

# Scope of practice for dental hygiene

The practice of dental hygiene is the prevention and non-surgical treatment of periodontal diseases through the provision of oral health assessment, diagnosis, management and treatment of any disease, disorder or condition of the orofacial complex and associated structures in accordance with this scope of practice and a dental hygienist's approved education, training, experience and competence.

A dental hygienist guides patients' personal care with the aim of ~~to achieving and~~ maintaining oral health ~~sound oral tissues~~ as an integral part of a patient's general health.

Dental hygienists practise as part of the dental team and work collaboratively with other oral health practitioners and health practitioners to provide appropriate and comprehensive care to the benefit of patients' overall health.

Dental hygienists and dentists have a consultative professional relationship. The relationship may be between a dental hygienist and one dentist or dental specialist or a dental hygienist and a number of dentists or dental specialists. The establishment and maintenance of the consultative professional relationship is required for the practice of dental hygiene.

Practitioners within the consultative professional relationship are jointly responsible and accountable for the standard of decisions and care delivered to patients based on professional advice sought and given. Practitioners may wish to jointly develop a document containing agreed processes to support the consultative professional relationship and ensure advice is readily available when needed, however this is not mandatory.

~~practise in a team situation with clinical guidance provided by a practising dentist or dental specialist<sup>1</sup>. Some aspects of the scope of practice are provided under direct clinical supervision<sup>2</sup>.~~

Dental hygiene practice includes:

## Provided under clinical guidance

- obtaining and ~~re~~assessing medical and oral dental health histories
- examination of oral tissues and recognition of abnormalities
- assessing and provisionally diagnosing disease of periodontal tissues, and appropriate referral
- obtaining informed consent for dental hygiene care plans
- providing oral health education, information, promotion and counselling
- scaling, debridement and prophylaxis of supra and subgingival tooth surfaces
- applying and dispensing non-prescription preventive agents and fissure sealants
- applying prescription preventive agents
- applying and dispensing topical agents for the treatment of tooth surface sensitivity and tooth discolouration
- administering topical local anaesthetic
- administering local anaesthetic using dentoalveolar infiltration and inferior dental nerve block techniques
- taking impressions, recording occlusal relationships and making study models
- taking impressions, constructing and fitting mouthguards and bleaching trays
- taking intra and extra-oral photographs
- performing postoperative procedures such as removal of sutures and placement and removal of periodontal dressings
- recontouring and polishing of restorations

- taking periapical and bitewing radiographs for the purpose of recognising disease of the periodontium
- taking extra-oral radiographs
- assisting the dentist or dental specialist in implementing orthodontic treatment plans, ~~prepared by the dentist or dental specialist responsible for the patient's clinical care outcomes~~, through performing the following orthodontic procedures:
  - tracing cephalometric radiographs
  - supragingival polishing of teeth (as part of oral hygiene, before bonding and after removal of fixed attachments)
  - providing oral hygiene instruction and advice on the care and maintenance of orthodontic appliances
  - making study models, and fabricating retainers, and undertaking other simple laboratory procedures of an orthodontic nature.

*~~Provided under the direct clinical supervision of a dentist or dental specialist~~*

- ~~• applying prescription preventive agents~~
- ~~• administering local anaesthetic using dentoalveolar infiltration and inferior dental nerve block techniques~~
- assisting the dentist or dental specialist in implementing orthodontic treatment plans, as directed ~~prepared~~ by the dentist or dental specialist who is responsible for the patient's clinical care outcomes and is on-site at the time, through performing the following orthodontic procedures:
  - placing separators
  - sizing and cementing of metal bands ~~and their cementation~~ including loose bands during treatment
  - preparing ~~ation of~~ teeth for ~~the~~ bonding of fixed attachments and fixed retainers
  - indirect bonding of brackets as set up by the dentist or dental specialist
  - placing archwires when necessary (as formed by the dentist or dental specialist) ~~when necessary~~ and replacing ligatures /closing self-ligating brackets
  - ~~trial fitting of removable appliances - This does not include activation~~
  - removing archwires after removing elastomeric or wire ligatures, or opening self-ligating brackets
  - removing fixed orthodontic attachments and retainers
  - removing adhesives after the removal of fixed attachments using burs in slow speed handpieces where there is minimal potential for the removal of enamel
  - ~~○ trial fitting of removable appliances. This does not include activation~~
  - fitting of passive removable retainers
  - bonding preformed fixed retainers.

Practice in this context goes wider than clinical dental hygiene practice to include teaching, research, and management, given that such roles influence clinical practice and public safety. Areas of dental hygiene practice which were not included in a practitioner's training should not be undertaken unless the practitioner has completed appropriate training and practises to the standards required by the Standards Framework for Oral Health Practitioners.

~~1 Clinical guidance means the professional support and assistance provided to a dental hygienist by a practising dentist or dental specialist as part of the provision of overall integrated care to the patient group. Dental hygienists and dentists or dental specialists normally work from the same premises providing a team approach. Clinical guidance may be provided at a distance but appropriate access must be available to ensure that the dentist or dental specialist is able to provide guidance and advice, when required, and maintain general oversight of the clinical care outcomes of the patient group. Dental hygienists are responsible and accountable for their own clinical practice within their scope of practice but the dentist or dental specialist is responsible and accountable for the clinical guidance provided. Further detail on the working relationship between dental hygienists and dentists is set out in the relevant Dental Council Practice Standard.~~

~~2 Direct clinical supervision means the clinical supervision provided to a dental hygienist by a practising dentist or dental specialist when the dentist is present on the premises at the time the dental hygiene work is carried out~~