



# Overview of the CDHBC PLAR Portfolio

## Frequently Asked Questions:

### 1. What is PLAR?

Prior learning assessment and recognition (PLAR) is a process which determines if university-level recognition can be awarded to learning that has taken place. In this particular portfolio you will be expected to demonstrate the required abilities related to the College of Dental Hygienists of British Columbia (CDHBC) '365-Day Rule Exempt Full Registration' at a fourth year bachelor degree level.

The primary sources of PLAR include:

- Certificates of qualification from health care organizations, workplace training programs, non-credit continuing education courses.
- Informal learning derived from achievement and performance in the workplace and/or through community or other life experience.
- Self-initiated learning activities.

PLAR acknowledges that people learn in many different ways throughout their life and that learning can occur informally as people read, interact and participate in a variety of professional discussions and activities. Our personal and professional lives provide us with many opportunities to learn and develop, however, we are often unaware of the depth and breadth of this learning. PLAR provides a structured process through which you can reflect on your learning and provide evidence to support that you have achieved that learning.

### 2. What are the essential stages in a learning portfolio?

PLAR is often organized into a portfolio format and this is what has been selected for the PLAR process related to the CDHBC registration category. There are three overall stages in a learning portfolio:

**Identifying:** The first stage involves identifying the knowledge and abilities that you possess that might be equivalent to those required for the CDHBC 365-Day Rule Exempt Full Registration category. These may be as a result of education, work, community involvement or other experiences that you have had.

**Equating:** As you begin to identify what you know, or can do, you will be equating these abilities and/or knowledge to those required for the registration. These are identified as competencies. In other words, you will match your previous learning to those required for the CDHBC 365-Day Rule Exempt Full Registration.

**Assessing:** Once you have submitted proof of learning, it is assessed by a trained assessor who is experienced in the profession. The assessor reviews your submission and will request an interview to clarify your information. The assessor will decide whether you have demonstrated learning equivalent to the competencies for the CDHBC 365-Day Rule Exempt Full Registration.

### 3. What does this specific portfolio involve?

The CDHBC has made special arrangements with Thompson Rivers University, Open Learning (TRU-OL) to offer the PLAR Portfolio for dental hygienists in good standing with a Canadian regulatory authority. To be eligible for this portfolio you must hold a current dental hygiene registration in Canada.

The CDHBC PLAR Portfolio will offer you the opportunity to present evidence of your learning at a fourth year bachelor degree level focused on the required competencies in the CDHBC Bylaws. You will basically be generating a personal learning portfolio that provides proof of what you know and can do.

The CDHBC PLAR Portfolio process is grounded in the required competencies in the CDHBC Bylaws. The 2012 June survey conducted by the CDHBC helped to articulate the differences between diploma and bachelor degree abilities in these required competencies. Registrants who had experience working through a diploma program and subsequently earned a bachelor degree in dental hygiene provided input regarding perceived differences between the required competencies related to their diploma practice and those resulting from their degree education. The results of the study were used to more fully describe the aspects in which the competencies based on the outcomes of the survey. Further details related to the survey can be accessed at: <http://www.cdhbc.com/Documents/365-Day-Exempt-Category-Support-Survey.aspx>

The overlapping areas were amalgamated, resulting in the following three competency statements:

- **Research use:** To use scientific information to support evidence and theory-based dental hygiene decisions and services.
- **ADPIE for clients with limitations and impairments:** To safely and effectively perform a needs assessment, develop a dental hygiene diagnosis and plan, implement and evaluate dental hygiene services for clients with complex needs and/or disabling conditions.

- **Inter-professional practice to support safer and better oral health outcomes:** To initiate collaborative approaches to support client safety and better oral health outcomes through the management and coordination of care.

In your diploma education you were required to demonstrate basic abilities in these areas in order to enter dental hygiene practice. The PLAR process requires you to demonstrate that you have developed these abilities at a fourth year bachelor degree level.

You will be asked to describe your experiences, but experiences alone are not sufficient to successfully complete the portfolio. You will receive recognition for demonstrated knowledge and skills; you will be required to provide proof of your learning through your reflections and associated evidence that provide examples of that learning.

The BC Ministry of Advance Education (BC MoAE) has articulated transferable abilities that need to be evident in all bachelor degrees in British Columbia (<https://www2.gov.bc.ca/assets/gov/education/post-secondary-education/institution-resources-administration/degree-authorization/degree-program-criteria.pdf>).

They include the following:

- depth and breadth of knowledge
- knowledge of methodologies
- application of knowledge
- communication skills
- awareness of limits of knowledge
- professional capacity/autonomy

These are described as involving an increased depth and breadth of knowledge particularly in the area of research methodologies and the knowledge of the discipline. These abilities are integrated into this portfolio as a quality assurance measure to help define what is required at a fourth year bachelor degree level with regard to the specific required competencies.

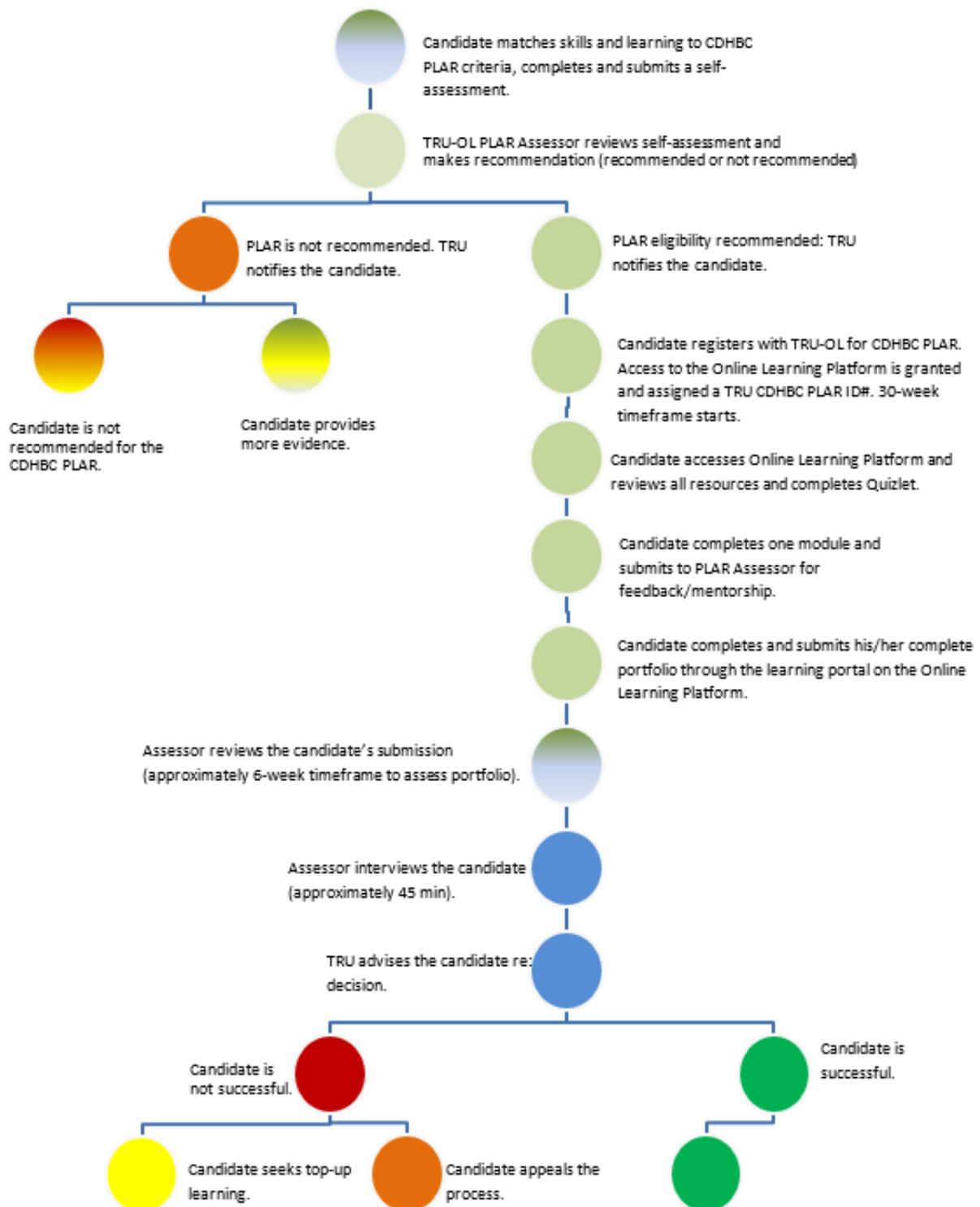
These BC MoAE abilities can be viewed as the foundational abilities that are common to work and life; they describe what is expected of learners in bachelor degree education in British Columbia. They are integral and foundational to the CDHBC abilities and you will find them threaded within each of the CDHBC Portfolio abilities. They have been shaped to reflect a professional dental hygiene practice context for the purposes of this assessment. The following information provides a description of these foundational competencies contextualized to the dental hygiene profession:

- **Depth and Breadth of Knowledge:** Knowledge and critical understanding that builds on post-secondary education to apply to and continuously improve practice decisions. This includes knowledge of the roles and practice of other health professionals. The ability to evaluate information from multiple sources with an open-minded, inquisitive, logical, and inquiring perspective to seek conclusions that are as precise as the information and the context allow.

- **Knowledge of Methodologies and Research:** Ability to understand a variety of qualitative and quantitative methods of research and discern appropriateness of approaches to answer practice questions and/or solve a practice problem. Ability to assess currency and relevance of research to inform dental hygiene practice.
- **Application of Knowledge:** Ability to observe, analyze, critique, consolidate and integrate evidence-based information to inform practice decisions. Ability to make judgments and critique information and concepts. Ability to frame problems in order to find a solution.
- **Communication Skills:** Use varied dimensions of communication to elicit, clarify and share information with diverse individuals, groups and other health care professionals in a clear, structured, effective and professional manner. Ability to incorporate communication that is empathetic, trauma informed and includes cultural safety and humility.
- **Awareness of Limits of Knowledge:** Understands limits of personal knowledge, skills and abilities that might impact client safety and care.
- **Professional Capacity/Autonomy:** Exhibit the ability to be self-directed in making autonomous decisions while having the interpersonal awareness and self-awareness to recognizing personal and professional limits of knowledge and abilities. Exhibit academic integrity, work effectively in a team environment and accountability for actions. Ability to apply good judgement and ethical decision making. Compassion, concern for others, interpersonal skills, interest and motivation are essential skills and abilities.

Think about looking through the lens of your camera and seeing a view of your dental hygiene practice; what you are seeing is the foundational abilities that are embedded in your practice. Then you zoom in on specific areas to enlarge your view of these. Those enlarged areas are the CDHBC required competencies; you will be exploring specific aspects of your practice that have been articulated in the CDHBC Bylaws.

## 4. What are the steps of the CDHBC PLAR Portfolio process?



## 5. What do the CDHBC PLAR Portfolio Modules include?

The competencies included in the portfolio and the competency indicators for each are as follows:

### 1. Research Use

Using scientific information to support evidence and theory-based dental hygiene decision and services.

Indicators:

- Navigate through diverse databases related to oral and general health issues.
- Critique study methodology and conclusions for their relevance and application to dental hygiene services.
- Synthesize and extrapolate information from current and credible research to support evidence-informed decision making about oral health services.
- Systematically examine group data related to services provided against epidemiological data, the effectiveness and/or cost-effectiveness of care outcome.

### 2. ADPIE for clients with limitations and impairments

Safely and effectively perform a needs assessment, develop a dental hygiene diagnosis and plan, implement and evaluate dental hygiene services for clients with complex needs and/or disabling conditions.

Indicators:

- Perform needs assessments grounded in evidence-based approaches for clients\* with multifaceted medical histories and complex and long term medical treatments including those living with limitations and impairments.
- Prioritize oral and general health issues grounded in oral health literature for clients living with limitations and impairments.
- Develop diagnostic statements based on a comprehensive knowledge of pathophysiology.
- Incorporate epidemiological, social and environmental data into planning of oral health interventions for clients\* with limitations and impairments living in diverse environments.
- Provide evidence based on dental hygiene services for clients\* across the life stages including those limitations and impairments.
- Mentor health care workers and professionals on issues and protocols related to oral care.
- Manage primary oral health care for clients effectively and safely with an emphasis on risk assessment, prevention, education, therapeutic services and referrals.

\*The dental hygiene profession defines the term 'client' as including individuals, groups, communities and populations.

### **3. Interprofessional practice to support safer and better oral health outcomes**

Initiate collaborative approaches to support client safety and better oral health outcomes through the management and coordination of care.

The term 'safer care and better oral health outcomes' is a term often used in health care literature. However, it is also acknowledged that 'better health outcomes' are essential components of safer care. The term is being used to place emphasis on the importance of the health outcomes.

This competency is organized into two units. The first unit (Unit A) directs attention to the use of best practice standards to support client safety and better health outcomes. The second unit (Unit B) directs the attention to the collaborative aspects associated with interprofessional practice and effective referrals that support client safety and better oral health outcomes.

#### **Module 3**

##### **Unit A: Best Practice Standards to support client safety and better oral health outcomes**

Indicators:

- Address the safety issues pertinent to the provision of dental hygiene services for clients\* with complex needs or disabling conditions (including vulnerable populations).
- Collaborate in the development of policies to promote client safety and better health outcomes.
- Implementation of policy protocols and/or standards of practice related to client\* safety and better health outcomes (including infection control, medical emergencies, referrals, dental hygiene services and program protocols as appropriate for practice context).
- Create and/or integrate systems to manage information within the practice context.

\*The dental hygiene profession defines the term 'client' as including individuals, groups, communities and populations.

#### **Module 3**

##### **Unit B: Interprofessional practice to support client safety and better oral health outcomes**

Indicators:

- Use strategies related to coaching, mentoring and networking to promote collaborative problem solving and decision making.
- Incorporate activities to solicit peer feedback to assess outcomes of services.
- Use strategies to effectively communicate with diverse clients\* including those with learning disabilities and/or cognitive impairments.
- Work with others to advocate for access to oral care.
- Demonstrate knowledge of the roles and responsibilities of personnel involved in the delivery of dental hygiene services for individuals with complex needs or disabling conditions.

\*The dental hygiene profession defines the term 'client' as including individuals, groups, communities and populations.

Once you are a CDHBC PLAR Portfolio candidate you will have access to the CDHBC PLAR Learning Platform on the TRU server website. This site will provide you with more detailed

information about each competency, the related knowledge and the performance indicators you will be expected to demonstrate.

It is important to remember that eligibility for the 365-Day Rule Exempt Full Registration category is not based on experience; it is based on learning that has occurred as a result of that experience. It is not enough to say that you have worked in a specific practice area for a specific number of years. That would be a statement of your experience. Your portfolio must also include proof of what you know and can do as a result of that experience.

## 6. What type of evidence are submitted to support prior learning for each competency/competency indicator?

The term 'evidence' means supporting documentation of prior learning that demonstrates how the candidate has met each Competency/Competency Indicator. Three categories of evidence are used in the CDHBC-PLAR Portfolio:

- **narratives** - introduces all product or outcome evidence and link it to the competency indicator
- **products or outcomes** - evidence that is the candidates own work to demonstrate each competency indicator
- **verification** – authenticates product or outcome evidence as the candidates own work

The following table provides a description, examples and application on how each classification of evidence is to be used within the portfolio.

Categories of Portfolio Evidence			
Category of Classification	Description	Example(s)	Application
<b>Narrative</b>	An introduction to all PO and Verification evidence outlining how the evidence links to a given competency indicator. The narrative must outline the candidate's abilities in relation to the competency indicator	Word document/PDF outlining the: <ul style="list-style-type: none"> <li>• Module name</li> <li>• Competency indicator</li> <li>• Description of how prior learning is addressed in the PO and how it meets the competency indicator.</li> </ul>	<ul style="list-style-type: none"> <li>• One Narrative must accompany each piece of PO and Verification evidence for each competency indicator</li> <li>• Reflects on the learning/abilities that occurred and the application and/or outcome</li> </ul>
<b>Product or Outcome (PO)*</b>	Evidence produced by the candidate that demonstrates experiential learning related to a competency indicator. It must draw on the learning that occurred, not the experience.  * a PO may be used for more than 1 indicator	<ul style="list-style-type: none"> <li>• Anonymized client records</li> <li>• Publications</li> <li>• Meeting minutes</li> <li>• Webinar presentations</li> <li>• Lesson plans</li> <li>• Research/literature review</li> <li>• Referral letters</li> <li>• Training and calibration materials</li> </ul>	<ul style="list-style-type: none"> <li>• Each Competency Indicator must have at least 1 PO evidence of depth, quality, sufficiency and relevance</li> <li>• Acceptable to have 2 pieces of PO if one specific piece is lacking sufficiency for all critical criteria for a competency indicator.</li> </ul>
<b>Verification</b>	Evidence (solicited or unsolicited) that authenticates the product outcome evidence submitted by the candidate. This may include outlining the sections of the product the candidate was responsible for if PO evidence was completed on a collaborative team.	<ul style="list-style-type: none"> <li>• Letter from employer/co-worker</li> <li>• Thank you card from organization where the candidate presented</li> <li>• Newspaper clipping</li> <li>• Awards &amp; Certificates</li> </ul>	<ul style="list-style-type: none"> <li>• When it is not apparent that the PO evidence was produced by the candidate, verification evidence must accompany the PO.</li> </ul>

## 7. What are the next steps?

Complete the Self-Assessment Activity by visiting the TRU website at:

<https://www.tru.ca/distance/transfer-options/transfer-agreements/other-partners/college-dental-hygienists.html>