

Board of Dentistry

1500 SW 1st Ave, Ste 770 Portland, OR 97201-5837 (971) 673-3200 Fax: (971) 673-3202

www.oregon.gov/dentistry

MEETING NOTICE

DENTAL ASSISTANT WORKFORCE SHORTAGE ADVISORY COMMITTEE MEETING (DAWSAC)

Oregon Board of Dentistry 1500 SW 1st Ave., Portland, Oregon 97201

ZOOM MEETING INFORMATION

https://us02web.zoom.us/j/82059859939?pwd=WEs2U0hrckZobmVldHU5V1ZjemNtQT09 Dial-In Phone #: 1-253-215-8782 • Meeting ID: 820 5985 9939 • Passcode: 664147

33-213-0702 • Micching ID. 020 3303 3333 • 1 association

October 27, 2023 8:00 a.m. – 9:00 a.m.

Committee Members:

Co-Chair, Terrence Clark, D.M.D.
Co-Chair, Aarati Kalluri, D.D.S.
Olesya Salathe, D.M.D. - ODA Rep.
Susan Kramer, R.D.H. - ODHA Rep.
Ginny Jorgensen - ODAA Rep.
Jill Lomax
Lynn Murray
Terri Dean
Alexandria Case
Jessica Andrews
Gail Wilkerson
Alyssa Kobylinsky

AGENDA

Call to Order: Dr. Terrence Clark, Chair

- 1. Review HB 3223 and information regarding formation of this Committee.
 - Information & HB 3223 Attachment #1
- 2. Formation of this advisory committee and general guiding principles General discussion & Self Introductions of Committee Members
 - Term Limit of 4 meetings and/or 1 year on this committee to ensure fresh ideas, voices and contributions for all (except Board chairs & professional association representatives).
 - Direction & Focus of this advisory committee
 - Discussion Ideas brought forward by Chair Clark Increase Dental Assistants in Workforce & Why
 is there a shortage of Dental Assistants? Attachment #2

- 3. Identified goals of this Committee per HB 3223
 - Study the dental assistant workforce shortage
 - Review the requirements for dental assistant certification in other states
 - This Committee shall provide advice to the Board of Dentistry on a quarterly basis on how to address the dental assistant workforce shortage in Oregon
- 4. Board discussed at August Board Meeting- brought to this committee for dental assistant feedback Discuss Dental Assistants desire to administer Local Anesthesia
 - OHA-DPP#100 Local Anesthetic Administration training for dental therapists Attachment #3
 - ADA email on Local Anesthesia Attachment #4
- 5. Academy of General Dentistry Dental Assistant Training Attachment #5
- 6. DANB RHS Exam Translated to Spanish Attachment #6

Open Comment - may be limited by the Chair due to time constraints as this meeting ends at 9 am.

Any Other Business

Next Meeting February 23, 2024 at 8 am via Zoom

Adjourn

At the August 25, 2023 Board Meeting the Oregon Board of Dentistry (OBD) established a new standing Advisory Committee named the "Dental Assistant Workforce Shortage Advisory Committee (DAWSAC)" per ORS 679.280, to review, discuss and make recommendations to the Board on addressing workforce shortages in accordance with HB 3223 (2023).

The section of HB 3223 relevant to this is included for reference:

13

14

- 8 SECTION 5. (1) The Oregon Board of Dentistry shall convene an advisory committee of 9 at least seven members to study the dental assistant workforce shortage and to review the 10 requirements for dental assistant certification in other states. The committee shall provide 11 advice to the board on a quarterly basis on how to address the dental assistant workforce 12 shortage in this state.
 - (2)(a) In appointing members to the advisory committee, the board shall prioritize diversity of geographic representation, background, culture and experience.
- (b) A majority of the members appointed to the committee must have experience working as dental assistants.
- SECTION 6. This 2023 Act takes effect on the 91st day after the date on which the 2023 regular session of the Eighty-second Legislative Assembly adjourns sine die.

This advisory committee will meet no less than four times per calendar year once established, and generally be scheduled concurrently with regular OBD Board Meetings. The OBD President will designate two Co-Chairs of the Committee whom will be OBD Board Members. Preference will be given to Board Members who have past experience working as a dental assistant.

The advisory committee shall include five representatives from the Oregon dental assistant community who are currently or have worked as an Oregon dental assistant. The OBD President will select the members, and utilize the legislative criteria, if more than five people volunteer to serve on this advisory committee.

The advisory committee will also include one representative from each of the professional associations: The Oregon Dental Association, The Oregon Dental Hygienists' Association and the Oregon Dental Assistants Association and eventually one from the Oregon Dental Therapy Association (should that be established).

The Advisory Committee members will bring relevant topics and agenda items to the meetings, be meaningfully engaged on the relevant issues, offer solutions and assist in gathering speakers, data and information.

The inaugural DAWSAC meeting is tentatively scheduled for October 27, 2023.

Page 1 of 13 Attachment #1

Enrolled House Bill 3223

Sponsored by Representatives PHAM H, JAVADI, Senators GELSER BLOUIN, MANNING JR; Representative LEVY E, Senator CAMPOS

CHAPTER	

AN ACT

Relating to dental assistants; and prescribing an effective date.

Be It Enacted by the People of the State of Oregon:

SECTION 1. Section 2 of this 2023 Act is added to and made a part of ORS chapter 679.

SECTION 2. (1) In adopting rules related to the requirements for certification as a dental assistant, including any type of expanded function dental assistant, the Oregon Board of Dentistry may require an applicant for certification to pass a written examination. If passage of a written examination is required for certification as a dental assistant, including any type of expanded function dental assistant, the board may accept the results of any examination that is:

- (a)(A) Administered by a dental education program in this state that is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization, and approved by the board by rule;
- (B) Administered by a dental education program in this state that is approved by the Commission for Continuing Education Provider Recognition of the American Dental Association, or its successor organization, and approved by the board by rule; or
- (C) An examination comparable to an examination described in subparagraph (A) or (B) of this paragraph that is administered by a testing agency approved by the board by rule; and
 - (b) Offered in plain language in English, Spanish and Vietnamese.
- (2) The board may not require an applicant for certification as a dental assistant, including any type of expanded function dental assistant, to complete more than one written examination for certification as that type of dental assistant.

SECTION 3. Section 2 of this 2023 Act applies to applications for certification as a dental assistant, including any type of expanded function dental assistant, submitted on or after the operative date specified in section 4 of this 2023 Act.

SECTION 4. (1) Section 2 of this 2023 Act becomes operative on July 1, 2025.

(2) The Oregon Board of Dentistry may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the board to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the board by section 2 of this 2023 Act.

SECTION 5. (1) The Oregon Board of Dentistry shall convene an advisory committee of at least seven members to study the dental assistant workforce shortage and to review the requirements for dental assistant certification in other states. The committee shall provide

Enrolled House Bill 3223 (HB 3223-B)

Page 1

advice to the board on a quarterly basis on how to address the dental assistant workforce shortage in this state.

(2)(a) In appointing members to the advisory committee, the board shall prioritize diversity of geographic representation, background, culture and experience.

(b) A majority of the members appointed to the committee must have experience working as dental assistants.

SECTION 6. This 2023 Act takes effect on the 91st day after the date on which the 2023 regular session of the Eighty-second Legislative Assembly adjourns sine die.

Passed by House March 16, 2023	Received by Governor:
Repassed by House June 24, 2023	, 2023
	Approved:
Timothy G. Sekerak, Chief Clerk of House	, 2023
Dan Rayfield, Speaker of House	Tina Kotek, Governor
Passed by Senate June 24, 2023	Filed in Office of Secretary of State:
Tussed by Schale Same 21, 2020	, 2023
Rob Wagner, President of Senate	
	Secretary of State

Enrolled House Bill 3223 (HB 3223-B) $\,$

Why is there a shortage of Dental Assistants?

The shortage of dental assistants and the challenges related to recruitment and retention in the field can be attributed to several factors:

Educational Requirements:

Becoming a dental assistant typically requires completing a dental assisting program or on-the-job training. However, some regions have limited access to accredited dental assisting programs, making it difficult for potential candidates to pursue this career. Additionally, the cost of education and training can deter individuals from entering the field.

Low Compensation:

Dental assistants often receive relatively low wages compared to other healthcare professions. The relatively low pay can be a disincentive for individuals considering a career in dental assisting, especially when they might have other options with better financial rewards.

Lack of Benefits:

In some cases, dental assistants may not receive comprehensive benefits such as health insurance or retirement plans. The absence of these benefits can make the profession less appealing, particularly for those who prioritize job security and employee perks.

Physical Demands:

Dental assisting can be physically demanding, with long hours spent on your feet, leaning over patients, and performing tasks that require precision and attention to detail. The physical strain can lead to burnout and may deter individuals from staying in the field long-term.

Limited Career Advancement:

Dental assisting often does not offer as many opportunities for career advancement compared to other healthcare professions. Some individuals may start as dental assistants with the hope of moving up the career ladder, but they may find limited options for growth and development.

Stress and Workload:

The dental field can be stressful due to patient demands, tight schedules, and the need to maintain a sterile and safe environment. The stress can be a factor in dental assistants leaving the field, as they may seek less demanding roles elsewhere.

Work-Life Balance:

Achieving a healthy work-life balance can be challenging in some dental assistant positions, especially if they work long hours or irregular schedules. This lack of balance can lead to dissatisfaction and a desire to explore other career options.

Career Changes:

Some dental assistants may decide to pursue other healthcare careers or opportunities that align better with their personal and professional goals. The healthcare industry offers a wide range of career choices, and individuals may choose to explore different options.

To address the shortage of dental assistants and improve retention rates, dental practices and policymakers can consider the following strategies:

Page 4 of 13 Attachment #2

Increasing Education Access:

Expanding the availability of accredited dental assisting programs can help train more individuals for the profession. Scholarships and financial incentives can also make education more accessible.

Competitive Compensation:

Offering competitive salaries and benefits packages can attract and retain skilled dental assistants. This may include providing health insurance, retirement plans, and bonuses.

Career Development Opportunities:

Dental practices can provide opportunities for career growth and development, such as advancing to roles like dental hygienist, office manager, or educator within the dental field.

Work-Life Balance:

Practices can promote work-life balance by implementing flexible scheduling and offering paid time off. This can improve job satisfaction and retention rates.

Supportive Work Environment:

Fostering a positive and supportive work environment can help reduce stress and burnout among dental assistants. This includes providing adequate training, resources, and mentorship.

Addressing the shortage of dental assistants and improving retention rates in the field will require a multi-faceted approach that involves collaboration between dental practices, educational institutions, and policymakers.

Page 5 of 13 Attachment #2

How to increase the number of dental assistants in the profession:

Increasing the number of dental assistants in the profession of dentistry involves a combination of strategies aimed at attracting individuals to the field, providing accessible education and training, and ensuring a supportive work environment. Here are some ways to achieve this:

- 1. Promote Dental Assisting as a Rewarding Career:
- 2. Create awareness about the dental assisting profession through career fairs, school programs, and outreach efforts.
- 3. Highlight the personal fulfillment and opportunities for growth within the field.
- 4. Offer Financial Incentives:
- 5. Provide scholarships, tuition assistance, or financial incentives to individuals interested in pursuing dental assisting education and training.
- 6. Partner with local organizations, dental schools, or community colleges to establish affordable training programs.
- 7. Expand Educational Opportunities:
- 8. Increase the number of accredited dental assisting programs in your region to accommodate a higher number of students.
- Consider offering online or evening classes to accommodate those who may have other commitments.
- 10. Streamline Certification Processes:
- 11. Work with relevant authorities to simplify and expedite the certification and licensing process for dental assistants.
- 12. Encourage reciprocity between states to make it easier for certified dental assistants to relocate and work in different regions.
- 13. Enhance Training Programs:
- 14. Collaborate with dental schools and dental organizations to update and improve dental assisting curricula to ensure graduates are well-prepared for the workforce.
- 15. Incorporate hands-on clinical experience into training programs.
- 16. Offer Career Advancement Opportunities:
- 17. Develop clear career paths for dental assistants, allowing them to progress to roles like dental hygienists, office managers, or educators.
- 18. Provide opportunities for continuing education and professional development.
- 19. Competitive Compensation and Benefits:
- 20. Offer competitive salaries and benefits to attract and retain dental assistants.
- 21. Consider providing health insurance, retirement plans, and performance-based bonuses.
- 22. Create Supportive Work Environments:
- 23. Foster a positive workplace culture that values the contributions of dental assistants.
- 24. Implement flexible scheduling options to accommodate various lifestyles and promote work-life balance.

Mentorship Programs:

- 1. Establish mentorship programs where experienced dental assistants can guide and support newcomers in the field.
- 2. Encourage networking and knowledge-sharing among dental assistants.

Advocacy and Legislation:

Page 6 of 13 Attachment #2

- 1. Advocate for policies and legislation that support the dental assisting profession, such as scope of practice laws and fair employment practices.
- 2. Collaborate with dental associations to promote the profession and lobby for improvements.

Public Awareness Campaigns:

- 1. Launch marketing campaigns that showcase the importance of dental assistants in oral healthcare.
- 2. Highlight the job stability and demand for dental assistants.

Community Engagement:

- 1. Engage with local schools, colleges, and community organizations to promote dental assisting as a viable career option.
- 2. Participate in career days and offer internships or shadowing opportunities.
- 3. Increasing the number of dental assistants in the profession of dentistry will require a concerted effort from dental practices, educational institutions, professional organizations, and policymakers. By addressing barriers to entry, improving training programs, and creating a supportive and rewarding work environment, it is possible to attract and retain more individuals in this crucial healthcare role.

Page 7 of 13 Attachment #2

Oregon Tribes Dental Health Aide Therapist Pilot Project

Dental Pilot Project Application #100

October 6, 2015



Oral Health Program
Center for Prevention and Health Promotion
Public Health Division
The Oregon Health Authority

Page 8 of 13 Attachment #3

Hours of Training: 96 didactic hours. Some of these objectives are met in previous units, so the hours will overlap.

Learning Objectives. At the end of this unit students will have knowledge of:

- Oral embryology & histology
- Oral anatomy
- Oral microbiology
- Oral biology / physiology
- Oral medicine & oral pathology
- Periodontology

UNIT 8: BASIC RESTORATIVE FUNCTIONS

This unit provides the theoretical and practical components for placing amalgam and composite restorations in pre-prepared teeth in the primary and permanent dentitions. Students learn practical skills on patient simulators (typodonts) mounted on dental chairs in the operatory.

Hours of Training: 14 hours of didactic instruction; 21 hours of pre-clinical encounters; 10 hours of laboratory instruction

Learning Objectives. The unit on basic restorative functions addresses the following topics:

- Tooth morphology, structure and function
- Placement and finish of Class I, II and V dental amalgams in pre-prepared typodont teeth
- Placement and finish of Class I, III and V composites in pre-prepared typodont teeth
- Placement and finish of complex (cusp protected) amalgam and composite restorations on pre-prepared typodont teeth
- Placement of stainless steel crowns on pre-prepared typodont teeth
- Placement of restorations in pre-prepared extracted teeth
- Assessment of clinical acceptability of restorations
- Post-procedure patient instructions

UNIT 9: LOCAL ANESTHETIC ADMINISTRATION

Hours of Training: 14 hours of didactic instruction minimum; 7 hours of laboratory instruction minimum

Learning Objectives. At the end of this unit students will demonstrate a working knowledge of local anesthetic agents, the armamentarium to administer the agents, and complications associated with administration of the agents. Students will demonstrate competency in providing clinical local anesthesia. Specifically, students will:

- Describe basic neurophysiology relating to local anesthesia, including fundamentals of impulse generation and transmission, mode and site of action of local anesthetics
- Describe the basic kinetics of local anesthetic onset and duration of action
- List the causes of failure to achieve profound anesthesia
- Describe the basic pharmacology of 2% lidocaine
- Describe the basic pharmacology of 20% benzocaine topical local anesthetic
- Describe the basic pharmacology of 1:100,000 epinephrine vasoconstrictor and its preservatives

- Calculate maximum dosages per weight of 2% lidocaine, 1:100,000 epinephrine
- Calculate maximum safe dosages of "DHATacaine", a fictitious anesthetic assigned variable properties
- List the actions of lidocaine, including onset, duration, and profoundness of nerve anesthesia
- List indications for use of long acting local anesthetic agents (e.g., bupivacaine) and local anesthetic agents without vasoconstrictor
- List contraindications for local anesthetics
- Identify and demonstrate selection and preparation of the instruments, supplies and equipment for administering various local anesthetic agents appropriate to individual patients
- Demonstrate the use of dental anesthetic armamentarium, including syringes, needles, and cartridges
- Demonstrate the use of other armamentarium, such as topical anesthetic, applicator sticks, cotton gauze, and hemostat
- Demonstrate the preparation of the armamentarium, including safe assembly of syringe/needle/cartridge and placing additional cartridges
- Demonstrate the care and disposal of the armamentarium
- List the most common local complications and their consequences
- Systemic complications
- Describe the clinical signs and symptoms of complications to local anesthetic agents
- Perform a medical history evaluation
- List the systemic conditions influencing selection and administration of an esthetic agents
- Describe the head, neck and oral cavity anatomy relating to administering local anesthetic agents, emphasizing surface landmarks, arterial supply, venous drainage, cranial nerves
- Describe the methods of administering local anesthetic agents with emphasis on technique: topical anesthesia, aspiration, slow injection, minimum effective dosage
- List and describe special techniques in pediatric dentistry, with emphasis on infiltration anesthesia for primary molars and use of short needles
- Perform clinical tests to confirm profound anesthesia prior to initiation of dental procedures
- Describe appropriate methods to avoid dental fear caused by the anesthetic procedure

UNIT 10: ADVANCED BEHAVIORAL AND ANXIETY CONTROL

This unit provides students with knowledge of managing fear and anxiety using behavioral management techniques and empathizing with patients in stressful situations. It is designed to help students understand behavior and anxiety in children in a dental context and investigate appropriate management techniques to deal with them.

Hours of Training: 4 hours didactic; 24 hours clinical

Learning Objectives. At the conclusion of this unit students will be able to:

- Identify psycho-social development from birth to adolescence
- Understand the relevance of psycho-social development to dental care

From: Tooks, Sherin < tookss@ada.org > Sent: Tuesday, September 5, 2023 3:42 PM

To: PRISBY Stephen * OBD < Stephen.PRISBY@obd.oregon.gov>

Subject: RE: LOCAL Anesth

Hello Stephen,

The Dental Hygiene and Dental Therapy Standards are found at the link below, under the section entitled Standards for Allied Dental Education Programs.

<u>Dental Hygiene</u>: Since state practice acts vary related to delegable duties, local anesthesia is covered within Standard 2-18: Where graduates of a CODA accredited dental hygiene program are authorized to perform additional functions defined by the program's state-specific dental board or regulatory agency, required for initial dental hygiene licensure, and the program has chosen to include those functions in the program curriculum, the program must include content at the level, depth, and scope required by the state. Students must be informed of the duties for which they are educated within the program.

Programs also provide instruction related to pain management as required by Standard 2-8c: *Dental sciences content must include tooth morphology, head, neck and oral anatomy, oral embryology and histology, oral pathology, radiography, periodontology, pain management, and dental materials.*

Additional Standards within Standard 2 may apply, related to patient experiences, treatment of patients with periodontal diseases, biomedical science content, etc.

Dental Therapy:

Within Dental Therapy please review Standard 2-13 related to didactic dental science instruction in pain management.

2-13: Didactic dental sciences content must ensure an understanding of basic dental principles, consisting of a core of information in each of the following areas within the scope of dental therapy: i. pain management

2-21: At a minimum, graduates must be competent in providing oral health care within the scope of dental therapy practice with supervision as defined by the state practice acts, including: I. administering local anesthetic

Additional Standards within Standard 2 may apply, related to biomedical science content, dental science content, etc.

https://coda.ada.org/standards

Please contact me if you have additional questions.

Regards, Sherin

Sherin Tooks, Ed.D., M.S. tookss@ada.org

Senior Director, Commission on Dental Accreditation & US Department of Education Compliance Commission on Dental Accreditation (CODA) 312-440-2940 office

Page 11 of 13 Attachment #4



HYBRID DENTAL ASSISTANT TRAINING PROGRAM

PROGRAM OVERVIEW

This hybrid program is a condensed and accelerated format, with the goal of preparing students for an entrylevel dental assistant position. Areas of study include dental anatomy, dental terminology, infection control, chairside and office etiquette, charting, chairside assisting, impressions and models, dental materials, and radiology certification approved curriculum. The program offers a combination of online didactic training and in person hands-on training at the OAGDF's state-ofthe-art dental clinic. The course will take place over six months, January 2024 - June 2024. The didactic curriculum will take place through asynchronous learning including online lessons and guizzes. A handson curriculum will be offered one weekend per month at the Oregon AGD Foundation Center.



Page 12 of 13

Attachment #5

COURSE INFORMATION

TUITION/COST:

\$2,000, which includes all required textbooks and supplies. Need-based grants available.

IN-PERSON DATES:

Saturday January 6, 2024, and Sunday January 7, 2024 Saturday February 3, 2024, and Sunday February 4, 2024 Saturday March 9, 2024, and Sunday March 10, 2024 Saturday April 20, 2024, and Sunday April 21, 2024 Friday May 10, 2024, and Saturday May 11, 2024 Saturday June 8, 2024, and Sunday June 9, 2024

First Day: 8 am - 5 pm; Second Day: 8 am - 12 pm

LOCATION:

OAGD Foundation Center 13333 SW 68th Parkway, Suite 010 Tigard, OR 97223

OUESTIONS? Contact Amanda Nash

Phone: 503.228.6266 Email: Amanda@oragd.org



DANB RHS exam translated to Spanish

September 12, 2023



The Dental Assisting National Board (DANB) will offer its Radiation Health and Safety (RHS) exam in Spanish in January 2024, a move aimed at breaking down language barriers and promoting inclusivity in the dental community. The RHS exam is DANB's most popular exam, with more than 12,000 exams administered each year, and it will be the first credentialing exam in oral healthcare to be offered in Spanish.

Current data shows 22% of RHS exam applicants are fluent in Spanish. The introduction of the Spanish translation of the RHS exam marks a pivotal moment for DANB's ongoing efforts to ensure that dental professionals from diverse backgrounds have equal access to certification opportunities. The impact is especially notable, as 38 states and D.C. recognize or require DANB exams or certifications for dental assistants.

"We are committed to fostering the growth of a well-prepared and diverse dental assistant workforce," said DANB CEO Laura Skarnulis. "Offering the RHS exam in Spanish will empower Spanish-speaking dental assistants to pursue career growth and to deliver quality care to patients who might otherwise not seek treatment due to a language barrier."

DANB worked closely with exam translation consultants and subject matter experts, including leaders from the Hispanic Dental Association (HDA), to ensure the accuracy of translation into Modern Spanish, while protecting exam integrity.

"As the leading voice for Hispanic oral health, we support DANB in offering the RHS exam in Spanish," said HDA CEO Dr. Manuel Cordero. "DANB's work in this area aligns with our mission and objectives to open new pathways for Hispanics into oral health careers and to promote the overall health of the Hispanic/Latinx and underrepresented communities."

See the FAQs below for more information.

Why is DANB offering the RHS exam in Spanish?

Spanish is the second-most-common language spoken in the U.S. and the second-most-common language spoken by dental assistants taking DANB's RHS exam. A well-prepared and diverse dental workforce contributes to the overall excellence of the industry. By offering the RHS exam in Spanish, DANB is facilitating the development of highly skilled dental professionals who can deliver quality care to patients across linguistic and cultural backgrounds.

Which dialect of Spanish will the RHS exam be translated to?

The RHS exam will be translated to Modern Spanish.

Is the RHS exam translated in Spanish the same as the English exam?

Yes, the exams are equivalent. The RHS exam in English and Spanish both follow the same exam outline, use the same question bank, have the same pass point, and have been constructed based on the same psychometrically valid principles. Candidates who opt to take the RHS exam in Spanish will be able to see the questions in English or Spanish.

How can dental assistants apply for the RHS exam in Spanish?

The application will be available on DANB's website starting in January 2024. The process will be the same as applying for the RHS exam in English. More details will be available in the coming months.

Will DANB offer other exams in Spanish?

DANB will begin translation of other exams in the upcoming months, with a Spanish translated ICE exam to be launched later in 2024.

Please contact us at communications@danb.org with questions or comments.