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Co-Executive Director
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Dear Laura, Candice and Diana:

Re: Concerns about the Supportive Pathway Pilot Program for Internationally Trained Dentists (ITDs).

We are writing to express our strong support for the Dental Hygienists Association of Alberta's (DHAA) important work to highlight significant concerns regarding the College of Dental Surgeons of Alberta's (CDSA's) "Supportive Pathway Pilot for Internationally Trained Dentists (ITDs)."

Our overall concern is the impact the Supportive Pathway Pilot Program will have on the safety of oral care, professional standards, and consequently, the public's trust in oral health care in Alberta. More specifically our concerns focus on the following:

Qualifications of Applicants to Competently Perform Clinical Skills

ITDs can enter the pilot program without successfully completing an evaluation of their clinical skills.

A requirement to be eligible for the Supportive Pathway is completion of the National Dental Examining Board of Canada (NDEB) Assessment of Fundament Knowledge (AFK) and the Assessment of Clinical Judgement (ACJ). While these examinations test knowledge of science, clinical judgement and decision-making, they do not evaluate an individual's clinical skills.

According to the NDEB, the NDECC is the nationally accepted examination to assess the clinical competence and judgement of individuals trained in non-accredited dental programs. The purpose of the NDECC is to assess the clinical competence and judgement of dentists trained in non-accredited programs. It assesses clinical skills and techniques relevant to the current Canadian standards. The situational judgement component of the NDECC assesses judgement required for solving problems in work related situations. This includes the important topics of patient-centred care, professionalism, and communications and collaboration, etc. (source: <https://ndeb-bned.ca/equivalency-process/ndecc-2/>).

The Ontario Dental Hygienists Association (ODHA) questions why ITDs are able to enter the Supportive Pathway **prior** to successful completion of the NDECC. How have applicants demonstrated they possess the clinical skills and judgement to deliver safe and effective oral care if they have not been evaluated using the nationally accepted clinical examination?

Uncertainty Regarding Whether Applicants Who Are Unsuccessful in the NDEB Equivalency and Certification Process Are Permitted to Remain in the Supportive Pathway

CDSA's website states ITDs are "encouraged" to continue the NDEB Equivalency Process while in the CDSA's Supportive Pathway Program. What does it mean for the ITD in the supportive pathway pilot who abandons the route to certification as a dentist due to failure? Are they allowed to remain in the pilot program?

"Supervision" by Dentists

A good clinician does not necessarily make a good supervisor. How is calibration of the supervising dentists ensured so the public can be confident the ITDs are undergoing rigorous and consistent evaluation of their clinical competency and safety to deliver oral care to patients?

CDSA does not define the term "direct" supervision. Does it mean the supervising dentist is in the office, or the particular operatory in which the ITD is delivering care, or does the dentist subsequently evaluate the care delivered to each patient by the ITD?

Lack of Truly Preparing ITDs for Dental Practice

If the goal of the pathway is to prepare ITDs for practise as a dentist, one has to question why are they eligible to only undertake a narrow aspect of what falls under the scope of dentistry (scaling and root planing; taking radiographs). How is it exposing them to practising dentistry?

The care ITDs seem to be able to deliver under the pilot more closely aligns with dental hygiene practice. However, it can not be assumed dentistry training in another country qualifies an individual to competently perform restricted acts such as scaling and root planing. The College of Dental Hygienists of Ontario notes that dentistry programs do not generally include curriculum related to the dental hygiene process of care, including scaling and root planing.

In addition, the CSDA has determined the ITDs in the pilot program will be able to perform procedures considered "reversible." However, there is still risk of harm to patients when undertaken by unqualified individuals, which is why they are considered restricted acts.

ODHA supports the delivery of dental hygiene care exclusively by qualified professionals who have completed an accredited dental hygiene education program and are registered with the provincial dental hygiene regulatory college.

We applaud the DHAA's efforts to raise concerns about this pilot and the potential risk to the public.

Please do not hesitate to contact us if you have any questions about the concerns raised in this letter or if we can assist you in anyway.

Sincerely,



Heather Kleinberg, RDH
President



Marg Harrington, MHS, MHE
Chief Executive Officer