ACDH

Alberta College of Dental Hygienists

ANNUAL REPORT 2025

Land Acknowledgement

The Alberta College of Dental Hygienists acknowledges that the land on which we operate, what we call Alberta, is the traditional and ancestral territory of many peoples, subject to Treaties 6, 7, and 8.

We acknowledge the many First Nations, Métis and Inuit who have lived on and cared for these lands for generations. This includes: the Blackfoot Confederacy – Kainai, Piikani, and Siksika – the Cree, Dene, Saulteaux, Nakota Sioux, Stoney Nakoda, and the Tsuu T'ina Nation and the Métis People of Alberta, including the Métis Settlements and the Six Regions of the Métis Nation of Alberta within the historical Northwest Metis Homeland.

The College recognizes the land of those First Nations, Métis, and Inuit people as an act of reconciliation and we express gratitude to those whose territory we reside on or are visiting. We are committed to working to continue building strong and positive relationships together.

Contents

Chair / Public Member's Message

Carol Gibbons Kroeker

As Council Chair for the Alberta College of Dental Hygienists and also a public member, I am continually encouraged by the dedication of Alberta's dental hygienists to maintaining high standards of care for the public.

This year, Council was pleased to support the College's extensive registrant engagement on the redesign of the Continuing Competence Program. Hearing directly from registrants about their experiences, perspectives, and hopes for the future of the program was invaluable. Council greatly appreciates the time and thoughtfulness that registrants contributed to this work, and we believe their input will help ensure the program remains meaningful, practical, and focused on supporting safe, high-quality care for Albertans.

Council also undertook a comprehensive governance review this year to strengthen our oversight practices and ensure our processes remain aligned with governance best practices. As a regulator entrusted with protecting the public, it is essential that Council continually reflect on how we govern and how we can improve. Alongside this work, Council engaged in discussions to clarify our collective approach to risk tolerance and risk management. This helps ensure that when difficult decisions arise, Council is aligned in considering both current and future risks and the potential impact of those decisions on the public and the profession.

I am particularly appreciative of the strong collaboration between the regulated members and public members of Council who share a common vision of regulatory excellence and remain focused on making decisions in the public interest. The balanced 50-50 composition of Council continues to be highly effective in supporting thoughtful, well-informed governance.

Council has remained focused on advancing the College's four strategic priorities and ensuring that every decision reflects the College's core values. Our work is grounded in the **values of accountability, transparency, collaboration, and integrity**, which guide how Council approaches its oversight responsibilities. Together, these priorities and values support the College's mandate to regulate in the public interest and to foster a profession that is accountable, responsive, and committed to the health and safety of the people of Alberta.

Introduction

BACKGROUND

Dental hygienists have been providing oral health services to Albertans since 1951. The profession has been self-regulating since 1990 and is currently regulated under the *Health Professions Act* (the *Act*, or *HPA*), the Dental Hygienists Profession Regulation (DHPR), and the Health Professions Restricted Activity Regulation (HPRAR).

The introduction of Bill 46 in 2020 separated regulatory colleges from associations and unions to ensure that colleges always put patients and the public interest first. To meet the Bill 46 requirements, the Alberta College of Dental Hygienists (ACDH) divested from all association-type activities and now operates under a singular mandate of public protection.

THE ROLE OF THE ACDH

The *HPA*, DHPR, and HPRAR authorize the ACDH to

- set entry-to-practice requirements,
- set and administer standards of practice, and
- resolve concerns and complaints about dental hygienists and administer disciplinary measures when necessary.

As the regulatory authority, the ACDH requires Alberta dental hygienists to

- meet or exceed the requirements for registration and renewal of practice permits,
- meet or exceed the requirements of the Continuing Competence Program, and
- comply with the ACDH's practice standards.

By meeting these professional expectations, Alberta's dental hygienists are well prepared to provide safe, effective oral healthcare services to their clients.

OVERVIEW OF SERVICES PROVIDED BY THE PROFESSION

In their practice, dental hygienists do one or more of the following:

- assess, diagnose and treat oral health conditions through the provision of therapeutic, educational and preventive dental hygiene procedures and strategies to promote wellness;
- perform restricted activities as authorized by the HPRAR;
- perform advanced restricted activities as authorized by the ACDH in accordance with legislation and the HPRAR; and/or
- provide services as clinicians, educators, researchers, administrators, health promoters, and consultants.

Dental hygienists provide clinical services in a wide variety of settings, including interdisciplinary health centres, dental hygienist-owned practices, dentist-owned practices, community health, continuing care and home care settings, administration, and education.

PROTECTED TITLES

A regulated registrant of the ACDH may use the following protected titles, abbreviations, and initials:

- dental hygienist
- registered dental hygienist
- DH
- RDH

Purpose

We are committed to supporting all Albertans in their health and wellness journey through the achievement of oral health regulatory excellence.

Vision

We are leaders in proactively advancing regulation and protecting the public through the provision of safe, quality oral health for all Albertans.

Mission

To ensure Alberta dental hygienists have the knowledge, skills, attitude, and judgment to provide safe, effective, ethical and beneficial oral healthcare services to the Alberta public.

Values

Accountable

We value individual and organizational accountability by accepting responsibility for our decisions and actions.

Transparent

We are committed to open and clear policies, procedures, and communication.

Collaborative

We value collaboration to create new ideas, enhance opportunities, and build relationships.

Integrity

We promote an environment of trust by demonstrating consistent, fair, and honest communication and behaviour.

The 2024-2027 Strategic Plan

The 2024-2027 Strategic Plan was developed and approved by the ACDH Council and went into effect on April 1, 2024. It outlines a clear direction forward for the College to be a leader in a changing regulatory environment directly aligning with the College's vision, mission, and values. The plan's strategic priorities have been designed to focus on critical areas to continue strengthening our regulation of dental hygiene in Alberta. College staff is responsible for implementing the strategic plan on an operational level.

Priority A:

ADVANCE THE CONTINUING COMPETENCE PROGRAM TO SUPPORT REGISTRANTS IN ENHANCING THEIR DELIVERY OF SAFE, HIGH-QUALITY CARE.

Objectives:

- Redevelop the continuing competence program in consultation with stakeholders.
- Use data to identify gaps in registrant competence and evaluate level of risk.
- Implement best practices and regulatory tools to support registrant competence.

Priority B:

ENSURE REGISTRATION PRACTICES CONTINUE TO PRIORITIZE PUBLIC SAFETY WHILE EFFECTIVELY RESPONDING TO LEGISLATIVE CHANGES.

Objectives:

- Identify and address opportunities to increase the effectiveness of our registration practices within the context of legislation.
- Work with other Canadian dental hygiene regulators to recognize and explore solutions to the variances in regulation across provinces.
- Use data and evidence to support enhancements to our registration practices.

Priority C:

ENGAGE IN COLLABORATIVE AND INNOVATIVE APPROACHES TO DRIVE REGULATORY ADVANCEMENTS.

Objectives:

- Build relationships with health regulators to be at the forefront of knowledge-sharing.
- Establish partnerships with other Alberta oral health regulators to improve operational efficiencies.
- Strengthen relationships with government to have a proactive role in legislative change.
- Identify and explore opportunities where dental hygienists can be involved in primary care initiatives.

Priority D:

DEMONSTRATE OUR COMMITMENT TO EQUITY, DIVERSITY, INCLUSION, AND ACCESSIBILITY.

Objectives:

- Assess and improve upon Council, College, and registrant initiatives through an EDIA lens.

Note that this priority has been put on hold due to new government legislation.

Governance

COUNCIL COMPOSITION

Council is comprised of five appointed registrants from the College's general register and five members of the public appointed by Alberta's Lieutenant Governor in Council. The council structure diagram below reflects the members of council from November 1, 2024, to the middle of September 2025. As of October 31, 2025, there were two public member vacancies.

Council appoints the registrar and CEO, complaints director, hearings director, and members of the Registration Committee and the Competence Committee. They also appoint registrants to a pool of individuals available for Hearing Tribunals and Complaint Review Committees.

Members of Council

Carol Gibbons Kroeker
Chair, Public Member

Judy Hansen
Vice-Chair, Public Member

Lindsay Ord
Regulated Member

Samantha Heron
Regulated Member

Mimi Godin
Regulated Member

Tyla Gill
Regulated Member

Kathy Ho
Regulated Member

John Jossa
Public Member

Vacant
Public Member

Vacant
Public Member

COUNCIL'S ROLE

Council acts on behalf of the College to provide strategic oversight and ensure that the organization fulfills its responsibilities under the legislation.

It monitors the success of the organization in achieving the strategic goals and establishes the mission, vision, and values for the organization that provide direction to both Council and the College team.

Council is accountable to the Government of Alberta, the Alberta public, and ACDH registrants. Its connection to the operational aspects of the College is through the registrar and CEO.

Council holds at least four meetings per year to conduct College business.

REGISTRAR

The registrar performs all the duties designated to the position by the legislation. Accountable to Council, the registrar also performs management duties as delegated by Council.

CEO

The CEO is responsible for operational management of the organization and is accountable to Council. Currently, the registrar and CEO positions are held by one person.

COMPLAINTS DIRECTOR

The complaints director receives and investigates complaints of unprofessional conduct and determines whether the complaint should be dismissed due to lack of evidence, referred to the alternate complaint resolution process, or referred to a hearing.

HEARINGS DIRECTOR

The hearings director carries out key administrative and organizational duties related to professional conduct hearings and appeals.

REGISTRATION COMMITTEE

The Registration Committee consists of no fewer than three members from the general register in good standing. This legislated committee reviews registration issues referred by the registrar and makes determinations.

Members:

- Carolynn Reimann (Chair)
- Janine Hartsook
- Jesse Novak
- Kaleigh Southwell

COMPETENCE COMMITTEE

The Competence Committee consists of no fewer than four members from the general register in good standing. This legislated committee reviews competence program issues as referred by the registrar or a Hearing Tribunal and makes determinations. The committee also makes recommendations to Council regarding the College's Continuing Competence Program.

Members:

- Heather Nelson (Chair)
- Samiha Rahman
- Terri Ward
- Allison Wylie
- Selda Suleymanoglu
- Jaimie Braybrook

HEARINGS TRIBUNAL or COMPLAINT REVIEW COMMITTEE

When a complaint is referred to a hearing, two or more individuals from the registrant and public member pools are appointed to a Hearing Tribunal to hear evidence and determine findings and appropriate disciplinary sanctions. Two or more individuals may also be appointed to a Complaints Review Committee to ratify a settlement resulting from an alternate complaint resolution process or to review the dismissal of a complaint, if requested by a complainant.

Members:

- Kwaku Adu
- Leanne Axelsen
- Matthew Bennett
- Barbara Boyer
- Glen Buick
- Avril Colenutt
- Geoffrey Coombs
- Emeka Ezike-Dennis
- Darwin Durnie
- Terry Engen
- Shelly Flint
- Catherine (Kate) Freeman
- Sarah Gingrich
- Lyle Guard
- Deborah Gust
- Kathryn Hilsenteger
- Brett Huculak
- Lillian (Patricia) Hull
- Andrea James
- Naeem N. Ladhani
- Iqra Nazir
- Andrew Otway
- Vincent Paniak
- Kent Lee Pallister
- Shirley Pate
- Emily Paxman, RDH
- Barbara Rocchio
- David Rolfe
- Kirstin Santrau, RDH
- Kathy Sauze, RDH
- Linda Sheen
- Laurel Sherret
- Peter Sherstan
- Meghan Smith, RDH
- Jaskiran (Jaz) Tathgur, RDH
- Judy Tran
- Ogochukwu (Ugo) Ukpabi
- Georgeann Wilkin
- Donald (Don) Wilson
- Jiaping (Julie) Wu, RDH

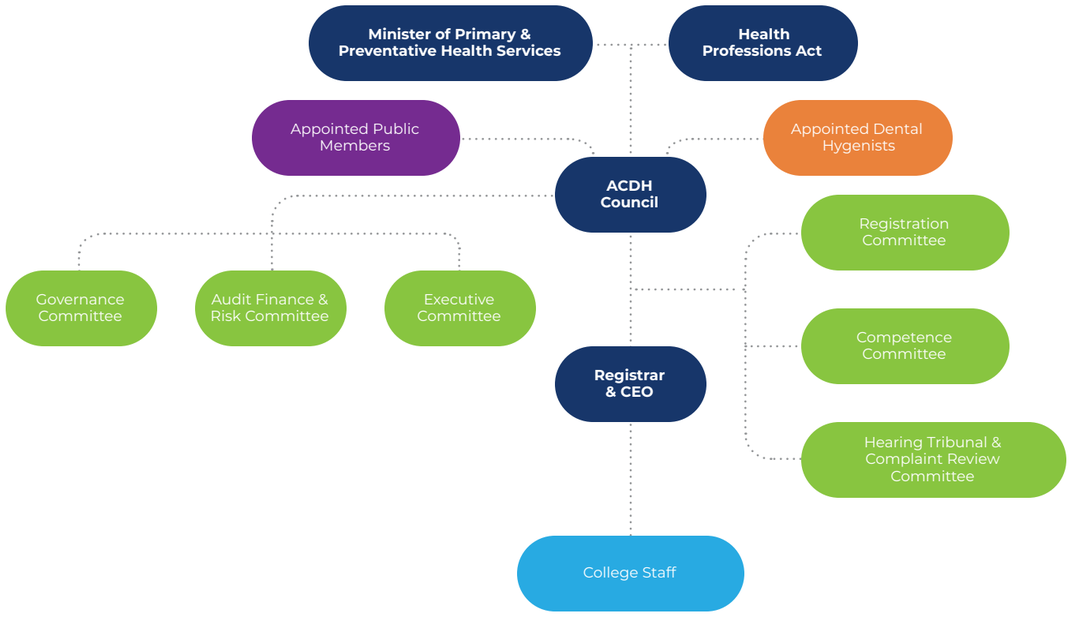
"RDH" indicates a regulated member, with the rest of the names representing public members.

ACDH MANAGEMENT TEAM

The management team is responsible for employing the appropriate means to ensure enforcement of the *Act* and for achieving the strategic plan established by Council. They achieve this through the application of policies, procedures, and activities. A list of current staff and their responsibilities is available on the College's website.

ORGANIZATIONAL STRUCTURE

Council, statutory committees, and other College positions are established in accordance with the *Health Professions Act* and the ACDH bylaws. Council governs the ACDH in accordance with the *Act* and bylaws.



Regulatory Functions

STANDARDS OF PRACTICE, CODE OF ETHICS, AND GUIDELINES

The Code of Ethics and Standards of Practice provide direction to health professionals in the practice of their profession. The Code of Ethics is a set of principles of professional conduct which guides all dental hygienists and establishes the expectations for dental hygienists in fulfilling duties to their clients, to the public, and to the profession. Standards of Practice set the minimum levels of professional behaviour and conduct of regulated health professionals.

Guidelines are intended to complement professional decision-making and should be used in conjunction with a dental hygienist's professional judgment. The College's Guidelines do not describe how to perform dental hygiene services but rather assist dental hygienists in meeting the Standards of Practice.

The College routinely reviews and updates the Standards of Practice and Guidelines to ensure they are current and aligned with industry standards, applicable laws, and regulations.

The following documents are approved and available on the College's website:

ACDH Code of Ethics

- Code Of Ethics
- Guidelines For The Code Of Ethics

ACDH Standards of Practice

- Administration Of Local Anaesthesia
- Advertising
- Clinical Therapy
- Collaboration
- Communication
- Conflicts Of Interest
- Continuing Competence
- Continuity Of Care
- Documentation
- Drugs: General
- Drugs: Prescribing Schedule 1 Drugs
- Duty To Report
- Evidence-informed Practice
- Informed Consent
- Ionizing Radiation
- Patient-centred Approach
- Privacy And Confidentiality
- Professional Accountability
- Protecting Patients From Sexual Abuse And Misconduct
- Record Management
- Restricted Activities
- Safety And Risk Management
- Supervision Of Restricted Activities

ACDH Guidelines

- Advertising
- Artificial Intelligence
- Clinical Therapy
- Continuity Of Care
- Drugs And Natural Health Products
- Duty To Report
- Fees And Billing
- Infection Prevention And Control
- Informed Consent
- Nitrous Oxide/Oxygen Conscious Sedation
- Prescribing Schedule 1 Drugs
- Preventing Sexual Abuse And Sexual Misconduct Towards Patients
- Privacy And The Patient Record
- Professional Boundaries

REGULATORY ADVISORS

Regulatory advisors have continued to play an important role in supporting the College's regulatory mandate. They offer valuable regulatory guidance to the public, employers, organizations, and dental hygienists, helping them understand and access legislative documents and directing them to essential resources.

In the 2024-2025 permit year, the regulatory advisors responded to over 750 inquiries either through phone or email communications. Most inquiries were related to dental hygiene practice and compliance with regulatory requirements. Some common topics included infection prevention and control (IPC), clinical therapy, and billing. The regulatory team also responds to individuals who are interested in practice ownership or who own a practice and are looking for information or clarification on specific legislative or regulated topics.

The following table outlines the incoming calls and emails by topic and frequency from November 1, 2024 – October 31, 2025:

Topics	Frequency
Compliance/Practice	361
Practice Ownership	140
Registration and Renewal	120
Issues, Concerns, and Complaints	49
Continuing Competence Program	51
Employment and Education	29
Total	750

The data collected from these calls and emails is highly valuable in helping the College develop and refine regulatory documents and resources. Based on these inquiries, the regulatory team created regulatory resources such as guidelines and frequently asked questions (FAQs) to support registrants in their practice of dental hygiene. These resources include

- fees and billing guidelines
- FAQs on the Practice Resources webpage, including topics on:
  - oral sedation,
  - authorization for restricted activities,
  - safety syringes and recapped waste needles,
  - radiography, and
  - laser use.
- Practice Ownership webpage, and
- FAQs for renewal on the topic of practice hours.

The *Regulation Matters* electronic newsletter continues to be sent to registrants throughout the year as an awareness and information resource. Topics during the 2024-2025 registration year included navigating ACDH regulatory documents and applying them in practice, safety and risk management in dental hygiene practice, and routine practices and point-of-care risk assessments.

CONTINUING COMPETENCE PROGRAM

Each registrant on the general register must meet the Continuing Competence Program (CCP) requirements as set out in the College's Continuing Competence Program Standard of Practice and Program Manual (available on the ACDH website). A registrant must earn 45 CCP credits (one credit = one hour of learning activity) in each three-year reporting period. A registrant's reporting period begins on November 1 following their initial date of registration with the ACDH.

Registrants self-report their credits in the registrant portal. Registrants must have evidence of obtaining 45 CCP credits in their three-year reporting period to renew their practice permit. The CCP also includes mandatory completion of cardiopulmonary resuscitation (CPR) training annually. At annual renewal, all applications are reviewed for compliance with the CCP requirements.

In 2025, the College launched a new learning management system to deliver educational regulatory content for Alberta dental hygienists. Five free courses were immediately available to registrants to support their ongoing learning. Course topics include documentation, privacy and confidentiality, jurisprudence, an introduction to regulation, and protecting patients from sexual abuse and misconduct.

Work on the Continuing Competence Program redesign continued in alignment with Strategic Priority A of our strategic plan: Advance the Continuing Competence Program to support registrants in enhancing their delivery of safe, high-quality care.

Through two surveys and a range of online and in-person engagement sessions across Alberta, registrants shared their strong commitment to patient well-being and the dental hygiene profession, and they emphasized the importance of a CCP that is accessible, autonomous, learning-oriented, and proactive.

Registrants also provided valuable insight into which learning approaches are perceived as most effective in supporting professional growth and proactively reducing risks to patient care. This feedback will guide the CCP redesign in 2026 and 2027, building on what is working well in the current program while better reflecting the diverse needs and practice realities of registrants. More information about the status of the redesign is available on the ACDH website.

ENTRY-TO-PRACTICE EXAMINATIONS

National Dental Hygiene Certification Examination

The National Dental Hygiene Certification Examination (NDHCE) is a written exam that tests the level of knowledge, judgment, and skills expected at the entry-to-practice level for dental hygienists in Canada and is administered by the Federation of Dental Hygiene Regulators of Canada (FDHRC). Successful completion of the NDHCE is a legislated requirement for registration with the ACDH. The examination is offered three times each year in multiple sites across Canada. The ACDH is a member and director on the FDHRC Board and has shared oversight of the NDHCE with the other provinces.

Jurisprudence Examination

Applicants for registration with the ACDH are required to successfully pass the jurisprudence examination approved by Council.

Delivered through the College's learning management system, the ACDH's jurisprudence examination is an online, on-demand course consisting of three modules: regulation, the role of the College, and registrant responsibilities. Each module includes multiple interactive learning activities and a module-specific exam. Applicants must review all module content and answer all exam questions correctly to successfully complete each module and meet the requirements for registration. Applicants may repeat the learning activities as many times as needed to support successful completion.

Clinical Examinations or Assessments

Applicants for registration may need to complete a performance exam, test, or assessment to help determine if their qualifications and competencies are substantially equivalent to what is required to graduate from the Council-approved Alberta benchmark program at the University of Alberta.

The assessments that may be used to determine entry-level competence are the Canadian Performance Examination in Dental Hygiene (CPEDH) or the Clinical Competence Assessment (CCA). The CPEDH was developed through a partnership of the regulatory colleges of BC, Ontario, and Alberta and is now administered through the Federation of Dental Hygiene Regulators of Canada (FDHRC). The CCA was developed and is administered by Continuing Dental Education, Mike Petryk School of Dentistry, at the University of Alberta.

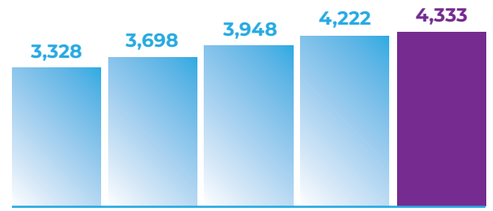
The ACDH uses these assessments when required to ensure that applicants demonstrate the necessary competence to provide dental hygiene services safely to the Alberta public. Those applying for registration under the labour mobility provisions of the Canadian Free Trade Agreement (CFTA) are generally not required to complete a performance exam, test, or assessment to demonstrate competence.

Registration Statistics

REGULATED MEMBER STATISTICS

The Dental Hygienists Profession Regulation establishes two categories of registration within the Regulated Member Register: General and Courtesy. General and Courtesy registrants hold a practice permit and may use the protected titles set out in the *Act*. Courtesy registrants may hold a practice permit for a specified purpose and period of time, as approved by the registrar, and for up to 60 days.

Regulated Members - AS AT OCTOBER 31, 2025



Courtesy Members in 2025: 1

New Applications for Registration - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Received	222	323	376	375	**289**

New Registrations Completed - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
University of Alberta	41	41	40	43	**42**
Other Canadian	158	256	332	319	**216**
International	0	4	1	0	**3**
Total	199	301	373	362	**261**

New Registrations Completed - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Issued	3	13	9	7	**3**
Conditions Met	2	5	8	7	**2**
Registrations Revoked	1	0	1	0	**0**

Transfers and Reinstatements - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Transfers	2	11	12	15	**9**
Reinstatements	9	27	15	27	**25**

Registration Statistics

The College discontinued the Non-Practicing Register effective October 31, 2024. Registrants were advised of the change and given the option to cancel their registration or return to the General Register. On November 1, 2024, nine registrants transferred from the non-practicing register back onto the General Register. Moving forward, there will no longer be transfers.

	2022	2023	2024	2025
Cancelled by Request	56	84	125	**94**
Cancelled by Request – Retired	29	30	45	**20**
Cancelled for Failure to Renew	18	34	97	**26**
Total Cancelled	103	148	267*	**140**

*2024 saw a jump in the number of cancellations and expiries due to removal of the Non-Practicing Register.

ADVANCED RESTRICTED ACTIVITY AUTHORIZATION

Individuals on the General Register who have provided evidence that they have achieved competence to perform advanced restricted activities may be authorized to perform those activities. Likewise, if authorized by the College, individuals on the Courtesy Register may also perform advanced restricted activities.

Registrants Authorized to: AS AT OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Administer local anaesthetic by injection	2,245	2,351	2,449	2,477	**2,592**
Perform restorative procedures of a permanent nature in collaboration with a dentist	48	55	57	57	**58**
Prescribe a limited subset of Schedule 1 drugs	149	218	272	310	**350**
Prescribe or administer nitrous oxide/oxygen conscious sedation	290	314	316	322	**345**
Perform orthodontic procedures in collaboration with a dentist	104	114	119	116	**118**
NP swabbing	10	11	11	10	**10**

The following initiatives in the 2024-2025 registration year were implemented:

- moved the Jurisprudence Examination modules and Protecting Patients from Sexual Abuse and Misconduct e-learning course to the new learning management system (LMS), allowing earlier access to applicants for registration;
- expanded automation process for renewal, increasing the number of eligible automated renewals from 300 to 1,000;
- revamped the registration pages on the ACDH website and increased transparency of substantially equivalent dental hygiene programs; and
- built reporting dashboards through PowerBI to improve data collection on registration.

Complaint Statistics

As part of its mandate to protect the public, the ACDH is responsible for addressing complaints of unprofessional conduct made about its registrants. The complaints process is outlined in Part 4 of the *HPA*. A complaint can be made by anyone about a registrant. Unprofessional conduct is defined in the *HPA* and includes a breach of the Standards of Practice, the Code of Ethics, or conduct that harms the integrity of the profession.

Complaints are handled objectively and compassionately, with an aim to address concerns and reduce risk to the public. When possible, the ACDH strives to resolve complaints with a focus on remediation and education.

The trend of rising numbers of complaints has continued. The top complaints issues were:

- **competency and skill:** e.g., failing to complete appropriate assessments and accurately diagnose periodontal disease, failing to complete periodontal probing, failing to detect and remove calculus, failing to read and interpret radiographs, etc.
- **infection, prevention, and control:** e.g., deficiencies related to medical device reprocessing, inadequate use of PPE, using medical devices without active Health Canada licenses, failing to follow the manufacturer's instructions for use for medical devices, etc.
- **billing:** e.g., overbilling, billing under inaccurate codes, etc.
- **patient records:** e.g., failing to note probing depths, recession, and abnormalities; failing to include the required sterilization load information; inadequate informed consent, etc.
- **communication:** e.g., failing to respond to inquiries from patients, failing to communicate with and respond to representatives of the ACDH, inappropriate communication on social media, etc.
- **collaboration:** e.g., failing to communicate the need for a referral, failing to refer when risks outweigh the benefits, etc.

Registrants Authorized to: AS AT OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Patient or public/family member	6	2	6	7	**10**
Other (agency, professional body, regulated health professional (not an RDH)	1	0	0	7	**7**
ACDH registrant (an RDH)	0	1	0	3	**4**
Employer	0	0	0	3	**3**
Section 56 (Complaints Director)	2	0	1	13	**5**
Total Complaints Received	9	3	7	33	**29**

Nature of New Complaints* - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Advertising/business operations	4	1	3	7	**10**
Conduct - non-sexual in nature	1	1	2	16	**11**
Communication/consent	1	1	1	13	**7**
Contravention of an Act or regulation	0	0	2	8	**5**
Ethical issues	1	0	0	3	**15**
Privacy issues	0	0	1	2	**3**
Record keeping	1	0	1	5	**2**
Sexual abuse or sexual misconduct	0	0	0	1	**0**
Skills/practice/knowledge	1	0	2	18	**5**
Infection prevention and control	-	-	-	-	**3**

*Complaints are often complex and multifaceted, so one complaint can encompass, and be reflected, in multiple categories.

Resolution of Complaints - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

Complaints dismissed	**8**
Complaints resolved by resolution agreement	**7**
Complaints withdrawn by complainant	**2**
Number of registrants dealt with under s.118	**0**
Total number of complaints closed	**17**

HEARINGS DIRECTOR REPORT

ACDH hearings are open to the public and may proceed by way of consent agreements between the registrant and the ACDH. Hearing Tribunal findings may be published on the College's website.

Discipline decisions made by Hearing Tribunal, Council, or the Court, for unprofessional conduct related to sexual abuse or sexual conduct, including the name and practice permit number of the registrant, plus any orders made, are permanently published on the College's website.

Hearings, Appeals, and Reviews Conducted - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

	2021	2022	2023	2024	2025
Findings based in whole or in part on sexual abuse	0	0	0	0	**0**
Findings based in whole or in part on sexual misconduct	0	0	0	0	**0**
Hearings	0	0	0	0	**0**
Hearings partly or completely closed to the public	0	0	0	0	**0**
Appeal of Hearing Tribunal decision to Council	0	0	0	0	**0**
Complaint Review Committee review of decision to dismiss a complaint	0	0	0	0	**0**

Outcomes of Hearings, Appeals, and Reviews - NOVEMBER 1, 2024 TO OCTOBER 31, 2025

Hearing Tribunal (s): n/a
Complaint Review Committee review of a complaint dismissal: n/a

College Initiatives

GOVERNANCE

ACDH's Council engaged The Regulator's Practice to conduct an independent review of its governance policies and practices. Over the past several years, the ACDH has advanced its governance model considerably by becoming a focused, single-mandate public-interest regulator. It has changed its name to reflect this focus, increased public representation on Council, transitioned to a competency-based appointment process, and moved away from the Policy Governance Framework.

The assessment explored four areas of governance:

- role clarity;
- people, culture, and relationships;
- decision-making and meeting effectiveness; and
- oversight responsibilities.

A summary of key findings can be found on the ACDH website.

Council also engaged a risk management consultant to work with them and staff on Council and College risk tolerance. Setting a risk tolerance level is crucial for good governance and sound decision-making. It helps organizations define the boundaries of acceptable risk-taking in pursuit of long-term objectives, ensuring that risks are managed effectively without exceeding the organization's capacity to absorb potential impacts. This process helped align Council's and the College's risk appetite with strategic and organizational goals.

GOVERNMENT RELATIONS

Throughout the year, the ACDH actively engaged with provincial government ministers, members of the legislative assembly (MLAs), and government officials to strengthen relationships and enhance understanding of the regulatory role of the College. Several of these meetings were conducted collaboratively with the Dental Hygienists Association of Alberta (DHAA), providing an opportunity to clearly articulate the distinct yet complementary roles of the professional association and the regulatory college. These discussions supported informed decision-making by government and focused on emerging issues affecting the profession and the public (e.g., labour mobility...oral landscape in Alberta). Through these ongoing conversations, the ACDH continued to advocate for effective regulation in the public interest while contributing its expertise to policy discussions impacting the dental hygiene profession and the Albertans it serves.

PROGRAM APPROVALS AND REVIEWS OF ALBERTA DENTAL HYGIENE PROGRAMS

ACDH's Council assesses new programs against a set of standards. These standards include the Entry-to-Practice Canadian Competencies for Dental Hygienists as defined by the Federation of Dental Hygiene Regulators of Canada and meet the scope of practice in Alberta as defined in the Dental Hygienists Profession Regulation and the Health Professions Restricted Activity Regulation. With the support of other regulatory colleges in Alberta, the ACDH formalized a program review and approval process in alignment with Section 3(1)(f) of the *Health Professions Act*. This included Council approval of policies, procedures, education standards, a fee schedule, and establishing of an Education Program Review Committee.

COLLABORATION

The ACDH strengthened its relationships with other oral health regulators by hosting a joint council education session and exploring shared office space. In addition, the College launched an Artificial Intelligence guideline, developed jointly with the College of Dental Technologists of Alberta (CDTA) and the College of Alberta Denturists (CAD), to support registrants in understanding expectations for the use of AI in practice. The College also continued building its partnership with the University of Alberta by presenting to dental hygiene students on regulation, registration and renewal requirements, continuing competency, and professional conduct.

CONTINUITY OF CARE

Registered dental hygienists can now voluntarily display up to two places of employment on the Verify a Dental Hygienist webpage on the ACDH website. This update supports the Continuity of Care Standard of Practice, which allows patients to search for a dental hygienist who was their previous care provider.

FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2026

INDEPENDENT AUDITOR'S REPORT

MARCH 31, 2026

TO THE MEMBERS OF ALBERTA COLLEGE OF DENTAL HYGIENISTS

Opinion

We have audited the financial statements of Alberta College of Dental Hygienists (the "organization"), which comprise the statement of financial position as at March 31, 2026, and the statements of revenues and expenses, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the organization as at March 31, 2026, and the results of its operations and cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO).

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the organization in accordance with ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with ASNPO, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Edmonton, Alberta
June 19, 2026

Bruce MS Mahon Professional Corporation
Chartered Professional Accountants

MAHON + ASSOCIATES
Chartered Accountants
an association for the practice of Chartered Accountancy

STATEMENT OF FINANCIAL POSITION

MARCH 31, 2026

	2026	2025
ASSETS		
CURRENT		
Cash	**$ 420,805**	$ 375,476
Accounts receivable	**22,998**	-
Prepaid expenses	**63,005**	40,659
Investments *(Note 3)*	**3,089,148**	3,538,728
	3,595,956	3,954,863
INVESTMENTS *(Note 3)*	**3,741,067**	3,456,954
PROPERTY AND EQUIPMENT *(Note 4)*	**201,057**	178,587
	$ 7,538,080	$ 7,590,404
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	**$ 107,195**	$ 147,271
Wages payable	**106,934**	72,780
Deferred permit fees *(Note 5)*	**1,519,007**	1,451,862
	1,733,136	1,671,913
NET ASSETS		
Unrestricted	**2,038,327**	1,674,344
Internally restricted *(Note 6)*	**3,565,560**	4,065,560
Invested in property and equipment	**201,057**	178,587
	5,804,944	5,918,491
	$ 7,538,080	$ 7,590,404

COMMITMENTS *(Note 7)*

CONTINGENCIES *(Note 8)*

ON BEHALF OF COUNCIL

COUNCIL MEMBER

COUNCIL MEMBER

STATEMENT OF REVENUES AND EXPENSES

YEAR ENDED MARCH 31, 2026

	2026	2025
REVENUE		
Permit and application fees	**$ $2,807,833**	$ $2,704,422
Investment income	**234,534**	243,398
Discipline costs, fines and other	**48,660**	8,720
	3,091,027	2,956,540
EXPENSES		
Salaries and benefits	**1,635,540**	1,309,021
Professional conduct	**281,531**	67,446
Professional fees and consulting	**201,643**	134,553
Continuing competence	**183,201**	175,008
Registration	**180,682**	169,126
Information technology	**165,752**	115,783
Rent and office costs	**155,328**	180,692
Bank charges and accounting	**144,228**	139,582
Amortization	**86,460**	72,208
Meetings	**61,136**	52,719
Legal	**36,737**	90,505
Insurance	**26,855**	25,491
Stakeholders	**25,997**	9,400
Communications	**19,484**	18,192
	3,204,574	2,559,726
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES	**$ (-113,547)**	$ 396,814

STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED MARCH 31, 2026

	Unrestricted	Invested in Property and Equipment	Internally Restricted *(Note 6)*	**2026**	2025
Balance at beginning of the year	$ 1,674,344	$ 178,587	$ 4,065,560	**$ 5,918,491**	$ 5,521,677
Excess of revenue (expenses) for the year	(27,087)	(86,460)	**-**	**(113,547)**	396,814
Purchase of property and equipment	(108,930)	108,930	**-**	**-**	**-**
Transfers, net *(Note 6)*	500,000	**-**	(500,000)	**-**	**-**
Balance at end of the year	$ 2,038,327	$ 201,057	$ 3,565,560	**$ 5,804,944**	5,918,491

STATEMENT OF CASH FLOWS

YEAR ENDED MARCH 31, 2026

		2026		2025
OPERATING ACTIVITIES				
Excess (deficiency) of revenue over expenses	**$**	**(113,547)**	$	396,814
Item not affecting cash:				
Amortization		**86,460**		72,208
		(27,087)		469,022
Changes in non-cash working capital:				
Accounts receivable		**(22,998)**		-
Accounts payable and accrued liabilities		**(40,076)**		82,437
Deferred permit fees		**67,145**		70,571
Prepaid expenses		**(22,346)**		(3,025)
Wages payable		**34,154**		8,509
		15,879		158,492
Cash flow from (used by) operating activities		**(11,208)**		627,514
INVESTING ACTIVITIES				
Purchase of property and equipment		**(108,930)**		(84,628)
Purchase of investments, net of redemptions		**165,467**		(413,798)
Cash flow from (used by) investing activities		**56,537**		(498,426)
INCREASE IN CASH FLOWS		**45,329**		129,088
Cash - beginning of year		**375,476**		246,388
CASH - END OF YEAR	**$**	**420,805**	$	375,476

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2026

1. PURPOSE OF THE ORGANIZATION

Alberta College of Dental Hygienists (the “College”) is constituted under the Health Professions Act. The College is a not-for-profit organization and accordingly, is exempt from payment of income taxes.

The College regulates the practice of dental hygiene in a manner that protects and serves the public interest. In fulfilling this role, the College establishes, maintains and enforces standards for registration and continuing competence, standards of practice, a code of ethics and investigates and acts on complaints.

2. SIGNIFICANT ACCOUNTING POLICIES

BASIS OF PRESENTATION

The financial statements were prepared in accordance with Canadian accounting standards for not for-profit organizations. The significant accounting policies are as follows:

REVENUE RECOGNITION

Membership revenue is recognized in the year to which the membership fees relate. The portion of annual permit fees paid before year end which relates to the next fiscal year has been included in deferred revenue.

Administration fees are recognized in the year to which the related service is provided.

Investment income is recognized as it is earned.

Conduct recoveries and other revenue are recognized when the amount is established and collection is reasonably assured.

CONTRIBUTED SERVICES

The work of the College is dependent on the voluntary service of many individuals. The fair value of donated services cannot be reasonably determined and are therefore not reflected in these financial statements.

CASH AND CASH EQUIVALENTS

Cash and cash equivalents consist of cash balances with banks.

INVESTMENTS

Guaranteed investment certificates and term deposits are stated at the purchase amount plus accrued interest.

PROPERTY AND EQUIPMENT

Property and equipment is stated at cost or deemed cost less accumulated amortization and is amortized over its estimated useful life on a declining balance basis at the following rates:

- Furniture and equipment 20%
- Computer equipment 30%
- Information systems 5 years
- Leasehold improvements term of lease

Leasehold improvements are amortized on a straight-line basis over the term of the lease. Information systems are amortized on a straight-line basis over 5 years. The organization regularly reviews its property and equipment to eliminate obsolete items.

Property and equipment acquired during the year but not placed into use are not amortized until they are placed into use.

FINANCIAL INSTRUMENTS POLICY

The College initially measures its financial assets and liabilities at fair value. Subsequent measurement is at amortized cost.

Financial assets measured at amortized cost consist of cash and investments.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities, and wages payable.

Financial assets measured at amortized cost are tested for impairment when there are indicators of impairment. The amount of write-down is recognized in net income. Any previously recognized impairment loss may be reversed to the extent of the improvement, directly or by adjusting the allowance account, provided it is no greater than the amount of impairment recognized previously. The amount of the reversal is recognized in net income.

USE OF ESTIMATES

The preparation of financial statements in conformity with Canadian accounting standards for not-forprofit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are reviewed annually and adjustments are made to income as appropriate in the year they become known. Significant items subject to such estimates include the estimated lives of capital property and equipment. Actual results could differ from these estimates.

COMPARATIVE FIGURES

Certain comparative amounts have been reclassified to conform to the current year's presentation.

NOTES TO FINANCIAL STATEMENTS
YEAR ENDED MARCH 31, 2026

3. INVESTMENTS

	2026	2025
Guaranteed investment certificates with interest rates ranging from 3.00% to 5.25% (2025: 3.30% - 5.25%), maturing between November 2026 and December 2030 (2025: September 2025 and October 2029).	**$ 4,700,000**	$ 5,000,000
Cash and cash equivalents	**2,073,356**	1,918,134
Accrued interest receivable	**56,859**	77,548
Total investments	**6,830,215**	6,995,682
Investments maturing within one year, including cash	**3,089,148**	3,538,728
Long-term portion of investments	**$ 3,741,067**	$ 3,456,954

The cost of the investments plus accrued interest receivable approximates their market value.

4. PROPERTY AND EQUIPMENT

	Cost	Accumulated amortization	2026	2025
Computer equipment	$ 83,440	$ 49,645	**$ 33,795**	$ 27,979
Information systems	271,304	152,089	**119,215**	98,526
Furniture and equipment	115,481	85,849	**29,632**	30,758
Leasehold improvements	77,716	59,301	**18,415**	21,324
	$ 547,941	$ 346,884	**$ 201,057**	$ 178,587

Amortization of equipment provided in the current year totaled $86,460 (2025: $72,208).

5. DEFERRED PERMIT FEES

	2026	2025
Deferred permit fees, beginning of year	**$ 1,451,862**	$ 1,381,291
Amounts received during the year	**2,874,978**	2,774,993
Amounts recognized as revenue during the year	**(2,807,833)**	(2,704,422)
Deferred permit fees, end of year	**$ 1,519,007**	1,451,862

College permit fees are effective from November 1 to October 31. As at March 31, seven months of the permit year have not occurred and the related portion of permit fees is deferred. Application fees are recognized in the year received.

6. INTERNALLY RESTRICTED ASSETS

The following funds have been established by Council for the purposes stated below. The funds in all internally restricted accounts can only be expended upon approval by Council.

The Unrestricted fund accounts for the College's operations and administrative activities. The College's accumulated surpluses and deficits from year to year are added to and subtracted from the Unrestricted reserve.

The Invested in Property and Equipment fund reports the assets, liabilities, revenue and expenses related to the College's property and equipment. Amortization expense and losses on disposals of equipment are subtracted from this fund. Property and equipment purchases in the year are transferred to this fund from the Unrestricted reserve.

The Sustainability fund is established to provide for continued operations for a minimum of six months if there are unexpected interruptions in cash flow or unexpected expenses.

The Investigations and Discipline fund is intended to provide funds to cover the cost of complex discipline issues including appeals above the amount in the annual operating budget

The Facility and Services fund may be used to cover the cost of any improvements of the College office space and staff work from home requirements.

The Strategic fund will provide funds to meet the cost of regulatory improvements, continuing competence programs, exam courses and communications.

The Technology fund is created to ensure the College can fund technology projects and cyber security initiatives.

The Legislation fund supports projects related to the regulatory mandate of the College including the implementation of new government bills, bylaws and standards of practice.

The Succession fund provides resources to support the recruitment and training of highly qualified individuals to enhance the operations of the College.

The Treatment and Counselling fund will be used to support patients when a complaint of sexual misconduct has been made.

The Program Approval fund will cover expenses related to the approval of new dental hygiene programs in Alberta in alignment with regulatory obligations.

		2026		2025
Investigations and Discipline Fund	**$**	**400,000**	$	360,000
Transfer from Unrestricted		**-**		40,000
		400,000		400,000
Legislation Fund		**500,000**		171,436
Transfer from Unrestricted		**-**		328,564
		500,000		500,000
Facility and Services Fund		**(500,000)**		260,000
Transfer (to) from Unrestricted		**-**		240,000
		500,000		500,000
Succession Fund		**200,000**		121,484
Transfer from Unrestricted		**-**		78,516
		200,000		200,000
Strategic Fund		**500,000**		358,253
Transfer from Unrestricted		**-**		141,747
		500,000		500,000
Sustainability Fund		**1,365,560**		1,365,560
		1,365,560		1,365,560
Technology Fund		**300,000**		127,704
Transfer from Unrestricted		**-**		172,296
		300,000		300,000
Treatment and Counselling Fund		**100,000**		-
Transfer from Unrestricted		**-**		100,000
		100,000		100,000
Program Approval Fund		**200,000**		-
Transfer from Unrestricted		**-**		200,000
		200,000		200,000
	$	**3,565,560**	$	4,065,560

7. COMMITMENTS

The College is committed to the rental of business premises under a lease agreement expiring March 2027. The minimum rent payable is $5,446 per month to March 2027, plus the College's proportionate share of common area costs

8. CONTINGENCIES

In the ordinary course of business, the College is occasionally involved in various legal proceedings, claims, and regulatory actions. While the outcome of these matters is inherently uncertain, management believes that any potential liability arising from current outstanding or threatened litigation will not, individually or in the aggregate, have a material adverse effect on the College's financial position, operating results, or cash flows.

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2026

9. SUBSEQUENT EVENT

Subsequent to March 31, 2026, the College signed a new lease agreement for operating space. The lease term is for 10 years beginning January 2027. Under the terms of the agreement, the College will pay base rent plus operating costs. Additionally, the landlord has agreed to provide a tenant improvement allowance of $565,880 to offset the costs of leasehold improvements required for the new premises. Future minimum lease payments excluding operating costs are approximately as follows:

2027	$	36,378
2028		145,512
2029		146,522
2030		149,554
2031 and thereafter		1,045,868
	$	1,523,834

10. FINANCIAL INSTRUMENTS

The College is exposed to risk on certain financial instruments as follows:

(a) Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. The College is exposed to interest rate risk primarily through its fixed-rate investments. The College manages this exposure through its investment policies and procedures.

(b) Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The College is exposed to this risk mainly in respect of its accounts payable and accrued liabilities and wages payable. The organization considers that it has sufficient funds available to meet current and long-term financial needs.

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