

Talking Ethics



Assurance of Quality

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It appears the phrase “quality assurance requirements” continues to create feelings of anxiety for many dental hygienists. We all know that maintaining competence includes a commitment to be a lifelong learner. In order to grow, we need to embrace the significant changes that are coming to our profession.



Growth is a process of developing or maturing and increasing in amount, value or importance. The opposite is decline or failure. Learning is growth. As health care professionals, we must be dedicated to lifelong learning. However, if you do not put that new knowledge into practice, you are the only one who benefits from it.

As we all know, one of the guiding principles in our CDHA *Code of Ethics* is **beneficence**.¹ This ethical concept means that we must use our knowledge and skills to help clients achieve and maintain optimal oral and overall health. We cannot say, “But we have always done it this way.” Ethically, we are required to modify our assessments based on new knowledge and then successfully implement change.

Progressive dental hygienists are already providing many valuable services beyond debridement and oral hygiene instruction. You are NOT a tooth cleaner! For too long we have been focused on procedures rather than outcomes. What else might we include in treatment protocols to reduce the oral inflammation that affects the entire body? Having a comprehensive medical history is imperative. Asking the sometimes-difficult questions about personal histories and being able to explain why you are asking those questions requires improving communication skills. Remember: unless we ask, we will not be able to accurately assess, diagnose, treat or evaluate the client.

The new AAP Classification of Periodontal and Peri-Implant Diseases and Conditions is a next step.² However, we then need to apply that knowledge to practice. How will staging and grading the level of disease that our clients are at translate into a change in the therapy that we provide? What are actions, technologies, and products that are appropriate for targeting their disease on an inflammatory level?

Laser certification in some provinces allows to us to deliver laser bacterial reduction, treatment of oral lesions, and enhanced desensitization. As other technology emerges, we will be able to use exciting new techniques to screen for diabetes, HIV, HPV, and other conditions that affect oral and overall health.³ Salivary testing is already in place—will serological testing be next? Will it become the standard of care to use these tests to determine the risk for caries and periodontal disease?



At CDHA's recent national conference in St. John's, Newfoundland & Labrador, one of the many excellent speakers, Ann Eshenaur Spolarich, RDH, PhD, FSCDH, presented information on P4 medicine, which is an interesting approach that envisions the health care professional as more of a coach. The "P4" refers to **Predictive, Preventive, Personalized, and Participatory**. Clients are becoming more involved in managing their own health and wellness and exercising their autonomy. The P4 format allows health care professionals to ensure that clients have all the information they need in order to make a truly informed choice about their health. Our commitment to quality assurance involves offering ethical, evidence-based treatment alternatives and supporting whatever path the client chooses.

Clients are wearing a "Fitbit," checking their glucose levels, and more. They can self-monitor with digital technology. Perhaps they are also now more receptive to taking ownership of their oral health and being in partnership with a dental hygienist. Are you ready? We may each have highly personalized information about our unique health status on "the cloud." This digital storage option allows health care professionals to truly collaborate and work towards better clinical outcomes overall.

It is time to expand our horizons and advance our knowledge and skill levels so that we can become a more valuable primary health care professional. Whenever we improve the level of care that we give our clients, we are moving forward in the assurance of quality.

Know that quality assurance programs are a good thing and provide motivation to grow. They have never been intended as a punishment. In every province, the requirements vary. The intention is to ensure that dental hygienists are using current, best practices. That is of enormous benefit to the client. In turn, our reward as health care professionals is an opportunity not only to enhance our clinical competence, but also to flourish both professionally and personally.

References

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