

Canadian Performance Exam in Dental Hygiene (CPEDH™)

Candidate Guide

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Introduction

Purpose of the Guide

This guide outlines how to apply for the Canadian Performance Exam in Dental Hygiene™ (CPEDH™), the structure of the CPEDH™ what to expect on exam day, and after the exam.

The intended audience of this guide is Applicants and Candidates of the CPEDH™.

Glossary

Term	Definition
Actual Client	A person who meets the selection criteria for Part 2 of the exam (see Selection of Actual Clients, page 11). The FDHRC™ selects and provides the Actual Clients for Part 2 of the exam.
Applicant	A person who has applied to take the CPEDH™ and has not yet been approved.
Canadian Performance Exam in Dental Hygiene™	The Performance-Based Assessment that consists of two parts. Acronym: CPEDH™.
Candidate	A person who has applied, meets all the requirements for eligibility, and has been approved to take the CPEDH™.
CPEDH™	See Canadian Performance Exam in Dental Hygiene™.
Chief Examiner	The person appointed to oversee the administration and to ensure the security and oversight of the CPEDH™.
Immediate Family Member	A spouse (including common-law relationship), child (including stepchild), grandchild, sister and brother, mother and father (including step-parents), mother-in-law and father-in-law, grandmother and grandfather, brother-in-law and sister-in-law.
Non-Accredited Program	An undergraduate dental hygiene program offered by a university or other institution that, at the time of the Applicant's graduation, was/has not been accredited by the Commission on Dental Accreditation of Canada (CDAC) or the American Dental Association Commission on Dental Accreditation (ADA/CODA).
Performance-Based Assessment	Testing that requires the Candidate to demonstrate their knowledge or skills in simulation-based settings or in an authentic clinical context.



Rater	A person who assesses Candidates' performance at a particular station(s) for a particular exam offering.
Roving Proctor	A person responsible for supporting Raters to ensure station documentation is complete and the station documents are replenished for the next Candidate.
Standardized Client	A person trained to portray the personal history, physical symptoms, emotional characteristics and everyday concerns of a real client (see Standardized Client, page 10).

Background - CPEDH™ Development

Purpose

The purpose of the Canadian Performance Exam in Dental Hygiene™ (CPEDH™) is to ensure that dental hygienists possess the breadth and depth of clinical skills necessary to safely and effectively enter the dental hygiene profession in Canada. The exam is dedicated to the assessment of these skills for two reasons. First, evaluating the performance of clinical skills is the most direct way in which Canadian dental hygiene regulators can determine an individual's competence and therefore readiness to practice. Second, other opportunities to assess Candidates, such as the assessment of prior learning and success on written exams, are generally focused on knowledge. Thus, the CPEDH™ represents a critical piece in the comprehensive and valid assessment of dental hygiene competence.

Overall CPEDH™ Exam Structure

Performance-Based Assessments (PBAs):

The CPEDH™ uses Performance-Based Assessments, or PBAs, with an assessment process comprised of two parts. Candidates apply and demonstrate their knowledge in simulation-based settings with Standardized Clients (Part 1) and in authentic clinical contexts with Actual Clients (Part 2). Successful completion of the PBAs requires both a minimum level of performance on Part 1 and a sufficient level of performance on both parts combined.

Together, Parts 1 and 2 are made up of ten (10) competency-focused clinical scenarios, known as stations (see Figure 1). For each station, Candidates will encounter a realistic dental hygiene situation in where they are required to perform several tasks or manage a situation.

Part 1 is comprised of seven (7) simulation-based stations that emulate clinical situations using Standardized Clients and/or manikins. Limited clinical interventions are performed on the Standardized Clients (e.g., head and neck assessment), or on manikins or other simulation dental equipment.

Part 2 is comprised of three (3) stations, each of which requires Candidates to perform specific dental hygiene interventions on an Actual Client, as outlined in the Candidate task.



The collection of ten (10) stations is intended to broadly sample from the National Dental Hygiene Certification Examination List of Competencies (as found in the NDHCE™ Blueprint).¹ Competencies judged to be most central to clinical competence are the focus of a station. This is deliberate so that the decision about Candidate competence can be made based on scenarios that examine clinical competence most directly. The list of competency areas/dimensions that make up the CPEDH are found in the [Canadian Performance Exam in Dental Hygiene™ \(CPEDH™\) Blueprint Development](#) document. For a full list of all competencies assessed on the CPEDH™ see the [Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint](#).

The final determination of competence is made using the overall performance across all ten (10) stations from both Part 1 and 2. A pass on the CPEDH™ is not based on a pass rate per station, but on an overall pass rate across each competency. As such, unsuccessful Candidates are required to complete the exam in full (both Part 1 and Part 2) in any subsequent attempts regardless of whether they were successful on Part 1 in their previous attempt.

Stations are labelled using the part number, a hyphen, and a station number. For example, the first station for Part 1 is labelled 1-01, the second station is 1-02, and so on. All stations for Part 2 are prefixed with “2-”.

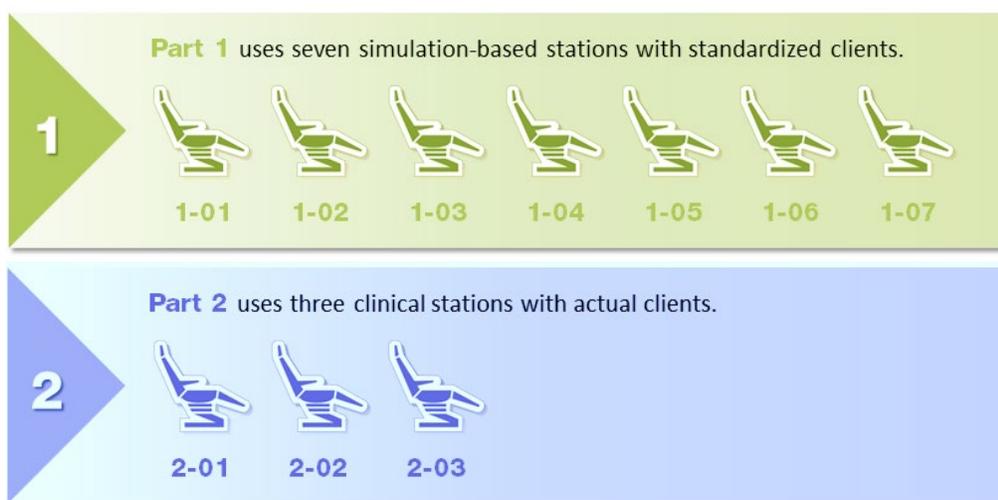


Figure 1: Parts 1 and 2 of the Performance-Based Assessment.

FDHRC™ Competencies Central to the Performance-Based Assessments

The [Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint](#) lists the competencies from the CPEDH™ Competency Profile that are most applicable to the performance exam. The document presents the competencies in groupings based on their importance in terms of clinical competence. The importance of each competency was determined through the input of dental hygiene subject matter experts.

¹ All NDHCE™ competencies are not tested on the CPEDH™. Candidates are advised to reference [Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint](#) for the full list of competencies tested on the CPEDH™.

CPEDH™ stations are created in part based on the list of competencies and their importance grouping. All competencies listed in the document are available for inclusion in the assessment. As such, Candidates should be prepared to demonstrate their knowledge, skills, and abilities on all the listed competencies when taking the CPEDH™.

In addition, the ten (10) stations feature the different client types that present the most important and/or frequent client care situations as judged by a panel of Canadian dental hygiene experts. The client types most likely to form the basis of a station are listed in the [Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint](#).

Client Types Forming the Basis of the Performance-Based Assessments

The *Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint* lists the “client types” or client characteristics that are most likely to be the focus of a scenario within the CPEDH™. Client types included in this list are sampled from the Competency Profile in order to design scenarios that will appear in the CPEDH™. All client types listed in the document are available for inclusion in the assessment. As such, Candidates should be prepared to demonstrate their knowledge, skills, and abilities on all the listed client types.

Part 1 always precedes Part 2. To protect the safety of the Actual Clients in Part 2, Candidates who do not demonstrate a minimum level of competence in Part 1 are not permitted to participate in Part 2.

Section 1 – Before The Exam

Preparing for the CPEDH™

There are several sources of information regarding the content of the exam that are authorized and that Applicants/Candidates are strongly encouraged to access in preparation for the exam. These include:

- *Canadian Performance Exam in Dental Hygiene™ (CPEDH™) Candidate Guide* (this document)
- [Canadian Performance Exam in Dental Hygiene™ \(CPEDH™\) Blueprint Development](#)
- [Consensus Definitions for Competencies and Client Types for the CPEDH™ – Adjunct to CPEDH™ Blueprint](#)
- Orientation video (to be provided to approved Candidates after the application closes)

Prior to the exam, Candidates must review the following orientation items:

- Orientation Video about stations and rotations
- *Canadian Performance Exam in Dental Hygiene™ Candidate Guide (this document)*

The following preparation reference materials are the most current and are intended to provide Applicants/ Candidates with suggestions to help prepare for the CPEDH™. The five most comprehensive resources have been highlighted in **bold** at the beginning of the list below. The



decision on what reference materials to study in for preparation for the CPEDH™ are left up to the Applicant.

- **Blue, Christine. (2019). Darby's Comprehensive Review of Dental Hygiene (9th Edition). St-Louis, Missouri: Saunders Elsevier.**
- **Bowen, D. M., Pieren, J. A. (2020). Darby and Walsh Dental Hygiene (5th ed.). Elsevier.**
- **Little, J.W., Falace, D.A., Miller, C.S., and Rhodus, N.L. (2018). Dental Management of the Medically Compromised Patient (9th ed.). Elsevier.**
- **Newman, M.G., Takei, H.H., Klokkevold, P.N. & Carranza, N.T. (2019). Newman and Carranza's Clinical Periodontology (13th ed.). Elsevier.**
- **Wilkins, E.M. (2020). Clinical Practice of the Dental Hygienist (13th ed.) Wolters Kluwer.**
- American Heart Association – Recommended Antibiotic Prophylaxis Regimen 2017 – Summary of Recommendations and Practice Guideline
- AHA Scientific Statement – Prevention of Viridans Streptococcal Infective Endocarditis (2021). Article: <https://www.ahajournals.org/doi/pdf/10.1161/CIR.0000000000000969>
- Bablenis Haveles, E. (2020). Applied Pharmacology for the Dental Hygienist (8th ed.). Elsevier.
- Brand, R.W. & Isselhard, D.E. (2019). Anatomy of Orofacial Structures: A Comprehensive approach (8th ed.). Elsevier.
- CDHA (2012). Code of Ethics. Ottawa, ON: Canadian Dental Hygienists' Association
- Finkbeiner, B. (2020). Practice Management for the Dental Team (9th ed.). Elsevier.
- Frantsve-Hawley, J. (2014). Evidenced-Based Dentistry for the Dental Hygienist. (1st ed.) Chicago, Illinois: Quintessence Publishing Co.
- Gehrig, J.S., Shin, D.E. & Willman, D.E. (2019). Foundations of Periodontics for the Dental Hygienist (5th ed.). Wolters Kluwer.
- Gehrig, J.S., Sroda, R., Saccuzzo, D. (2017). Fundamentals of Periodontal Instrumentation (8th ed.). Philadelphia, Pennsylvania: Wolters & Kluwer.
- Harris, N.O., Garcia-Godoy, F. Nielson Nathe, C. (2014). Primary Preventive Dentistry (8th ed.). Upper Saddle River, New Jersey: Pearson Prentice Hall.
- Ibsen, O.A.C. (2018). Oral Pathology for the Dental Hygienist (7th ed.). Elsevier.
- Jeske, A.H. (2021). Mosby's Dental Drug Reference (13th ed.). Elsevier.
- Malamed, S.F. (2015). Medical Emergencies in the Dental Office (7th ed.). St-Louis, Missouri: Mosby Elsevier.
- Sroda, R., Reinhard, T., (2018). Nutrition for Dental Health., (3rd ed.) Wolters Kluwer.
- Stabulas-Savage, J. (2019). Frommer's Radiology for the Dental Professional (10th ed.). Elsevier.

Instruments/Armaentium Available during the CPEDH™

Exam Kit

- Front surface mouth mirror
- Cotton pliers



- 11/12 Explorer
- Pigtail Explorer
- Periodontal probe CP-12

Scaling Kit

- 129 E2 Nevi Scaler
- H6/H7 Sickle Scaler
- 1/2 Gracey Curette
- 5/6 Gracey Curette
- 11/12 Gracey Curette
- 13/14 Gracey Curette
- 4R/4L Columbia Curette
- 10/11 Orban File
- 12/13 Orban File
- 204S Sickle

Ultrasonic Cavitron Inserts

- 1000 Triple Streamline Direct Flow, 30K
- Left Streamline Direct Flow, 30K
- Right Streamline Direct Flow, 30K
- Straight Streamline Direct Flow, 30K

Radiography

- Details will be provided to Candidates in their Exam Day Package after confirmation of registration and eligibility.

Armamentarium

- All dental armamentarium needed for the evaluation is provided.

Expectations of Candidates During the CPEDH™

Confidentiality Agreement

Candidates must sign the *Non-Disclosure and Consent: Candidates* form before the start of each part for each exam attempt. Candidates must read the form carefully, as they are obligated to maintain the confidentiality and security of the exam materials as set out in the following rules. Candidates will receive a copy of the form Exam Day Information Package once approved in order to review it before exam day. It will need to be signed prior to the start of each exam Part. Candidates will receive a copy at registration to sign.

Exam Regulations

In applying to participate in the CPEDH™, Applicants agree to abide by the following rules:

1. All oral and written instructions regarding the exam process must be followed.
2. Recording or memorizing exam scenarios for communicating information to other Candidates, individuals or agencies, for distribution, financial gain, or any other purpose is strictly forbidden.



3. All exam content must be kept confidential, even after the exam. This includes exam scenarios and their content including script, materials, client characteristics, and any other characteristic the disclosure of which may compromise the validity of the exam.
4. Communication about the exam with anyone other than exam personnel is prohibited.
5. Candidates may converse with exam personnel if required, in a discrete and confidential manner. If Candidates need to use the washroom, they must indicate this to exam personnel.
6. Study or reference materials must not be brought into the exam.
7. Candidates cannot use or be in possession of any electronic devices (e.g., cellphones, cameras, pagers, MP3 players such as an iPod, smart watches, headphones, etc.) during the exam. Candidates will be provided with a bag/or locker in which to place all personal items during check-in. The FDHRC™ is not responsible for any lost or stolen items.
8. Candidates cannot be in possession of any study materials during the exam.
9. All notes that the Candidate is permitted to make during the exam must be surrendered to exam personnel as per instructions.
10. Candidates cannot document or otherwise create or preserve records of exam content for any reason.
11. Candidate cannot treat a spouse, romantic partner, or an Immediate Family Member.
12. Candidate cannot be an Immediate Family Member, spouse, or romantic partner of any Standardized Client.
13. Candidates cannot engage in behaviour before, during, or after the exam that disturbs other Candidates or causes them anxiety.
14. Candidates cannot make disruptive comments about the exam, unnecessarily question exam policies and procedures, or engage in other behaviour that disturbs other Candidates or is disrespectful of exam personnel.
15. Candidates must refrain from breaches, unethical conduct, or any attempt to subvert the exam. This includes anything that could affect their results, the results of another Candidate, or the results of a potential future Candidate. If Candidates witness such behaviour, they are obligated to report it to exam personnel as soon as possible.
16. Conduct occurring before, during, or after the exam that violates these Rules may result in, but is not limited to, the following: dismissal from the exam, invalidation of exam results, assignment of a failing grade, and/or a report provided to Canadian dental hygiene regulatory authorities.
17. Candidates must communicate with clients, Raters, and other personnel in either English or French (depending on the language of the exam) at the stations.
18. Candidates are strictly prohibited from communicating with clients and other Candidates during breaks.
19. At the end of the exam, Candidates must leave the exam premises immediately and cannot remove any exam materials from the exam site.
20. All arrangements for transportation for the end of the exam day must be made before entering the exam site. Anyone waiting for Candidates must do so away from the exam area and Candidates cannot wait within the exam area for their transportation.



Exam Policies

Accommodations

Candidates who want to apply for exam accommodations for a disability or medical condition should review the [FDHRC™ Test Accommodations Policy and Procedure](#) carefully.

Candidates must then complete the following forms, as appropriate:

- [Form A Testing Accommodations Candidate Application - CPEDH™](#)
- [Form B Testing Accommodations Functional Abilities Form - CPEDH™](#)

Fully completed Forms A and B, as well as supporting documentation, must be sent to the FDHRC™ by the exam application deadline. Any incomplete documentation or requests received after the application deadline may result in accommodations that cannot be met due to a lack of time prior to the examination. The candidate is responsible for any costs related to any supporting documentation. A new accommodation request (including Form A and Form B, if required) and appropriate documentation must be made with every examination application. An approved accommodation for a previous exam attempt does not guarantee it will be approved for subsequent attempts.

Requests for accommodation are reviewed and determined on a case-by-case basis. Candidates are entitled to reasonable accommodation up to the point of undue hardship; they are not entitled to their preferred form of accommodation, nor to a perfect accommodation.

All accommodation requests and plans are confidential and will only be disclosed to third parties to the extent necessary to implement or administer the accommodation plan.

Candidates with disabilities or other medical conditions who choose not to apply for accommodations or submit documentation past the registration deadline (causing the FDHRC™ to be unable to meet their accommodation needs), but still choose to proceed with challenging the CPEDH™ without accommodations, cannot use this as grounds for appeal of their results if they are not successful.

Illness or Other Extraordinary Circumstances Before or On Exam Day

Please follow local public health guidelines regarding staying home if you are sick. If unsure, please contact the FDHRC™ immediately.

Candidates are **strongly encouraged not to attempt an exam** and to make an appropriate withdrawal if, prior to the exam, they are ill or have extraordinary circumstances, including bereavement, that may affect their performance in the exam. If you choose to attempt the exam and have extenuating circumstances (such as an illness or bereavement), this is not grounds for appeal of your results if you are not successful. Please see [fee schedule](#) regarding the refunds policy. Note that you will not forfeit your attempt.

If a Candidate is unable to attend an exam due to a matter that arises suddenly on the day of the exam, they must immediately notify the FDHRC™ by phone at 613-260-8156. Phones are monitored off business hours during the exam dates.



Contraventions

Standards and procedures for administering exams have two related objectives: giving Candidates comparable opportunities to demonstrate their abilities and preventing any one Candidate from gaining an unfair advantage over others. To uphold these objectives, exam results may be cancelled or withheld, when, in the opinion of the Incident Review Committee, a testing irregularity occurs; cheating has occurred; there is an apparent discrepancy in, or falsification of, a Candidate's identification; a Candidate engages in misconduct or plagiarism; when anomalies in performance are detected for which there is no reasonable and satisfactory explanation; or the results are believed to be invalid for any other reason.

All contraventions (i.e., irregularities, breaches, dismissals, and disqualifications) result in a forfeiture of the exam fee. Exceptions are stated below in the specific sections.

Irregularities

The standards for valid exam administration (i.e., [Standards for Educational and Psychological Testing](#) and the [National College Testing Association Professional Standards and Guidelines](#)), or 'the Standards', require that test administration is secure and that impediments are not introduced during the testing experience which can negatively impact the Candidates from demonstrating their knowledge, judgment, skills, and ability on the assessment. As much as possible, the assessment administration process should accurately reflect what the Candidate truly knows and is able to perform while limiting factors which may impede this measurement.

The exam process has been developed to ensure consistency and security during administration of the exam. Despite these efforts, certain irregularities may occur in administering the exam that have the potential to affect the validity and trustworthiness of the exam scores.

Exam irregularities are events which materially interrupt and potentially impact a Candidate's performance on an exam and which are outside the Candidate's control. Note that all irregularities, whether they appear on the list or not, will be recorded and included as part of the documentation of exam performance.

If a Candidate is affected by an irregularity, they can request a review and may be given the opportunity to complete the task again via an Incident Report. These will be provided to Candidates following each exam day and are reviewed by FDHRC™ staff prior to the Candidate leaving the exam centre.

Equipment Malfunction

In the event of equipment malfunction that could affect the performance of tasks in a station, the Incident Review Committee will review the situation and, if appropriate, FDHRC™ personnel will reschedule the affected tasks for that Candidate to the end of the exam session. If the equipment in the station cannot be restored to a working state **within a reasonable amount of time**, another station will be set up so that all Candidates can complete the tasks for that station.



Candidates will be required to sign a form acknowledging the equipment malfunction, that they have been given the opportunity to redo the station and whether they choose to redo the station or not, and that they understand if they redo the station that their original station scores will be nullified and only the redo station scores will be considered.

Interruption in Administration

The Chief Examiner must address any other interruptions (specifically that are not due to equipment malfunction, such as emergencies and power failures). If the source of the interruption can be addressed within a **reasonable amount of time**, the exam will be resumed once the situation has been addressed. If the interruption cannot be addressed within a reasonable time, the exam will be rescheduled to a later time or date.

Other Irregularities

Every effort is made to ensure a standardized environment for each exam administration that is suitable for Candidates and personnel; for example, a well-lit area, free from extreme temperature fluctuations and other distractions; and recommending acceptable clinical attire so Candidates can adjust to minor room temperature fluctuations.

However, unforeseen circumstances, or other irregularities, may arise that are outside the exam administration personnel's control that expose Candidates to a form of testing irregularity, such as unanticipated loud construction outside the designated clinic area.

In cases of inclement weather, natural disaster, or other local conditions that may cause unavoidable interruptions to testing, the CPEDH™ will make reasonable efforts to notify Candidates and determine the best course of action.

If the source of the other irregularity can be addressed within a **reasonable amount of time**, the exam will be resumed once the situation has been addressed. If the irregularity cannot be addressed within a reasonable time, the exam will be rescheduled to a later time or date.

Misconduct

Candidates are responsible for following all written and verbal regulations, policies and guidelines provided for the CPEDH™ before, during and after the exam. Misconduct can be identified during the exam or after the exam via an anonymous or identified report. Misconduct may require immediate intervention from FDHRC™ personnel during the exam (such as confiscation of exam materials or any other documents, objects, or materials that could be used for misconduct) and may result in dismissal.

Examples of misconduct include (but are not limited to):

1. Copying from another Candidate during the exam.
2. Copying or memorizing test items for communicating information to other Candidates, individuals, or agencies, for distribution, financial gain, or any other purpose.
3. Receiving or distributing information about the exam either before or after the exam.
4. Receiving assistance from another Candidate, practitioner, or educator.
5. Giving help to or coaching others during the exam.



6. Engaging in any conduct before, during, or after the exam that disturbs or is disrespectful toward other Candidates, clients, or exam personnel.
7. Failing to disclose that a Standardized Client or Actual Client is an Immediate Family Member, etc.
8. Receiving detailed knowledge of the client's intra-oral condition (e.g., reviewing previous client records and charts).
9. Inappropriately altering client records, radiographs, treatment records, or exam forms.
10. Providing treatment to a client prior to the performance exam.
11. Using unauthorized aids or reference materials, including electronic devices, at any time during the exam.
12. Having non-registered individuals pose as registered exam Candidates.
13. Beginning the exam before being instructed to do so and/or continuing the exam after being told to stop.
14. Disregarding instructions from FDHRC™ personnel, Raters, or any exam personnel.
15. Modifying exam results letters to give a false impression of having passed the exam or misrepresenting the Candidate's exam status.
16. Participating in any activity that would be considered illegal such as assault, harassment, or theft.

All cases of misconduct are investigated. Possible consequences of a finding of misconduct includes (but are not limited to):

- An overall grade of fail for the examination and grant permission to retake the examination on or after a specified date,
- An overall grade of fail for the examination with loss of attempt and grant permission to retake the examination on or after a specified date,
- Assigning an overall grade of fail for the examination and prohibit the examinee from taking any future examinations,
- Reporting of misconduct finding to Canadian provincial and territorial dental hygiene regulatory bodies
- Legal action

Any finding of misconduct by the FDHRC™ can be appealed in accordance with the Appeal Policy.

Inappropriate Candidate Communication

Candidates **must not** converse or communicate with one another in any manner whatsoever while the exam is underway. Depending on the severity of the breach, a Candidate may be dismissed immediately from the exam, or a Candidate may be given one verbal warning, after which continuation of the behaviour will be considered grounds for dismissal from the exam.

Inappropriate Candidate Behaviour

Candidates **must not** behave in a manner that disturbs other Candidates, is disrespectful of other Candidates, clients, or exam personnel, or disrupts the administration of the exam. Depending on the severity of the behaviour, a Candidate may be dismissed immediately from



the exam, or a Candidate may be given one verbal warning, after which continuation of the behaviour will be considered grounds for dismissal from the exam.

Dismissals

Dismissal from the exam for any reason results in an automatic failure.

Improper Performance

Dismissal from the exam may result from improper performance relative to procedural skills or clinical judgment which jeopardizes the health or safety of the client, Candidate, or Rater. A Candidate may be dismissed from the exam upon agreement between the Incident Review Committee. Examples of improper performance include, but are not limited to:

1. Failure to disclose a condition which would potentially jeopardize the health or safety of the client, Candidate, or Raters.
2. Failure to uphold client welfare and/or comfort.
3. Rude, abusive, uncooperative, or disruptive behaviour.
4. Failure to comply with infection prevention and control.
5. Excessive trauma to tissue and/or performance is inadequate in the validated judgment of the Raters.
6. Failure to recognize or respond to proper handling of hazardous material(s).
7. Failure to adhere to the *Guide for Candidates of the CPEDH™*.

Disqualifications

Improper or Missing Identification

Candidates who do not have proper identification will not be allowed into the exam (see also Arrival and Registration at the Exam, [page 17](#)). Improper or missing identification is deemed a disqualification and results in the forfeiture of exam fees but does not count as a failed attempt. Improper identification includes, but is not limited to, the following invalid identification: expired government-issued identification, unmatched names, not government-issued identification, identification without a photo, and identification damaged beyond legibility.

Late Arrivals

Candidates who arrive after the registration closes will not be allowed into the exam (see also Arrival and Registration at the Exam, [page 17](#)). A late arrival constitutes a disqualification. This disqualification results in the forfeiture of exam fees but does not count as a failed attempt.

Failure to Show

No-shows on the date of the exam result in the forfeiture of exam fees. Failure to show for the exam will not count as an attempt towards the Candidate's attempt limit. Failure to show for two different exams requires a special request to the FDHRC for permission to apply for further attempts.

Exam Applications

Eligibility Criteria

An individual is eligible to apply to attempt the CPEDH™ only if they have been found to be a graduate of a recognized dental hygiene program, through completion of an equivalency



assessment conducted by the FDHRC™, and have successfully completed the National Dental Hygiene Certification Examination (NDHCE™) or an equivalent exam accepted by the Canadian provincial or territorial regulatory authority in which the Candidate is applying for registration/licensure.

Language Proficiency Requirements

While the CPEDH™ exam is typically offered in English, individual provincial regulatory bodies may have language proficiency registration/licensure requirements requiring evidence of proficiency in a specific language (English or French). Candidates are responsible for knowing all regulatory requirements for the province in which they wish to register following successful completion of the CPEDH™, including language proficiency requirements.

Privacy

Please refer to the FDHRC™ privacy policy found on the [website](#) for information on the collection and security of personal information.

Exam Application Procedure

Applications can be submitted online through the FDHRC™ website's [CPEDH application page](#). The application and all supporting documents must be received by the application deadline for the administration the Applicant is completing the application for. Incomplete applications will be cancelled.

Application Checklist:

- Completion and payment of the [online application and fee](#)
- Submission of Accommodation Forms (if applicable)
- One current notarized and signed, passport-compliant photograph. Photos must have been taken and dated within 6-months of the application deadline. This is to be mailed directly to the FDHRC™ office located at 75B Colonnade Road, Ottawa, ON, K2E 0A8.
- Evidence of professional liability insurance for a minimum amount of \$1,000,000 for the CPEDH™ (see Liability Insurance, [page 16](#)). A copy can be attached to the online application, emailed (exam@fdhrc.ca), or mailed to the FDHRC™ office.
- Reporting of any active communicable disease/respiratory illness (e.g., TB, HBC). If a Candidate has such an illness, it must be reported in writing, and the report and any related documentation can be attached to the online application, emailed (exam@fdhrc.ca), or mailed to the FDHRC™ office. Appropriate follow-up will be completed to determine what, if any, actions are required.

If the FDHRC™ does not have the following documentation already on file for an Applicant, they will be required to provide it before the application deadline: a notarized or official copy of their DH diploma and official transcript. Applicants do not need to submit these documents unless specifically asked by the FDHRC™.

The name an Applicant uses to apply for the exam must match the first name and last name (e.g., Jane Doe) that appears on their valid government-issued photo identification (e.g., driver's licence, passport).



Any exam having an insufficient number of Applicants by the application deadline may be cancelled. Therefore, individuals are encouraged to apply early. If this happens, Applicants will receive a full refund of their exam fees.

Once an application is submitted, it is considered a contract. If an Applicant fails to fulfill all requirements of the application, or are unable to take the exam, the Refund Policy applies (see [page 17](#)).

Photo Identification

Candidates must provide one (1) notarized passport-style photographs which has a plain background, shows the full face, and with no hats/headwear (exception for religious headwear only). A notarized photo is certified by a notary public, a licensed public officer who serves as an impartial witness to the signing of documents and establishes the authenticity of the signatures and photos for identification. Photos must have been taken and dated within six (6) months of the application deadline.

Candidates also need to sign, in ink, the reverse of both photographs before sending them to the FDHRC™ office. Candidates need to ensure that the photograph is a current likeness of themselves as it will be used to identify them at the exam.

Photographs are to be mailed directly to the FDHRC™ office located at 75B Colonnade Road, Ottawa, ON, K2E 0A8.

The notarized photo is used in part to confirm the identity of the Candidate on exam day. Should a Candidate drastically change their appearance between when the photo was taken and the exam date, the FDHRC™ will require a new notarized photograph that is a true representation of how the Candidate will look on the exam day.

NOTE: Photo Identification MUST be received before the application deadline. Interested individuals can find the application deadline on the FDHRC™ website at www.fdhrc.ca/cpedh.

Liability Insurance

All Applicants must provide evidence of holding professional liability insurance for a minimum amount of \$1,000,000. This insurance may be obtained from the Canadian Dental Hygienists Association, some provincial dental hygiene associations, or another independent broker of the Applicant's choice. A copy can be attached to the online application, emailed (exam@fdhrc.ca), or mailed to the FDHRC™ office.

NOTE: Proof of insurance coverage MUST be received before the application deadline. Individuals can find the application deadline on the FDHRC™ website at www.fdhrc.ca/pages/cpedh/.

Confirmation of Acceptance for the Exam

Applications are reviewed as they are received. If there are any issues with the application or if the FDHRC™ has found an individual to be ineligible for the CPEDH™, an email will be sent outlining the concerns and providing next steps.



After the application deadline the FDHRC™ will send a confirmation email to approved Applicants that will include:

- Their Candidate Identification Number (This is used on grading forms and will be used in any correspondence related to the exam.)
- Information about the exam venue and general exam day schedule.
- Exam day instructions, including outline of required dress (see Candidate Exam Day Checklists on [pages 20](#) and [24](#) in this Guide for this information).
- Links to any additional orientation/prep materials not already available on the website.
- Instructions for what to do if the Candidate changes their name, appearance, or contact information.

Refund Policy

Requests for withdrawal from the exam must be made online through the FDHRC™ website. A verbal request for withdrawal is not accepted. Refunds are made based on the following conditions. See the [Fee Schedule](#) on the website for a list of fees associated with withdrawal or cancellation of an application and applicable deadlines.

Administration Fees

See the [Fee Schedule](#) on the website for a list of administration fees associated with the CPEDH™.

Section 2 – Exam Days

Arrival and Registration at the Exam

All Performance-Based Assessment sessions will start promptly based on the schedule. Candidates must arrive at the exam location by the designated registration time and check in with the exam receptionist. Candidates who arrive after the registration closes are considered late arrivals and will not be admitted to the exam (see also Disqualifications, [page 14](#)).

Each Candidate must show identification at the check-in for both Part 1 and 2. Identification must be a valid government-issued identification that includes both a photo and a signature (e.g., passport, driver's licence). Candidates who do not have proper identification will not be admitted to the exam (see also Disqualifications, [page 14](#)). Additionally, Candidates must sign a **Non-Disclosure and Consent: Candidates** form at the check-in.

Following check-in, Candidates will be given time to change into clinic attire and be provided with an area to store their personal effects. The FDHRC™ is not responsible for the loss of any personal effects.

On-Site Orientation

Following check-in on exam day, Candidates must attend an orientation session where FDHRC™ personnel will review the exam process, interactions with Raters and exam staff, physical facilities, station process, and instruments/equipment available.



The orientation session will be recorded (audio only) to ensure accuracy of post-exam documentation. Candidates will be required to consent to being recorded. Candidates will only be allowed to ask exam related questions during the official orientation period. They will not be allowed to ask exam related questions during check-in, breaks, or any other time outside the orientation session.

Washroom Breaks

Candidates will be given the opportunity to use the washroom prior to the start of the exam, during the scheduled exam break, and at the end of the exam.

Unscheduled washroom breaks

Should a Candidate need to use the washroom during station rotations, they must request it of the Rater who will inform a Roving Proctor. Exam personnel must accompany the Candidate to and from the washroom.

All exam materials must be left at the station during a washroom break. The Candidate must not talk to any person or consult any external materials during this washroom break.

Time missed during the washroom break cannot be made up. Time missed due to unscheduled washroom breaks is not grounds for appeal of your results if you are not successful.

Clinical Attire

Candidates must bring with them, and change into, appropriate clinical attire including scrubs, a lab coat, personal protective eyewear, and shoes with enclosed toe and enclosed heel. When working on clients in Part 2, Candidates must wear over gowns, which are supplied on-site. Over gowns are not required for Part 1 unless specified.

Any hair longer than shoulder length and any hairstyle that falls forward toward a simulator, laboratory equipment, or client when bending forward must be pulled back and fastened. Beards and moustaches should be closely trimmed and neat to allow the dental mask to seal tightly.

The exam is scent-free and the FDHRC™ asks that Candidates refrain from wearing perfume, colognes, aftershaves, and other scented products.

Accessories such as rings and watches are **highly discouraged** as they have the potential to harbor microorganisms. If worn, rings must be limited to a single smooth band without projections or mounted stones and watches should be covered by a glove or sleeve. Long sleeves or jewelry should not interfere with or become wet when performing hand hygiene. If watches and other wrist jewelry are present, remove or push up above the wrist before performing hand hygiene.

Infection Prevention and Control (IPAC)

Candidates are expected to review and adhere to the IPAC Standards/Guidelines in the province in which the exam will occur. Candidates are expected to follow provincial authority and exam facility COVID-19 protocols.



Links to the provincial IPAC guidelines are in the chart below. Candidates should ensure they review the IPAC guidelines for the province where they will be taking the exam.

Province	Document	Link
Ontario	College of Dental Hygienists of Ontario: Infection Prevention and Control Guidelines	https://cdho.org/covid-19-update-and-revised-ipac-guidance/ https://cdho.org/wp-content/uploads/2024/02/GUI-IPAC.pdf

There may be times that the exam facility’s policies exceed the provincial IPAC requirements and, in these cases, the facility’s policies would apply. In the confirmation of eligibility email, the FDHRC™ will provide Candidates with the facility’s relevant IPAC policies.

At all times, Candidates (and the testing facility) must comply with the highest IPAC standard. IPAC guidelines apply to both Part 1 and Part 2 of the CPEDH™. The following activities must comply with the IPAC guidelines in Ontario:

- Performing hand hygiene
- Donning and doffing of Personal Protective Equipment (PPE)
- Handling and disposal of sharps
- Obtaining/transporting additional supplies
- Assessing risk of transmission; e.g., illness of Candidate² or client
- Removing all PPE when leaving operatory
- Moving from station to station (e.g., washing/disinfecting protective eyewear, performing hand hygiene, doffing and donning of PPE)

Finally, Candidates may choose to wear personal protective equipment that goes above the provincial guidelines and/or facility policies. The Candidate will be responsible for providing this additional equipment for themselves.

COVID-19 requirements:

All persons entering the exam site may be screened for symptoms of COVID-19 using the applicable jurisdictional public health screening tool.

Additional things to be considered for COVID-19:

- International Candidates are encouraged to monitor Federal travel and quarantine requirements when planning their arrival into Canada.

² If Candidates have symptoms of an active communicable disease/respiratory illness (e.g., TB, influenza), they must report it to FDHRC™ personnel upon arrival. It may not be appropriate for them to treat clients on that day.



- Candidate may be required to show proof of a negative COVID-19 test within 24-hours of the CPEDH™ and/or complete a rapid COVID-19 test on arrival at the exam site. If required, this will be communicated to approved Candidates prior to the exam day.

Exam Part 1

Candidate's Exam Day Checklist

Candidates are required to bring the following items with them:

- CPEDH™ Candidate Identification Number
- Valid government-issued identification that includes a photo and a signature
- Clinical attire to be provided by the Candidate for themselves:
 - Scrubs
 - Latex-free gloves
 - N95 Mask fit-tested and sealed. A minimum 2 required for Part 1. ASTM Mask level 3 will be provided by FDHRC™.
 - Lab coat
 - Shoes with enclosed toe and enclosed heel
- A combination lock to secure personal items in an assigned locker (if lockers are available)
- Beverage (water) (optional)
- Food (optional)
- Optional: Loupes³

The FDHRC™ will provide gowns and regular, single use face shields and/or reusable goggles for all Candidates on exam day. Candidates do not need to provide their own gowns. Candidates can bring their own goggles if they prefer. Regular prescription eyeglasses are not considered appropriate eye protection as they do not provide protection against splashes around the top and sides of the glasses.

Protective eyewear (face shields or goggles) is required for all aerosol producing procedures for both Part 1 and Part 2 of the CPEDH™.

If you use reusable protective eyewear and/or loupes at a station, you must clean and disinfect them before reusing them at another station.

Disposable face shields will need to be thrown out after use and a new face shield used at the next station.

The FDHRC™ recommends that Candidates bring only the items on the list above to the exam site. A storage area will be provided for any personal items; however, the FDHRC™ is not responsible for any lost or stolen items.

³ If you plan to use Loupes during the CPEDH™ you will be required to bring your own face shield that will comfortably sit over the Loupes and provide full protection. The FDHRC™ provided face shields **cannot** be worn with Loupes.



Part 1: Simulation-Based Stations

Station Set-Up

The seven (7) simulation-based stations include seven (7) independent and clinical interactions. Each case involves a new client interaction and/or problem and requires a new set of competencies.

A case description (i.e., case stem) is posted outside each station. Each station may include a Standardized Client (i.e., actors trained to portray certain roles), a manikin and/or a written scenario including a standardized set of equipment or materials as required by the case. Each station has one (1) Rater, who stays at that station and rates each Candidate who completes that station.

Part 1 is approximately a five- to six-hour assessment, including onsite orientation, the stations, and any on-site end of day wrap up. On the assessment day, FDHRC™ personnel will inform each Candidate of their assigned start station and rotations. Candidates will rotate through each station until all seven are completed for Part 1. There will be one scheduled break for Candidates after the third or fourth rotation, depending on the number of Candidates completing the exam.

Daily Schedule

See the following **sample** Part 1 Candidate schedule for the seven stations.

Sample Candidate Timetable for Part 1 Clinical Assessment (with 2-minute transitions)

Time	Task
9:00 – 9:15	Registration
9:30 – 10:00	On-site orientation
10:00 – 10:10	Washroom break
10:15 – 10:20	Start Exam — Rotation 1: Read case stem
10:20 – 10:35	Rotation 1: Complete station tasks
10:35 – 10:37	Transition
10:37 – 10:42	Rotation 2: Read case stem
10:42 – 10:57	Rotation 2: Complete station tasks
10:57 – 10:59	Transition
10:59 – 11:04	Rotation 3: Read case stem



11:04 – 11:19	Rotation 3: Complete station tasks
11:19 – 11:21	Transition
11:21 – 11:26	Rotation 4: Read Case Stem
11:26 – 11:41	Rotation 4: Complete station tasks
11:41 – 12:03	Break
12:03 – 12:08	Rotation 5: Read case stem
12:08 – 12:23	Rotation 5: Complete station tasks
12:23 – 12:25	Transition
12:25 – 12:30	Rotation 6: Read case stem
12:30 – 12:45	Rotation 6: Complete station tasks
12:45 – 12:47	Transition
12:47 – 12:52	Rotation 7: Read case stem
12:52 – 13:07	Rotation 7: Complete station tasks
13:07 – 14:30	End of exam: Departure

Station Timing

FDHRC™ personnel maintains the exam schedule, timing of the stations, and correct Candidate rotation. Support staff will clearly signal the start and end of each station as well as a time remaining warning for each station, the reading prep time, and the transition time between stations.

Prior to entering each station, the Candidate will give the requested Candidate Identification Number labels to the station Rater. The Rater uses the labels to identify each Candidate's specific paperwork. When signaled, the Candidate will have 5-minutes to read and prepare for the case. Then the Candidate will have 15-minutes to complete the task(s) of the station. (The Candidate is not required to use the full time if they have completed the task(s) of the station.) Two (2) minutes are allowed to transition between stations. (Additional time may be granted for variances in location settings and/or pursuant to an accommodation request – Form A2). See **Figure 2** for the timing of Part 1 stations.





Figure 2: Timing of Part 1 stations.

Prior to entering the station, a signal will indicate the beginning of the 5-minute time frame to read a case stem that provides necessary background information, client details, and/or expectations associated with the station. Once the 5-minutes are up there will be a signal notifying Candidates that they can enter the station and start the station tasks. Candidates will then have 15-minutes to interact with the Standardized Client and/or complete the station tasks. A warning signal will indicate when 2-minutes are remaining in the station. As a guiding rule, Candidates should avoid engaging with the Rater during the Standardized Client interaction (unless required by a case stem in which the Rater plays a role in the scenario). This helps to ensure Candidates are attending to the Standardized Clients at all times. Raters only interject if needed and are not permitted to provide any feedback.

When support staff signals the end of the station time, Candidates have 2-minutes to transition to the next station before the 5-minutes of prep time begins. During the transition, Candidates must avoid any communication with each other in order to protect the integrity of the assessment.

Overall Instructions

Raters remain at the same station for the duration of the assessment. Candidates rotate through stations.

Posted Schedule

During the orientation, FDHRC™ personnel provides each Candidate with a customized copy of their individual schedule (see the On-Site Orientation, [page 17](#)).

Roles and Accountability

Standardized Client

Standardized Clients are used in Part 1 of the Performance-Based Assessment.

Standardized Clients must not be an Immediate Family Member, spouse, or romantic partner of any Candidate. If a Candidate becomes aware that a Standardized Client falls into one of these categories, the Candidate must inform FDHRC™ personnel immediately. Alternative arrangements will be made for the Candidate to complete the station(s). Failure to inform FDHRC™ personnel of a prior relationship/connection to a Standardized Client could lead to removal from the exam and/or the nullification of the Candidate's exam results.

Standardized Clients are trained to simulate clients in a realistic and reliable manner. As much as possible, they are carefully selected to match the characteristics of the client case being portrayed, including factors such as age, gender, and appearance. Guidelines provide

Standardized Clients with the instructions and processes to be adhered to during the Performance-Based Assessment.

Standardized Client Conduct

Depending on the case, Standardized Clients may provide additional information as directed by the Standardized Client instructions. Candidates are to treat the Standardized Client interaction as realistically as possible and try to ignore the fact that this is a simulation. Standardized Clients will not provide any feedback. The Standardized Clients are trained to respond to the questions asked by the Candidates; however, they will not provide prompts or nudge Candidates to ask certain questions. Candidates are expected to know what they should be asking and/or doing with the client based on the station background and task list provided to them at the start of each station.

Exam Part 2

Candidate's Exam Day Checklist

Candidates are required to bring the following items with them:

- CPEDH™ Candidate Identification Number
- Valid government-issued identification that includes a photo and a signature
- Clinical attire to be provided by the Candidate for themselves:
 - scrubs
 - Latex-free gloves
 - N95 mask fit-tested and sealed. A minimum 4 required for Part 2. N95 Masks used in Part 1 cannot be reused during Part 2.
 - Lab coat
 - Shoes with enclosed toe and enclosed heel
- A combination lock to secure personal items in an assigned locker (if lockers are available)
- Beverage (water) (optional)
- Snacks (optional)
- Optional: Loupes⁴

The FDHRC™ will provide gowns and regular, single use face shields and/or reusable goggles for all Candidates on exam day. Candidates do not need to provide their own gowns. Candidates can bring their own goggles if they prefer. Regular prescription eyeglasses are not considered appropriate eye protection as they do not provide protection against splashes around the top and sides of the glasses.

Protective eyewear (face shields or goggles) is required for all aerosol producing procedures for both Part 1 and Part 2 of the CPEDH™.

⁴ If you plan to use Loupes during the CPEDH™ you will be required to bring your own face shield that will comfortably sit over the Loupes and provide full protection. The FDHRC™ provided face shields **cannot** be worn with Loupes.



If you use reusable protective eyewear and/or loupes at a station, you must clean and disinfect them before reusing them at another station.

Disposable face shields will need to be thrown out after use and a new face shield used at the next station.

The FDHRC™ recommends that Candidates bring only the items on the list above to the exam site. A storage area will be provided for any personal items; however, the FDHRC™ is not responsible for any lost or stolen items.

Part 2: Client Clinical Stations

Part 2 is approximately a four-hour assessment. Candidates will be notified of the date, time, and location of their assessment. On the assessment day, FDHRC™ personnel informs each candidate of their assigned start station and rotations. Candidates will rotate through three stations to complete Part 2.

Station Set-Up

Each Candidate's three client clinical stations include three independent clinical interactions. (Note: If more than three Candidates are taking the exam, more than three stations will be operating, but each Candidate completes only three clinical stations.) The client clinical stations are similar to the simulation-based stations except they take place with Actual Clients and include a specific intra-oral assessment and clinical therapy (e.g., probing, debridement [specific teeth depending on difficulty, such as 2.4–2.7]). Each Candidate is given 12 Candidate Identification Number labels (four for each station), which are used for identification in the assessment process.

A case stem is available within each station. Each station includes an Actual Client and a standardized set of equipment or materials as needed for the case. Each station has one Rater, who stays at that station and rates each Candidate who comes through that station.

Station Timing

FDHRC™ personnel maintain the exam schedule, timing of the stations, and correct Candidate rotation. Support staff clearly signals the start and end of each station as well as the transition time between stations.

Upon entering each station, the Candidate will give the four Candidate Identification Number labels for that station to the Rater. The Rater uses the labels to identify the Candidate's individual paperwork. The Candidate will have 60 minutes to review the case and complete the tasks of the station. (Candidates are not required to use the full time if they have completed the tasks of the station.) A warning signal will indicate when 10-minutes and 5-minutes are remaining in the station. Fifteen (15) to thirty (30) minutes are allowed to transition between stations. See **Figure 3** for the timing of Part 2 stations.





Figure 3: Timing of Part 2 stations.

Once signalled to start, the Candidate will have 60 minutes to respond to the clinical task(s). The Rater gives the quadrant details to the Candidate in writing via the *Clinical Care Notes with Tooth Debridement Assignment* form. The Candidate will read this along with the Actual Client’s health history, then complete the process of care for their specified area. Given the nature of the clinical environment, Raters may intervene to ensure client safety and comfort. However, as in Part 1, Raters only interject if needed and are not permitted to provide any feedback.

When support staff signals the end of the station time, the Candidate will have 15–30 minutes to rest, clean and disinfect PPE (if necessary), use the washroom, and move to the next station. During the transition, Candidates must avoid any communication with each other in order to protect the integrity of the assessment. If any station requires local anaesthetic, all stations must have a 30-minute transition. This 30-minute transition allows the Raters to administer or arrange for local anaesthetic for the next area of the mouth (if needed). If the Candidate determines that a client needs topical anaesthetic, they may provide it during their 60-minute station tasks.

Daily Schedule

Daily schedules and number of stations are determined based on the number of Candidates. For 1–3 Candidates, 3 stations are used; each additional Candidate requires an additional station. That is, 4 stations are required if there are 4 Candidates, 5 stations for 5 Candidates, and so on. See the following **sample** Part 2 Candidate schedule for the three stations.

Sample Candidate Timetable for Part 2 Clinical Assessment (with 15-minute transitions)

Time	Role	Task
7:30 – 7:45	Candidates	Registration (Candidates must arrive by 7:45)
8:00 – 9:00	Candidates	Attend orientation
9:15 – 10:15	Candidates	Review case and perform ADPIE for assigned teeth for first assignment
10:15 – 10:30	Support Staff	Resets station with new instruments, replenishes supplies
10:30 – 11:30	Candidates	Review case and perform ADPIE for assigned teeth for second assignment



11:30 – 11:45	Support Staff	Resets station with new instruments, replenishes supplies
11:45 – 12:45	Candidates	Review case and perform ADPIE for assigned teeth for third assignment
12:45 – 13:15	Rater	Assesses Candidates assignments using rating scale, including charting remaining calculus

In the following sample rotation, two tables are shown: *Candidates and Assignments* and *Stations and Quadrants*. The information in the two tables is the same but shown from different viewpoints. *Candidates and Assignments* shows the first, second, and third assignments for each Candidate. *Stations and Quadrants* shows each Actual Client's quadrants and which Candidate will work on those quadrants. Remember, Candidates rotate through the stations, but each Rater and client stay in one station.

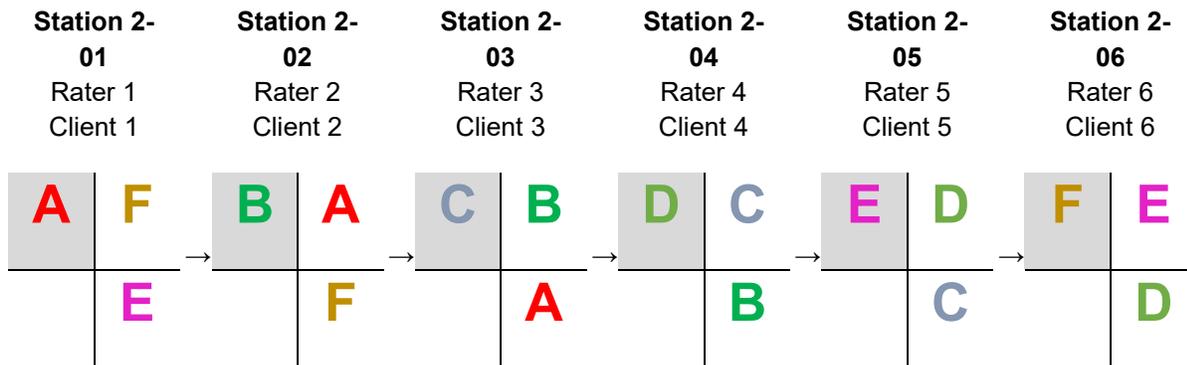
Sample Rotation for 6 Candidates

Candidates and Assignments

Candidate	First Assignment		Second Assignment		Third Assignment	
	Station	Quadrant	Station	Quadrant	Station	Quadrant
A	2-01	1	2-02	2	2-03	3
B	2-02	1	2-03	2	2-04	3
C	2-03	1	2-04	2	2-05	3
D	2-04	1	2-05	2	2-06	3
E	2-05	1	2-06	2	2-01	3
F	2-06	1	2-01	2	2-02	3



Stations and Quadrants



Legend

Quadrant 1	Quadrant 2	<ul style="list-style-type: none"> • Coloured letters refer to Candidates. • Shaded quadrants indicate where Candidates begin (that is, their first assignment).
Quadrant 4	Quadrant 3	

Overall Instructions

1. Raters remain at the same station for the duration of the assessment. Candidates rotate through three stations.
2. Each Candidate is assessed on a quadrant of three different Actual Clients by three different Raters.
3. Instruments are supplied for Candidates and stations are reset with new instruments and supplies as required during station transition periods.
4. Actual Clients are provided by the FDHRC™. The clients are screened ahead of time to ensure they meet the client selection criteria.

Actual Clients

Selection of Actual Clients

In advance of the exam, Actual Clients are screened to ensure they meet the following selection criteria as well as to review their health history.

The Actual Clients will be made up of a group of people who:

- are 18 years of age or older
- are not an Immediate Family Member, a spouse, or a romantic partner of the Candidate providing the client's treatment
- are not a dentist, a dental hygienist, a dental assistant, or a student of a dentistry, dental hygiene, or dental assisting program
- are of a minimum standard of health
- Teeth requirements



- will not have generalized probing depths over 6 mm (desired range 4–6 mm).
- will be free of gross caries, temporary or faulty restorations, or restorations with poor margins
- will not have orthodontic bands (bonded lingual arch wires are acceptable)
- will have detectable calculus deposits
- meet medical clearance requirements

Section 3 – After The Exam

Feedback

Anonymous feedback will be obtained via surveys from the following primary interest groups: Candidates, Raters, and support staff of facilities where exams are held. Data from these surveys provide pertinent information to guide perpetual monitoring and improvement of exam processes, such as improving communications and updating resources.

Grading the Performance-Based Assessments

All Candidates in this Performance-Based Assessment are assessed using a global rating scale (GRS) that uses six (6) dimensions and seven (7) rating scale descriptions.

Dimensions

An underlying principle of GRS is that the six (6) dimensions are believed to be present in real clinical interactions with clients, and therefore must be adequately demonstrated by each Candidate to function competently in clinical practice. Content experts have developed a description for each dimension. The descriptions are intended to help Candidates understand what is being assessed in each station. See the *Clinical Performance Global Rating Scale* dimensions and dimension definitions in the following table.

Clinical Performance GRS Dimension	GRS Dimension Definitions
Risk Management	The process of assessing risk and then developing and/or implementing strategies to manage the risk. In general, the strategies employed may include transferring the risk to another party (e.g., referral), avoiding the risk, reducing the negative effect of the risk (e.g., infection prevention and control or premedication), and accepting some or all of the consequences of a particular risk. This refers to the Candidate’s overall ability to consider and integrate environmental considerations, resources, and client condition (including the comprehensive health history) to reduce and manage risks for the client, the dental hygienist, and colleagues.
Client Assessment	The Candidate’s overall ability to effectively gather a complete client history (includes comprehensive medical



	and dental health history) which is organized, appropriately structured, timed, and focused. Client assessment is an iterative process and requires that the Candidate demonstrate continued appropriate reassessment while working towards a differential diagnosis and care plan.
Professional Behaviour	Competence is the judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, and values for the benefit of the individual and community being served. —revised from Epstein and Hundert (1) Professional behaviour includes ethical, legal, and culturally sensitive practice: e.g., informed consent, involving clients as full partners in decision-making, and introducing themselves to the client — giving both their name and their professional role.
Evidence Based Decision Making	The Candidate’s overall ability to select and develop an appropriate, safe, and effective client-centered care plan for a given client interaction that is based on current evidence and aligned with accepted clinical practices: e.g., appropriate sequencing of the care plan, identification of appropriate therapeutic interventions, or identifying the need for medical consultation or referral.
Intervention/Procedural Skill	The Candidate’s overall ability to demonstrate interviewing techniques, psychomotor and/or procedural skills to standard e.g., provision of (performing) preventive, therapeutic, and supportive clinical therapy, and health promotion.
Communication and Collaboration	The Candidate’s overall ability to interact with clients and function effectively within a team. This includes the Candidate’s ability to clearly and accurately exchange appropriate information with the health care team, the client and/or family: e.g., the use of concise and appropriate verbal, non-verbal, or written language (including documentation), demonstrating effective listening skills, empathy, and responding appropriately to the team, client, or family.

GRS Rating Scale Descriptions

Content experts have developed a description for each rating score. Generally speaking, these descriptions have been designed with three concepts in mind: (a) safety, (b) reference to standards, and (c) the ability to work unsupervised/independently.



Score	Rating Description
1	Demonstrated NONE of the performance expectations and/or performance compromised client care/safety.
2	Demonstrated SOME of the performance expectations with numerous inconsistencies or inaccuracies.
3	Demonstrated SOME of the performance expectations adequately OR demonstrated MOST of the performance expectations with numerous inconsistencies or inaccuracies.
4	Demonstrated MOST of the performance expectations with limited inconsistencies or inaccuracies.
5	Demonstrated MOST of the performance expectations thoroughly, accurately, and proficiently OR demonstrated ALL of the performance expectations adequately.
6	Demonstrated ALL of the performance expectations thoroughly, accurately, and proficiently.
7	Demonstrated ALL of the performance expectations outstandingly.

How Scores are Assigned

In each station for both Part 1 and 2, Candidates are assessed by different Raters (one at each station) using the GRS. Upon completion of all 10 stations, Candidates will have 10 scores, assigned by the Raters in 10 different contexts/client interactions for each dimension. Final scores are generated by analyzing the Candidates' results across the 10 stations for each dimension independently. In other words, Candidates do not pass or fail an individual station, but rather have each dimension score informed by the Raters, using 10 different contexts and clinical encounters. The score for each of the 6 dimensions across 10 stations is used to inform final decisions.

This Performance-Based Assessment applies a non-compensatory scoring model, which means a Candidate must pass each of the 6 dimensions. Dental hygienists must demonstrate the requisite attributes across all 6 dimensions to function safely and effectively. Cut scores are calculated using standard setting methods for each dimension. While pass/fail decisions are ultimately made based on all 10 stations, a preliminary analysis is completed following Part 1 (the 7 simulation-based stations) to identify any major risks to client safety prior to Candidates entering Part 2. Candidates who do not demonstrate a minimum level of competence in Part 1 are not permitted to participate in Part 2.



Exam Results

Performance Reports and Exam Results

Upon completion of Part 1, Candidates who successfully completed Part 1 will receive an email with a letter confirming their results and next steps for participation in Part 2. Candidates who were unsuccessful at Part 1, will receive an email and letter with a brief performance summary per dimension. Four to six (4-6) weeks following the exam, unsuccessful Candidates will also receive a summary performance report that will provide relevant feedback on their performance according to the dimensions tested on the exam. The performance report contains critical information, including any areas requiring improvement. Unsuccessful Candidates should review the performance report carefully prior to any subsequent attempts on the exam to identify areas of study and remediation.

Upon completion of Part 2, Candidates who successfully completed both Part 1 and Part 2 of the CPEDH™ will receive a letter via email confirming their results and a printed certificate via mail confirming they have successfully completed the CPEDH™ 4-6 weeks following the exam dates. Candidates who were unsuccessful at Part 2 will receive an email and letter with a brief performance summary per dimension. Unsuccessful Candidates will also receive a summary performance report that will provide relevant feedback on their performance according to the dimensions tested on the exam 4-6 weeks following the exam dates. The performance report contains critical information, including any areas requiring improvement. Unsuccessful Candidates should review the performance report carefully prior to any subsequent attempts on the exam to identify areas of study and remediation.

The CPEDH™ is used to certify competence to practise the profession at an entry-level, in the interest of the protection of the public. The exam is not intended to be educational. With respect to more detailed feedback on a Candidate's weaknesses, the CPEDH™ will not provide additional feedback or recommendations regarding individual performance or remediation further to what is provided in the detailed performance report.

If a Candidate requires any clarification of the information in their performance report, they are advised to send a written request to the FDHRC™.

Information accumulated through the exam process may be used for statistical purposes and for evaluating the exam. All individual information will be kept confidential and will not be used for any other purposes without permission.

To expedite the provincial registration/licensure of Candidates, a list of successful Candidates will be forwarded to all provincial and territorial regulatory authorities at the same time as the release of individual results.

Further, Candidate results will not to be discussed between the FDHRC™ and a third party other than a dental hygiene regulatory body unless written consent to do so has been provided by the Candidate and submitted to the FDHRC™.



Results Notification

The FDHRC™ will notify Candidates of their results within approximately 4–6 weeks. Exceptions may be made if irregularities are being investigated. For reasons of confidentiality, results and performance reports will not be released by telephone or fax. CPEDH™ policy does not permit the release of actual exam scores or station content. Results are given as either a pass or fail; no grade is given.

Exam Attempts

A Candidate is allowed a maximum of three (3) attempts at successfully completing the CPEDH™.

Candidates should carefully assess their preparedness before attempting the exam as they are permitted a maximum number of attempts. After the second unsuccessful attempt, the Candidate is strongly recommended to review the feedback provided from their previous attempts. Completion of formal remedial or upgrading courses is strongly recommended prior to initiating the final attempt of the performance exam.

A Candidate who is applying for a final attempt of the CPEDH™ is requested to return the *Final Attempt Declaration* form to the FDHRC™, verifying their understanding that this latest attempt is their final attempt at the CPEDH™.

A Candidate who has failed the maximum number of attempts allowed is no longer a Candidate for the CPEDH™ unless they successfully complete, again, all of the dental hygiene course requirements of a recognized dental hygiene program and meets the eligibility criteria in effect at the time of their new application to write the CPEDH™.

All regulatory bodies in Canada recognize the results of each other's performance exams. Therefore, Candidates may take the exam in any province. Canadian dental hygiene regulators share and confirm Candidates' successful and unsuccessful results with one another. Exams taken in any province count towards the cumulative number of performance exam attempts permitted per Candidate. This includes all attempts at dental hygiene clinical exams, including the CPEDH™ and any clinical exam preceding the CPEDH™.

Request for Appeal

See the FDHRC's [Appeal Policy](#) for more information.

