

**As this course is theory based only, it is not intended to fulfill the College of Dental Hygienists of BC registration option #3\*.  
\*(Completion of a CDHBC approved refresher course)**

## **BRITISH COLUMBIA DENTAL HYGIENISTS' ASSOCIATION DENTAL HYGIENE REFRESHER COURSE INFORMATION**

The British Columbia Dental Hygienists' Association's (BCDHA) Dental Hygiene Refresher Course is designed for graduate dental hygienists who wish to update their knowledge and skills. The course focuses on various areas within the dental hygiene scope of practice in BC.

Successful completion of the Refresher Course may qualify for 50 hours of continuing education credits towards the Continuing Competency requirements set out by the College of Dental Hygienists of BC\*. For additional information, contact the College of Dental Hygienists of BC (1-800-778-8277) or visit their website at [www.cdhbc.com](http://www.cdhbc.com). **NOTE:** Dental Hygienists from outside BC should check with their provincial regulatory body regarding the course's eligibility for continuing education credits.

### **Eligibility:**

Applicants for the Refresher Course must have graduated from a dental hygiene education program. In addition, applicants must provide a complete application form and appropriate fees.

### **Course Goal and Learning Outcomes:**

The goal for the BCDHA Dental Hygiene Refresher Course is to update the knowledge and skills of graduate dental hygienists. **Please note that this course is not designed or intended to prepare candidates for the National Dental Hygiene Certification Board Exam, or to provide comprehensive education related to dental hygiene practice in Canada.**

Six learning outcomes form the foundation of the course. These learning outcomes are as follows:

1. Practise professionally.
2. Provide a safe and well-managed practice environment.
3. Communicate clearly and effectively.
4. Provide dental hygiene services through a problem-solving process of assessment, diagnosis/program goal planning, implementation and evaluation.
5. Use health promotion principles to help individuals and communities improve their health.
6. Provide a learning atmosphere for individuals and groups to explore their values and beliefs, and expand their knowledge and skills, about health/oral health.

### **Course Format:**

The Refresher Course is provided in a distance education format that takes approximately 50 hours to complete. It may be started at any time. The outline is attached as Appendix A. The Refresher Course must be completed within twelve months after receiving the course materials.

The Refresher Course Manual will be sent to you upon receipt of your application and payment. Participants are required to obtain a copy of the textbooks *Dental Hygiene Process: Diagnosis and Care Planning* and *Dental Hygiene Theory and Practice, 2nd Ed*, by M.L. Darby and M.M. Walsh. Participants who are unable to obtain a copy of these textbooks may contact the BCDHA office. We have a limited supply of rental textbooks available.

### **To register for the BCDHA Refresher Course:**

- Complete the Refresher Course Application form
- Include payment for the Refresher Course (see form for payment details)

Fees for the Refresher Course:

BCDHA members: \$850\*      Non-Members: \$980\*

\*Non-BC Residents add \$30 for mailing costs.

Fees for textbook rental: \$100 deposit for both textbook (\$50 will be refunded when textbooks are returned).

**If you have any questions regarding the BCDHA Refresher Course, please contact Chris Kilmaster, Executive Assistant, at 1-888-305-3338 (toll free within BC) or 604-415-4559 or via email at [info@bcdha.bc.ca](mailto:info@bcdha.bc.ca).**

**BRITISH COLUMBIA DENTAL HYGIENISTS' ASSOCIATION  
DENTAL HYGIENE REFRESHER COUSE**

**APPENDIX A**

**Tab 1: Learning Outcomes #1 – Regulation and Professionalism**

- 1.1 Practice Regulations
- 1.2 Behavioural Codes and Policies
- 1.3 Dental Hygiene Process of Care

**Tab 2: Learning Outcome #2 – Safety**

- 2.1 Quality Assurance
- 2.2 Infection Control
- 2.3 Safety Strategies and Health Codes
- 2.4 Radiation Protection
- 2.5 Emergency Care
- 2.6 Dental Hygiene Fees

**Tab 3: Learning Outcome #3 – Communication**

- 3.1 Communication Strategies
- 3.2 Self-care Counselling
- 3.3 Record Keeping
- 3.4 Referrals

**Tab 4: Learning Outcome #4 – Clinical Services**

Assessment:

- 4.1 Medical and Health Status
- 4.2 Pathology
- 4.3 Periodontology
- 4.4 Radiography

Dental Hygiene Diagnostic Statements:

- 4.5 Dental Hygiene Diagnostic Statements

Planning:

- 4.6 Dental Hygiene Care Planning

Implementation:

- 4.7 Clinical Services
- 4.8 Pain and Anxiety Control
- 4.9 Dental Hygiene Care for Clients with Special Needs

Evaluation:

- 4.10 Evaluating Dental Hygiene Care

**Tab 5: Learning Outcome #5 – Health Promotion**

- 5.1 Health and Wellness
- 5.2 Healthy Communities

**Tab 6: Learning Outcome #6 – Education**

- 6.1 Learning Styles
- 6.2 Educational Strategies for Oral Health

**Tab 7: Answer Keys**

**Theory Section: Learning Outcomes Completion Form**

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DENTAL HYGIENE REFRESHER COURSE  
APPLICATION FORM**

PLEASE READ THE BCDHA DENTAL HYGIENE REFRESHER COURSE INFORMATION SHEET BEFORE COMPLETING THIS APPLICATION

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
SURNAME GIVEN NAMES

Home Address: \_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY PROVINCE POSTAL CODE

Telephone: \_\_\_\_\_ Work/Alternate Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Dental Hygiene Education Program Completed: \_\_\_\_\_

City/Country: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Are you a BCDHA member? YES NO If YES: Membership Number: \_\_\_\_\_

If NO: Are you currently registered to practice: YES NO

Please indicate province or state of registration: \_\_\_\_\_

**PAYMENT OF FEES**

**BCDHA MEMBER: \$850\* NON-MEMBER: \$980\* \*IF OUTSIDE BC – Please add \$30 for additional mailing costs**

**TEXTBOOK RENTAL: \$100** (\$50 will be returned to you when textbooks are returned to our office)

**PAYMENT BY:**

Cheque  (please make cheque payable to BCDHA)

Credit Card: VISA  MasterCard

Card No. \_\_\_\_\_ Expiry: \_\_\_\_\_  
MM/YYYY

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**DECLARATION**

I hereby make application to participate in the BCDHA Dental Hygiene Refresher Course and I do not know of any reason, condition or circumstance why I should not be eligible to participate.

I make this solemn declaration, conscientiously believing all statements on this application to be true and complete, and knowing that it is of the same force and effect as if made under oath.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (dd/mm/yyyy)

Mail or fax completed application to:

**BRITISH COLUMBIA DENTAL HYGIENISTS' ASSOCIATION  
#301 – 9600 Cameron Street, Burnaby, BC Canada V3J 7N3  
Fax: 604-415-4579**

EFFECTIVE: JANUARY 01, 2009