hygiene clinics and volunteers participated in the Gift from the Heart. Go to 'Your Community' on page 9 for their stories.

(L-R) Maricel with Brenda Barrick, RDH and Marica Szeleczki, RDH.

Mara Sand, RDH (centre) with Davis/Wright family.

Volunteers at Focus on Dental Hygiene owned by Cheri Wu, RDH.

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Chair's Message

by Margit Strobl

Welcome Spring! I always look forward to this time of growth and renewal. Your professional association is also looking ahead and renewing our commitment to work on behalf of our members to advance the dental hygiene profession in British Columbia.

Reflection..... This is something we all participate in at one time or another. We reflect in our professional lives every day in working with our clients to improve or maintain their oral health. In our personal lives we are faced with all the decisions that come from every-day living. We reflect on decisions we make or might make in the future and those decisions we made in the past. In this Chair's message I have chosen to reflect on my time as a Board Director at BCDHA.

This is the last year of my final term as a board director at BCDHA. Although some things tend to feel like an eternity, this is not the case with the time I have spent sitting at the board table at BCDHA. Perhaps because so much has happened; lobbying the government for regulation changes that brought about the new legislation related to the 365 day rule, conversations with the British Columbia Dental Association concerning issues of mutual interest, providing input into the CDHBC bylaw renewal process, getting dental insurance companies to recognize dental hygienists as service providers and more. It still amazes me that a relatively small population of individuals such as dental hygienists can accomplish so much. This might seem like an odd statement but it is true. Although a lot of the changes over the years have been driven by BCDHA, it would not have been possible without the support of our members.

It has been seven years but I still remember attending my first meeting. I had no idea what BCDHA really did as an organization, let alone the benefits it provides to the members. I was unsure as to what my role as a director might be and whether I could contribute anything useful to the organization.

"It still amazes me that a relatively small population of individuals such as dental hygienists can accomplish so much."

That first year had a steep learning curve! I had no knowledge of policy governance, ends and means, ownership linkage; these were totally foreign concepts just as they are for many of you reading this now. I wondered if I had perhaps not made a wise decision in volunteering to sit on this board. I felt a little like I had jumped in over my head. As a result I spent most of that first year just listening to the discussion and contributing when I felt I had something useful to say or someone asked my opinion. The second year however, I began to understand the process and difference between "ends" and "means" and all the other aspects of policy governance. I could see how BCDHA was enhancing our profession and I was a part of that. It was exciting and that feeling of excitement has not diminished over the years.

I will be sad when my term is finished at the end of next year as I have made a lot of valuable and long lasting friendships. In addition, I am much more aware of what it takes to affect change in our profession and will continue to do my part in order that dental hygienists can one day practice with a full scope in British Columbia.

I will always look back at this time and reflect that I was one of the dental hygienists who made a difference. I can say with honesty that this will have been one of the most gratifying experiences of my professional life. So, for those of you who have thought about wanting to contribute something more to your profession, you just have to take that first step; whether as a Board Director at BCDHA or in other ways. I am sure you will find it as rewarding as I have over the last seven years.

BCDHA Refresher Program is Convenient & Flexible

by Cindy Fletcher, Executive Director

BCDHA Refresher Modules can be used by dental hygienists to:

- *prepare for the QAP.*
- *meet your online learning plan requirements after the QAP.*
- *meet your Continuing Competency requirements from home.*

BCDHA recently released the new Refresher Program for Dental Hygienists. This self-study program is made up of 21 modules, each addressing a specific topic.

After conducting a survey in conjunction with the Pacific Dental Conference last year, members told us clearly that they were looking for a program that could support their learning needs in a number of ways. In addition, members told us that they wanted a program that was self-directed and self-paced.

BCDHA contracted five dental hygiene educators to develop the series of modules that focus on six main domains: Biological Sciences, Social Sciences, Dental Sciences, Dental Hygiene Clinical Practice, Community and Professional Issues. The challenge: To develop a comprehensive review program tailored to suit the needs of all dental hygienists – from those who completed their dental hygiene education many years ago, right up to the most recent graduates. The result: A flexible program that can be customized to give you just what you need.

The complete set of 21 modules can be purchased for those wanting a detailed review of the dental hygiene curriculum, or modules can be purchased individually to brush up on specific areas. The supporting textbooks are also available for short-term rental.

With the modules now available, dental hygienists are utilizing them in different ways. Some have used the modules to review the material in preparation for the College of Dental Hygienists new Quality Assurance Program (QAP), while others are using them to meet their online learning plan requirements after completing the QAP. You will notice that the 21 BCDHA modules coincide with the 21 subcategories used by the College of Dental Hygienists in the QA program, making them the perfect partner for your studies.

In addition, dental hygienists are purchasing the modules as a convenient way to meet their continuing competency requirements from home. For BCDHA members, each module costs only $25 and takes approximately 3 hours to complete. You work through the material at your own pace - when it suits your schedule. A Certificate of Completion is issued upon completion of the module. The certificate should then be kept as part of your Continuing Competency file.

For more information on the BCDHA Refresher Modules, or to place an order, please visit the BCDHA website at www.bcdha.com, click on "Professional Resources" and then on "Quality Assurance Support". •

SNAPSHOT ON THE BOARD

BRENDA CURRIE,
Upper Fraser Valley Director

Brenda received her Diploma training at the University of British Columbia (UBC) Dental Hygiene Program and after many years in clinical practice went on to earn a Bachelor of Dental Science (Dental Hygiene) and a Master of Science degree, also through the University of British Columbia. Brenda's special interests and primary passion remains with the areas of oral health disparities, access to oral care and the provision of quality services that will ultimately improve oral health for all.

Brenda served for three years as an elected board member for the College of Dental Hygienists of BC. As well, she sits on numerous Advisory Boards and Committees, including the University of British Columbia Faculty of Dentistry Dean's Board of Counselors and the BCDHA. She also sits as a member of the Canadian Dental Hygienists Association Research Advisory Committee and is a grant reviewer for the Canadian Foundation for Dental Hygiene Research and Education.

Brenda has always been active both in community and professional activities. Currently, she is Event Chair for the 2nd Annual "An Evening to Conquer Oral Cancer", raising money for oral cancer research and is Co-Chair on the Committee for the 50th Anniversary Celebrations at the Faculty of Dentistry, UBC.

Brenda is married and keeps busy with 5 children and a Boxer dog! She enjoys travelling, golfing and skiing in her spare time.

BCDHA Welcomes New Staff Member Carol Yakiwchuk

BCDHA is pleased to announce that Carol Yakiwchuk has joined our staff in the position of Dental Hygiene Practice Consultant.

Carol has been a dental hygienist for more than 20 years and has practiced as a clinician, educator, researcher, administrator and community health dental hygienist. Carol holds a Diploma in Dental Hygiene from the University of Manitoba, a Bachelor of Science (Dental Hygiene) Degree from the University of Manitoba and a Masters of Health Studies & Leadership from Athabasca University.

In her role as the Dental Hygiene Practice Consultant, Carol will serve as a resource person to members, other agencies and the public on issues related to all aspects of dental hygiene practice, including independent dental hygiene practice, clinical practice, and employment-related issues.

Carol can be contacted at the BCDHA office at cyakiwchuk@bcdha.bc.ca.

Happenings from the BCDHA Annual General Meeting

Held in Victoria, March 16, 2013

The 49th Annual General Meeting of the British Columbia Dental Hygienists' Association was held in Victoria on March 16, 2013 with about 70 members in attendance. Highlights of the meeting included an overview by the Board of Directors of the provincial Association's advocacy work for the dental hygiene profession over the last year.

CDHA Director for BC, Arlynn Brodie, brought greetings from the national association and discussed the many initiatives that are currently underway to increase the visibility of the dental hygiene profession and to improve access to oral care.

Incoming Chair Mandy Hayre (l) receives the gavel from Past Chair Margit Strobl (r).

2013 – 2014 BCDHA Board of Directors

Back row: (L/R) Kim Laing (Greater Vancouver); Mandy Hayre, Chair (Dental Hygiene Educators); Brenda Morris, Vice Chair (Upper Island); Brenda Currie (Fraser Valley); Karl Gunderson (Interior). Front row: Jodi Noble (Victoria); Margit Strobl (Northern BC); Connie Goertson (Kootenay)

Outgoing Board members Wendy Kelly (Interior Region); Rae McFarlane (Kootenay Region); and Margaret Shemilt (Victoria Region) were thanked for their years of dedicated service on the Board. The following new members were welcomed to the Board: Connie Goertson (Kootenay Region); Karl Gunderson (Interior Region); and Jodi Noble (Victoria Region).

The membership also thanked Margit Strobl for her valued and committed work as Chair over the past five years. Mandy Hayre was welcomed as the new Chair for the 2013 – 2014 term and Brenda Morris was introduced as the incoming Vice Chair.

Be sure to join us at next year's AGM as we celebrate BCDHA's 50th Birthday!

2012 Dianne Gallagher Inspiration Award

Mandy Hayre (L) recipient of award with BCDHA Chair Margit Strobl

BCDHA is pleased to announce that Mandy Hayre was selected as the recipient of the 2012 Dianne Gallagher Inspiration Award.

Mandy completed her Degree from the University of British Columbia and became a dedicated educator in the field of dental assisting and dental hygiene. Her efforts brought Dental Hygiene Education to Vancouver Island University 7 years ago. The program is innovative, fully accredited and well respected in the province. She has completed her Master's Degree and mentored many dental hygiene students through diploma and higher learning pursuits. Her students have been published, a great achievement for an undergraduate and not accomplished without an inspiring teacher and mentor.

Mandy has served the profession through her office on the BCDHA Board, CDHA Board of Directors and the Education Advisory Group of CDHA. She has been an enthusiastic Surveyor for the Commission on Dental Accreditation of Canada and the driving force behind the establishment of the Community Dental Clinic in Nanaimo. Her work on the BCDHA Board was done with enthusiasm, vision and industry. No job was too much work for her, and no speaking engagement too daunting.

Mandy's work in Community Health and Education has been inspirational and her commitment to the development of the dental hygiene profession and to improving access to dental hygiene care is unquestionably dedicated.

Mandy manages her very accomplished career in Dental Hygiene while being a dedicated parent, wife and citizen.

BCDHA received the following thoughts from Mandy Hayre: *"Dianne Gallagher is an icon in Canadian dental hygiene history. I remember hearing her name and learning of her many accomplishments as a student in Prince George, or as a new dental hygienist. While she is no longer with us, her passion and message for our profession will live on in hundreds of students she mentored and dental hygienists she inspired. And she will never be forgotten. I will certainly carry her spirit with me.*

Mandy Hayre with Dianne Gallagher

I always say that if Dianne's career was the measure for this award, we would probably only give it out once, to her. But, in true Dianne fashion, when the criteria for the award were decided, Dianne wanted it to be an award available to everyone; and the final result was the Inspiration Award. How very apt. Dianne's vision for the award was that it go to someone who inspires others; be it a student, a grass roots dental hygienist, an entrepreneur who shares their new knowledge, a dental hygienist that volunteers their time in any capacity, or a leader of our profession.

It is an honour for me to walk into my office each day and see the Dianne Gallagher Award glass sculpture. But, the honour for me was not in being the recipient; it was being nominated by Dianne Gallagher herself. She was my inspiration, my mentor, my friend and I will miss her dearly.

There is a message that I want to share with the dental hygienists of BC. It was one of the last conversations I had with Dianne. She wanted this Award to be given out to a student or dental hygienist who inspired others to do more, be better, or simply helped others. Accordingly, I ask you the dental hygienists of BC: Is there a dental hygienist that inspired you? Is there someone that helped you with no expectation of reciprocation? Is there a colleague that assisted you as you made the move from student to dental hygienist, general practice to entrepreneur or business owner? Is there someone who mentored you in a new role, or through a personal situation? Is there someone you know that has been an inspiration for reasons only you are aware of?

If you answer yes, please consider nominating that person for the Dianne Gallagher Inspiration Award. This award was established for everyone and anyone. It is an opportunity to honour those who may be 'ordinary' to others in the profession, but is 'extraordinary' to you. If they are like me, the honour for them will not even be in receiving the award; it will be in being nominated by you. That is indeed an honour worth celebrating." •

Editors note: Nomination forms are available on the BCDHA website.

Guest Editorial

Getting Dental Hygiene on the Political Agenda

by Andrea Burton, Government Relations and Communications, Monkeytree Creative

The holidays are over, the credit card bills are paid (or piling up if you're like me) and eyes and ears are turning towards Victoria and the promise of a spring election. For the first time in more than a decade, the party in power is not the party leading in the polls. Many of us, from the public to pundits to policy wonks, are anticipating significant changes in the provincial legislature. Our current Premier was not elected by the public in a general election, and as a result, many British Columbians are preparing to use the upcoming campaign to convey their pleasure or displeasure with the past four years of B.C. politics.

Each of us bring our own politics and biases to the voters' booth, but we don't always remember that election campaigns provide a wealth of opportunities for professional groups and associations to come together and raise important issues that will be remembered and brought forward when a new government has been formed. For Dental Hygienists, this is particularly true in 2013.

Changes to Legislation that were announced by Minister De Jong at the BCDHA Annual General Meeting in March of 2012, are currently being implemented. These changes were very welcome – but make no mistake – there is more work to be done if Dental Hygienists in B.C. are going to enjoy the same opportunities as their colleagues in other provinces.

Now is the time for Dental Hygienists to engage in the political process with the goal of raising awareness and interest in the profession. Imagine the difference it could make to send 85 MLAs to Victoria – all with a basic understanding of the Dental Hygiene profession and the important role Dental Hygienists can have in improving the health and well-being of British Columbians.

There are numerous ways for Dental Hygienists to get involved in the political process. Although the BCDHA remains non-partisan, the Association encourages all Dental Hygienists to meet with and review the background and history of their local candidates and ask questions about their intentions towards advancing health professional legislation – particularly in relation to Dental Hygiene.

How you can get involved:

- Attend Town Hall Meetings, Open Forums, Debates and other meetings within your community. Meet the candidates, hear their point of view, and most importantly, ask questions.
- Answer the Door! Most candidates will swing through your neighbourhood in the lead-up to the election, and give you a chance to ask questions and share your thoughts on important issues they should keep in mind if they want your vote.
- Follow the campaigns and platforms of the leaders and share your thoughts on key platform issues by writing a Letter to the Editor or engaging in online discussion forums.
- Request a meeting with your MLA, or candidate for MLA, through their campaign office (addresses and contact information will be posted after the official campaign begins in early April).
- Follow the candidates on social media (Twitter, Facebook, LinkedIn), and track where they are and what they have to say about current events or issues in the news.

Questions to ask?

When you get a chance to talk to a candidate, be ready with a few questions you'd like answered. Here are a few examples to get you started:

- How would you further engage dental hygienists in primary healthcare? (Remind them that dental hygienists have the skills and knowledge to identify serious illness and disease, help manage overall health and work with other healthcare providers to help British Columbians live longer, healthier lives!)
- Are you aware of the legislation governing my profession, and the fact that this legislation is out-dated and not only limits my profession, but makes it harder for British Columbians to access the dental services they need to improve their health?
- If you are elected into office, will you be willing to sit down with me to discuss, in detail, the legislation that governs Dental Hygiene, and will you work with my colleagues and me to ensure that amendments to this legislation are given consideration with the newly formed government?

Regardless of your party affiliations or personal opinions, all Dental Hygienists should use this election campaign as an opportunity to talk to the candidates and convince them that important changes are needed to enable all British Columbians to access important Dental Hygiene services, without unnecessary limitations or restrictions. Let's ensure that all elected MLAs head to the legislature this fall with a good understanding of how important the Dental Hygiene profession is to the healthcare system and the health of British Columbians. •

Dysphagia in the Dental Office

by Brenda Morris, RDH, PID, BHSc, MHS

and Dawn Moon, RDH

Dysphagia is defined as difficulty in swallowing food, fluids or secretions. It is predisposed by a number of conditions including strokes, brain injury, dementia and neurodegenerative diseases. The purpose of this article is to increase awareness of the condition, and to provide recommendations to dental teams that support the provision of care for clients with dysphagia in the dental environment.

Clients with dysphagia often have complex medical histories and face a number of barriers to quality oral care both at home and in the dental office. Many have limited manual dexterity and must rely on care providers to brush and floss their teeth. Behaviors such as clenching, grinding, spastic movements and gagging can make it difficult for care providers to be effective in daily mouth care practices.

Depending on the level of dysphagia some individuals are on strictly controlled diets where the consistency of their food might be minced or pureed, and their liquids thickened. In more severe cases of dysphagia, clients may be receiving their nutrition by a tube feed, not orally. The presence of Gastric Esophageal Reflux can increase the risk of oral diseases for clients who take no food by mouth, and they are vulnerable to chest infection from inhalation of bacteria from the oral cavity. Given that daily mouth care is challenging and complex for many clients with dysphagia, it becomes important for them to have an established "dental home" where they can receive comprehensive, client focused, quality dental and dental hygiene care.

Regular visits to the dental office for exams and dental hygiene care support the overall health of these clients by reducing the amount of bacteria, plaque and calculus in their mouths. However, dental care needs to be based on the individual's health status, risk factors for dental and systemic disease, and dental care needs. Perhaps one of the most important considerations is the increased risk of choking and aspiration pneumonia. Care must be taken to minimize the risk of aspiration of dental materials, bacteria and water during dental care.

How to Tell if a Client is at Risk?

Look for clues in the medical history:

- Special instructions for before, during and after eating are provided by a Speech-Language Pathologist or Occupational Therapist
- Diet modifications (eg. Thickened liquids or pureed food)
- Receive no food by mouth (tube-fed)
- History of a stroke, Parkinson's Disease, dementia or other neurodegenerative diseases
- Complaints of things getting stuck in the back of their throat, or pain upon swallowing

Not all clients with dysphagia will present in the dental office with a diagnosis and/or care provider who can support the client through the dental appointment. It therefore becomes an important part of the dental hygiene assessment phase to look for signs that might suggest a client has challenges swallowing foods, liquids or secretions.

Observe for signs of aspiration/choking/respiratory distress

- Coughing
- Choking
- Gurgling
- Hoarseness of voice
- Change in colour of face (cyanosis)
- Watery eyes
- Difficulty breathing

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Dysphagia continued….

What Considerations Should be Made for a Person at Risk?

Positioning

May need to be positioned upright or in the position used for feeding

If sitting up, avoid hyper extending the neck (chin up position makes it difficult to protect the airway when swallowing)

If lying down, may need to have head turned to the side to allow liquids to drain

Equipment Use and Products

RECOMMENDED

High and low volume suction

Rubber dams

Fluoride varnish or gels (no rinses)

AVOID (if possible)

Ultrasonic scalers, high speed handpieces Polishers

Air/water syringe (use gauze to wipe mouth instead)

Offer Frequent Breaks for the Client to:

Swallow

Breathe

Communicate their needs

Providing dental hygiene care for clients with dysphagia requires careful consideration of overall health status and dental needs. In general dental practices, clients with dysphagia are rare, but they are among the most vulnerable to dental diseases and medical emergencies. Dental hygienists who work in care facilities, have mobile practices, or practice in public health settings may be more familiar with the needs of these clients, and are an excellent resource base for dental hygienists who may have questions about how to safely provide care to clients with dysphagia. Other health care providers such as nurses, doctors, physiotherapists, occupational therapists and speech and language pathologists are members of interdisciplinary health care teams that provide care for this population group and when possible their expertise should be utilized. •

Réso Santé
COLOMBIE-BRITANNIQUE

Language and the Health Professional:

a Matter of Quality and Security

Language barriers are part and parcel of health professionals' codes of ethics. From informed consent to providing explanations to patients or from refraining from practicing under conditions that impair service quality, language matters. It is even more so in the context of patient-centered approaches. Patients are taking a greater role in prevention, care and recovery and better health outcomes are achieved when professionals and patient speak the same language[1].

In Canada, health jurisdictions manage language barriers using a variety of approaches. The optimal response varies according to community capacity. In BC for example where more than 119,475 persons speak Cantonese at home and where 395 doctors practice in that language, clinics offer services in Cantonese at high density locations. At other locations or for other linguistic communities, interpretation would be a more realistic approach.

Language Capacity and the BC French-speaking Community

The BC French-speaking community can be perceived as large or small depending on perspective. It is the fourth largest in Canada (after Quebec, Ontario and New Brunswick) but it represents only 1.7% of the BC population where it is ranked ninth in terms of the language spoken at home. When Réso-Santé looked at languages spoken by physicians in 2009, French ranked first after English, yielding a very favourable ratio of doctors to patient for our community. In fact the BC Francophone community benefited from 4 times more French-speaking doctors per capita than Quebeckers!

Language Capacity and the BC Francophile Community

Though the BC French-speaking community has a stellar opportunity to

(Continued on page 9)

(Continued from page 8) ***Language & the Health Professional ...***

receive services in its own language, bar none, it has not taken advantage of this. One challenge is to identify French-speaking health professionals under the current Canadian linguistic reality. Most French-speaking doctors have names such as Baker, Bentley, DeMarco, Geerts, Green, Ibrahim, Shaw! If they do not offer this proactively, this service is difficult to find. RésoSanté took on the role of matchmaker by publishing a yearly directory of French-speaking health professionals. Over 650 health professionals are currently listed online.

It is a matter of quality and security. Join us, it's free!

www.resosante.ca

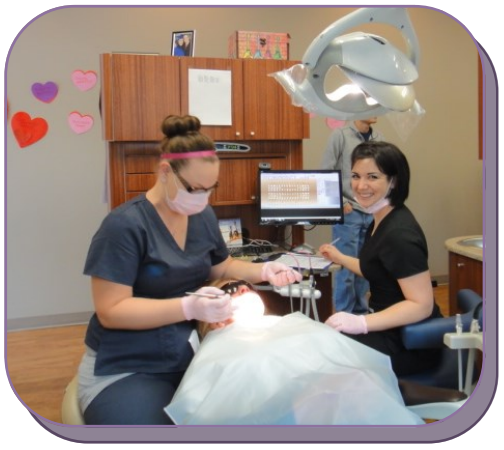
1. *Bowen, S. (2001) Language Barriers in Access to Health Care. Health Canada, Ottawa.*
2. *Lortie, L. & A. Lalonde (2012) Cadre de référence pour la formation à l'offre active des services de santé en français. CNFS, Ottawa.*
3. *Aucoin, L. (2008) Compétences linguistiques et culturelles des organisations de santé: analyse critique de la littérature, p. 12. SSF, Ottawa.*
4. *Bowen, op. cit.*
5. *There are two accreditation bodies in the USA: the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) and the National Committee for Quality Assurance (NCQA)*
6. *Green, A. (2007) L'effet des barrières linguistiques sur les soins de santé. 3e Rendez-vous SSF, Ottawa.*
7. *Canadian Census 2006, Statistics Canada (all population statistics quoted herein come from this source)*
8. *BC College of Physicians and Surgeons Web site (all doctor statistics quoted herein are from this source)*
9. *61 family doctors and 108 specialists per 10, 000 population (BC average is 24 and 11 respectively)*
10. *BC has four times as many French-speaking Francophiles than French Canadians.*

Your Community...

Cover Story continued...

Cheri Wu, RDH owner of Focus on Dental Hygiene gave back to the community for the second year by participating in Gift from the Heart, an event started by Bev Woods 5 years ago in Ontario, offering free dental hygiene services for those who have limited access to oral health care. This year, over 60 independent hygiene clinics across Canada were involved with the event. Throughout the day, Cheri's clinic treated 12 hygiene patients and an additional 8 patients received dental exams only. To help things run smoothly, there were 6 volunteer dental hygienists treating patients, 6 volunteers (including dental hygiene students and dental hygienists) assisting the dental hygienists and 3 volunteer dentists. Also, donating food and supplies were Thrifty Foods, Henry Schein, HuFriedy, Colgate, Sunstar, Dentsply, Maxill, Camosun College, and James Bay Square Denturist. A huge thanks to all.

The day focused on oral cancer



(Continued on page 10)

Cheri Wu's Story continued...

screening, head and neck exams, full dental hygiene treatment and oral hygiene instruction. According to

Cheri, "Our patients were very appreciative and left with huge smiles and a better understanding of the importance of dental hygiene maintenance and of the DH profession itself. Hygienists have such a capacity for giving back to their community – they rock! And as GFTH has shown –this generosity is found Canada wide. We aren't sure who enjoyed the day the most – the patients or the volunteers."

Overall, it was a busy day, but it was nice to see the kind hearts of the volunteers in helping the patients "Smile for the health of it" (the Focus on Dental Hygiene slogan).

Cheri Wu owns Focus on Dental Hygiene in Victoria.

Mara Sand, Community Dental Hygienist wrote, "During the Month of February I provided my Gift of the Heart to 6 clients. Several of the clients did not have transportation to my clinic in my home. Instead of picking them up downtown and transporting them to my clinic, I brought my mobile services to them, which necessitated me to increase the number of days I provided the services. I have been providing preventative dental Public Health service for Jessie Davis and Clayton Wright's children *(pictured on the front page)* for a few years, but the Dental Public Health system does not provide preventive services for the parents. So I did. They were very grateful.

I met Lorelei last year. She was in need of dental treatment and preventive dental hygiene care. I was able to link her up to the Kootenay Boundary Dental Access fund for the dental treatment and I provided her dental hygiene care this February as part of Gift of the Heart.

Judy is a wonderful piano teacher, but because of a serious car accident she has not been able to teach, so she has no income. She is struggling with physical pain and the difficulties of dealing with access to care of many types. The billing value of the services I provided was just over a thousand dollars.

It is my intention to make dental hygiene care accessible to people and help increase the value of dental hygiene wherever I go." •

Mara Sand (L) with Lorelei

Mara Sand with Judy

Brenda Barrick, RDH with 12 year old patient MacNeil Fiesta

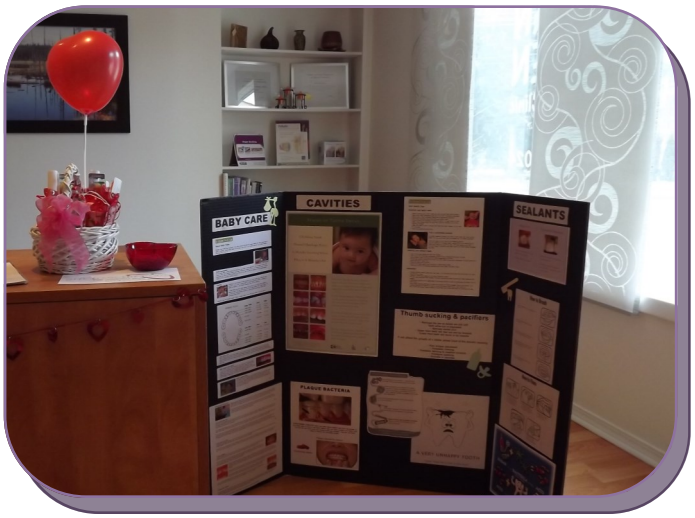
Marica Szeleczki, RDH

"At the Toothwhisperer Dental Hygiene Clinic in North Vancouver on Gift from the Heart day myself and Brenda Barrick, RDH saw five patients over the course of the day, including three children. It was a roaring success!" •

Marica Szeleczki, RDH with 14 year old patient Iana Juntado

Cover Story continued...

Denise Pawlyshyn, RDH wrote, "This is actually my second year participating in the GFTH event. I currently work alone, so there are very limited spaces available for patients in need on the GFTH event day (I can see 6-8 in a day, depending on their needs). Another dental hygienist helped out with the event this year with paperwork (signing patients in & out and filling out health/dental forms), some clean-up and oral hygiene instruction.



Last year I did a general appeal for patients in need. The response was so overwhelming (I had over 50 calls) and it really broke my heart to have to turn so many people in need away. So, this year I decided to approach a target group...I chose a local women and baby group. There were a number of new mothers, first time mothers, young mothers (under 20 yrs. old) and single mothers. It ended up being a great way to teach them not only about their dental health, side effects from pregnancy and hormones, but we were also able to teach them about infant dental health and care. I made up a large poster board about infant dental health and dental needs (including when to bring baby in for their first visit, how to care for teeth and gums, pacifiers and thumb sucking habits and Early Childhood Caries). I made up GFTH gift bags. They included baby info sheets & dental aids and dental aids for the mothers.

It was a huge success. In addition to the 6 mothers, I also had 2 additional patients. They had come into my office earlier in the week due to tooth pain. When I mentioned that I was offering a free dental cleaning at the end of the week they both jumped at the chance to have an appointment. I was thrilled to add them to my day....one patient had not been in for a cleaning in 40 years and the other had not been in for dental services for more than 20 years. They ended up needing multiple visits for me to provide a thorough initial cleaning. I believe that we will see these patients again. They were so grateful for the service. Upon walking into my office they were both so terrified that they were going to lose their teeth....they presented with heavy stain and bridges of calculus. But after their cleanings both patients could not believe that they had healthy white teeth underneath all of the build-up. It was such an amazing feeling to bring a smile to these people's faces!! Seriously heart-warming! We made such a huge impact on their lives!

I find it so rewarding to educate people about their oral health and how it can affect their overall health. It is hard to believe that people still grow up without these basic services & knowledge about their dental health. How is it that basic dental care & prevention is still so elusive to so many in our communities? I will forever be an independent dental hygienist that will participate in the GFTH event!"

Denise Pawlyshyn owns Clean Between in Castlegar.

CDHA 2013
National Conference
CELEBRATING OUR ROOTS, OUR WINGS
October 3-5, 2013 - Toronto

- Internationally acclaimed expert presenters
- Celebrating Our Roots...Our Wings with professional networking and special events
- Thursday evening Dance Party and Exhibit Extravaganza
- 50th anniversary Birthday Bash
- Past presidents through the decades discussion panel
- Golden Anniversary Awards Gala

For more information visit **www.cdha.ca/2013conference**

Vancouver College of Dental Hygiene

Enhancing Students' Education & Supporting Communities

The Vancouver College of Dental Hygiene Inc. (VCDH) received one of six BCDHA Dental Hygiene Program Grants in 2012. This grant is offered to all accredited dental hygiene programs in British Columbia through an application process, to assist in the development of a special program and to enhance the students' education.

The grant received by VCDH has been supporting a newly developed program in their curriculum which aims to enhance VCDH students' educational experiences and to decrease the progression of oral disease in long-term care facilities. This program currently serves to assist people who reside at Britannia Lodge and their care-aids and care-givers. Britannia Lodge is a long-term care facility located in East Vancouver which provides care for people with mental disabilities and other special needs. Currently, every week E3F3 students from VCDH have been attending Britannia Lodge under the guidance and supervision of a VCDH dental hygiene instructor (RDH) creating a 'dental home' for these residents.

In addition to their oral care services, the students wanted to share their holiday spirit and express their friendship towards Britannia Lodge staff and residents, so they volunteered their own time to help put up their Christmas decorations. The room was filled with smiles, laughter and holiday cheer while decorating with garland, glimmering lights, tinsel snowflakes, and most importantly decorating the Christmas tree!

VCDH and Britannia Lodge would like to thank BCDHA for their assistance in supporting this educational initiative. •

Your Colleagues...

Awards and Achievements

Paula McAleese - Recipient of BCDHA Life Membership

Leanne Donnelly— Appointed full-time faculty member at the University of British Columbia

Shelly Sorensen— Elected to the Board of Directors of the Public Health Association of BC

Shannon Waldron— Recipient of the HuFriedy CDHA Nevi Scholarship Program

Elizabeth Cavin— Recipient of the HuFriedy CDHA Nevi Scholarship Program

Best wishes on your retirement!

Patricia Olinyk

and

Judy Blake-Cochrane

BCDHA Announces the Passing of Dianne Gallagher

It is with great sadness that BCDHA announces the passing of Dianne Gallagher. Dianne passed away on January 12, 2013 in Victoria after a courageous battle with cancer.

Dianne has given selflessly to her profession for more than 40 years. She has been active in dental hygiene education and has been a strong advocate for the advancement of our profession throughout her career. She held positions on many Boards and committees over the years at the local, national and international levels. Dianne always brought a joyous passion that she shared freely with others in her work.

Through her dedication, Dianne has inspired many dental hygienists in British Columbia and across Canada. She has led by example, and through her vision, she has challenged dental hygienists to make their personal and professional futures better. She has been a role model to thousands, and has mentored and nurtured the role models of the future.

Dianne Gallagher made a difference. Through her vision and willingness to share her knowledge, she led the profession to a better place. Dianne will always be remembered as a mentor, colleague and friend.

Our heartfelt condolences go out to Dianne's family.

DVD Quarterly of Dental Hygiene

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British Columbia adopts new Divorce Laws

By Antonio Simoes, B.Sc., LL.B, Victory Law and Mediation

On March 18, 2013, the Family Law Act (FLA) replaced the Family Relations Act. This legislation means that families dealing with relationship breakdown need to be aware of the new laws.

Some of the biggest changes will come for those partners who live in a "marriage-like" or common-law relationship for at least 2 years or have a child together. Of greatest significance, under the FLA, married and common-law spouses have the same property rights, and spouses will be entitled to family property regardless of one's use or contribution. Family property includes real property, vehicles, investments, and pensions.

The new Act also includes provisions for Excluded Property such as assets acquired before the start of the relationship and certain compensation payments.

Another major area of exciting change relates to parenting. FLA removes all reference to custody and access and uses more appropriate terms: "Parental Responsibilities" will encompass all aspects of decision-making about a child's care and well-being, while "Parenting Time" specifies the time a child spends with each Guardian.

The FLA also takes into account the modern-day reality of blended families with special provisions for step-children. The prevalence of parental mobility has created a need for clear guidelines for the relocation of children. As always, the best interests of the child remain paramount.

The Family Law Act does not govern Child Support, and all child support payments will remain in accordance with the 2012 Federal Guidelines.

If you have questions about how the new FLA act will affect you and your family, please contact Victory Law and Mediation for a free initial consultation.

About the author:

During his many years of practice in Family Law, Antonio witnessed first-hand the damaging effects of prolonged litigation, and the toll that such conflict took on families, their assets and their children.

Antonio prefers the powerful tools of settlement negotiation and mediation to skillfully resolve the difficult issues of asset division, spousal support, child support and parenting time, rather than relying on the Courts. Antonio is dedicated to helping families restructure their relationship with win - win outcomes.

Antonio is pictured with his son, Michael.

Anna Pattison is coming to Victoria!!
June 21st and 22nd, 2013

A lecture and **"Hands On"** root instrumentation skills workshop will be held in conjunction with the Annual **Canadian Academy of Periodontology Meeting** in Victoria.

To reserve your space, go to:
www.cap-acp.ca

Victory Law and Mediation

Victory Law and Mediation has partnered with the BCDHA for 2013 and is offering to BCDHA members:

- **a free Lawyer's Initial Consultation,** and
- **a reduction of 25% to their regular hourly rate for legal fees (BCDHA rate $225.00/ hour).**

Victory Law focuses on assisting families looking to restructure upon the breakdown of their relationship with Family Mediation and/ or Litigation. They also offer Immigration Law (including Spousal Sponsorships), drafting Wills and Powers of Attorney.

To schedule your free consultation, please call 604 430 2345 or visit www.victorylaw.ca.

An Evening to Conquer Oral Cancer

Supporting Oral Cancer Research Through Partnerships to Benefit Community.

Presented by PMI Labs — Early diagnosis, better outcomes™ — VELscope Vx — Enhanced Oral Assessment

Support oral cancer research!

The second annual ***"An Evening to Conquer Oral Cancer"*** will be an evening you won't want to miss! Named the *"Most impressive inaugural event of 2012"* by the Province's **Fred Lee's Social Network**, the aim of this event is to continue to increase awareness about oral cancer and raise funds for putting cutting- edge research into action.

Where: Fairmont Hotel Vancouver

When: Thursday April 25, 2013

Time: 6:00 pm-10:30 pm

Benefiting the **B.C. Cancer Foundation** in support of the **B.C. Oral Cancer Prevention Program.** All funds raised will help develop and test new and innovative ways to identify oral cancer in its early stages, thus improving the long- term prognosis of oral cancer patients.

Featuring: An "up close and personal" appearance by **Colin Arthur Wiebe**, a singer/songwriter from Vancouver, best known for singing and playing with Randy Bachman of The Guess Who and Bachman-Turner Overdrive for well over a decade.

The Evening: Champagne reception, gourmet dinner, and a live and silent auction.

MC: Norma Reid, co-host from the **CTV Morning Live Show**.

Television Media Sponsor: CTV

The success of this event relies heavily on your support and generosity. Last year $55,000 was raised. The goal for this event is to raise $75,000 -$100,000! With your support we are confident that we can achieve this.

Ticket Sales and Donations: www.conqueroralcancer.com

Event Chair: Brenda Currie
Honorary Chair: Sophia Leung

e-mail: conqueroralcancer@gmail.com

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BCDHA

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Do you have a story idea or want to send a letter to the Editor? We welcome articles of 500 words or less. Topics should be of interest to your colleagues or provide food for thought. Submissions will be published subject to Editorial Board approval and space.

Email your submission to: outlook@bcdha.bc.ca.

ATTENTION BCDHA MEMBERS

It's impossible to know everything our members are doing throughout their communities so we need your help!

If you have any announcements or events and photos* you would like to share, please send them to

outlook@bcdha.bc.ca.

**A Photo Release Form must be signed. To obtain a form send request via email to dpulice@bcdha.bc.ca*

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