

RWDNÆ"RC EMGV"

# **OREGON BOARD OF DENTISTRY**

**BOARD MEETING  
FEBRUARY 19, 2021**





# Oregon

Kate Brown, Governor

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

## NOTICE OF REGULAR MEETING

**PLACE: VIRTUAL VIA ZOOM**

**DATE: February 19, 2021**

**TIME: 8:00 a.m. – 3:00 p.m.**

**Call to Order – Yadira Martinez, R.D.H., President**

**8:00 a.m.**

### EXECUTIVE SESSION

The Board will meet in Executive Session pursuant to ORS 192.660(2)(f)(h) and (l); ORS 676.165, ORS 676.175(1) and ORS 679.320 to review records exempt from public disclosure, to review confidential materials and investigatory information, and to consult with counsel. No final action will be taken in Executive Session.

1. Review New Cases Placed on Consent Agenda
2. Review New Case Summary Reports
3. Review Completed Investigative Reports
4. Previous Cases Requiring Further Board Consideration
5. Personal Appearances and Compliance Issues
6. Licensing and Examination Issues
7. Consult with Counsel

**OPEN SESSION (Via Zoom)**

**12:30 p.m.**

**\* This is when the public may connect to the Board Meeting, please see page three for meeting details**

Board President Yadira Martinez, R.D.H. - Welcome and Introductions of Board Members and select OBD Staff.

### NEW BUSINESS

8. Approval of Minutes
  - December 18, 2020 - Board Meeting
  - OLD BUSINESS
9. Executive Director's Report
  - Board Member and Staff Updates
  - OBD Budget Status Report
  - Customer Service Survey
  - Board Member and Staff Speaking Engagements
  - 2021 Dental License Renewal
  - OBD SB 5511 Presentation and Documentation
  - 2021 Legislation being tracked
  - OBD Strategic Planning Preparation- More information under Tab 14
  - AADA & AADB 2021 Mid - Year Meetings
  - Statewide Diversity, Equity & Inclusion Conference Summary
  - Workday Payroll Project

10. Association Reports
  - Oregon Dental Association
  - Oregon Dental Hygienists' Association
  - Oregon Dental Assistants Association
11. Committee and Liaison Reports
  - WREB Liaison Report – Yadira Martinez, R.D.H.
  - AADB Liaison Report – Yadira Martinez, R.D.H.
  - ADEX Liaison Report – Hai Pham, D.M.D.
    - Report of the 16<sup>th</sup> ADEX Virtual Annual Meeting 11.7.2020
  - CDCA Liaison Report – Amy B. Fine, D.M.D.
    - Report of the 2021 CDCA Annual Meeting
12. Unfinished Business and Rules
  - OHA Legislative Efforts
  - OHSU Request to Modify Vaccine Course
  - Oregon OSHA Rules Update
13. Correspondence
  - Melissa Turner, R.D.H. Request for Dental Hygienists to Administer Vaccines
  - Pamela Lynch, R.D.H. Request for Dental Hygienists to Administer Vaccines
  - Laura Crosby, R.D.H. Request for Dental Hygienists to Administer Vaccines
  - ADAA Mandatory Infection Control Education
14. Other
  - MEMO & Strategic Planning Survey Responses
  - Performance Audit of the HPSP – Final Report
  - CODA 2020 Annual Report
  - OSHA – Question to Board regarding medical history Evaluation
  - Dental Pilot Project #100 Advisory Committee Meeting
15. Articles & Newsletters (No Action Necessary)
  - January 2021 HPSP Newsletter
  - OHA Dental Director Recruitment

**Enforcement Actions (vote on cases reviewed in Executive Session)**

**LICENSURE AND EXAMINATION**

16. Ratification of Licenses Issued
17. License and Examination Issues
  - Soft Reline Course – Alyssa Kobylinsky
  - University of New Mexico – Local Anesthesia course approval
  - Request to be recognized by the Board as a dental study group – Hero Dental Education

**OTHER BUSINESS**

**ADJOURN**

**3:00 p.m.**

## Board Meeting - Public Session

Time: February 19, 2021 12:30 PM Pacific Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/82358653151?pwd=c1BKTnBoR2FZQUV0VDF3TW9CMUlrZ09>

Meeting ID: 823 5865 3151

Passcode: 080230

Dial by your location

- +1 669 900 6833 US (San Jose)
- +1 253 215 8782 US (Tacoma)
- +1 346 248 7799 US (Houston)
- +1 929 205 6099 US (New York)
- +1 301 715 8592 US (Washington D.C)
- +1 312 626 6799 US (Chicago)

\*Public Comments: If you wish to speak, please use the “raise hand” function of Zoom. Staff will turn on your microphone and call on you at the direction of the OBD President. When you speak, please state your name, occupation, and indicate the agenda item or other topic you wish to communicate about.

The OBD President may set specific time constraints for each attendee’s comments.

### Additional Notes:

- (1) The meeting location is not accessible to persons with disabilities due to the pandemic. A request for an interpreter for the hearing impaired or for other accommodations for persons with disabilities should be made at least 48 hours before the meeting to Samantha VandeBerg or Haley Robinson at (971) 673-3200.
- (2) The Board may from time to time throughout the meeting enter into Executive Session to discuss matters on the agenda for any of the reasons specified in ORS 192.660. Prior to entering into Executive Session, the Board President will announce the nature of and authority for holding the Executive Session. No final action will be taken in Executive Session.



# APPROVAL OF MINUTES

**DRAFT 1**  
**OREGON BOARD OF DENTISTRY**  
**MINUTES**  
**DECEMBER 18, 2020**

MEMBERS PRESENT: Yadira Martinez, R.D.H., President

MEMBERS PRESENT  
VIA TELECONFERENCE: Alicia Riedman, R.D.H., Vice-President  
Gary Underhill, D.M.D.  
Jose Javier, D.D.S.  
Reza Sharifi, D.M.D.  
Chip Dunn  
Jennifer Brixey  
Hai Pham, D.M.D.  
Amy B. Fine, D.M.D.

STAFF PRESENT: Stephen Prisby, Executive Director  
Daniel Blickenstaff, D.D.S., Dental Director/ Chief Investigator (portion of meeting)  
Winthrop "Bernie" Carter, D.D.S., Dental Investigator  
Haley Robinson, Office Manager (portion of meeting)  
Shane Rubio, Investigator (portion of meeting)  
Samantha VandeBerg, Office Specialist (portion of meeting)  
Ingrid Nye, Examination and Licensing Manager (portion of the meeting)  
Teresa Haynes, Project Manager (portion of the meeting)

ALSO PRESENT: Lori Lindley, Sr. Assistant Attorney General

VISITORS PRESENT  
VIA TELECONFERENCE\*: Amy Coplen, R.D.H.; Phillip Marucha, D.M.D.; Pam Johnson; Jen Lewis-Goff, O.D.A.; Linda Boyd; Lisa Rowley, R.D.H.; Pam Lynch, R.D.H.; Carol Poe, R.D.H.

\*This list is not exhaustive, as it was not possible to verify all participants on the teleconference.

**Call to Order:** The meeting was called to order by the President at 8:00 a.m. at the Board office; 1500 SW 1<sup>st</sup> Ave., Suite 770, Portland, Oregon.

**EXECUTIVE SESSION:** The Board entered into Executive Session pursuant to ORS 192.606 (1)(2)(f), (h) and (L); ORS 676.165; ORS 676.175 (1), and ORS 679.320 to review records exempt from public disclosure, to review confidential investigatory materials and investigatory information, and to consult with counsel

**OPEN SESSION:** The Board returned to Open Session.

President Yadira Martinez, RDH welcome everyone to the meeting and had the Board Members, Lori Lindley and Stephen Prisby introduce themselves.

## **NEW BUSINESS**

### **Approval of Minutes**

Dr. Fine moved and Dr. Pham seconded that the Board approve the minutes from the October 23, 2020 Board Meeting as presented. The motion passed unanimously.

## **EXECUTIVE DIRECTOR'S REPORT**

### **Board Member & Staff Updates**

The OBD will welcome our newest Board Member in early 2021. Mr. Prisby provided an update and additional information to the Board.

Mr. Prisby recognized Ingrid Nye, Examination & Licensing Manager, for her five-year work anniversary with the OBD on November 9, 2020.

Mr. Prisby recognized Shane Rubio, Investigator/Diversion Coordinator, who has been with the OBD for just over 2 years and celebrated his 10-year service anniversary working for the State of Oregon on November 29, 2020.

The OBD's dedicated and hardworking staff were designated "essential employees" earlier in 2020 and continue to show up at our downtown Portland Office. Mr. Prisby thanked them and acknowledged them for doing their work in these challenging times.

### **OBD Budget Status Report**

Mr. Prisby presented the latest budget report for the 2019 - 2021 Biennium. This report, which is from July 1, 2019 through, October 31, 2020 shows revenue of \$2,735,964.72 and expenditures of \$2,191,716.47.

### **OBD 2021-2023 Budget - NIC Fee Increase**

Mr. Prisby presented an email and fee table from NIC regarding a fee increase. The OBD is not planning to pass this fee increase on to our Licensees. Mr. Prisby believes the OBD can absorb the fee increase in the proposed 2021-2023 budget.

### **Customer Service Survey**

Mr. Prisby presented the customer service surveys received from July 1, 2020 – November 30, 2020, with majority rating their experience with the OBD positively.

### **OBD Strategic Planning Survey**

The OBD begins its initial planning to develop its next strategic plan (to replace the 2017-2020 edition) with responses gathered from this strategic planning survey. The survey will be sent to

all Licensees and stakeholders on our email distribution lists, posted on our website and included in email blasts. We will collect survey responses into January and plan to have the results available at the February Board Meeting.

### **AADA Annual Meeting**

The American Association of Dental Administrators' (AADA) annual meeting was held on October 30, 2020 as a virtual meeting. The AADA adapted to the virtual setting and it was an efficient meeting. Mr. Prisby was elected President-Elect of the AADA.

### **AADB Mid-Year Meeting**

The American Association of Dental Boards' (AADB) Mid-Year Meeting will be a virtual meeting February 27 - 28, 2021. The AADA is considering holding their mid-year meeting on March 2, 2021.

### **Health Related Licensing Boards' Meeting**

The Health Related Licensing Boards' Executive Directors held a meeting on November 16, 2020. Mr. Prisby presented 81 pages of material which covered a number of important topics discussed at the meeting including racial justice, telehealth, access to service and Oregon's IT focus.

### **National Center for Interstate Compacts – Council of State Governments**

The CSG National Center for Interstate Compacts (NCIC) has partnered with the U.S. Department of Defense to support the development of new occupational licensure interstate compacts. Mr. Prisby attended an informational webinar held on November 30, 2020, and shared his opinion on this endeavor with the Board.

### **Pew Dental Therapy Model Administrative Rules Project**

Mr. Prisby volunteered to participate and shared his experience and opinion on the topic of dental therapy rulemaking. The first meeting of this group was on December 2, 2020.

### **OBD Dec 2020 Newsletter**

Mr. Prisby presented the latest newsletter, which is also available on our website. Mr. Prisby thanked all that contributed and especially our graphic artist, Samantha VandeBerg, who assembled the newsletter. Alicia Riedman also lent her editorial skills once again.

## **ASSOCIATION REPORTS**

### **Oregon Dental Association (ODA)**

Ms. Lewis-Goff reported that the 2021 Oregon Dental Conference will be held virtually, with registration beginning in January. She reported that the ODA is continuing to advocate for dental staff to be able to receive the Covid-19 vaccine, with dental staff currently falling under "phase four of wave one" of vaccine administration. Ms. Lewis-Goff reported that the Lane County Dental Society has been working with OHSU to bring the vaccine training course down to Lane County. She reported that the ODA has released their 2021 legislative agenda, which is focused on increasing access to dental care, creating a tribal dental scholarship at OHSU, and funding the state dental director position.

### **Oregon Dental Hygienists' Association (ODHA)**

Ms. Rowley reported that the ODHA held their annual meeting on November 14, 2020, with Laura Vanderwerf being installed as the ODHA 2020-2021 President. Ms. Rowley also reported that the 2020 Outstanding Partner Award was given to the Oregon Dental Association.

## **COMMITTEE AND LIAISON REPORTS**

### **WREB Liaison Report**

Dr. Fine reported that the DERB meeting minutes were available for Board members to review.

### **AADB Liaison Report**

Dr. Fine reported that the AADB meeting will be held virtually. Mr. Prisby added that the OBD is in need of a Board member to step in as AADB liaison.

### **ADEX Liaison Report**

Dr. Pham summarized a few recent changes to grading criteria for dental and hygiene exams, with the full material available for review on the ADEX website.

### **CDCA Liaison Report**

Dr. Fine reported that the annual CDCA meeting will be held virtually on January 7-11, 2021.

## **UNFINISHED BUSINESS & RULES**

### **Dental Hygiene Scope of Practice – Orofacial or Myofunctional Therapy**

OBD Staff have fielded questions regarding dental hygienists approval from the Board to practice and advertise therapeutic techniques involving orofacial and myofunctional therapy. OBD Staff believe it is within the scope of dental hygiene services as long as they have appropriate training and do not misrepresent their credentials in advertising. Mr. Prisby requested that the Board make a formal policy decision and address whether this type of therapy is allowed under a dental hygienists' scope of practice.

The Board requested more information on the matter, and no motion was made. The Board will readdress this topic at the February Board meeting.

## **CORRESPONDENCE**

### **Request for Clarification on Virtual CE Requirements**

Dr. Fred Bremner requested clarification on the requirements for a webinar CE lectures to count for the 40 hours of CE requirement for licensure.

Dr. Javier moved and Dr. Pham seconded that the Board accept Zoom, and other similar virtual or web-based training, lectures, and courses for the continuing education (CE) requirements under existing OBD rules, and that said training does not necessarily require a quiz at the end to be considered acceptable for CE. The motion passed unanimously.

### **Request for Dental Hygienists to administer COVID-19 vaccine**

The Board has received multiple requests to allow dental hygienists to administer the COVID-19 vaccine. The Board discussed the matter with legal counsel, and came to the determination that based on current legislature, it is not within the scope of practice of dental hygienists to administer vaccines.

### **OTHER ISSUES**

#### **Request for Approval of IV Access/Phlebotomy Course – South Beach Dental Training Institute**

Dr. Pham moved and Dr. Javier seconded that the Board deny the IV Access/Phlebotomy course as requested. The motion passed unanimously.

#### **Request for Approval of Revised Vaccination Course – OHSU**

Dr. Javier moved and Dr. Pham seconded that the Board accept the revisions to the OHSU vaccination course as presented. The motion passed unanimously.

### **ARTICLES AND NEWS (Informational Only)**

- DHAT Article
- Kaiser Permanente Dentists to Begin Offering Flu Vaccines
- REALD Data Collection and Reporting
- Forbes Dental Vaccine Article
- The Future of State Telehealth Policy
- Oregon Dentists Training to Give Vaccines
- Yadira Martinez receives National Oral Health Award

#### **Requests for Non-Resident Permits**

Dr. Javier moved and Dr. Pham seconded that the Board approve the issuance of non-resident permit for John Van, D.D.S. The motion passed unanimously.

Dr. Pham moved and Dr. Javier seconded that the Board approve the issuance of non-resident permit for Jerome Cutler, D.D.S. The motion passed unanimously.

#### **Implementation of Electronic Signatures for Wall Certificates**

Dr. Pham moved and Dr. Javier seconded that the Board approve the use of electronic signatures for wall certificates. The motion passed unanimously.

#### **Request to Withdraw Dental Licensure Application – Susan Chan, D.D.S.**

Dr. Javier moved and Mr. Dunn seconded that the Board approve the withdrawal of dental licensure application for Dr. Susan Chan. The motion passed unanimously.

### **Request for Release of Investigative Summary**

Dr. Pham moved and Dr. Javier seconded that the Board release the investigative case summary for case 2020-0154 as requested. The motion passed unanimously.

#### **Amendment to August 21, 2020 Board Meeting Minutes**

Dr. Javier moved and Dr. Pham seconded that the Board amend the minutes from the August 21, 2020 Board Meeting regarding case 2020-0180, and that the motion and minutes reflect this: In reference to case 2020-0180, move to close the matter with a letter of concern reminding the licensee to assure that he takes two hours of infection control continuing education every licensure period, and to ensure that his amalgam separator is installed and maintained. The motion passed unanimously.

#### **CONSENT AGENDA**

##### **2021-0049, 2021-0054, 2021-0068, 2021-0062, 2021-0067, 2021-0048, 2021-0056**

Ms. Riedman moved and Dr. Javier seconded that the Board close the matters with a finding of No Violation or No Further Action. The motion passed unanimously.

#### **COMPLETED CASES**

##### **2021-0014, 2020-0205, 2020-0104, 2021-0018, 2021-0044, 2021-0050**

Ms. Riedman moved and Mr. Dunn seconded that the Board close the matters with a finding of No Violation or No Further Action. The motion passed unanimously.

##### **ANDERSON, JAMES R., D.M.D., 2021-0005**

Dr. Underhill moved and Dr. Javier seconded that the Board, in regards to Respondent #1, move to issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, a \$1,000.00 civil penalty to be paid within 30 days, a refund to patient TJ of \$1,780.00 to be paid within 30 days, and pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days of the effective date of the Order. In reference to case 2021-0005, as regards Respondent # 2, move to close the matter with a Letter of Concern reminding Licensee to assure that weekly biological testing of sterilization devices is completed. The motion passed unanimously.

##### **2020-0201**

Dr. Pham moved and Dr. Underhill seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that he documents informed consent and patient vital signs when administering nitrous oxide sedation. The motion passed with Ms. Martinez, Ms. Riedman, Dr. Sharifi, Dr. Pham, Dr. Underhill, Dr. Fine, Ms. Brixey and Mr. Dunn voting aye. Dr. Javier recused.

##### **2021-0045**

Dr. Javier moved and Dr. Sharifi seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that her autoclave is tested with a biological monitoring system on a weekly basis. The motion passed unanimously.

**2021-0002**

Mr. Dunn moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that he conducts weekly biological monitoring testing of his sterilization devices. The motion passed unanimously.

**2021-0004**

Dr. Fine moved and Dr. Underhill seconded that the Board close the matter with a Letter of Concern reminding Licensee not to attempt to restore an implant until the surgeon has deemed the implant is integrated and ready to restore, and to assure that all of your autoclaves are tested with a biologic monitoring system on a weekly basis. The motion passed unanimously.

**CAUBLE, DAVID A., D.M.D., 2021-0016**

Dr. Sharifi moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, a \$12,000.00 civil penalty to be paid within 150 days, complete six hours of Board approved continuing education in infection control within 60 days, complete three hours of Board approved continuing education in record keeping within 30 days, pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days, and for a period of one year from the effective date of the Order, submit results of weekly testing of his heat sterilizing devices with a biologic monitoring system on a weekly basis. The motion passed unanimously.

**2020-0189**

Ms. Brixey moved and Dr. Underhill seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that he thoroughly documents all of the treatment provided to a patient during an appointment. The motion passed with Ms. Martinez, Ms. Riedman, Dr. Sharifi, Dr. Pham, Dr. Underhill, Dr. Fine, Ms. Brixey and Mr. Dunn voting aye. Dr. Javier recused.

**2021-0029**

Dr. Underhill moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding the Licensee to assure that all of his autoclaves are tested with a biological monitoring system on a weekly basis. The motion passed unanimously.

**DUTRO, JAMES A., D.M.D., 2020-0171**

Dr. Pham moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, and to successfully pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days of the effective date of the Order. The motion passed unanimously.

**EDWARDS, JAMES, D.D.S., 2021-0076**

Dr. Javier moved and Mr. Dunn seconded that the Board issue an Order of Immediate Emergency Dental License Suspension. The motion passed unanimously.

**2021-0012**



Mr. Dunn moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that he thoroughly documents in the patient records all treatment discussions and referral discussions he has with his patients. The motion passed unanimously.

**2021-0009**

Dr. Fine moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that sterilization is completed within CDC guidelines and that biological monitoring is done on a weekly basis. The motion passed unanimously.

**2007-0314**

Dr. Sharifi moved and Dr. Javier seconded that the Board close the matter with No Further Action. The motion passed unanimously.

**2021-0053**

Ms. Brixey moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure to place a ligature on all rubber dam clamps used on a patient, and to assure that all rubber dam clamps are removed from the patient's oral cavity prior to dismissing the patient. The motion passed with Ms. Martinez, Ms. Riedman, Dr. Sharifi, Dr. Javier, Dr. Underhill, Dr. Fine, Ms. Brixey and Mr. Dunn voting aye. Dr. Pham recused.

**MYERS, KRISTI M., R.D.H., 2021-0052**

Dr. Underhill moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand and a \$500.00 civil penalty to be paid within 60 days of the effective date of the Order. The motion passed unanimously.

**2020-0213**

Dr. Pham moved and Dr. Javier seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that he documents in the patient record all radiographs taken, and that his autoclaves are tested with a biological monitoring system on a weekly basis. The motion passed unanimously.

**2021-0027**

Dr. Javier moved and Mr. Dunn seconded that the Board close the matter with a Letter of Concern reminding Licensee to assure that all instruments that he uses have been sterilized in an autoclave that has been tested with a biologic monitoring system on a weekly basis, and to instruct the Board staff to open a complaint against the owner of the practice for missing biologic monitoring testing of the autoclaves in the office on 18 occasions in 2019. The motion passed unanimously.

**SUMMER, JOHN D., D.D.S. 2021-0043**

Mr. Dunn moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action, and offer Licensee a Consent Order incorporating a reprimand, a \$2,000.00 civil penalty to be paid within 30 days, take a Board approved continuing education course on record keeping within 30 days, and pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days of the effective date of this Order. The motion passed unanimously.

**SWEETEN, J. COLT, D.D.S., 2021-0023**

Dr. Fine moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, a \$12,000.00 civil penalty to be paid within 150 days, complete three hours of Board approved continuing education in record keeping within 30 days, complete six hours of Board approved continuing education in infection control within 60 days, pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days, and submit monthly results of the biological monitoring of his autoclave for a period of one year, of the effective date of the Order. The motion passed unanimously.

**WOLFE, BENJAMIN J., D.M.D., 2021-0022**

Dr. Sharifi moved and Dr. Javier seconded that the Board issue a Notice of Proposed Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, pay a \$263.70 refund to the patient, pay restitution of \$5,200.00 to the patient, take a three hour board approved continuing education course on Record Keeping within 30 days, and pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days of the effective date of the Order. The motion passed with Ms. Martinez, Ms. Riedman, Dr. Sharifi, Dr. Javier, Dr. Underhill, Dr. Fine, Ms. Brixey and Mr. Dunn voting aye. Dr. Pham recused.

**PREVIOUS CASES REQUIRING BOARD ACTION****AGARWAL, ROHINI A., D.M.D., 2019-0201**

Ms. Brixey moved and Dr. Javier seconded that the Board issue an Amended Proposed Notice of Disciplinary Action and offer Licensee a Consent Order incorporating a reprimand, a \$4,000.00 civil penalty; refund patient CT \$ 50.00; monthly submission of spore testing results for a period of one year; pass the Oregon Board of Dentistry Dental Jurisprudence Examination; complete a Board approved continuing education course, in person, in Record Keeping; and complete six hours of a Board approved continuing education course in Infection Control. The motion passed unanimously.

**BIANCO, MARC F., D.M.D., 2020-0211**

Dr. Underhill moved and Dr. Javier seconded that the Board accept Licensee's offer, and offer Licensee a Consent Order incorporating a reprimand, pay a \$1,500.00 civil penalty within 60 days, take four hours of infection control continuing education within 30 days, and pass the Oregon Board of Dentistry Jurisprudence Exam within 30 days of the effective date of the Order. The motion passed unanimously.

**2019-0050**

Dr. Pham moved and Dr. Javier seconded that the Board issue an Order of Dismissal, dismissing Licensees Interim Consent Order dated August 23, 2019. The motion passed unanimously.

**HIGBEE, T.J., D.D.S., 2006-0086 & 2012-0073**

Dr. Javier moved and Dr. Underhill seconded that the Board deny Licensees request to end the Interim Consent Order and return to practice. The motion passed unanimously.

**2007-0116**

Mr. Dunn moved and Dr. Javier seconded that the Board close the matter with No Further Action. The motion passed unanimously.

**RATIFICATION OF LICENSES**

Dr. Underhill moved and Dr. Fine seconded that the Board ratify the licenses presented. The motion passed unanimously.

**ADJOURNMENT**

The meeting was adjourned at 2:14 p.m. Ms. Martinez stated that the next Board Meeting would take place on February 19, 2021.

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Yadira Martinez, R.D.H.  
President

# **EXECUTIVE DIRECTOR'S REPORT**

## **EXECUTIVE DIRECTOR'S REPORT**

### **February 19, 2021**

#### **Board Member & Staff Updates**

Here is a snapshot of some changes coming to the OBD.

Dr. Hai Pham has indicated he will not seek a second term on the OBD, and his term is set to expire on April 2, 2021. We appreciate and thank Dr. Pham for his service and support over the last four years. His experience and clinical knowledge has been very valuable in OBD discussions and decisions.

Alicia Riedman's term is set to expire on April 30, 2021 and she has applied to serve another term. Chip Dunn's term is set to expire on April 2, 2021, and Mr. Dunn has indicated he will apply to serve another term as well. We appreciate their willingness to volunteer for four more years with the OBD.

Dr. Aarati Kalluri is on the Governor's list of board member appointments to go forward on Feb 23<sup>rd</sup> to a Senate committee, one step closer to joining the Board. She will need to be confirmed by the full Senate after the committee meeting. Her term is tentatively scheduled to begin on March 1 (if confirmed by then), and we will work out the details of her new board member orientation in the next few weeks. Dr. Kalluri is joining the Board due to the board opening created when Dr. Todd Beck resigned in August 2020.

Dr. Daniel Blickenstaff, Dental Director & Chief Investigator will be retiring from the OBD this spring with his last day on April 1, 2021. We previously recognized Dr. Blickenstaff for his service and will send him off appropriately on his last day.

All Board openings have been publicized through our email blasts, in our newsletter, on state employment website (for staff position) and on our website. The OBD thanks all interested candidates that have applied for these openings. The dental investigator candidate interview process is moving along and I will have an update at this meeting.

#### **OBD Budget Status Report**

Attached is the budget report for the 2019 - 2021 Biennium. This report, which is from July 1, 2019 through December 31, 2020, shows revenue of \$2,776,851.24 and expenditures of \$2,449,877.96. If Board Members have questions on this budget report, please let me know.

#### **Attachment #1**

#### **Customer Service Survey**

Attached are the legislatively mandated survey results from July 1, 2020 – January 31, 2021. The results of the survey show that the OBD continues to receive positive ratings from the majority of those that submit a survey. **Attachment #2**

#### **Board Member and Staff Speaking Engagements**

Ingrid Nye gave a virtual License Application Presentation to the graduating Dental Hygiene Students at OIT in Klamath Falls on Wednesday, February 3, 2021.

#### **2021 Dental License Renewal**

The new database and interface to renew licenses was being tested and finalized at the time of this report. I will have an update at this board meeting.

### **OBD SB 5511 Presentation and Documentation**

The presentation to the Joint Committee On Ways and Means Subcommittee On Education on February 3, 2021 and supporting documentation is attached. **Attachment #3**

### **2021 Legislation being tracked**

I attached some reference materials on legislation and a report of 2021 legislation I am tracking for the OBD. **Attachment #4**

### **OBD Strategic Planning Preparation**

The strategic planning survey results are in Tab 14 for Board Members to review. The Board will discuss the next steps to advance work on the Board's next strategic plan to replace the 2017-2020 edition.

### **AADA & AADB 2021 Mid Year Meetings**

The American Association of Dental Administrators (AADA) and the American Association of Dental Boards (AADB) 2021 Mid Year Meetings will both be held virtually this year. The meeting agendas are attached and there will be a report back to the Board in April on them.

**Attachment #5**

### **Statewide Diversity, Equity & Inclusion Conference Summary**

This past October, the 2020 Statewide Diversity, Equity, & Inclusion Conference was held virtually, and welcomed a record number of state employees to the annual professional development event with all OBD staff members participating. As a follow-up, the Conference Planning Committee shared the attached post-event executive report. This report was developed to provide department leadership a snapshot of our planning efforts, successes and lessons learned, attendee feedback, and a breakdown of conference expenses.

**Attachment #6**

### **Workday Payroll Project**

The Payroll and Time Tracking replacement project officially kicked off on January 13, 2021. In 2019 Oregon state government made a leap forward in modernizing legacy IT systems with the rollout of Workday – our HR information system. The next major step is to replace the over 30-year old payroll system (Oregon Statewide Payroll Application--OSPA) by moving to Workday payroll and time tracking. Workday will replace our time tracking system (ePayroll) and leave accrual system, and everyone in state government will begin using Workday for time tracking and payroll starting July 1, 2022. **Attachment #7**

Appn Year                      2021  
**BOARD OF DENTISTRY**  
**Fund 3400 BOARD OF DENTISTRY**  
**For the Month of DECEMBER 2020**

## REVENUES

Budget Obj	Budget Obj Title	<u>Prior Month</u>	<u>Current Month</u>	<u>Bien to Date</u>	<u>Financial Plan</u>	<u>Unoblig</u>
0505	FINES AND FORFEITS	374,212.52	7,500.00	381,712.52	200,000.00	-181,712.52
0210	OTHER NONBUSINESS LICENSES AND FEES	11,000.00	0.00	11,000.00	10,000.00	-1,000.00
0205	OTHER BUSINESS LICENSES	2,294,381.00	14,090.00	2,308,471.00	3,270,001.00	961,530.00
0605	INTEREST AND INVESTMENTS	42,984.20	998.70	43,982.90	20,000.00	-23,982.90
0410	CHARGES FOR SERVICES	19,376.00	0.00	19,376.00	20,000.00	624.00
0975	OTHER REVENUE	11,938.82	370.00	12,308.82	49,999.00	37,690.18
		<b>2,753,892.54</b>	<b>22,958.70</b>	<b>2,776,851.24</b>	<b>3,570,000.00</b>	<b>793,148.76</b>

## TRANSFER OUT

Budget Obj	Budget Obj Title	<u>Prior Month</u>	<u>Current Month</u>	<u>Bien to Date</u>	<u>Financial Plan</u>	<u>Unoblig</u>
2443	TRANSFER OUT TO OREGON HEALTH AUTHORIT'	108,157.00	0.00	108,157.00	226,800.00	118,643.00
		<b>108,157.00</b>	<b>0.00</b>	<b>108,157.00</b>	<b>226,800.00</b>	<b>118,643.00</b>

## PERSONAL SERVICES

Budget Obj	Budget Obj Title	<u>Prior Month</u>	<u>Current Month</u>	<u>Bien to Date</u>	<u>Financial Plan</u>	<u>Unoblig</u>
3160	TEMPORARY APPOINTMENTS	0.00	0.00	0.00	4,219.00	4,219.00
3190	ALL OTHER DIFFERENTIAL	11,981.80	738.70	12,720.50	38,194.00	25,473.50
3260	MASS TRANSIT	5,431.55	308.24	5,739.79	8,250.00	2,510.21
3110	CLASS/UNCLASS SALARY & PER DIEM	927,996.19	53,809.09	981,805.28	1,312,557.00	330,751.72
3220	PUBLIC EMPLOYES' RETIREMENT SYSTEM	136,202.16	8,302.22	144,504.38	207,191.00	62,686.62
3170	OVERTIME PAYMENTS	1,185.57	0.00	1,185.57	6,136.00	4,950.43
3230	SOCIAL SECURITY TAX	71,225.10	4,164.34	75,389.44	105,198.00	29,808.56
3221	PENSION BOND CONTRIBUTION	47,920.62	2,877.11	50,797.73	73,260.00	22,462.27
3270	FLEXIBLE BENEFITS	144,637.88	8,516.41	153,154.29	281,472.00	128,317.71
3210	ERB ASSESSMENT	262.08	14.04	276.12	427.00	150.88
3250	WORKERS' COMPENSATION ASSESSMENT	229.81	11.91	241.72	464.00	222.28
3240	UNEMPLOYMENT ASSESSMENT	16.24	0.00	16.24	0.00	-16.24
3180	SHIFT DIFFERENTIAL	8.00	0.00	8.00	0.00	-8.00
		<b>1,347,097.00</b>	<b>78,742.06</b>	<b>1,425,839.06</b>	<b>2,037,368.00</b>	<b>611,528.94</b>

## SERVICES and SUPPLIES

Budget Obj	Budget Obj Title	<u>Prior Month</u>	<u>Current Month</u>	<u>Bien to Date</u>	<u>Financial Plan</u>	<u>Unoblig</u>
4650	OTHER SERVICES AND SUPPLIES	66,765.59	1,922.45	68,688.04	97,999.00	29,310.96
4225	STATE GOVERNMENT SERVICE CHARGES	158,711.11	27.00	158,738.11	161,339.00	2,600.89
4315	IT PROFESSIONAL SERVICES	10,500.00	0.00	10,500.00	140,031.00	129,531.00

Budget Obj	Budget Obj Title	Prior Month	Current Month	Bien to Date	Financial Plan	Unoblig
4100	INSTATE TRAVEL	17,375.81	217.35	17,593.16	50,784.00	33,190.84
4125	OUT-OF-STATE TRAVEL	0.00	0.00	0.00	7,563.00	7,563.00
4175	OFFICE EXPENSES	34,043.21	460.11	34,503.32	91,230.00	56,726.68
4400	DUES AND SUBSCRIPTIONS	9,481.29	0.00	9,481.29	7,126.00	-2,355.29
4300	PROFESSIONAL SERVICES	212,561.00	5,426.38	217,987.38	255,911.00	37,923.62
4200	TELECOMM/TECH SVC AND SUPPLIES	16,690.19	1,115.64	17,805.83	24,925.00	7,119.17
4150	EMPLOYEE TRAINING	18,509.79	0.00	18,509.79	54,223.00	35,713.21
4715	IT EXPENDABLE PROPERTY	11,844.70	0.00	11,844.70	23,482.00	11,637.30
4700	EXPENDABLE PROPERTY \$250-\$5000	0.00	0.00	0.00	5,836.00	5,836.00
4275	PUBLICITY & PUBLICATIONS	3,852.67	0.00	3,852.67	14,855.00	11,002.33
4375	EMPLOYEE RECRUITMENT AND DEVELOPMENT	0.00	0.00	0.00	705.00	705.00
4575	AGENCY PROGRAM RELATED SVCS & SUPP	25,223.59	3,988.00	29,211.59	134,566.00	105,354.41
4250	DATA PROCESSING	57,062.62	2,986.80	60,049.42	68,458.00	8,408.58
4425	FACILITIES RENT & TAXES	124,384.45	7,496.16	131,880.61	179,097.00	47,216.39
4325	ATTORNEY GENERAL LEGAL FEES	168,621.23	4,801.76	173,422.99	271,973.00	98,550.01
4475	FACILITIES MAINTENANCE	0.00	0.00	0.00	583.00	583.00
		<b>935,627.25</b>	<b>28,441.65</b>	<b>964,068.90</b>	<b>1,590,686.00</b>	<b>626,617.10</b>

## CAPITAL OUTLAY

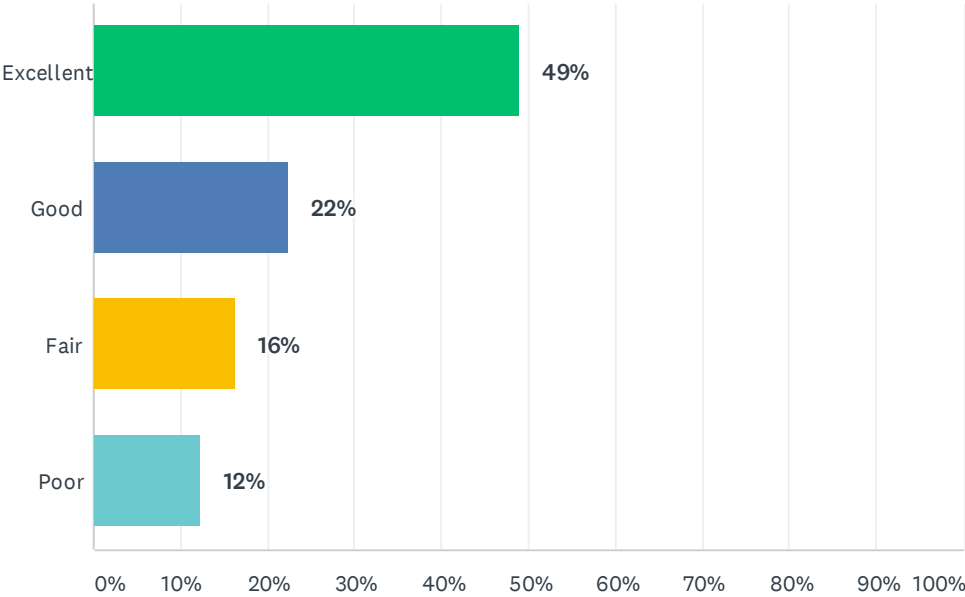
Budget Obj	Budget Obj Title	Prior Month	Current Month	Bien to Date	Financial Plan	Unoblig
5550	DATA PROCESSING SOFTWARE	59,970.00	0.00	59,970.00	0.00	-59,970.00
		<b>59,970.00</b>	<b>0.00</b>	<b>59,970.00</b>	<b>0.00</b>	<b>-59,970.00</b>

		3400		
		Monthly Activity	Biennium Activity	Financial Plan
REVENUES	REVENUE	22,958.7	2,776,851.24	3,570,000.00
	Total	22,958.7	2,776,851.24	3,570,000.00
EXPENDITURES	PERSONAL SERVICES	78,742.06	1,425,839.06	2,037,368.00
	SERVICES AND SUPPLIES	28,441.65	964,068.9	1,590,686.00
	CAPITAL OUTLAY	0	59,970	0.00
	Total	107,183.71	2,449,877.96	3,628,054.00
TRANSFER OUT	TRANSFER OUT	0	108,157	226,800.00
	Total	0	108,157	226,800.00



Q1 How would you rate the timeliness of services provided by the Oregon Board of Dentistry?

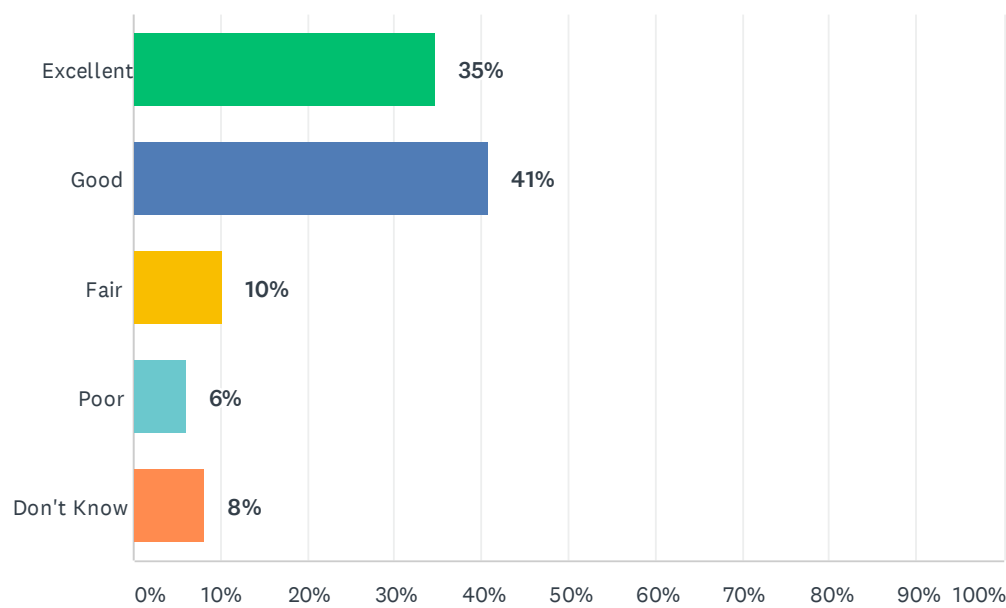
Answered: 49    Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	49%	24
Good	22%	11
Fair	16%	8
Poor	12%	6
TOTAL		49

Q2 How do you rate the ability of the Oregon Board of Dentistry to provide services correctly the first time?

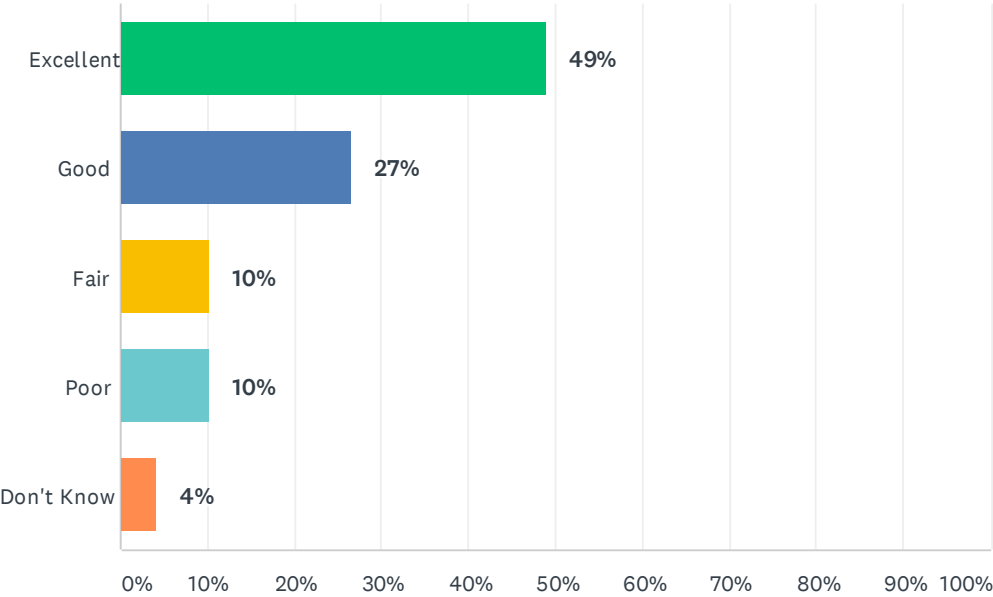
Answered: 49    Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	35%	17
Good	41%	20
Fair	10%	5
Poor	6%	3
Don't Know	8%	4
TOTAL		49

Q3 How do you rate the helpfulness of the Oregon Board of Dentistry employees?

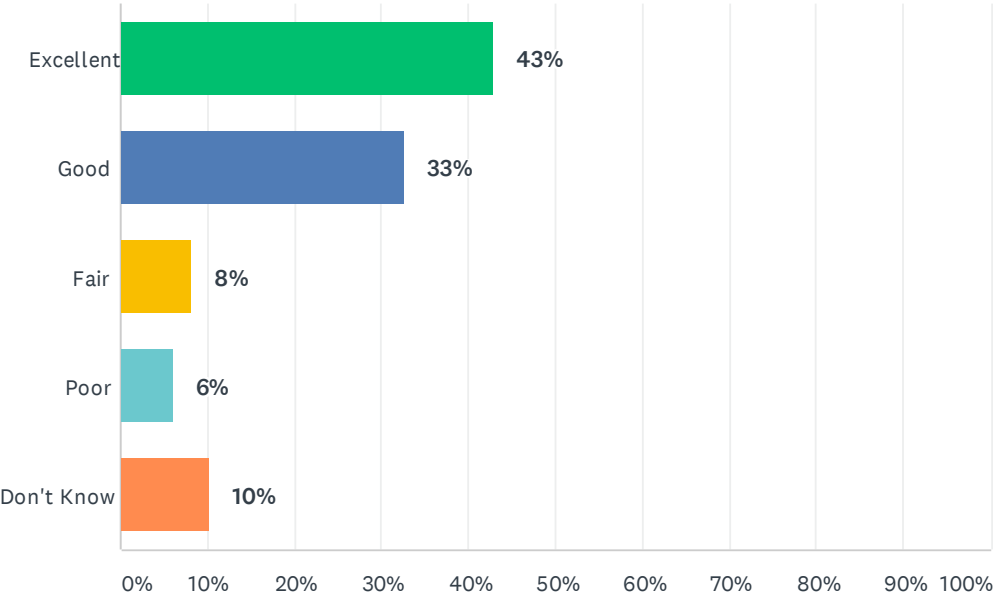
Answered: 49 Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	49%	24
Good	27%	13
Fair	10%	5
Poor	10%	5
Don't Know	4%	2
TOTAL		49

Q4 How do you rate the knowledge and expertise of the Oregon Board of Dentistry employees?

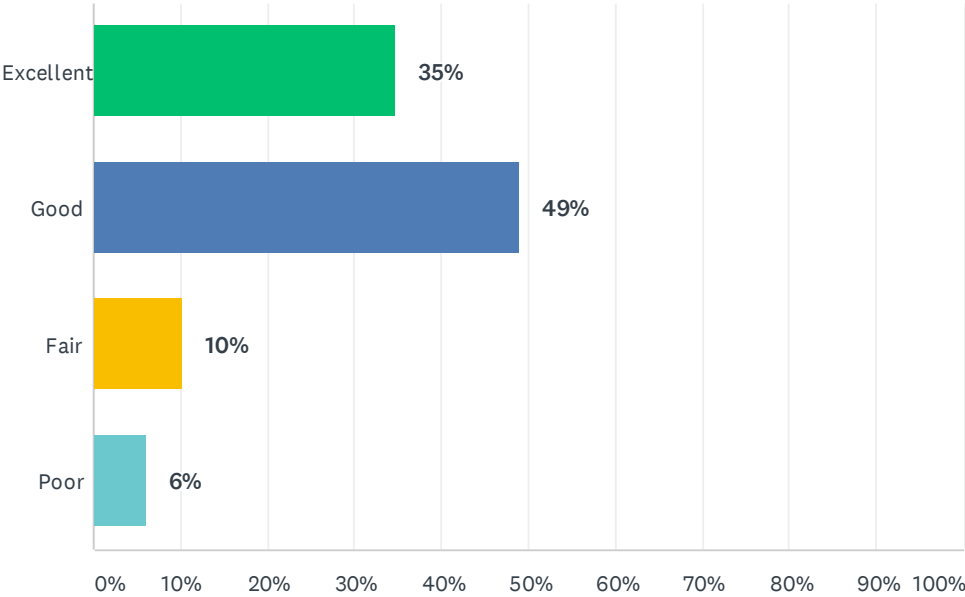
Answered: 49 Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	43%	21
Good	33%	16
Fair	8%	4
Poor	6%	3
Don't Know	10%	5
TOTAL		49

Q5 How do you rate the availability of information at the Oregon Board of Dentistry?

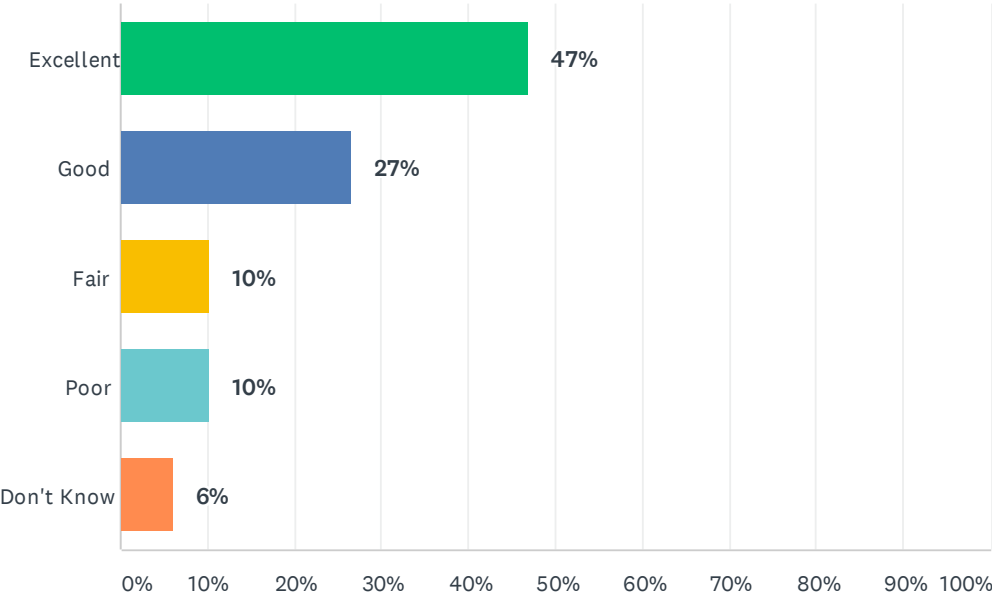
Answered: 49    Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	35%	17
Good	49%	24
Fair	10%	5
Poor	6%	3
TOTAL		49

Q6 How do you rate the overall quality of service provided by the Oregon Board of Dentistry?

Answered: 49    Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	47%	23
Good	27%	13
Fair	10%	5
Poor	10%	5
Don't Know	6%	3
TOTAL		49

Senate Members:

Sen. Lew Frederick, Co-Chair  
Sen. Michael Dembrow  
Sen. Chuck Thomsen

Staff:

Doug Wilson, Committee Coordinator  
Joan Green, Committee Assistant



House Members:

Rep. Susan McLain, Co-Chair  
Rep. Teresa Alonso Leon  
Rep. Bobby Levy  
Rep. E. Werner Reschke  
Rep. Ricki Ruiz

**JOINT COMMITTEE ON  
WAYS AND MEANS  
SUBCOMMITTEE ON  
EDUCATION**

**Oregon State Capitol  
900 Court Street NE, Room H-178, Salem, Oregon 97301  
Phone: 503-986-1828**

**AGENDA**

**Revision 1 Posted: JAN 29 12:25 PM**

**WEDNESDAY**

**Date: February 3, 2021**

**Time: 1:00 P.M.**

**Room: Remote E**

**Public Hearing**

SB 5511

Board of Dentistry - Invited Testimony and Public Testimony (ADDED public testimony)

SB 5523

Mental Health Regulatory Agency (Board of Licensed Professional Counselors and Therapists;  
Board of Psychology) - Invited Testimony and Public Testimony (ADDED public testimony)

PLEASE NOTE

- The Capitol Building is currently closed to the public and meetings are taking place remotely
- A viewing station is available outside of the Capitol Building
- This meeting will be held online and streamed live at the following website:

**<https://olis.oregonlegislature.gov/liz/2021R1/Committees/JWMED/Overview>**

PUBLIC TESTIMONY OPTIONS

**Written Testimony**

Testimony will be accepted up to 24 hours after the start time of the meeting in which the public hearing is held. Testimony is uploaded to OLIS as part of the legislative record and made publicly available.

To submit testimony electronically, go to:

<https://olis.oregonlegislature.gov/liz/2021R1/Testimony/JWMED>

To submit testimony by mail, send to: Ways and Means Education Subcommittee, 900 State Street NE, Room H-178, Salem OR 97301

**Oral Testimony (Live Remotely)**

For ADA accommodation requests, please email [employee.services@oregonlegislature.gov](mailto:employee.services@oregonlegislature.gov) or call 1-800-332-2313.

**AGENDA (cont.)**  
**February 3, 2021**

Registration is required to testify by phone or video link. Registration closes at the time the meeting is scheduled to begin.

To register electronically, go to:

[https://survey.sjc1.qualtrics.com/jfe/form/SV\\_3rCmGkfl9lofW3Y](https://survey.sjc1.qualtrics.com/jfe/form/SV_3rCmGkfl9lofW3Y)

To register by phone, call: 1-833-698-1371

To register in person at the time of the meeting, go to: Public Access Kiosk located outside of the State Capitol Building.

*Neither registration nor use of the public access kiosk is a guarantee that you will be able to testify during the meeting. For this reason, written testimony is encouraged even if you plan to speak.*



# Senate Bill 5511

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Oregon Department of Administrative Services)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, but excluding lottery funds and federal funds, collected or received by Oregon Board of Dentistry.

Declares emergency, effective July 1, 2021.

## A BILL FOR AN ACT

Relating to the financial administration of the Oregon Board of Dentistry; and declaring an emergency.

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

**SECTION 1. Notwithstanding any other law limiting expenditures, the amount of \$3,658,308 is established for the biennium beginning July 1, 2021, as the maximum limit for payment of expenses from fees, moneys or other revenues, including Miscellaneous Receipts, but excluding lottery funds and federal funds, collected or received by the Oregon Board of Dentistry.**

**SECTION 2. This 2021 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2021 Act takes effect July 1, 2021.**

**Note: For budget, see 2021-2023 Biennial Budget**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

# OREGON BOARD OF DENTISTRY

## 2021 - 2023 BUDGET PRESENTATION

Joint Ways and Means Subcommittee on Education

February 3, 2021

Presented by:  
Stephen Prisby, Executive Director

**OREGON BOARD OF DENTISTRY  
2021-2023 Budget Presentation**

**Joint Way and Means Subcommittee on Education**

**AGENCY OVERVIEW**

The Board of Dentistry was established by the Legislature in 1887 to regulate the practice of Dentistry. It is the oldest health licensing board in Oregon. In 1946, Dental Hygiene was established as a licensed profession in Oregon and added to the purview of the Board.

There are ten members appointed to this policymaking Board and eight permanent full-time staff. The ten Board Members include six dentists, one of whom must be a specialist, two dental hygienists and two public members. Members of the Board are appointed by the Governor and confirmed by the Senate.

The Board's Mission is to promote high quality oral health care in the State of Oregon by equitably regulating dental professionals. The Board's identified goals are to protect the public from unsafe, incompetent or fraudulent practitioners; encourage licensees to practice safely and competently in the best interests of their patients; and educate the public on acceptable and appropriate dental practices. The Board's highest priorities are the enforcement, monitoring, licensing and examination of Dentists and Dental Hygienists in Oregon.

The Board is supported solely from application and license renewal fees, permit fees, miscellaneous receipts, penalty fees for late renewals and civil penalties, 95% of this revenue is from licensee and permit fees.

## Board Roster

Name	Location	Term ends
Yadira Martinez, RDH - President	Hillsboro	4/1/2022
Alicia Riedman, RDH - Vice President	Eugene	4/30/2021
Gary Underhill, DMD	Enterprise	4/1/2022
Amy B. Fine, DMD	Medford	4/1/2022
Reza Sharifi, DMD	Portland	4/1/2023
Charles "Chip" Dunn	Happy Valley	4/2/2021
Hai Pham, DMD	Hillsboro	4/2/2021
Jose Javier, DDS	Portland	4/1/2024
Jennifer Brixey	Portland	4/6/2024
Vacant Dentist Position		

**The Board for the first time in its history, has both Dental Hygiene Members serving as our officers at the same time: President Yadira Martinez, RDH and Vice President Alicia Riedman, RDH.**

## BOARD MEMBERS



Yadira Martinez,  
R.D.H.  
President  
Hillsboro  
Second term expires 2022



Alicia Riedman, R.D.H.  
Vice President  
Eugene  
Second term expires  
2021



Jennifer Brixey  
Portland  
Second term expires 2024



Jose Javier, D.D.S.  
Portland  
Second term expires 2024



Gary Underhill, D.M.D.  
Enterprise  
Second term expires 2022



Reza Sharifi, D.M.D.  
Portland  
First term expires 2023



Charles "Chip" Dunn  
Happy Valley  
First term expires 2021



Hai Pham, D.M.D.  
Hillsboro  
First term expires 2021



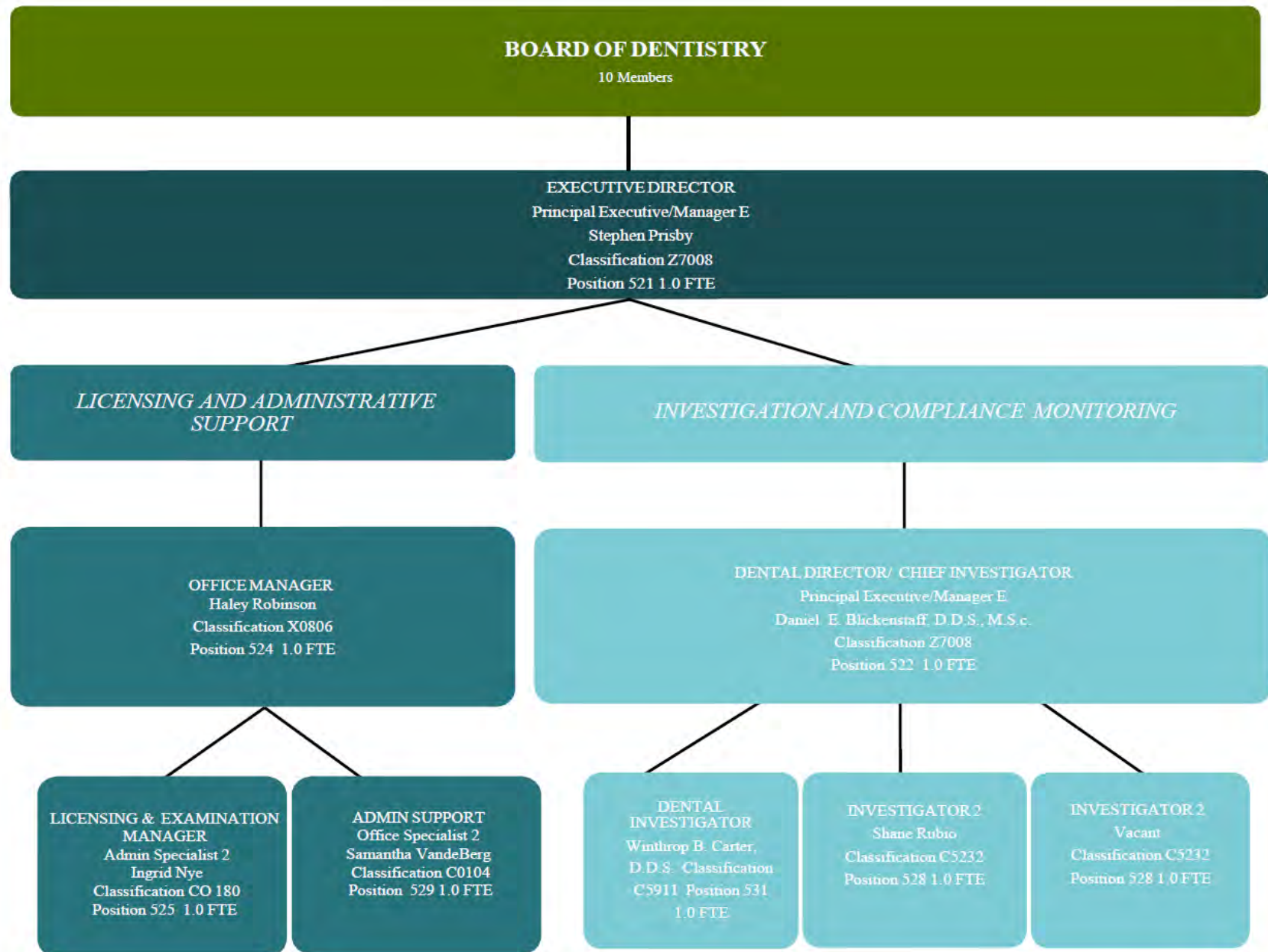
Amy B. Fine, D.M.D.  
Medford  
Second term expires 2022

## **AGENCY PERFORMANCE OVERVIEW**

### **OREGON BOARD OF DENTISTRY ANNUAL PERFORMANCE PROGRESS REPORT 2020**

<b>Key Performance Measure</b>	<b>FY 2020 Goal</b>	<b>Actual for FY 2020</b>
<b>#1 Percent of licensees in compliance with continuing education requirements</b>	<b>100%</b>	<b>100%</b>
<b>#2 Average time from receipt of a new complaint to completed investigation (ready to be submitted to the Board)</b>	<b>7.5 months</b>	<b>8 months</b>
<b>#3 Average Number of working days for the receipt of completed paperwork to issuance of license (new or renewal)</b>	<b>7 Days</b>	<b>7 Days</b>
<b>#4 Agency Overall Satisfaction – Percent of customers rating their overall satisfaction with the agency above average or excellent.</b>	<b>90% Positive Response</b>	<b>78% Positive Response</b>
<b>#5 Board Best Practices – Percent of total of best practices met by Board.</b>	<b>100%</b>	<b>100%</b>

*The complete FY 2020 Annual Performance Progress Report is at the end of this document.*



**PROGRAM PRIORITIES** The Board has 3 broad areas of focus and priorities:

- Licensing and Examination
  - Enforcement and Discipline
  - Administration
- 
- Licensing and Examination

The Board licenses dentists and dental hygienists, conducts examination for different specialties, establishes standards for the use of anesthesia in dental offices, issues four levels of anesthesia permits, and certifies dental assistants. Background checks are conducted on all new applicants. All applicants must pass a written national examination; a clinical examination conducted by a dental testing agency recognized by the Board, and pass the Board's Jurisprudence examination. We audit 15% of all licensees renewing their licenses each year for compliance with the Board's Continuing Education requirements.

As of January 1, 2021 there are 3863 licensed dentists and 4300 licensed dental hygienists. We anticipate issuing about 800 new licenses in the 2021-2023 biennium almost equally divided between dentists and dental hygienists. During the 2017 – 2019 biennium, 746 new licenses were issued. We anticipate that the total number of Licensees will remain fairly flat over the next two to six years. Demographics point to a steady flow of retirements and licenses lapse for any number of reasons along with practitioners moving out of state. Each year approximately 325 - 375 licensees choose to stop practicing in Oregon. Oregon's net inflow population migration has also slowed and is projected to stabilize in the near future.

The Board recognizes licensure through examination; by credential: and for dental specialists, the ability to be examined by Board recognized testing agencies in a particular specialty and then the license is limited to that special area of expertise; i.e., Oral and Maxillofacial Surgery, or Pediatric Dentistry. Applicants for a general dental license or a dental hygiene license must pass a written examination, called the "National Boards," which is conducted by the American Dental Association's Commission on Dental Education. Applicants must also pass a clinical examination conducted by any state or regional testing agency as described in statute.



**The table shows the historical and projected workload for the agency in this activity.**

Licensing and Examination Workload	2009-11 Actual	2011-13 Actual	2013-15 Actual	2015-17 Actual	2017-19 Actual	2019-21 Est	2021-23 Est	2023-25 Est
Licenses Issued:								
Dental	305	340	397	402	381	390	380	400
Dental Hygiene	434	450	518	447	365	380	420	420
Total New Licenses Issued:	739	790	915	849	746	770	800	820
Licenses Renewed:								
Dental	3389	3400	3431	3482	3594	3600	3600	3700
Dental Hygiene	3613	3700	3715	3633	3985	4000	4200	4200
Total Licenses Renewed:	7002	7100	7146	7354	7579	7600	7800	7900
Specialty Examinations Conducted	3	3	4	3	0	0	0	0
Candidates Examined	5	3	4	3	0	0	0	0
Anesthesia Permits Issued/Renewed	4359	4400	4783	5092	4931	5000	5000	5000
Dental Assistants Certified	2638	2650	2263	1873	1903	1900	1900	1900
Dental Assisting Instructor Permits Issued/Renewed	110	125	131	143	193	200	200	200
Limited Access/Expanded Practice Dental Hygiene Permits Issued/Renewed	171	300	534	676	731	725	725	725

- **Enforcement and Monitoring**

The Board conducts investigations of complaints filed with the Board alleging unacceptable patient care or other issues ranging from unprofessional conduct, improper prescribing practices, substance abuse, unauthorized use of auxiliaries, advertising or disciplinary action in another state. The majority of cases involve allegations of unacceptable patient care. Investigations are also conducted based on reports of malpractice claims that are submitted by insurance companies. Disciplinary actions are reported to the National Practitioners Data Bank and to the Healthcare Integrity and Protection Data Bank. Licensees under disciplinary sanction are actively monitored to assure their compliance with the terms of their Order including licensees with substance abuse issues who have long-term treatment and recovery needs.

- **Complaints - Some Common Issues**

- Communication break down
- Implant Complications
- Anesthesia Complications
- Sterilizer Monitoring deficiencies
- Continuing Education deficiencies
- Dentists complaining about each other
- Documentation Errors/None
- Radiographs/Records not being released to patient/other providers
- Failure to respond to the Board within 10 days (ORS 679.170 )

- **The Processing of Complaints**

Receipt of complaint. Opening up case and assigning investigator.

Letter from the OBD to Licensee requesting:

- Original chart (including patient ledger)
- Narrative describing care provided
- Digital copy of films if appropriate
- Continuing Education records
- Amalgam separator records
- Sterilizer monitoring records
- Proof of current BLS Healthcare certificate
- Proof of Prescription Drug Monitoring Program (PDMP) registration if they have a DEA Registration

## **Health Professionals' Services Program (HPSP)**

The Board has a legislatively mandated non-disciplinary, confidential diversion program to help licensees with diagnosed substance abuse disorders and mental health challenges. This confidential Diversion Program is for our licensees to get help to practice safely and be diverted from the public scrutiny of discipline. There is a minimum of 5 years monitoring, they must remain in compliance & meet requirements of the program. The Board gets updates from the staff diversion coordinator on progress, and informed if action needed. The Medical Board, Nursing Board and Pharmacy Board also participate in the HPSP.

## **Discipline & Monitoring**

Regarding Licensees that have been disciplined and are required to fulfill some Board requirement. There are usually about 60 - 70 Licensees being monitored on a regular basis. During fiscal year 2020 the Board opened 216 complaints and closed 286 case investigations. Disposition of those cases are shown in the table below.

Dismissed	166
Letter of Concern	88
Disciplinary Actions	47
Total	301
These 286 cases involved 301 Licensees	

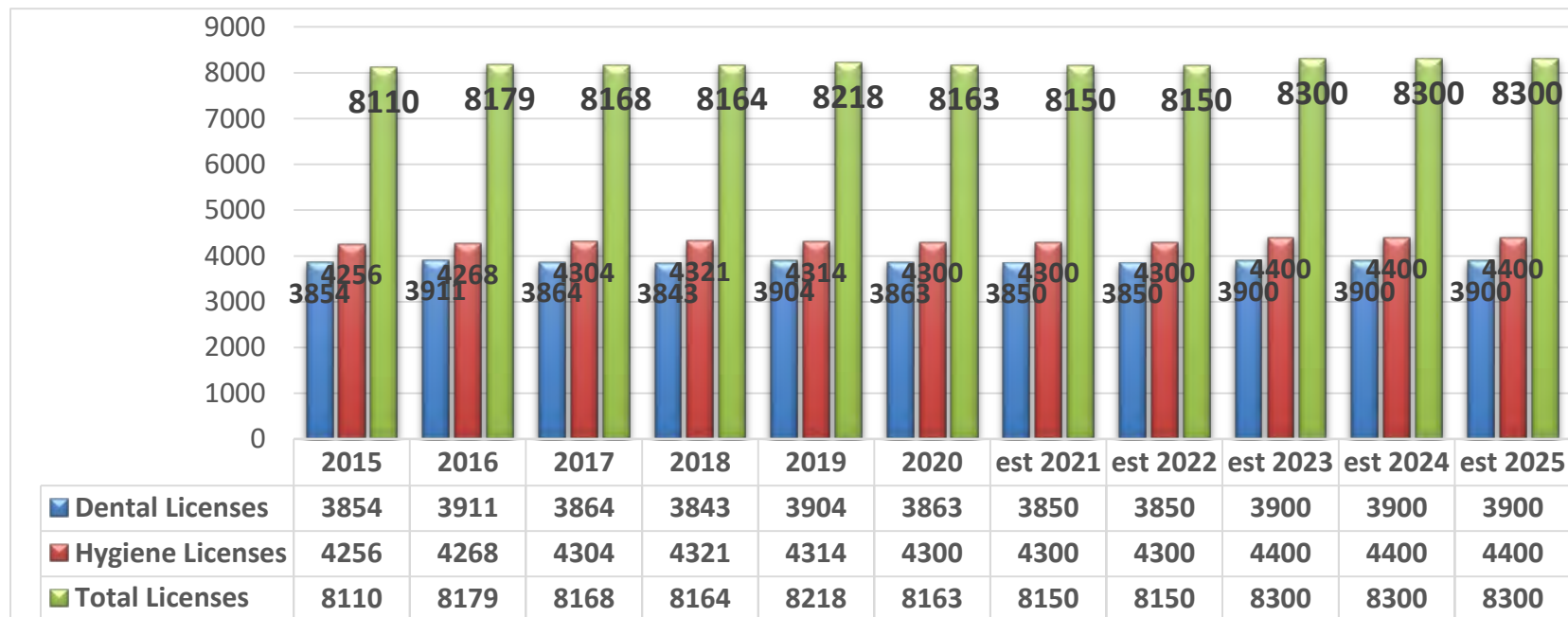
Board Actions	2016	2017	2018	2019	2020
No Violation	50	56	52	59	56
No Further Action	38	58	62	104	94
Letter of Concern	76	77	67	79	88
Discipline	60	57	89	99	47
Total	224	248	270	341	301

(There is typically more than one type of discipline incorporated in a disciplinary action; i.e. reprimand, civil penalty or pass the OBD's Jurisprudence Exam are typical standards for many disciplinary matters. The Board has detailed protocols for reoccurring offenses to educate Licensees and guide the Board on making equitable decisions.)

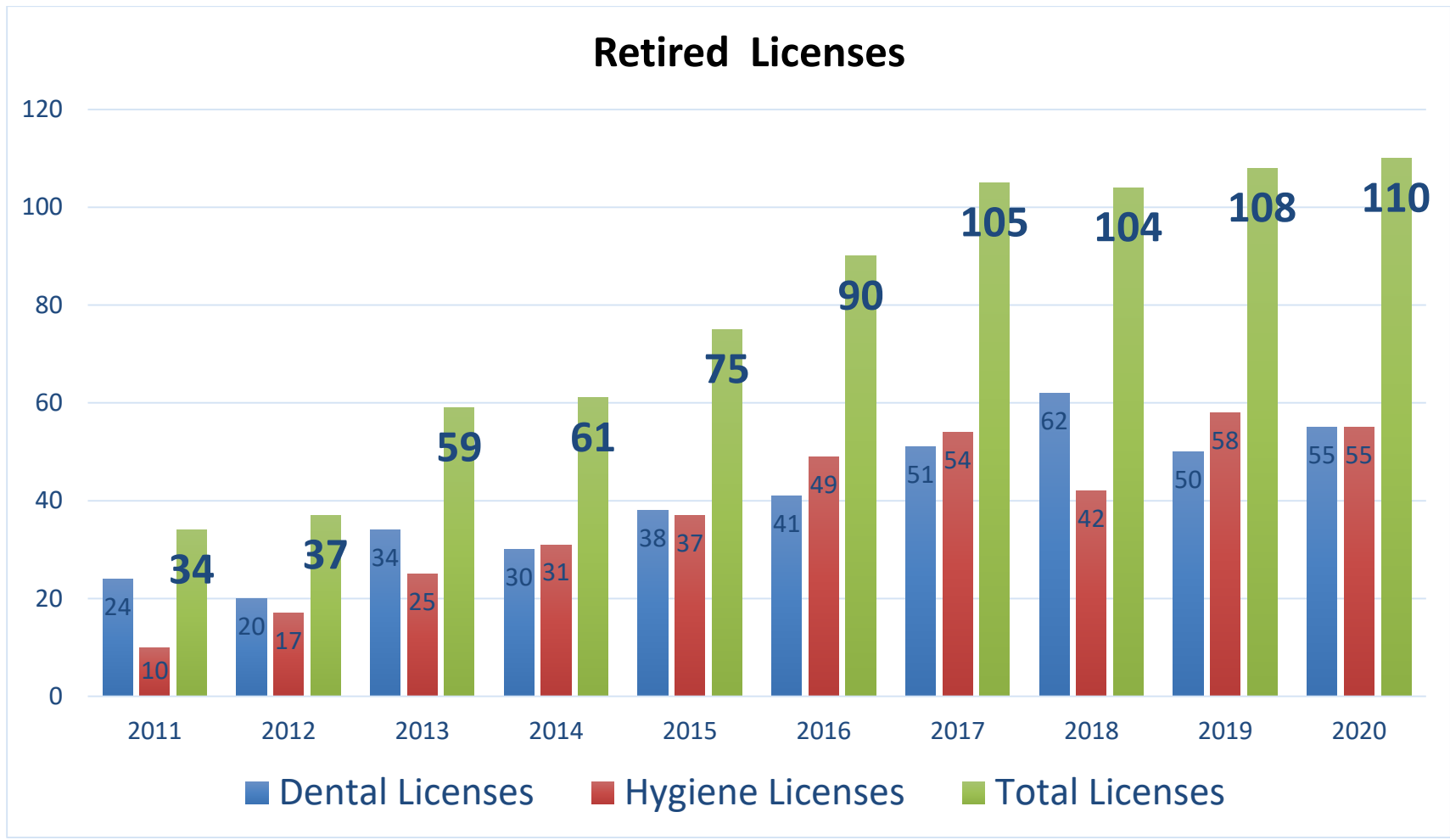
- **Administration**

Administrative activities include implementation of Board policy, communication and collaboration with the professional associations, the School of Dentistry, dental hygiene schools, related licensing agencies such as the Board of Pharmacy, the Board of Medicine and the Board of Denture Technology in addition to State Boards of Dentistry in other states. Administration also includes legislative activities, budget development and monitoring, and staffing. A major component of Administration is carrying out the Board's primary goal of communicating with licensees and the public. This includes maintenance of a robust and updated web site, production of two newsletters per year, and scheduling and presenting information to students, licensees and the public about the Board and its activities. The Board also convenes standing OBD Committees to undertake rulesmaking efforts and the Executive Director is also the Rules Coordinator. As a state agency the OBD also has to adhere to DAS and Governor Directives for policies, training and executive orders. These actions and efforts add up and increase workload every year.

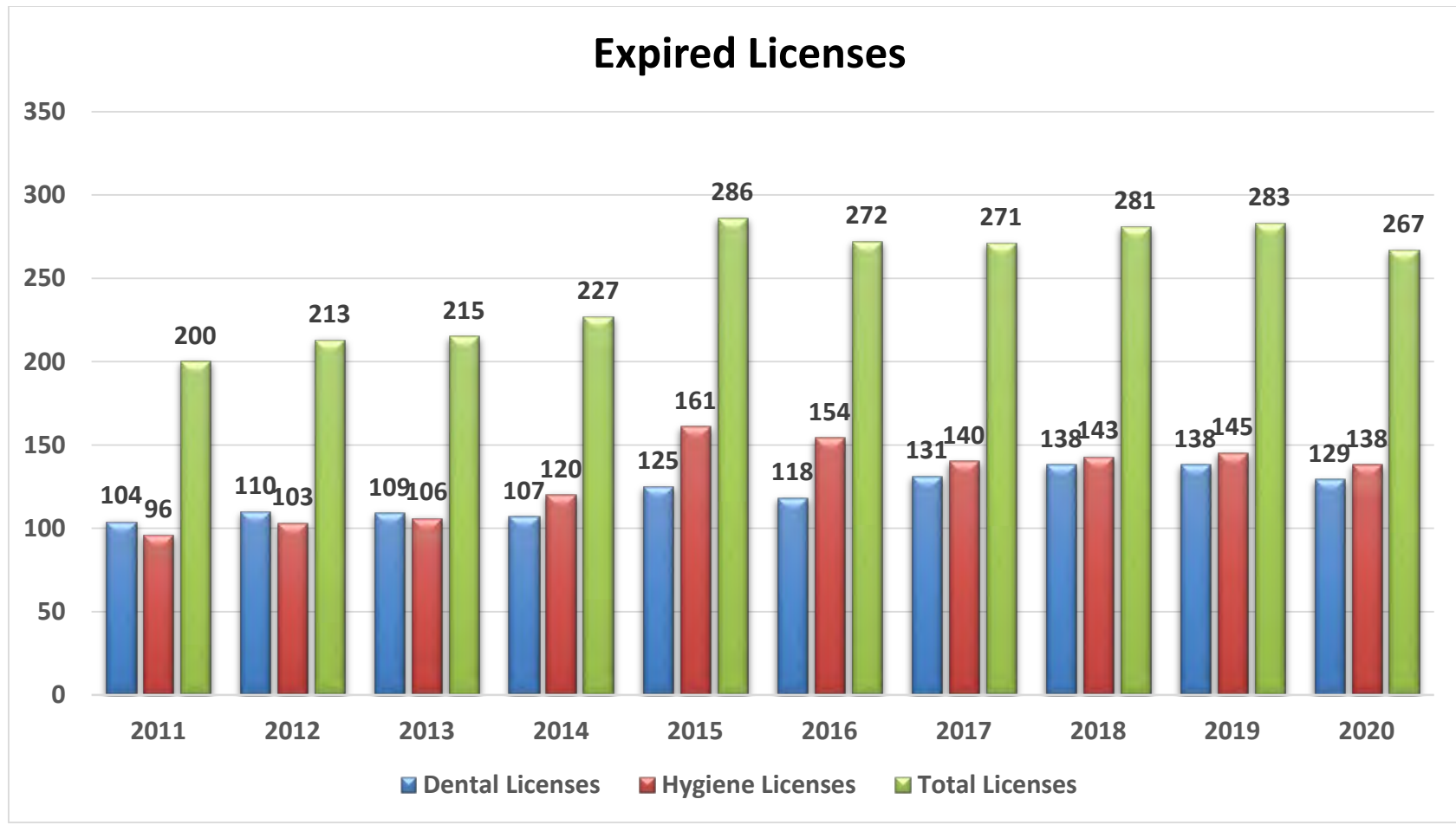
**Total Licensees has remained flat for the last 6 years and we estimate that trend to continue through 2025.**



Licensees may choose to retire their licenses, which usually means they are done practicing.

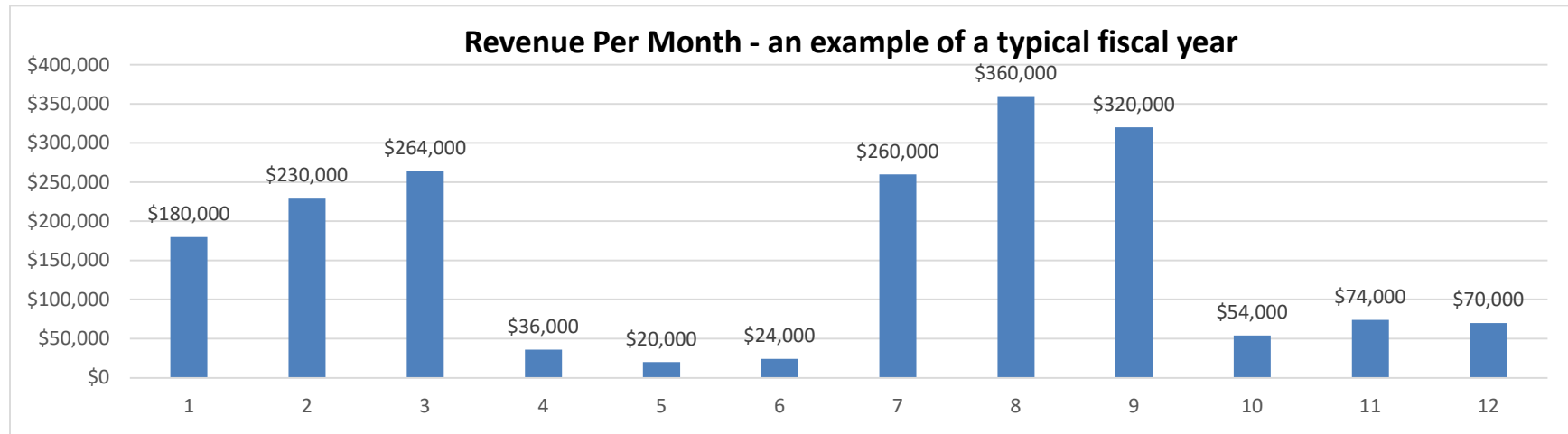


Licensees may choose to let their license expire, which usually means they are done practicing here in Oregon, but continue to hold a license in another state or jurisdiction and plan to continue practicing outside of Oregon.



## **Revenue & Financial Overview**

Revenue stream is uneven during a biennium, with a 2 –year licensing period. Each year one-half of our dentists renew their licenses by March 31<sup>st</sup> and one-half of our dental hygienists renew by September 30<sup>th</sup>. These renewal dates are set in statute.



The Board anticipates ending the current 2019-2021 Biennium with approximately \$1,565,000. This is higher than projected ending balance in LAB of \$757,940.

Current projections of 2019-2021 ending balance is higher than 2019-2021 LAB due to the 2017-2019 ending balance being higher than what had been anticipated. We attribute the extra surplus also due to vacancy savings and reduced expenses in areas of: Travel, Attorney General support, board meeting per diems, physical meetings costs and hearings costs. The projected revenue is now forecast to be slightly below what was anticipated in the 2019-2021 LAB due to a small reduction in new license applications. Some of the revenue will also not be recognized because it is civil penalty revenue that will be written off or not collected. The 2019-2021 revised projected ending balance of \$1,565,000 represents a reserve of approximately 9 months operating expenses for 2021-2023.

## **ESSENTIAL PACKAGES**

Essential Packages make budget adjustments that are part of our Current Service Level Budget and are automatically built into the 2021 – 2023 Budget.

### **ONE POLICY OPTION PACKAGE:**

#### **Package 100 – OBD Database and Data Processing System**

- **Estimated Cost - \$85,416**
- **Ongoing per Biennium**
- The OBD is transitioning to a new IT provider, which will entail migrating over to ETS for email and server support and find a new vendor to transition our current database to a new system. The work is being implemented now and will continue on into the 2021-2023 Biennium. Due to heightened and more robust State CIO IT requirements, these costs will help be covered by this policy package as well. Additional costs include paying for new servers and migrating all the servers and other IT support under the state data center's security net.
- **How Achieved:** The Oregon Board of Dentistry will work with the state procurement, CIOS's Office and other affected boards.
- **Staffing Impact:** Current staff will be impacted with implementation, based on experiences other boards shared with the OBD.
- **Services and Supplies:** Vendors and equipment bought through approved state contracts and follow appropriate purchasing policies.
- **Revenue Source:** The Board of Dentistry's funding is 100% Other Funds generated primarily from fees paid by licensees and applicants for licenses and permits



## **AGENCY ACCOMPLISHMENTS DURING 2019-2021**

- The Board remained opened and fully functional during social unrest, pandemic and wildfires at its downtown Portland Office.
- Vaccine administration rules, cultural competency continuing education rules and 30 other rules changes effective January 1, 2020.
- Multiple IT Projects ongoing – realign servers and resources under the safe umbrella of the state data center & implement new database and on line system for all transactions – new applications and license renewals.
- The 2017-2020 Strategic Plan had five Strategic Priorities:
  - 1. Ensure Patient Safety- focus on dental implants and safe anesthesia practices
  - 2. Plan for Attrition (retirements of staff)
  - 3. Manage Case Complexity
  - 4. Manage Change in Dentistry Practice
  - 5. Retain OBD Autonomy
- All areas of the plan were addressed.
- Between 2017 & 2019 the Agency had four valued employees with over 20 years of service retire from the OBD.
- Now the OBD is planning for the next strategic plan beginning with a survey recently sent to licensees & stakeholders to gather initial information needed to inform the Board on important areas to focus on.
- Executive Director elected as President-Elect to the American Association of Dental Administrators, a national group of state dental board executive directors.
- Investigative Case backlog reduced so that at the time of this report every complaint is in some step of the investigative process. No complaints are sitting cold waiting for action.
- Processed dental and dental hygiene applications, no significant delays due to OBD Staff absences.
- Board Members continue to participate in national dental organizations like the American Association of Dental Boards and other national organizations to stay current and up to date on national oral health issues and trends.
- Utilized the Board Website, OBD Newsletter, ODA, ODHA, email blasts and other appropriate communication tools to continue to inform Licensees of relevant OBD news, rules and updates from the Board.
- Reduced requirements for accepting transcripts electronically for licensure (in some cases).
- Telehealth (Teledentistry) statute clarified, options available for optimal and lawful practice
- The Board allowed collection of samples (whether oral or nasal) for testing for COVID-19.
- Regular communication with Oregon Dental Association, Oregon Dental Hygiene Association and other stakeholders.
- The OHA works with our Board and 16 other state health regulatory boards to collect workforce demographic data every year– the most recent report has been submitted as supplemental materials to inform you more on this.

## **OBD Covid-19 Actions and Response**

The Board has remained open throughout the pandemic. The Board did restrict physical access to the office but the phone calls and emails were responded to promptly. On March 24, 2020, the Executive Director designated all OBD Staff as “Essential Personnel”, per state policy 60.015.01 Temporary Interruption of Employment and the Novel Coronavirus (COVID-19) Letter of Agreement (LOA), signed 3/13/20. “Essential Personnel” are individuals assigned by the agency as essential to operations during curtailment or closure. OBD Staff are fortunate to have separate offices, maintain social distancing and take other OSHA prescribed safety precautions during this pandemic. All regularly scheduled Board Meetings occurred and there was minimal disruption to Board work, although it was not ideal to have virtual meetings.

The OBD Website was regularly updated with links to the Governor and OHA’s Covid-19 Resource pages. The OBD also endorsed all dental professionals signing up with the State Emergency Registry of Volunteers in Oregon (SERV-OR). Eblasts are going out on relevant topics and reminders to Licensees to comply with all Executive Orders and Oregon OSHA requirements as well.

### **Executive Order 20-10**

The Executive Order required that dentists, along with other health care providers, cease all elective and non-urgent procedures, immediately and no later than March 23, 2020, through June 15, 2020. Procedures were exempt if a three-month delay in the procedure or surgery would put the patient at risk of irreversible harm. The order also required that dentists, along with other health care providers, identify any surplus Personal Protective Equipment (PPE) to the state by March 27<sup>th</sup>, and arrange for delivery of supplies.

Some efforts undertaken throughout the pandemic included:

- A COVID-19 FAQ document was sent out & updated in an email blast and is posted on Hot Topics page.
- Executive Order 20-10 severely limited dental practices from operating statewide and staff were available to handle questions and assist as best as possible.
- Board Meeting April 24 considered multiple issues including: waiving rules, extending deadlines for CE requirements and recognition of new clinical testing options.
- The Board granted a waiver on completing certain types of certifications until October 30, 2020. Licensees were able to complete certifications and continuing education requirements all online.
- Continue and ongoing work in office, not teleworking to ensure all documents, communication maintains confidentiality per statute and the work gets done.

- Provided alternative suggestions for continuing education requirements to be met online.
- Referred Licensees to SERV-OR and other agencies to serve as a resource for COVID-19 efforts.
- Facilitated PPE donations when the PPE coordinator could not be accessed.
- Communicated with other states and licensing Boards regarding licensure requirements and clinical examination options.
- Continued to promote and encourage participation in the volunteer Dentist/Dental Hygienist program to increase access to quality dental care and assist those that wanted to help with the vaccination efforts.
- Utilized the website and published two newsletters to communicate Board policies and expectations.

### **AGENCY GOALS FOR 2021-2023:**

- Develop & Implement next Strategic Plan.
- Continue to promote and encourage participation in the Statewide HPSP diversion program for licensees with substance abuse addictions.
- Continue to promote and encourage participation in the volunteer Dentist/Dental Hygienist program to increase access to quality dental care.
- Advance the next strategic plan- overcome pandemic limitations on stakeholder engagement and meeting limitations.
- Retain employees & utilize DAS required trainings and identify professional development opportunities.
- Dental Therapy Legislation would create a new Licensee for the Board to promulgate new rules and regulate.
- Incorporate Racial Justice Policies, Legislation and Governor's Executive actions into meaningful and positive change for Oregonians and our Licensees.
- Continue to educate consumers on their options regarding the complaint process, and alternative means of resolving their issues.
- Continue to promote the Oregon Prescription Drug Monitoring Program to all licensees.
- Utilize the website, newsletter and personal presentations to communicate Board policies and expectations.
- Implement all REALD Information gathering requirements and collect data on the ethnic and racial makeup of licensees and work with policy makers, educators, and students to encourage a representative diversity in the dental workforce.
- Continue the implementation of more electronic media for communication and Board functions.

### **AGENCY CHALLENGES FOR 2021 – 2023**

- Continue appropriate response and support during the pandemic.
- Develop and Implement new strategic plan initiatives.
- Onboard new Board members & staff as fast as possible so they are contributing effectively to fulfilling our mission.
- Pivot and shift appropriately to new legislation and Governor's priorities.

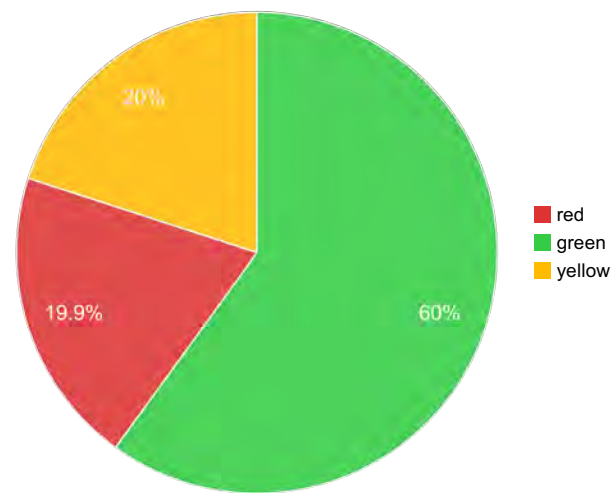
# Dentistry, Board of

Annual Performance Progress Report

Reporting Year 2020

Published: 9/28/2020 8:18:04 AM

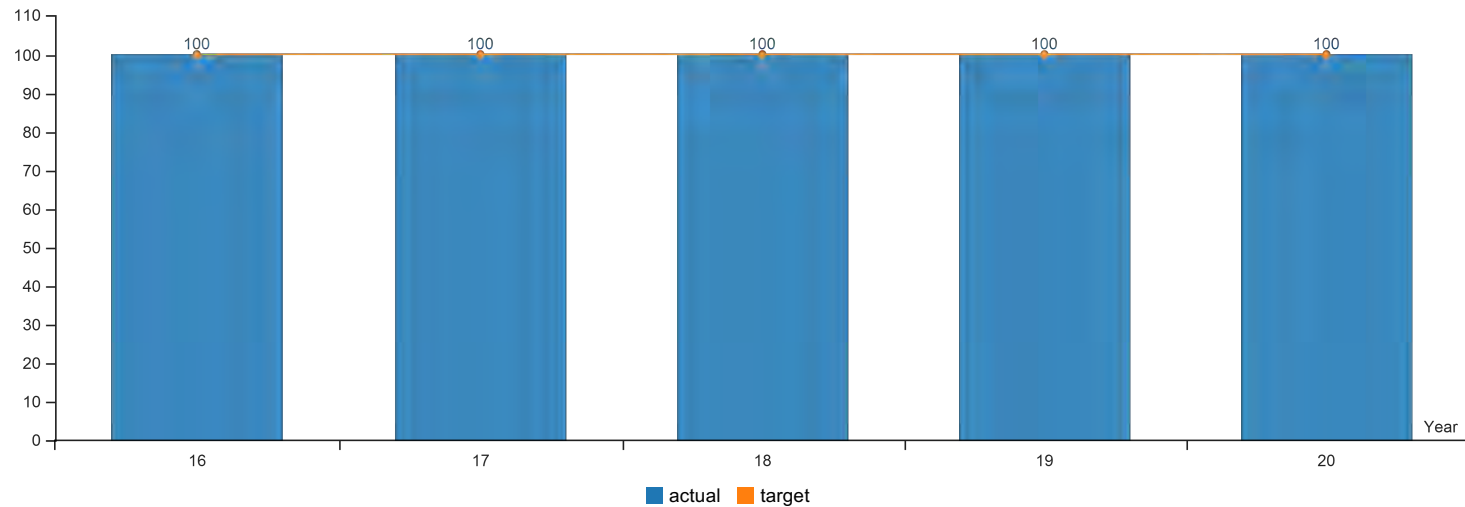
KPM #	Approved Key Performance Measures (KPMs)
1	Continuing Education Compliance - Percent of Licensees in compliance with continuing education requirements.
2	Time to Investigate Complaints - Average months from receipt of new complaints to completed investigation.
3	Days to Complete License Paperwork - Average number of working days from receipt of completed paperwork to issuance of license.
4	CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall, timeliness, accuracy, helpfulness, expertise, availability of information.
5	Board Best Practices - Percent of total best practices met by the Board.



Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	60%	20%	20%

KPM #1	Continuing Education Compliance - Percent of Licensees in compliance with continuing education requirements.
	Data Collection Period: Jul 01 - Jun 30

\* Upward Trend = positive result



Report Year	2016	2017	2018	2019	2020
<b>Percent of Licensees in Compliance with Continuing Education Requirements</b>					
Actual	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%

#### How Are We Doing

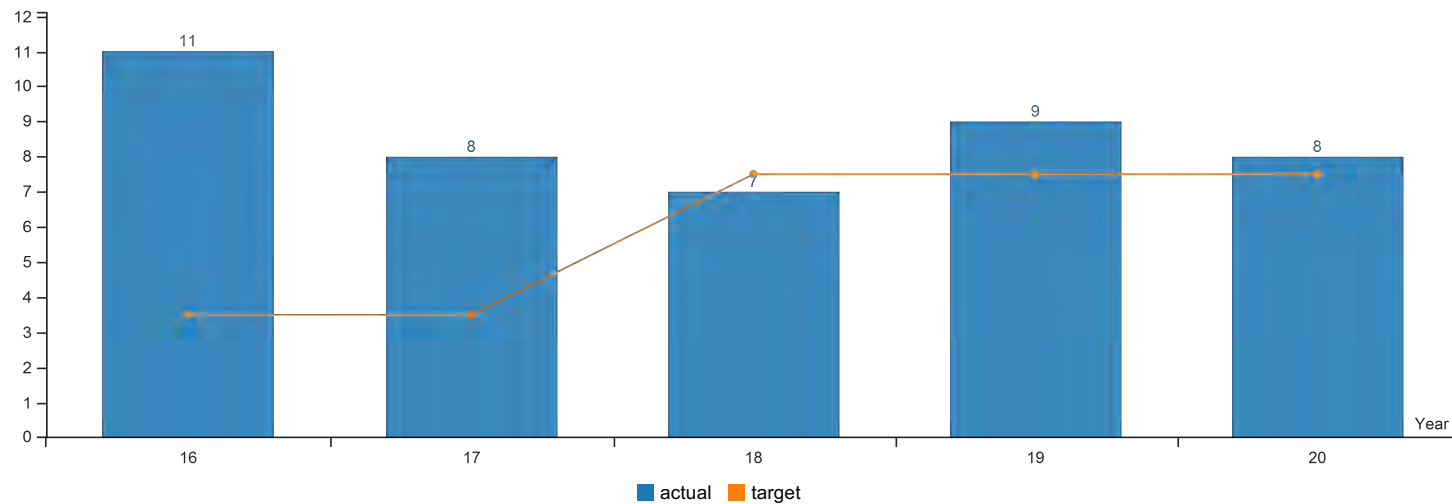
For FY 2020 we accomplished this goal by requiring our Licensees to complete continuing education requirements. We monitor their compliance with questions on their license renewal forms and with audits. Staff follows up with Licensees as needed to ensure all requirements are met.

#### Factors Affecting Results

Experienced staff work with our Licensees to communicate effectively regarding the continuing education requirements.

KPM #2	Time to Investigate Complaints - Average months from receipt of new complaints to completed investigation.
	Data Collection Period: Jul 01 - Jun 30

\* Upward Trend = negative result



Report Year	2016	2017	2018	2019	2020
<b>Average time to Investigate Complaints</b>					
Actual	11	8	7	9	8
Target	3.50	3.50	7.50	7.50	7.50

#### How Are We Doing

For FY 2020 the investigators worked hard to close a number of pending cases that dragged on due to them being part of or considered for the Health Professionals' Services Program. Other cases were finally resolved that were delayed for legal due process and complicated cases involving multiple licensees and voluminous records.

Investigations always take time for a number of reasons: the number of treatment providers involved, the complexity of the case, the timely responses of those involved in the matter and the cooperation of the parties as well.

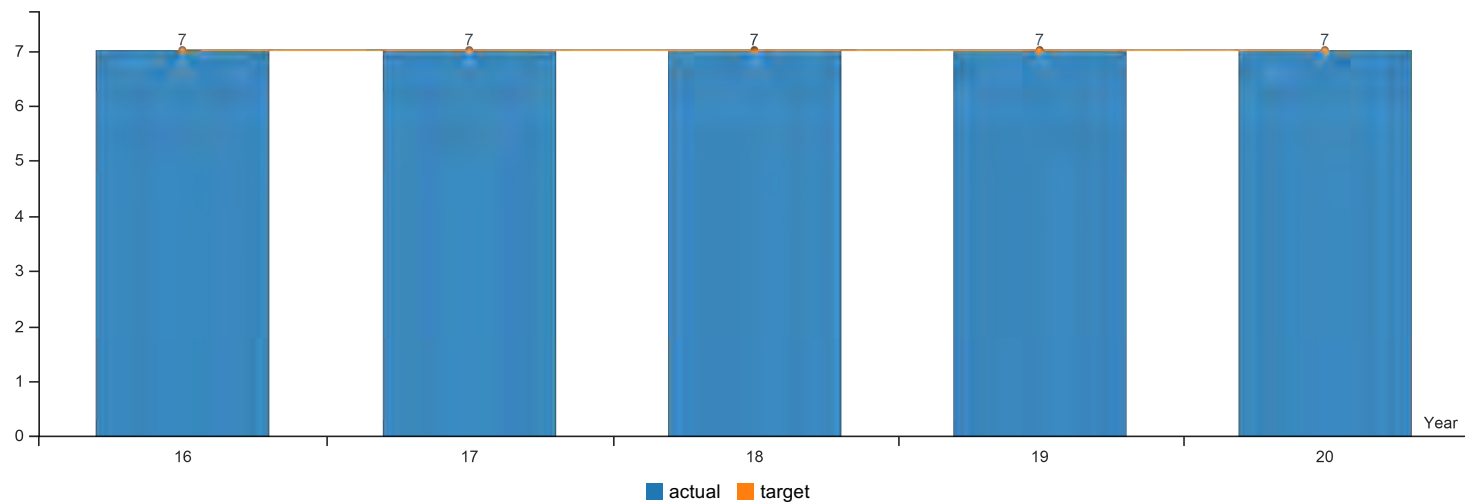
#### Factors Affecting Results

The total number of investigations opened in FY 2020 was 216, compared to 281 in FY 2019. The number of cases closed in FY 2020 was 286, compared to 315 in FY 2019. We surmise the lower number of new cases opened was because the pandemic closed or severely limited operations at many dental practices for 4 months of this reporting period.



KPM #3	Days to Complete License Paperwork - Average number of working days from receipt of completed paperwork to issuance of license.
	Data Collection Period: Jul 01 - Jun 30

\* Upward Trend = positive result



Report Year	2016	2017	2018	2019	2020
<b>Average Number of Working Days to Issue license after Paperwork is Completed.</b>					
Actual	7	7	7	7	7
Target	7	7	7	7	7

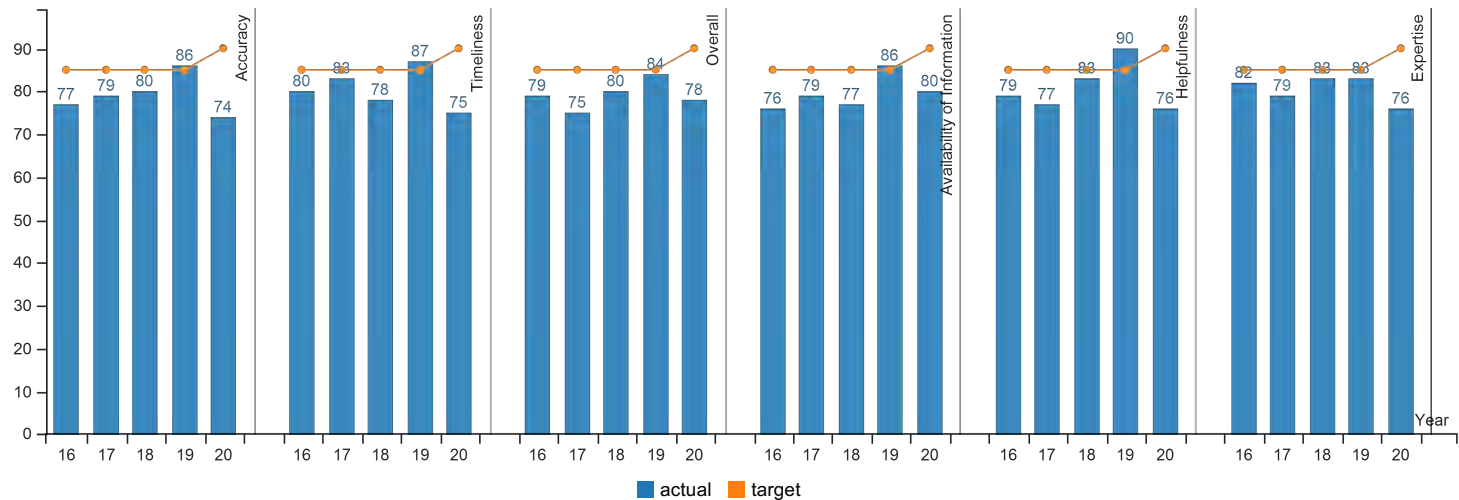
#### How Are We Doing

For FY 2020 we achieved this goal. The Board's strategy is that the processing of accurate and complete paperwork for the issuance of a new or renewed license, should take place in a reasonable period of time to fulfill one of our statutory requirements of those desiring ta license from the Oregon Board of Dentistry in a timely fashion.

#### Factors Affecting Results

It is one of our top priorities that applications and renewals be processed accurately and efficiently and that we not create any barriers for someone to practice once they meet all applicable statutes and rules.

KPM #4	CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall, timeliness, accuracy, helpfulness, expertise, availability of information.
	Data Collection Period: Jul 01 - Jun 30



Report Year	2016	2017	2018	2019	2020
<b>Accuracy</b>					
Actual	77%	79%	80%	86%	74%
Target	85%	85%	85%	85%	90%
<b>Timeliness</b>					
Actual	80%	83%	78%	87%	75%
Target	85%	85%	85%	85%	90%
<b>Overall</b>					
Actual	79%	75%	80%	84%	78%
Target	85%	85%	85%	85%	90%
<b>Availability of Information</b>					
Actual	76%	79%	77%	86%	80%
Target	85%	85%	85%	85%	90%
<b>Helpfulness</b>					
Actual	79%	77%	83%	90%	76%
Target	85%	85%	85%	85%	90%
<b>Expertise</b>					
Actual	82%	79%	83%	83%	76%
Target	85%	85%	85%	85%	90%

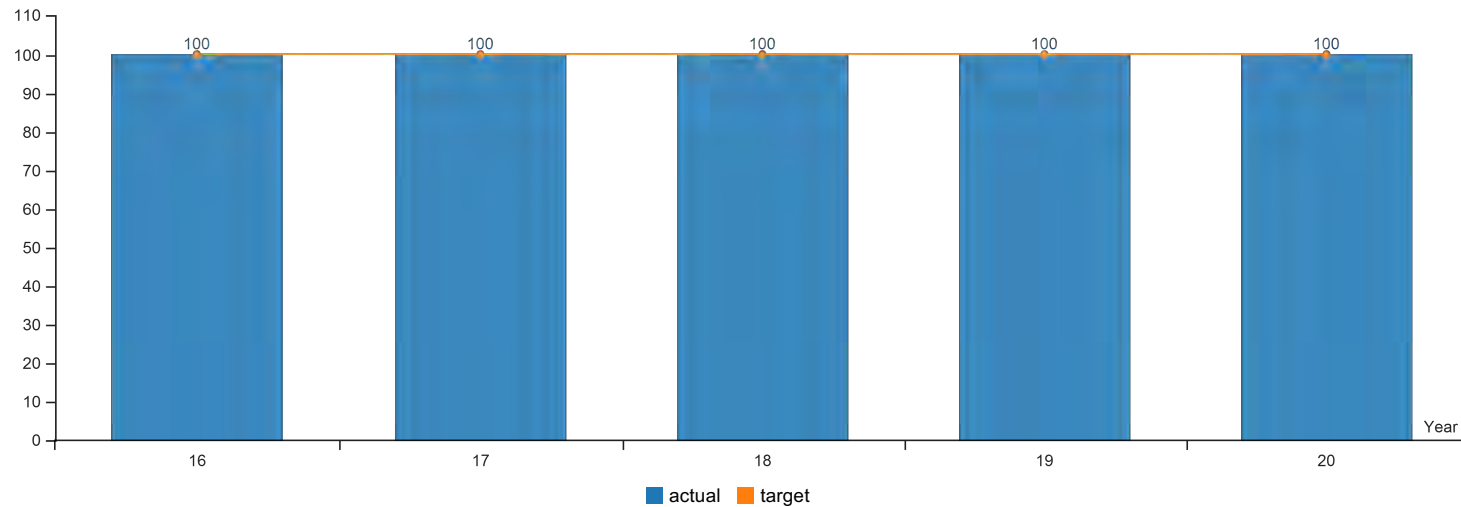
For FY 2020 we did not achieve this goal. Although targets were not met, the overall response is positive and we will continue to encourage people to submit feedback and review the comments received, to assess our service. The survey results were negatively impacted due to the pandemic and subsequent feedback from licensees that were less than pleased with decisions by the state to permit dental operations to resume. As the pandemic and response to it carried on through the year the overall response to our surveys were more in line with past results, and overall positive.

**Factors Affecting Results**

People choose to respond to surveys and we will continue to promote the survey and encourage feedback. We take the feedback seriously and it helps the Board in messaging and understanding the concerns of our Licensees and stakeholders.

KPM #5	Board Best Practices - Percent of total best practices met by the Board.
	Data Collection Period: Jul 01 - Jun 30

\* Upward Trend = positive result



Report Year	2016	2017	2018	2019	2020
<b>Compliance with Best Practices Performance Measurement</b>					
Actual	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%

#### How Are We Doing

For FY 2020 we achieved this goal. Annually at the August Board Meeting the Board reviews these metrics and conducts the performance review of the Executive Director. The Board is in 100% compliance with Best Practices Performance Measurements for Governing Boards and Commissions.

#### Factors Affecting Results

The Board Members are engaged and dedicated to their responsibilities, duties and obligations serving Oregon in their capacity. The Board reviewed the Board Best Practices at its August 21, 2020 Board meeting.

## Best Practices Self-Assessment

Annually, Board members are to self-evaluate their adherence to a set of best practices and report the percent total best practices met by the Board (percent of yes responses in the table below) in the Annual Performance Progress Report as specified in the agency Budget instructions.

### Best Practices Assessment Score Card

Best Practices Criteria	Yes	No
1. Executive Director's performance expectations are current.	✓	
2. Executive Director receives annual performance feedback.	✓	
3. The agency's mission and high-level goals are current and applicable.	✓	
4. The Board reviews the Annual Performance Progress Report.	✓	
5. The Board is appropriately involved in review of agency's key communications.	✓	
6. The Board is appropriately involved in policy-making activities.	✓	
7. The agency's policy option budget packages are aligned with their mission and goals.	✓	
8. The Board reviews all proposed budgets.	✓	
9. The Board periodically reviews key financial information and audit findings.	✓	
10. The Board is appropriately accounting for resources.	✓	
11. The agency adheres to accounting rules and other relevant financial controls.	✓	
12. Board members act in accordance with their roles as public representatives.	✓	
13. The Board coordinates with others where responsibilities and interest overlap.	✓	
14. The Board members identify and attend appropriate training sessions.	✓	
15. The Board reviews its management practices to ensure best practices are utilized.	✓	
Total Number	15	
Percentage of total:	100%	

At the August 21, 2020 Board Meeting, the Board reviewed the best practices self-assessment documents and unanimously agreed that all Best Practices were met.



# Oregon

## 2021-23 GOVERNOR'S RECOMMENDED BUDGET Oregon Board of Dentistry



Drew Cohen  
Department of Administrative Services  
Chief Financial Office  
February 3, 2021



# Oregon Board of Dentistry

## 2021-23 Governor's Budget Overview

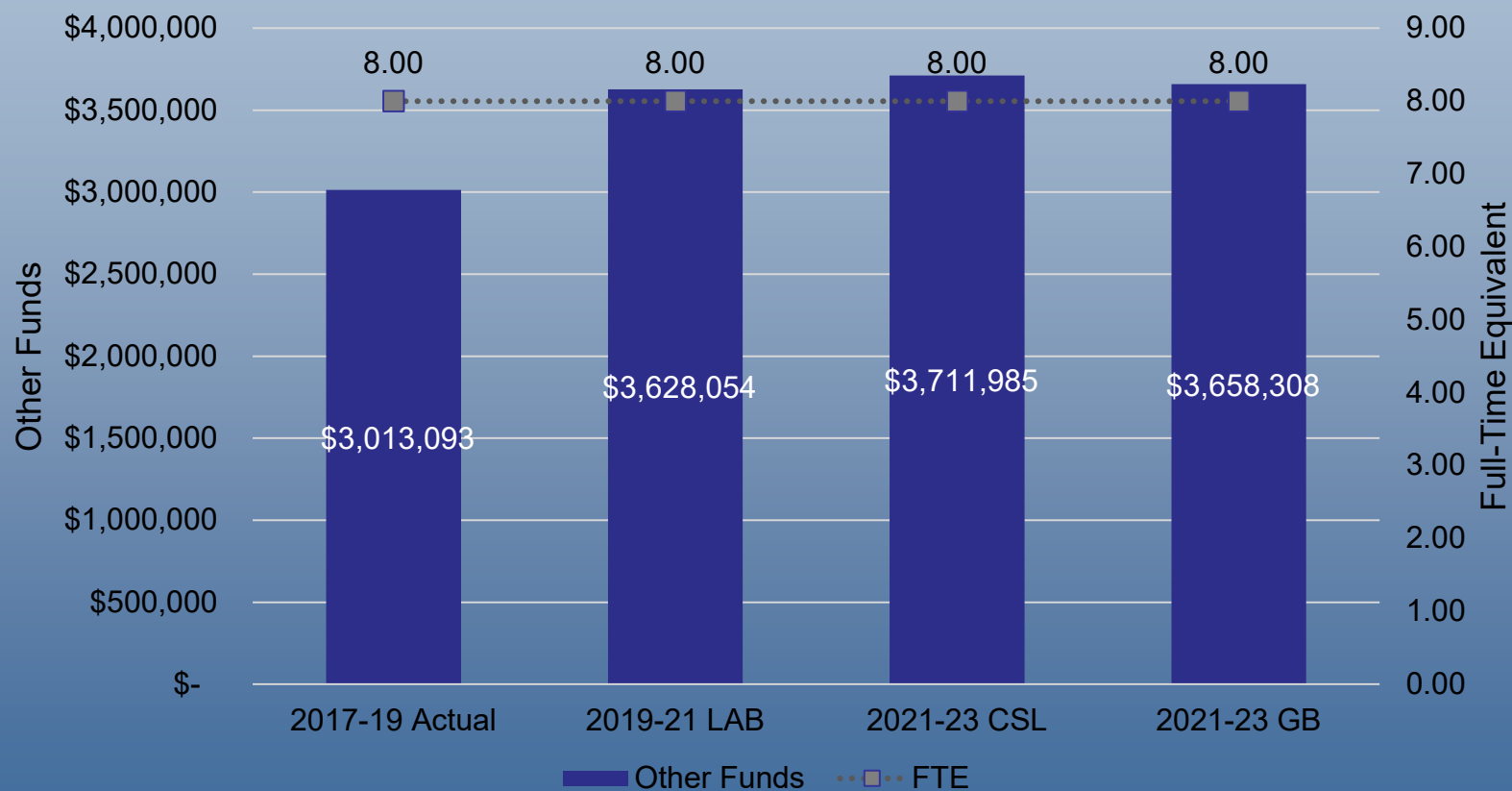
- Emerging Issues:
  - Continued move toward E-government services
  - Continued development of IT database system and IT contracts
  - OBD is supported by Other Funds revenue and does not expect a need to increase fees





# Oregon Board of Dentistry

## Expenditure History + 2021-23 Governor's Budget



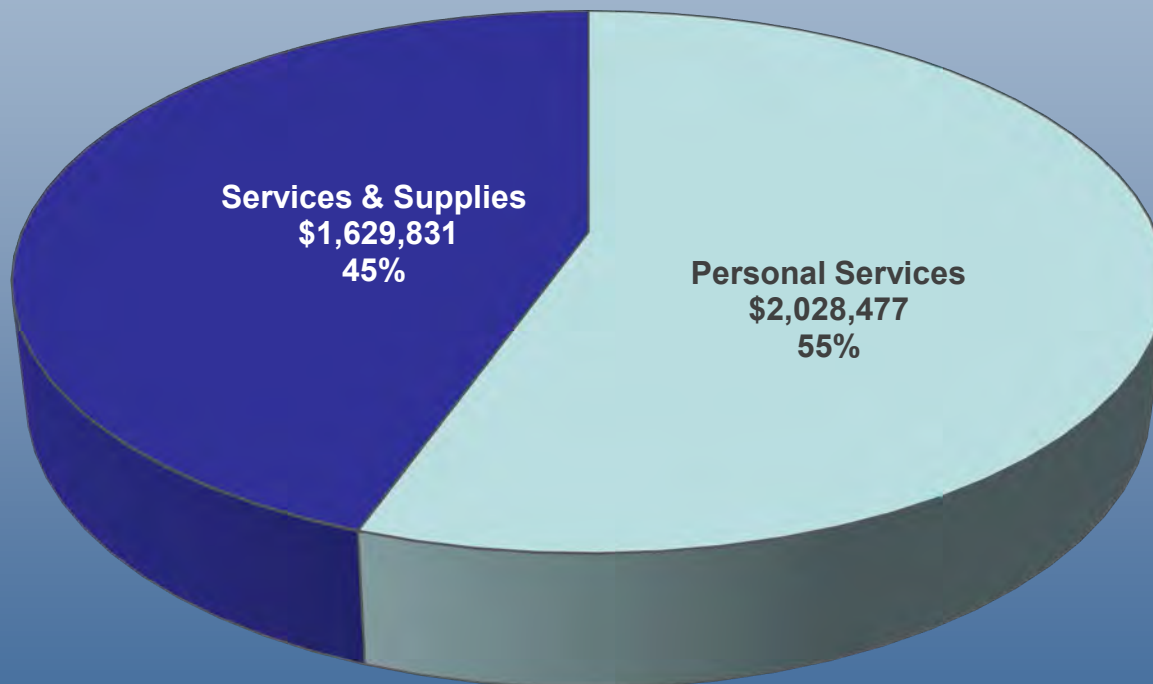




# Oregon Board of Dentistry

## 2021-23 Governor's Budget

### Budget by Expenditure Category





# Oregon Board of Dentistry

## 2021-23 Governor's Budget/Revisions

- The Governor's Budget supports current services and invests in the following:
  - Implementation of a new IT data processing project
  - Ongoing technical support for the database project
- Statewide adjustments:
  - Updates to the DAS price list, state government service charges, and Microsoft 365 consolidation





# QUESTIONS?



## Oregon Board of Dentistry

	2017-19 Actual	2019-21 Legislatively Adopted	2019-21 Legislatively Approved *	2021-23 Current Service Level	2021-23 Governor's Budget
Other Funds	3,013,093	3,535,260	3,628,054	3,711,985	3,658,308
<b>Total Funds</b>	<b>3,013,093</b>	<b>3,535,260</b>	<b>3,628,054</b>	<b>3,711,985</b>	<b>3,658,308</b>
Positions	8	8	8	8	8
FTE	8.00	8.00	8.00	8.00	8.00

\* Includes Emergency Board and administrative actions through January 2021.

### Program Description

The mission of the Board of Dentistry (OBD) is to promote high-quality oral healthcare in Oregon by regulating dental professionals. The Board regulates the practice of dentistry and dental hygiene through examination, licensing, and disciplinary programs. The Board also establishes standards for the administration of anesthesia in dental offices, and establishes standards for training and certification of dental assistants. The 10-member board is appointed by the Governor and composed of six dentists, two dental hygienists, and two public members.

### Policy Issues

HB 2528 would create a new dental therapist license type for OBD, and add a dental therapist licensee board member. Dental therapists are practitioners with a skill level generally between a dental hygienist and a dentist, and must practice under the supervision of a dentist. The creation of this license type is meant to help expand dental care to underserved populations. This concept was brought forward during the 2020 Legislative Session and has since been further refined by a legislative workgroup.

POP 100: The Database and Data Processing Project budget request will increase OBD's Other Funds expenditure limitation by \$85,146 to pay ongoing fees for their new application, licensing and investigation system, and for other increased IT expenses.

### Pandemic

The Board reports that a significant number of dentists may choose to retire early or not renew their licenses as a result of the COVID-19 pandemic. Many licensees have closed their practices this year rather than work through the pandemic. A decrease in licensees will impact agency revenues.

### Key Performance Measures

A copy of the OBD Annual Performance Progress Report can be found on the LFO website:

[https://www.oregonlegislature.gov/lfo/APPR/APPR\\_OBD%202020.pdf](https://www.oregonlegislature.gov/lfo/APPR/APPR_OBD%202020.pdf)

**2020**

# **Oregon's Licensed Health Care Workforce Supply**

**Based on data collected during 2009 through January 2020**

**Published January 2021  
Oregon Health Authority  
Office of Health Analytics**



**Health Care Workforce  
Reporting Program**

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### About the data in this report

Oregon’s Health Care Workforce Reporting Program (HWRP) was created in 2009. As directed by Oregon Revised Statute 676.410, the HWRP collects and tabulates information from licensees of 17 health licensing boards upon renewal.

Data in this report was collected prior to the onset of the COVID-19 pandemic in the Spring of 2020. At this time, it is uncertain how the pandemic may affect the licensed health care workforce supply in Oregon. Future supply reports will assess the impact of COVID-19.

This report adds data from three licensing boards that were not included in previous reports. It also introduces data on providers who have secondary practice locations in Oregon. For those reasons, data from this report should not be compared with data from earlier reports.

# Executive Summary

## Report objectives

**This report on Oregon’s licensed health care workforce evaluates:**

- ◆ how many professionals are licensed and practicing in Oregon as well as how much of their time was spent with patients;
- ◆ which counties professionals are working in and the supply available relative to the population size;
- ◆ county differences in demand for services measured by selected target populations;
- ◆ and how many professionals specialize in primary care, behavioral health, oral health and more.

## Why is it important to measure supply?

**The health care workforce is a large contributor to the economy.**

Understanding the supply of the licensed health care workforce in Oregon is essential to making evidence-based policy decisions about health care access, cost and quality and has implications for the broader state economy.<sup>1</sup> In 2018, the health care sector was the largest employer in the United States, exceeding both manufacturing and retail sectors.<sup>2</sup> Nationally, about 1 in 8 people who were employed work as health care professionals or within a health system<sup>3,4</sup> with similar levels seen in Oregon.<sup>5</sup> Historically, jobs in health care have been relatively resilient in times of recession<sup>6</sup> and are good opportunities for improving social class, particularly for women.<sup>1</sup> The health care industry pivots on its workforce — labor costs make up about 50 percent of health care spending in the United States,<sup>7,8</sup> while at the same time shortages of health care professionals are predicted due to the health care demands of aging populations and increases in chronic diseases.<sup>9-15</sup>

**Demands on health care are increasing in Oregon.**

Over the next decade, the population of those 65 years of age and older will likely grow at over 3 times the rate of the population 64 years and younger.<sup>16</sup> Currently, just over half of the population has one or more chronic conditions.<sup>17</sup> At the same time, more Oregonians had insurance coverage in 2018 (94.0%) compared with the rest of the country (91.5%).<sup>18,19</sup>

**Major events like the COVID-19 pandemic may impact supply and care delivery.**

As the COVID-19 pandemic continues, there will be unforeseen impacts on the health care workforce including possible slow growth of the workforce in the coming years. For example, the Oregon Center for Nursing has reported difficulties with nursing students completing clinical rotations during the pandemic,<sup>20</sup> and there are likely excess pressures on currently practicing professionals, particularly those with private practices.<sup>21</sup> Future reports will assess COVID-19 impacts on the licensed health care workforce supply.

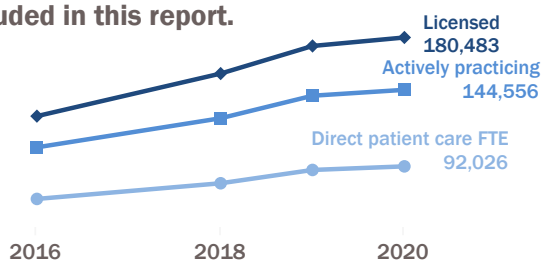
Explore these data and learn more:

[Oregon’s licensed health care workforce supply dashboard.](#)

## Key insights

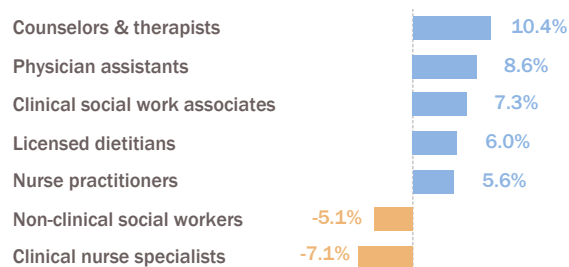
Data from over 180,000 licensed health care professionals are included in this report.

Three important supply estimates are discussed including number licensed, actively practicing and full-time equivalent (FTE) providers of direct patient care (page 5).



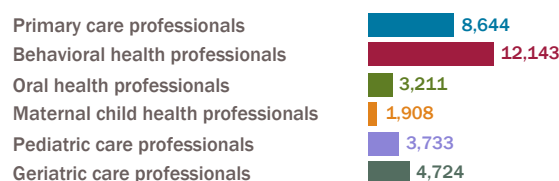
Direct patient care FTE increased over time for some occupations but not others.

Growth in direct patient care FTE was greatest for counselors and therapists, physician assistants, clinical social work associates, licensed dietitians and nurse practitioners (page 7). Clinical nurse specialists and non-clinical social workers lost the most direct patient care FTE on average over time.



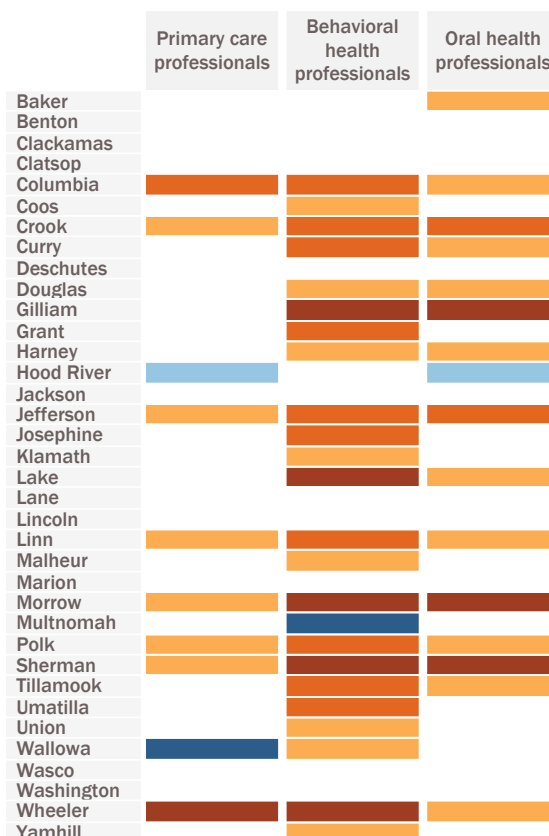
Behavioral health professionals were the largest specialty group with 12,143 actively practicing.

Other specialty groups include primary care, oral health, maternal child health, pediatric care and geriatric care professionals (page 9).



Behavioral health professionals are concentrated in Multnomah and neighboring counties and relatively underrepresented throughout the rest of the state.

The number of health care professionals available for every 10,000 Oregonians was mapped by county (pages 10-12) and a heat map was created to summarize the findings (page 13-14). Health care professionals are generally well represented in Deschutes, Hood River, Multnomah, Wallowa, and Washington counties and generally underrepresented in Columbia, Crook, Gilliam, Jefferson, Morrow, Sherman, and Wheeler. Primary care professionals are more evenly distributed throughout the state compared with other specialty groups. Of the specialty groups, unequal distribution is worst for behavioral health professionals.



Orange colors indicate that the county supply is less than supply statewide.

Blue colors indicate that the county supply is higher than supply statewide.

In both cases, the darker the color the larger the difference.

Percent difference from state

76% to 100%

51% to 75%

26% to 50%

-25% to 25%

-26% to -50%

-51% to -75%

-76% to -100%



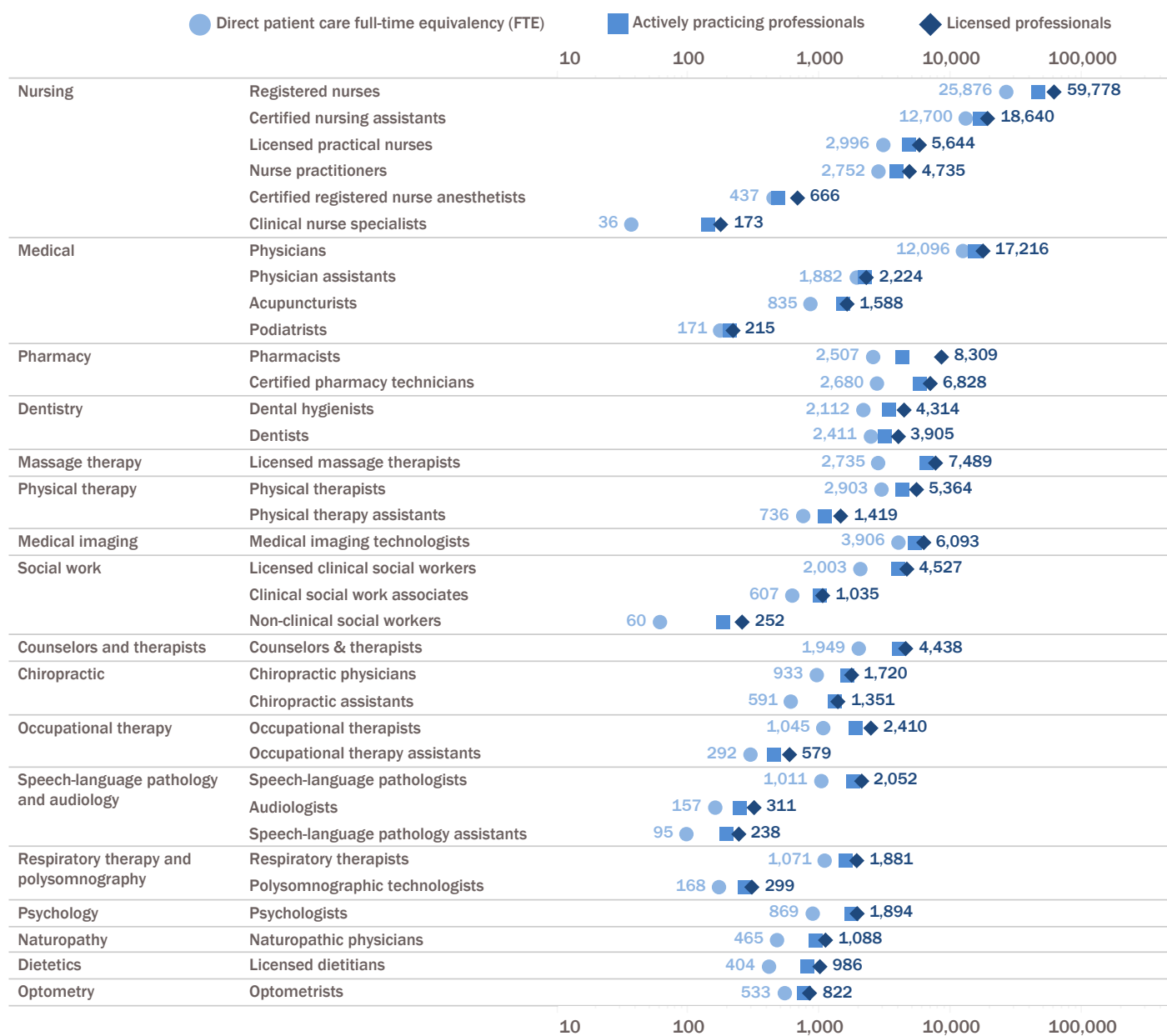
# Findings

## Supply estimates include licensed, actively practicing, and direct patient care FTE for 2020.

This analysis includes a wide range of occupations that practice physical and behavioral health, from eastern and western traditions and from allied health care occupations. The nursing workforce was the largest with 89,636 licensed professionals, followed by medical, pharmacy, and dentistry.

The number of hours worked per week and the amount of time spent in patient care varies by professional and by occupation, so direct patient care FTE is estimated from licensed and actively practicing to better understand the current supply of health care professionals available to the Oregon population. Knowing the number of licensed and actively practicing professionals helps us to understand the potential capacity of the workforce.

Of registered nurses, there were 59,778 holding active licenses in Oregon in 2020. Of those licensed, an estimated 45,135 were actively practicing, meaning they reported providing services to Oregon residents. Of all actively practicing registered nurses, there were an estimated 25,876 full-time equivalent (FTE) providers of direct patient care, where 1 FTE is equal to 40 hours of work in direct patient care per week. Supply estimates for each occupation can be found below.



## Supply estimates vary over time by occupation and workforce.

The number of hours worked per week and the amount of time spent in direct patient care are practice characteristics that vary by occupation, workforce and year affecting supply estimates over time. For example, in 2020 optometrists who held an active license in Oregon actively practiced in Oregon at a higher average rate (90.4%; 743 actively practiced of 822 licensed) compared with pharmacists (50.5%; 4,198 actively practiced of 8,309 licensed).

This active practice rate varies between occupations but also by year. For dentists, this rate remains relatively steady over time, while for nurse practitioners, the rate seems to be decreasing slightly between 2018 and 2020. In terms of time spent in direct patient care, physicians spend more time in direct patient care on average (81.3% of time or 12,096 FTE from 14,882 who actively practiced) compared with nurse practitioners (72.5% of time or 2,752 FTE from 3,794 who actively practiced). Psychologists, counselors and therapists and pharmacists spend about 50-60 percent of time in direct patient care on average. Professionals can also report spending time in administration and management, teaching, doing research or some other activity.

### More information about these graphs

When assessing the supply of the health care workforce, it is essential to understand how factors like practice characteristics and license renewal cycles impact supply estimates and longitudinal trends. Importantly, these factors often vary by occupation. Longitudinal trends are affected by changes in Health Care Workforce Reporting Program methodology, duration of participation in the program by health licensing boards, and differing renewal cycles.

For some occupations, the number of licensed professionals is available 2010 and onward while other occupations are only included 2018 or 2019 and onward. Reliable estimates for actively practicing and direct patient care FTE are available for 2016 and onward where the number of licensed is known.

Licensing boards have either annual or biennial renewal cycles and supply estimates fluctuate for occupations that renew on biennial periodic cycles (pharmacy, occupational therapy, physical therapy, and speech-language pathology and audiology occupations). For those occupations, the number of licensees is higher in renewing years compared with non-renewing years as licensees generally leave the workforce at time of license renewal, which is reflected the following year. Beginning in 2018, supply estimates are reported annually (instead of biennially).

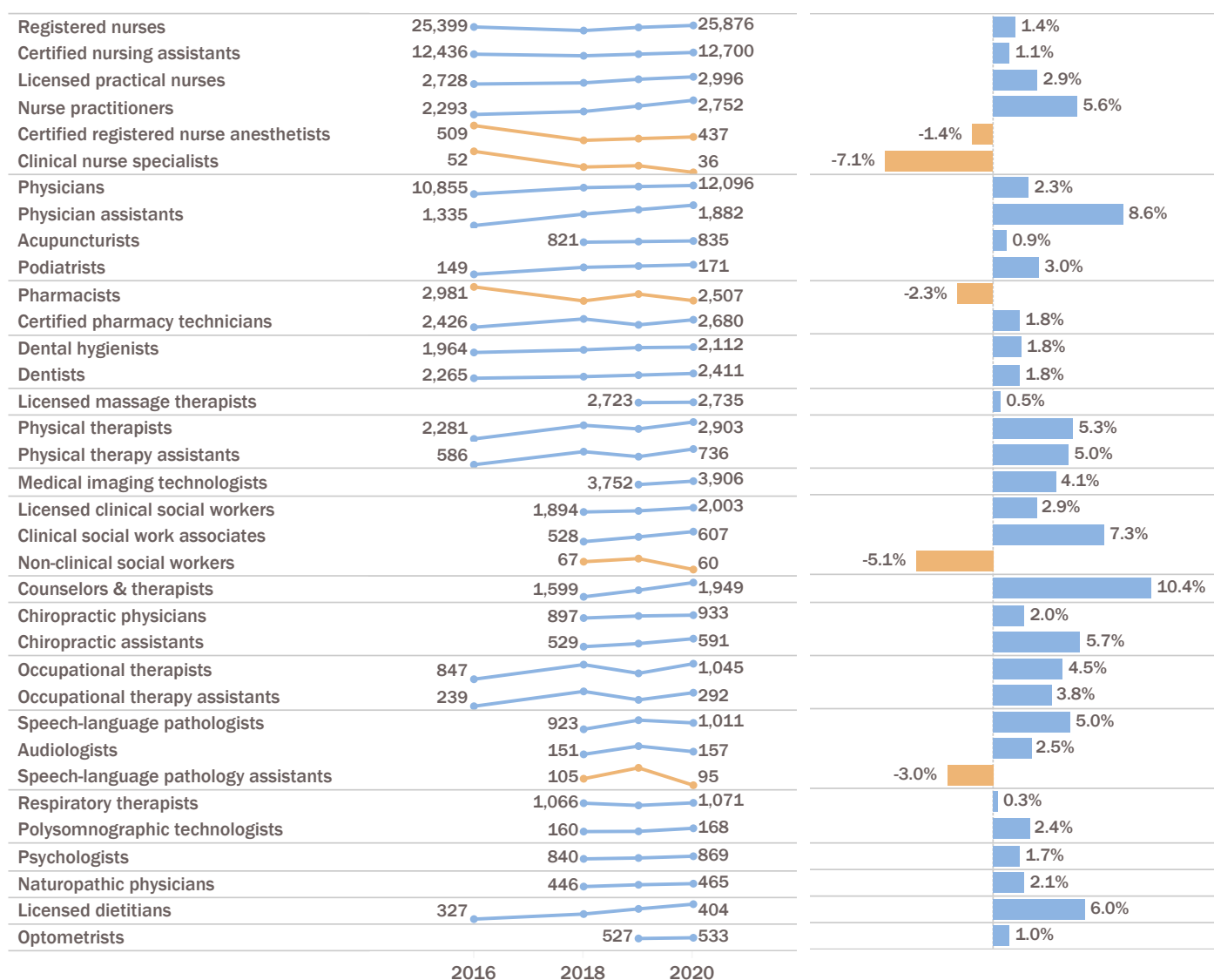


\*Note: Estimates for physicians, physician assistants, podiatrists and acupuncturists for 2019 are an average of 2018 and 2020 estimates.

## Average annual percent change in direct patient care FTE varies by occupation.

As Oregon's population grows, the supply of direct patient care FTE must also grow to ensure continued access to health care professionals. Average annual percent change in direct patient care FTE varies by occupation, with some occupations keeping pace with the Oregon population's average annual growth of 1.3 percent during the same time period. Noteworthy growth was observed for physician assistants, counselors and therapists, licensed dietitians, nurse practitioners, physical therapy occupations, and occupational therapy occupations.

For advanced practice registered nurses, a 5.6 percent average annual growth for nurse practitioners (459 greater FTEs) overshadowed a 7.1 percent average annual decline in clinical nurse specialists and a 1.4 percent average annual decline in certified registered nurse anesthetists (16 and 72 fewer FTEs respectively). Pharmacist FTE decreased while certified pharmacy technician FTE grew. Similar trends were seen for social work and speech-language pathology occupations. Note axes are not the same between occupations and should not be compared.



Explore these data and learn more:

[Oregon's licensed health care workforce supply dashboard.](#)

## Licensing boards shared insight on factors that may affect supply.

The health professional licensing boards who collaborate with the HWRP responded to HWRP questions about possible factors affecting supply trends over time. The boards noted the importance of such factors as the availability of good in-state educational programs; workforce-friendly state policies and regulations, such as low licensing fees and progressive telemedicine policies; and professional associations' efforts to facilitate clinical rotations and promote health care workforce occupations at varying educational institutions. Boards also speculated that growth in direct patient care FTE may have increased during this time period because overall demand for services increased.

### Changes in demand for services

For example, increases in demand for dentistry and physical therapy could have been driven by an aging population. For physical therapy, there may have been a paradigm shift towards referring patients to physical therapy for pain instead of prescribing medications like opioids. FTE may have increased for medical imaging professionals due to policy changes which expanded opportunities for physician assistants and nurse practitioners to supervise interventional imaging services; additionally, there was an expansion of imaging services to rural hospitals. Another factor increasing FTE for some occupations may be reduced social stigma, or wider acceptance of or interest in mental health, wellness and nutrition, sleep awareness, and naturopathic medicine services.

#### Factors that may affect supply trends over time

- Overall demand for services
- Reduced social stigma, or wider acceptance of mental health, wellness and nutrition, sleep awareness, and naturopathic medicine services
- Workforce-friendly state policies and regulations
- Professional association support of students
- Insurance coverage and reimbursement
- Availability of in-state educational programs

### Insurance coverage and reimbursement

Insurance coverage and reimbursement increased for some occupations, notably in mental health, nutrition counseling and hands-on chiropractic services. However, insurance companies declined to cover some health care services by naturopathic physicians, which could impact the amount of time spent in direct patient care. Some pharmacists have reported that their hours are being reduced in retail pharmacies around the state, possibly due to declining reimbursement or generally increased costs.

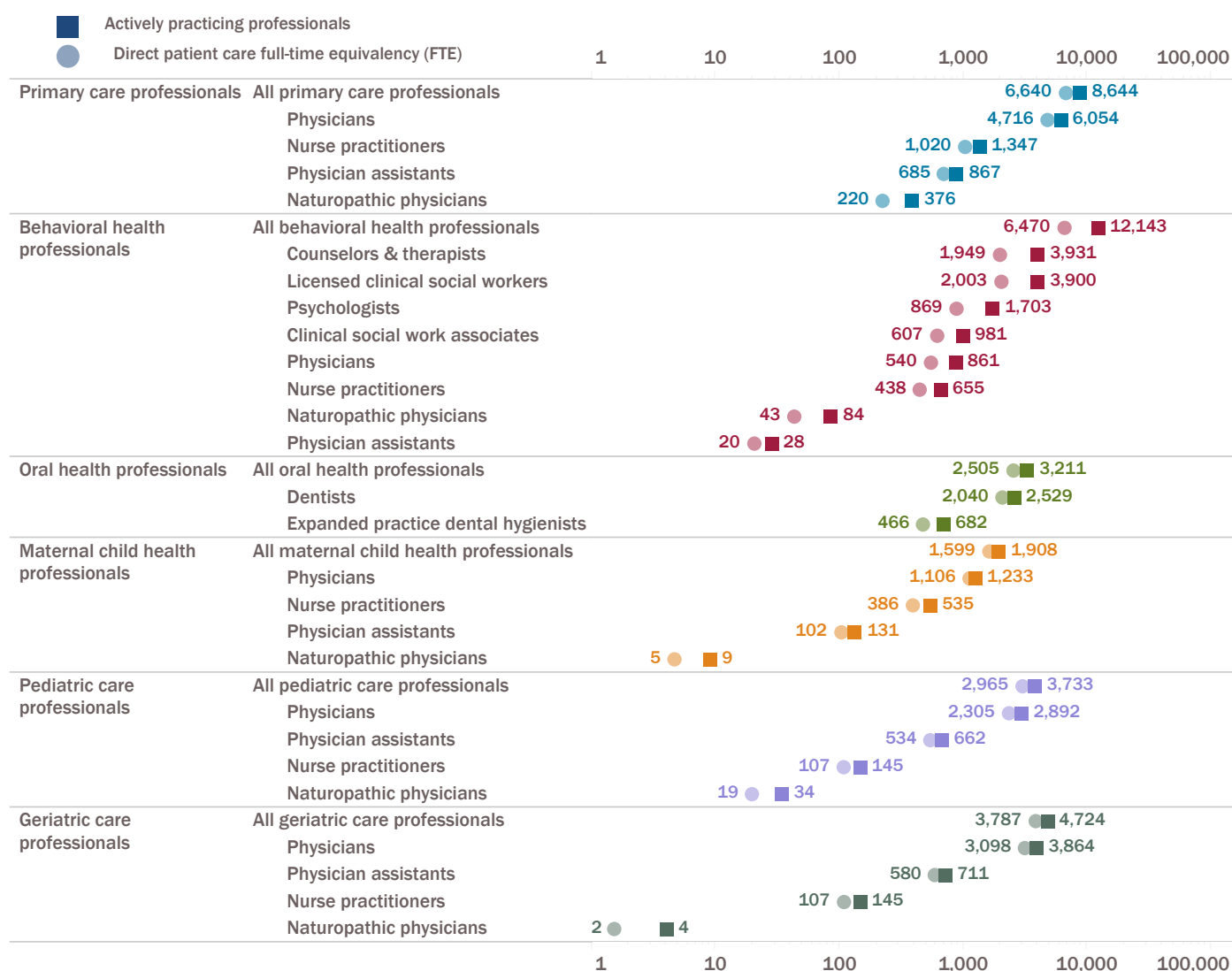
### Educational programs

Lack of educational programs in Oregon may negatively impact supply. A respiratory therapy program at Lane Community College was recently closed and in 2018 a certified registered nursing program closed in Oregon. These closures could be correlated with other factors that influenced change in direct patient care FTE. There were no clinical nurse specialists programs in Oregon, so all new licensees come from programs in other states. Additionally, clinical nurse specialists do not generally perform duties that require time in direct patient care. Similarly, direct patient care is limited for non-clinical social workers compared with licensed clinical social workers. It's possible that employers may require or encourage recruitment of licensed clinical social workers, even when the position duties may not require that level of license, simply because it is the highest-level license offered. The Oregon Board of Licensed Clinical Social Workers is working with Portland State University to more effectively communicate the role of non-clinical social workers to employers and prospective students.

## Supply estimates are also available for specialty groups of health care professionals for 2020.

In addition to evaluating the health care workforce supply by occupation, it is important to evaluate it through a multidisciplinary lens which groups health care professionals by specialty rather than by occupation. For example, physicians, nurse practitioners, physician assistants and naturopathic physicians may all specialize in primary care and provide this service to Oregonians. Supply estimates for the specialty groups of primary care, behavioral health, oral health, maternal child health, geriatric care and pediatric care professionals show the occupational diversity by specialty.

Behavioral health professionals were the largest specialty group with 12,143 actively practicing. There were an estimated 8,644 primary care professionals actively practicing in Oregon, the majority of which were physicians. Geriatric care and pediatric care professionals are subgroups of primary care professionals, so for example, an estimated 3,733 primary care professionals were also pediatric care professionals. Because specialty providers were identified by their self-reported specialty and they may report multiple specialties, providers may fall into more than one of the specialty groups shown here.



Note: Some professionals are included in more than one specialty group; specialty groups are not mutually exclusive.



## County provider-to-population ratios from 2020 show differences in the distribution of professionals.

Determining whether the supply of health care professionals is sufficient to meet the needs of Oregonians across the state requires more than knowing the number of actively practicing professionals or direct patient care FTE for different health care occupations and specialty groups – it requires the assessment of supply estimates relative to the population at state and county levels. This sort of analysis gives insight into the density of health care professionals across Oregon. For measures that assess the supply of the workforce relative to an underlying population, supply estimates for direct patient care FTE are utilized.

Statewide there were an estimated 15.7 primary care professionals per 10,000 Oregonians, although this provider-to-population ratio differs depending on county. County provider-to-population ratios for primary care providers range from 30.3 per 10,000 in Wallowa county to none reported practicing in Wheeler county, while some counties fall closer to the statewide average, like Marion county at 15.0 per 10,000.

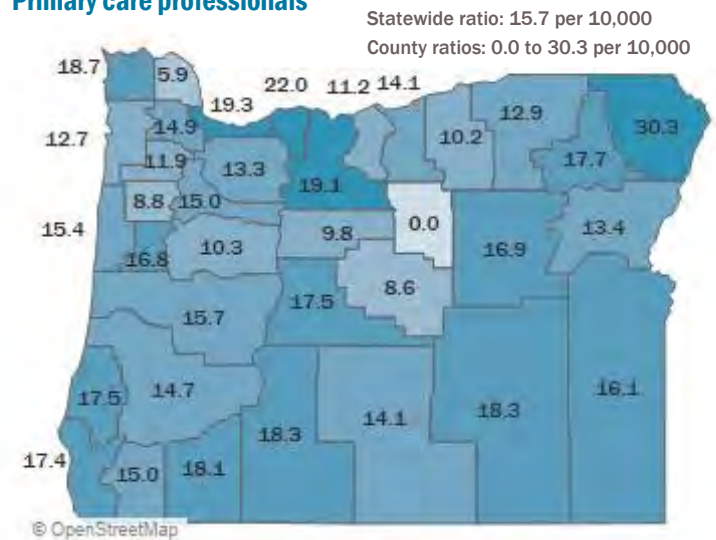
Statewide there were an estimated 15.3 behavioral health professionals per 10,000 Oregonians with none observed in Sherman, Gilliam and Wheeler counties and with the highest densities observed in Multnomah (28.6 per 10,000) and Deschutes (17.7 per 10,000) counties.

Statewide there were an estimated 5.9 oral health professionals per 10,000 Oregonians, with no or few providers observed in Sherman, Gilliam and Morrow counties and with the highest density observed in Hood River county at 8.8 per 10,000.

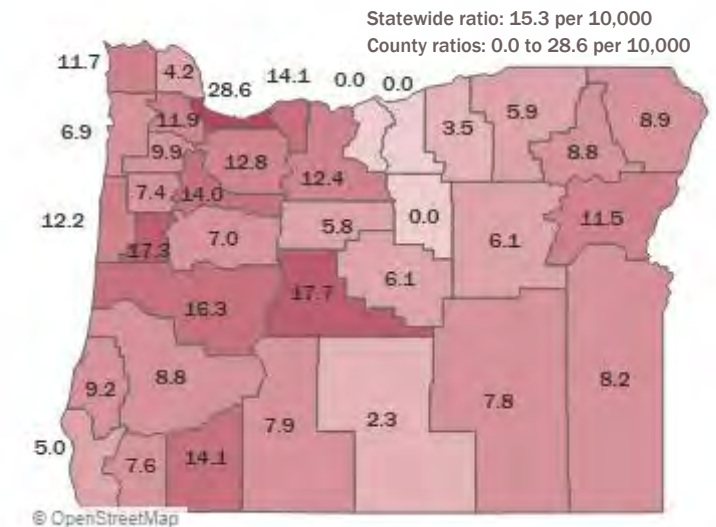
### On telehealth and mobile practices

These data currently focus on physical practice locations where the professionals deliver care and do not reflect areas where telehealth is available, nor do they fully reflect providers with a mobile practice. Future reports will assess telehealth and mobile practice in more detail.

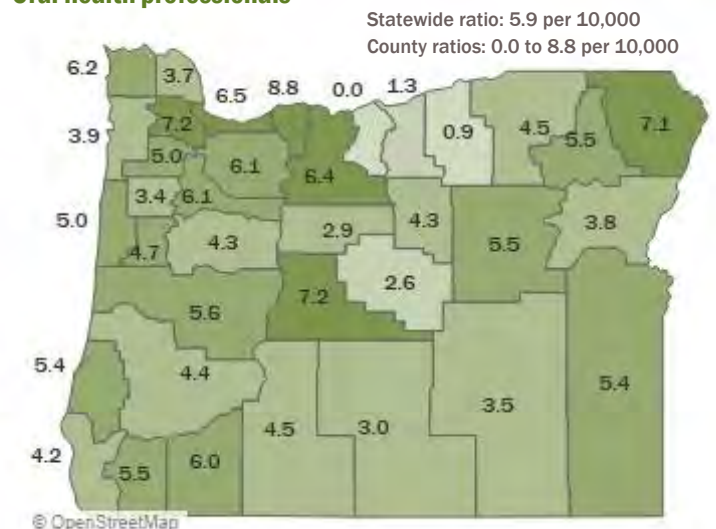
### Primary care professionals



### Behavioral health professionals



### Oral health professionals



Population estimates sourced from 2018 PSU population research center.

County provider-to-selected target population ratios from 2020 contextualize demand for services.

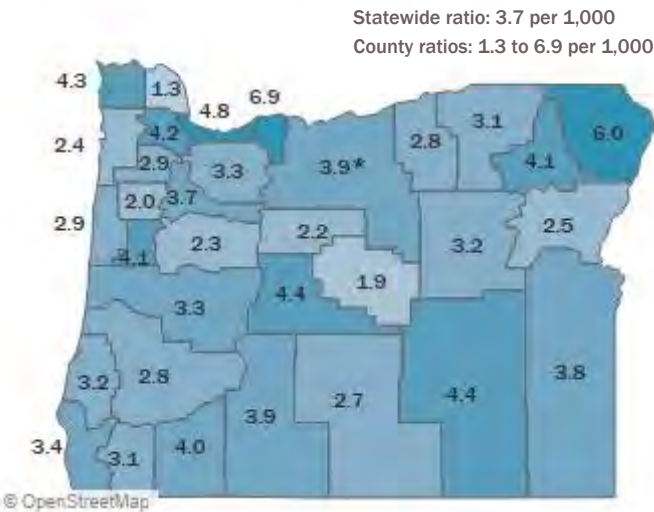
To better understand where in Oregon there may be more demand for health care professionals, supply relative to selected target populations was measured for each of the specialty groups – defined in this report as populations that may be more likely to access services from certain specialty health care professionals. Since primary care professionals play a critical role in managing chronic illness,<sup>22-25</sup> provider-to-population ratios of primary care professionals relative to adults with at least one chronic disease is shown below. Statewide there are 3.7 primary care professionals per 1,000 adult Oregonians with at least one chronic disease.

Maps with the following specialty groups and selected target populations are found on this page and the next:

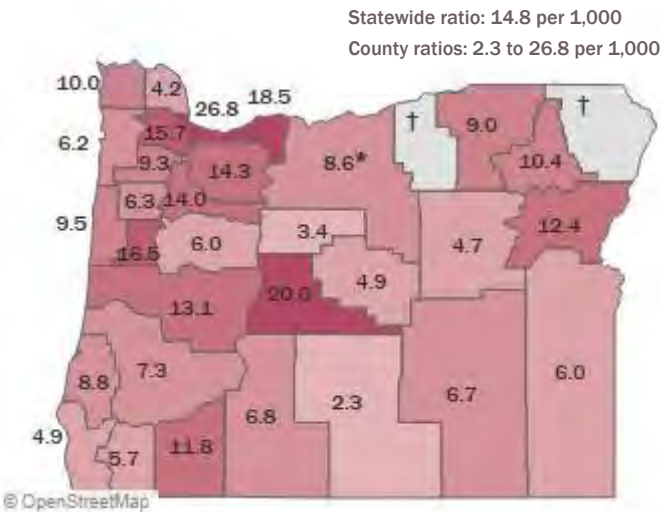
- ♦ primary care professionals: adults with at least one chronic disease,<sup>26,27</sup>
- ♦ behavioral health professionals: adults with frequent mental distress,<sup>26, 27</sup>
- ♦ oral health professionals: adults without a dental visit in the last year,<sup>26, 27</sup>
- ♦ maternal child health professionals: mothers and children, based on number of births,<sup>28</sup>
- ♦ pediatric care professionals: children 18 years of age and under,<sup>26</sup>
- ♦ geriatric care professionals: adults 65 years and over for.<sup>26</sup>

Explore these data and learn more:  
[Oregon’s licensed health care workforce supply dashboard.](#)

Primary care professionals and adults with at least one chronic condition.



Behavioral health professionals and adults with mental distress.

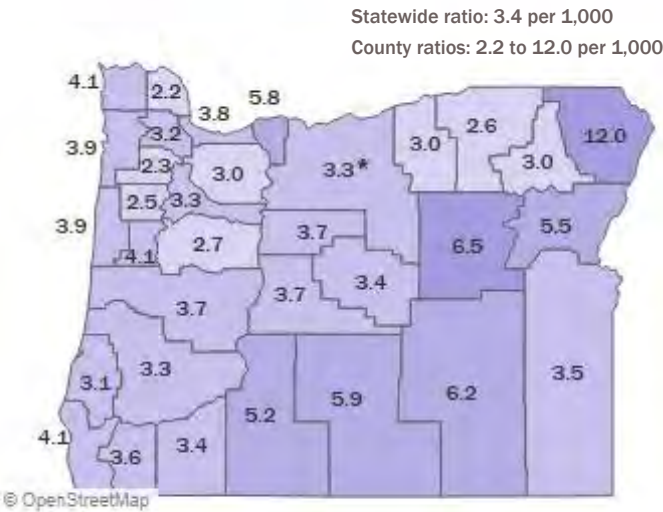
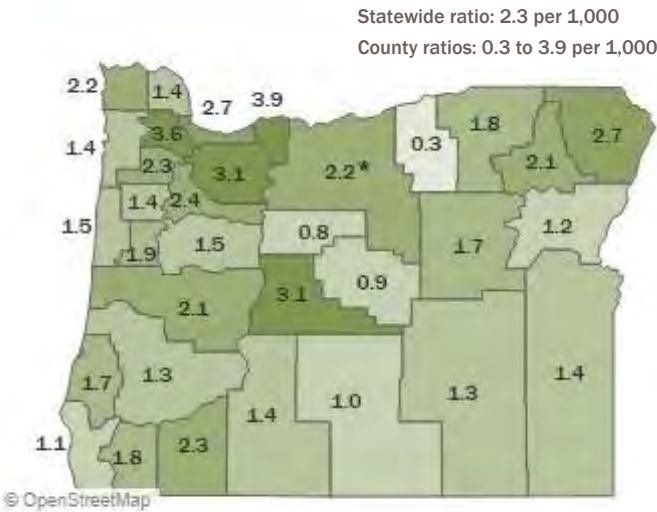


Selected target populations differ by specialty group of professionals; population estimates sourced from 2014-2017 BRFSS, 2014-2017 OHA vital statistics, and population estimates sourced from 2014-2017 PSU population research center.  
Due to small populations of interest: \*the counties of Gilliam, Sherman, Wasco and Wheeler are aggregated and referred to as the North Central region; †estimates for counties in gray are suppressed.

# County provider-to-selected target population ratios from 2020 contextualize demand for services (continued).

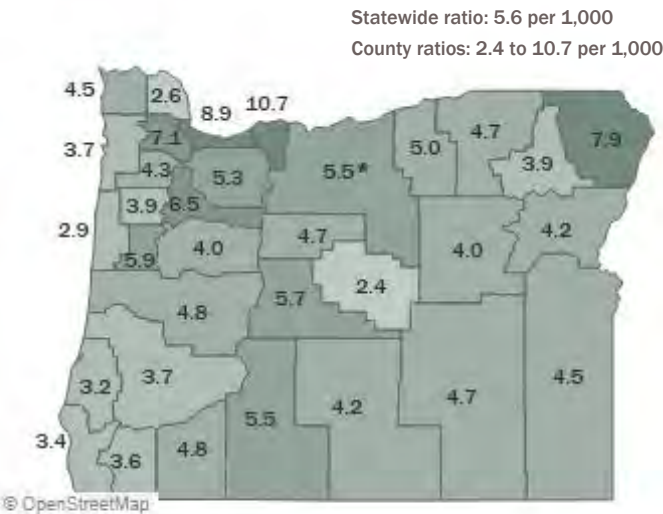
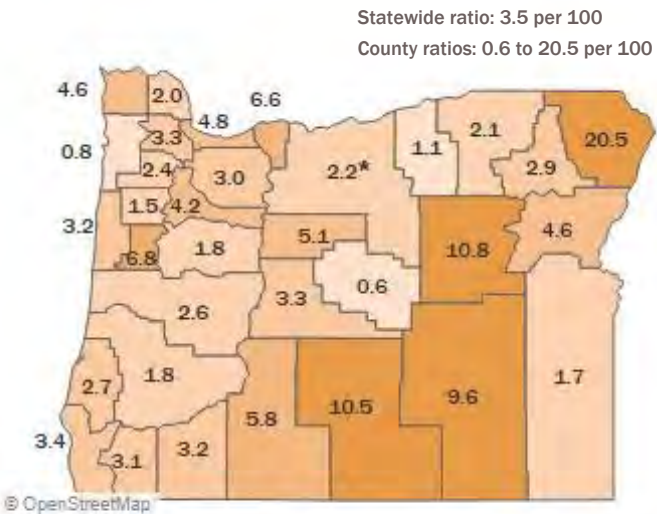
**Oral health professionals and adults without a dental visit in the last year.**

**Pediatric care professionals and children 18 years of age and under.**



**Maternal child health professionals and number of births.**

**Geriatric care professionals and adults 65 years of age and over.**



Selected target populations differ by specialty group of professionals; population estimates sourced from 2014-2017 BRFSS, 2014-2017 OHA vital statistics, and population estimates sourced from 2014-2017 PSU population research center.  
Due to small populations of interest: \*the counties of Gilliam, Sherman, Wasco and Wheeler are aggregated and referred to as the North Central region; †estimates for counties in gray are suppressed.



Heat map summarizes differences between statewide and county provider-to-population ratios in 2020 (see next page).

### Why is a heat map helpful?

If health care professionals were distributed equitably across Oregon, then provider-to-population ratios at the county level would have little variation. However, this is not the case. By assessing the percent difference between county provider-to-population ratios and the statewide ratio, counties with the lowest and highest density of health care professionals can be identified. The heat map depicted on the following page is a visual representation of state and county ratio differences from the maps presented previously.

### How do you interpret the heat map?

**Orange** colors indicate that the county ratio is less than the statewide ratio. **Blue** colors indicate that the county ratio is higher than the statewide ratio.

In both cases, the darker the color the larger the difference. Rows that are predominantly orange indicate that health care professionals are underrepresented in the county. Columns that are predominantly orange indicate the health professionals in that occupation or specialty group are not equally distributed across the state. For example, the provider-to-population ratio of primary care professionals in Columbia county is 62 percent less than the ratio throughout the state overall. In Hood River, the provider-to-population ratio of primary care professionals is 40 percent higher than the ratio throughout the state.

### By comparing provider-to-population ratios with provider-to-selected target population ratios, we can better identify which counties may have more demand for services.

For example, the provider-to-population ratio for primary care professionals in Lake county is 10 percent less than the statewide ratio. The ratio of primary care professionals relative to adults with at least one chronic condition, however, is 26 percent less than the same ratio at the state level, indicating that there may be a higher demand for primary care professionals in Lake county that may have not been apparent when looking at the provider-to-population ratio alone. Conversely, in Hood River county the primary care professional to adult with chronic disease ratio is 87 percent less than the statewide ratio, while the standard provider-to-population ratio is 40 percent less. Assessing workforce supply relative to selected target populations helps to identify counties which may have more or less demand for services, based population differences.

### Geographic representation of the health care workforce.

Health care professionals are generally well represented in Deschutes, Hood River, Multnomah, Wallowa, and Washington counties and generally underrepresented in Columbia, Crook, Gilliam, Jefferson, Morrow, Sherman, and Wheeler counties. Primary care professionals are more evenly distributed throughout the state compared with other specialty groups; this is particularly true for pediatric care professionals and also geriatric care professionals. Of the specialty groups, unequal distribution is worst for behavioral health professionals and oral health professionals. Behavioral health professionals are overrepresented in Multnomah county and most underrepresented in Lake, Morrow, Gilliam, Sherman and Wheeler counties. Maternal child health professionals are most underrepresented in Crook and Tillamook counties.

## Heat map summarizes differences between statewide and county provider-to-population ratios in 2020 (continued).

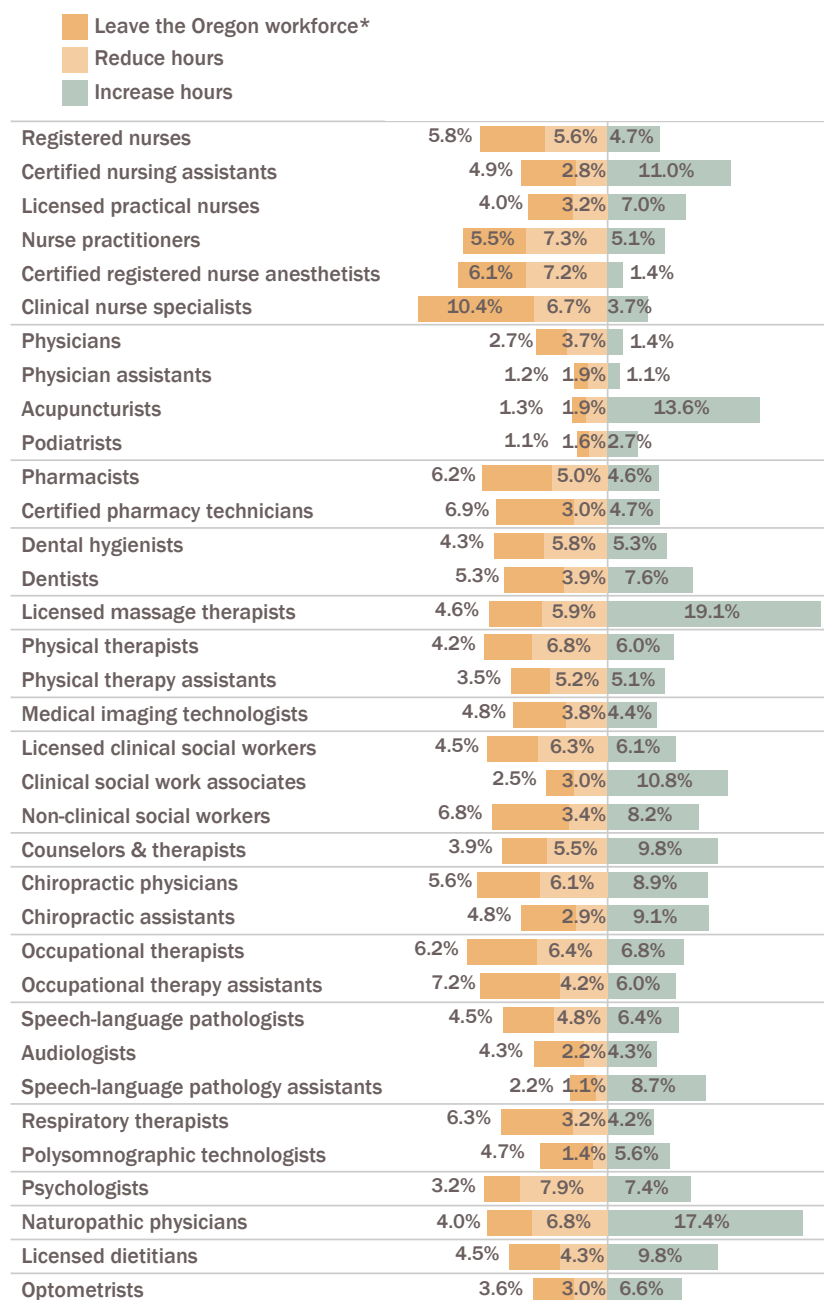
Columns: provider-to-population ratio and provider-to-selected target population ratio.

	Primary care professionals		Behavioral health professionals		Oral health professionals		Maternal child health professionals	Pediatric care professionals	Geriatric care professionals
	Pop	Selected Pop	Pop	Selected Pop	Pop	Selected Pop	Selected Pop	Selected Pop	Selected Pop
Baker	-15%	-33%	-25%	-16%	-35%	-51%	31%	61%	-25%
Benton	7%	11%	13%	12%	-21%	-20%	92%	20%	5%
Clackamas	-15%	-11%	-16%	-3%	3%	30%	-15%	-11%	-6%
Clatsop	19%	16%	-23%	-32%	4%	-7%	30%	20%	-20%
Columbia	-62%	-65%	-72%	-71%	-38%	-40%	-43%	-36%	-54%
Coos	11%	-13%	-40%	-41%	-9%	-29%	-22%	-9%	-44%
Crook	-45%	-49%	-60%	-66%	-57%	-60%	-82%	1%	-57%
Curry	11%	-7%	-68%	-67%	-30%	-54%	-5%	20%	-39%
Deschutes	11%	20%	16%	36%	22%	30%	-8%	9%	1%
Douglas	-6%	-25%	-43%	-51%	-26%	-43%	-49%	-5%	-35%
Grant	7%	-14%	-60%	-68%	-7%	-27%	204%	90%	-29%
Harney	16%	19%	-49%	-55%	-40%	-46%	169%	80%	-16%
Hood River	40%	87%	-8%	26%	49%	68%	87%	69%	90%
Jackson	15%	7%	-8%	-20%	2%	-4%	-10%	-2%	-15%
Jefferson	-37%	-40%	-62%	-77%	-51%	-64%	45%	9%	-16%
Josephine	-5%	-17%	-51%	-61%	-8%	-24%	-12%	6%	-35%
Klamath	17%	6%	-48%	-54%	-24%	-39%	64%	51%	-2%
Lake	-10%	-26%	-85%	-85%	-49%	-59%	196%	72%	-26%
Lane	—	-10%	7%	-11%	-5%	-12%	-28%	7%	-14%
Lincoln	-2%	-22%	-20%	-36%	-16%	-34%	-8%	16%	-49%
Linn	-34%	-38%	-54%	-59%	-27%	-36%	-49%	-21%	-29%
Malheur	3%	2%	-47%	-59%	-8%	-42%	-51%	4%	-21%
Marion	-5%	-1%	-8%	-5%	3%	1%	17%	-4%	15%
Morrow ‡	-35%	-25%	-77%	—	-85%	-88%	-68%	-12%	-11%
Multnomah	23%	30%	87%	82%	10%	14%	36%	11%	59%
North Central *	—	5%	—	-41%	—	-5%	-39%	-4%	-2%
Gilliam	-10%	—	-100%	—	-78%	—	—	—	—
Sherman	-28%	—	-100%	—	-100%	—	—	—	—
Wasco	22%	—	-19%	—	9%	—	—	—	—
Wheeler	-100%	—	-100%	—	-27%	—	—	—	—
Polk	-44%	-45%	-52%	-57%	-42%	-38%	-58%	-26%	-31%
Tillamook	-19%	-34%	-55%	-58%	-33%	-41%	-76%	14%	-34%
Umatilla	-18%	-17%	-62%	-39%	-23%	-25%	-41%	-25%	-17%
Union	13%	10%	-43%	-29%	-7%	-11%	-18%	-13%	-31%
Wallowa ‡	93%	63%	-42%	—	20%	17%	479%	251%	40%
Washington	-5%	15%	-22%	6%	21%	53%	-7%	-6%	27%
Yamhill	-24%	-22%	-35%	-37%	-15%	—	-33%	-34%	-23%

\*Estimate for the North Central region is shown for the provider-to-select target population ratio for Gilliam, Sherman, Wasco and Wheeler counties. ‡Estimates for the provider-to-population with frequent mental distress is suppressed for Wallowa and Morrow counties.

## Future plans to increase hours, reduce hours or leave the workforce in 2020.

### All occupations

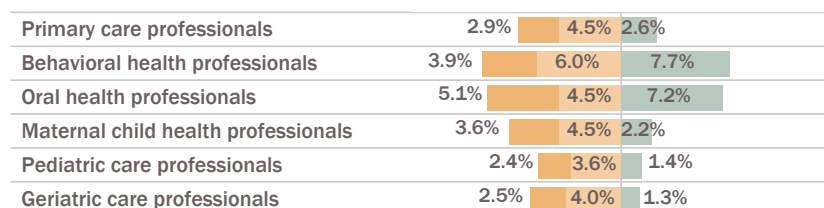


Health care professionals reported plans for their practices over the next two years, including intentions to maintain, increase or decrease their practice hours, as well as intentions to leave the occupation or to move out of state. Those who intended to leave the Oregon workforce at the highest rates were clinical nurse specialists (10.4 percent), occupational therapy assistants (7.2 percent), certified pharmacy technicians (6.9 percent), non-clinical social workers (6.8 percent), and certified registered nurse anesthetists (6.1 percent).

Those who intended to increase practice hours at the highest rates were licensed massage therapists (19.1 percent), naturopathic physicians (17.4 percent), acupuncturists (13.6 percent), certified nursing assistants (11.0 percent), clinical social work associates (10.8 percent), licensed dietitians (9.8 percent) and counselors and therapists (9.8 percent). Note that plans to increase practice hours do not necessarily reflect the ability to do so; for example, providers might try to increase their hours but lack sufficient patient demand for services.

Out of the specialty groups, oral health professionals indicated the intention to leave the Oregon workforce at the highest rate of 5.1 percent, while 7.2 percent indicated that they intended to increase their practice hours over the next two years. Behavioral health professionals had intentions of increasing their practice hours at the highest rate of 7.7 percent.

### Specialty groups



# Supplemental materials

## The Health Care Workforce Reporting Program (HWRP)

The HWRP collaborates with 17 health regulatory licensing boards (seven since 2009, ten since 2016 and 2017) to collect, process, and analyze data for over 35 occupations to understand Oregon's health care workforce; inform public and private educational and workforce investments; and inform policy recommendations for the Governor's Office, legislative leadership and state agencies regarding Oregon's health care workforce (Oregon Revised Statute (ORS) 676.410; Oregon Administrative Rule (OAR) 409-026).

For more information about methodology and results, visit

<https://www.oregon.gov/oha/hpa/analytics/Pages/Health-Care-Workforce-Reporting.aspx>

## Limitations

The Health Care Workforce Reporting Program (HWRP) collects data on occupations that are licensed in Oregon and are included in HWRP, so one major limitation of this data is that it does not represent the entire health care workforce. Data in this report was collected prior to the onset of the COVID-19 pandemic in the Spring of 2020. At this time, it is uncertain how the pandemic may affect the supply of the health care workforce in Oregon. The program does not currently collect data for many unlicensed health care professionals including traditional health workers, health care interpreters, qualified mental health professionals, addiction counselors, peer support specialists, licensed professional counselor interns, lab scientists/technicians, medical assistants, ophthalmologist technicians, and more. Survey data comes only from renewing licensees, so this report assumes that new licensees would respond similarly to renewing licensees. There is a time lag in reporting, so estimates reflect a historical point in time. Length of participation in the HWRP varies by board, so reliable estimates over time vary by occupation. Currently we are unable to estimate the number of professionals who provide telehealth. This report adds data from three licensing boards that were not included in previous reports. It also introduces data on providers who have secondary practice locations in Oregon. For those reasons, data from this report should not be compared with data from earlier reports. Data is collected for up to two practice locations, so data may not be accurate for health care professionals who have three or more practice locations or who have a mobile practice. Lastly, diversity is not in the scope of this report; please find the most recent licensed health care workforce [diversity report](#) on our website.

## Methodology and definitions

Data sources for this report include workforce data from HWRP for 2014 through the first quarter of 2020. HWRP collects workforce-related information directly from health care professionals via a survey embedded in the license renewal process. Health care professionals with an active license in each reporting year (January 2018, 2019 and 2020; month of verification varied by occupation in 2016), were included in this report. Estimates are dependent on licensees who completed the survey. Each licensee can report workforce data for up to two practice locations. Please refer to the HWRP's [General Methods documentation](#) on the website for further details. Other data sources for this report include population estimates from Portland State University (PSU) for 2014 through 2019,<sup>26</sup> from the Behavioral Risk Factor Surveillance System (BRFSS) county file 2014 through 2017,<sup>27</sup> and Oregon Vital Statistics for 2014 through 2017.<sup>28</sup>

## Definitions

Workforce supply measures are stratified by occupation (license type), by specialty group or a combination of both.

- ♦ **Specialty groups** include primary care professionals, behavioral health professionals, oral health professionals, maternal child health professionals, pediatric care professionals, and geriatric care professionals.
- ♦ **Primary care professionals** include physicians and physician assistants who specialize in family practice, general practice, geriatric medicine, pediatrics, adolescent medicine, internal medicine, or obstetrics and

gynecology; nurse practitioners who specialize in family practice, geriatrics, pediatrics, internal medicine, or OB/GYN/women's health; and naturopathic physicians who specialize in family medicine, pediatrics, geriatrics or obstetrics.

- ◆ **Behavioral health professionals** include all psychologists, counselors and therapists, licensed clinical social workers, and clinical social work associates; physicians and physician assistants who specialize in psychiatry (addiction, neurology, child, adolescent, geriatric, or forensic) or psychoanalysis; nurse practitioners who specialize in psychiatry/mental health; and naturopathic physicians who specialize in mental health.
- ◆ **Oral health professionals** include dentists who specialize in oral health, pediatric dentistry or public health; and expanded practice dental hygienists who specialize in oral health, pediatric dentistry or public health and who report holding an expanded practice permit.
- ◆ **Maternal child health professionals** include physicians and physician assistants who specialize in obstetrics and gynecology, neonatology/perinatal or maternal and fetal medicine. Also included are primary care physicians and physician assistants who answer a subsequent question saying they provide maternal child health in their practice (important for rural communities where primary care physicians provide the bulk of maternity care); nurse practitioners who specialize in maternal-child health, OB/GYN/women's health; and naturopathic physicians who specialize in obstetrics.
- ◆ **Pediatric and geriatric care professionals** are subgroups of primary care professionals and include nurse practitioners and naturopathic physicians who specialize in pediatrics or geriatrics respectively, as well as physicians and physicians assistants who report any of the primary care specialties in addition to acknowledging in subsequent questions that they provide pediatric or geriatric services.
- ◆ Specialty groups are not mutually exclusive, so some professionals are included in more than one.

Workforce supply measures include licensed, actively practicing, direct patient care full-time equivalency (FTE), provider-to-population ratios, and provider-to-selected target population ratios at the state and county levels.

- ◆ **Licensed professionals** include all health care professionals who hold an active license from an Oregon health licensing board.
- ◆ **Actively practicing professionals** are estimated by multiplying the number of licensed professionals by the proportion of survey respondents who indicate they currently provide services to Oregon residents and have a practice location in Oregon.
- ◆ **The equivalent number of professionals providing full-time direct patient care (direct patient care FTE)** is estimated by multiplying the number of actively practicing professionals by the average hours spent in direct patient care per week divided by 40 (note that this calculation caps the number of hours per week at 80 per practice location).
- ◆ **Provider-to-population ratios** are calculated by dividing direct patient care FTE by the PSU population estimate for the reporting year. PSU estimates for 2016, 2017, 2018, and 2019 are used for the HWRP reporting years 2016, 2018, 2019, 2020 (respectively). Provider-to-selected target population ratios are calculated by dividing direct patient care FTE by selected target populations are as follows:
  - ◆ Primary care providers per population of adults with one or more chronic health conditions (including asthma, arthritis, diabetes, cancer, heart disease, depression or COPD)<sup>26, 27</sup>
  - ◆ Behavioral health professionals per population of adults with frequent mental distress (14+ days in past 30 days)<sup>26, 27</sup>
  - ◆ Oral health professionals per population of adults without a dental visit for any reason within past year<sup>26, 27</sup>
  - ◆ Maternal child health providers per births<sup>28</sup>
  - ◆ Pediatricians per children 18 and under<sup>26</sup>
  - ◆ Geriatricians per adult 65 and older<sup>26</sup>

These denominators (1) were the prevalence of risk factors from BRFSS<sup>27</sup> multiplied by the average population estimates from PSU<sup>26</sup> or (2) were the average population estimates for age groups from PSU<sup>26</sup> or (3) were average birth estimates from OHA vital statistics<sup>28</sup> (all averaged for the years 2014-2017).



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29. Icons made by Tyler Gobberdiel and Adrien Coquet from The Noun Project, 2020.

## For questions about this report, contact

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Research and Data  
Oregon Health Authority  
Wkfc.Admin@dhsosha.state.or.us  
971-283-8792

Report authored by Paige Snow, Vanessa Wilson, and Amy Clary. Thank you to the licensing boards who supported this analysis. All errors are the authors'.

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# Oregon

Kate Brown, Governor

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

**TO:** Oregon Legislators, LFO, DAS & other interested parties

**FROM:** Stephen Prisby, OBD Executive Director

**DATE:** February 4, 2021

**SUBJECT:** Board of Dentistry supplemental materials for 2021-2023 Budget Development

---

A link to our 2021-2023 Governor's Recommended Budget can be accessed [HERE](#)

The budget document is posted on the Oregon Board of Dentistry Website.

I also attached two additional documents:

- Program Prioritization
- Other Funds estimated Ending Balance

# Program Prioritization for 2021-23

<b>Agency Name:</b> Oregon Board of Dentistry																					
<b>2021-23 Biennium</b>																			<b>Agency Number: 83400</b>		
Agency is One (1) Program Unit																					
<b>Program/Division Priorities for 2021-23 Biennium</b>																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
<b>Priority</b> (ranked with highest priority first)	<b>Agency Initials</b>	<b>Program or Activity Initials</b>	<b>Program Unit/Activity Description</b>	<b>Identify Key Performance Measure(s)</b>	<b>Primary Purpose Program-Activity Code</b>	<b>GF</b>	<b>LF</b>	<b>OF</b>	<b>NL-OF</b>	<b>FF</b>	<b>NL-FF</b>	<b>TOTAL FUNDS</b>	<b>Pos.</b>	<b>FTE</b>	<b>New or Enhanced Program (Y/N)</b>	<b>Included as Reduction Option (Y/N)</b>	<b>Legal Req. Code (C, D, FM, FO, S)</b>	<b>Legal Citation</b>	<b>Explain What is Mandatory (for C, FM, and FO Only)</b>	<b>Comments on Proposed Changes to CSL included in Agency Request</b>	
Agcy	Prgm/ Div	OBD																			
83400	1	OBD	LIC	1) Process new license applications 2) Renew existing licenses 3) Answer questions from licensees and applicants 4) Work with investigators on problem applications 5) Update database records (addresses, license status, etc.) 6) Develop license policy	1,3,4			800,000				\$ 800,000	1	1.50	n	y	S	ORS676			
		OBD	INV	1) Investigate complaints 2) Assist Board in developing remedies 3) Coordinate contested case hearings 4) Monitor licensees under probation 5) Provide required information to national databases 6) Work with License staff on problem applications 7) Perform triage and investigative services for the Health Professionals' Services Program	2,4,5			1,200,000				\$ 1,200,000	4	4.00	n	y	S	ORS676			
		OBD	ADM	1) Provide public information through electronic data requests 2) Rules Promulgation 3) Education & Outreach 4) Borrd member relations 4) Other duties as assigned	1,2,3,4,5			1,500,000				\$ 1,500,000	3	2.50	n	y	S	ORS676			
												\$ -									
												\$ -									
												\$ -									
												\$ -									
												\$ -									
												\$ -									
												\$ 3,500,000	8	8.00							

Activities were prioritized based on the following criteria:

- 1) Does the activity fulfill a statutory mandate?
- 2) Does the activity support the mission of the Oregon Medical Board?
- 3) Does the activity support the Governor's priorities?

## 7. Primary Purpose Program/Activity Exists

- 1 Civil Justice
- 2 Community Development
- 3 Consumer Protection
- 4 Administrative Function
- 5 Criminal Justice
- 6 Economic Development
- 7 Education & Skill Development
- 8 Emergency Services
- 9 Environmental Protection
- 10 Public Health
- 11 Recreation, Heritage, or Cultural
- 12 Social Support

## 19. Legal Requirement Code

- C Constitutional
- D Debt Service
- FM Federal - Mandatory
- FO Federal - Optional (once you choose to participate, certain requirements exist)
- S Statutory

Within each Program/Division area, prioritize each Budget Program Unit (Activities) by detail budget level in ORBITS

## Document criteria used to prioritize activities:

Activities were prioritized based on the following criteria:

- 1) Does the activity fulfill a statutory mandate?
- 2) Does the activity support the mission of the Oregon Board of Dentistry?
- 3) Does the activity support the Governor's priorities?

Agency Request

☒ Governor's Recommended

Legislatively Adopted

Budget Page

Attachment #3

**Agency:** Oregon Board of Dentistry  
**Contact Person (Name & Phone #):** Stephen Prisby, (971) 673-3200

**Objective: Provide updated Other Funds ending balance information for potential use in the development of the 2021-23 legislatively adopted budget.**

Column (a): Select one of the following: Limited, Nonlimited, Capital Improvement, Capital Construction, Debt Service, or Debt Service Nonlimited.

Column (b): Select the appropriate Summary Cross Reference number and name from those included in the 2019-21 Legislatively Approved Budget. If this changed from previous structures, please note the change in Comments (Column (j)).

Column (c): Select the appropriate, statutorily established Treasury Fund name and account number where fund balance resides. If the official fund or account name is different than the commonly used reference, please include the working title of the fund or account in Column (j).

Column (d): Select one of the following: Operations, Trust Fund, Grant Fund, Investment Pool, Loan Program, or Other. If "Other", please specify. If "Operations", in Comments (Column (j)), specify the number of months the reserve covers, the methodology used to determine the reserve amount, and the minimum need for cash flow purposes.

Column (e): List the Constitutional, Federal, or Statutory references that establishes or limits the use of the funds.

Columns (f) and (h): Use the appropriate, audited amount from the 2019-21 Legislatively Approved Budget and the 2019-21 Current Service Level at the Agency Request Budget level.

Columns (g) and (i): Provide updated ending balances based on revised expenditure patterns or revenue trends. Do not include adjustments for reduction options that have been submitted unless the options have already been implemented as part of the 2019-21 General Fund approved budget or otherwise incorporated in the 2019-21 LAB. The revised column (i) can be used for the balances included in the Governor's budget if available at the time of submittal. Provide a description of revisions in Comments (Column (j)).

Column (j): **Please note any reasons for significant changes in balances previously reported during the 2019 session.**

Additional Materials: If the revised ending balances (Columns (g) or (i)) reflect a variance greater than 5% or \$50,000 from the amounts included in the LAB (Columns (f) or (h)), attach supporting memo or spreadsheet to detail the revised forecast.

# HOW DOES A BILL BECOME A LAW?

## 1 EVERY LAW STARTS WITH AN IDEA



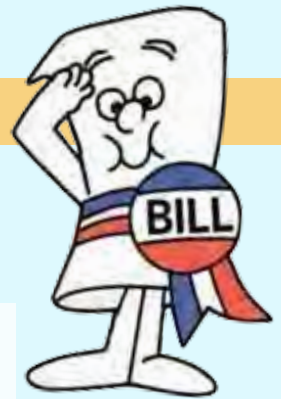
That idea can come from anyone, even you! Contact your Legislator to share your idea. If they want to try to make it a law, they will write a bill. Legislators or legislative committees can sponsor a bill.

## 2 THE BILL IS INTRODUCED

A bill can start in either the Senate or House. The bill is then assigned to a committee.

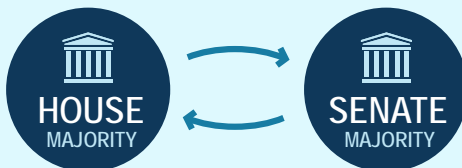
## 3 THE BILL GOES TO COMMITTEE

Representatives or Senators meet in a small group to talk about, and make changes to the bill. This is also the time when the public can voice their opinion, like by testifying before committee or writing their legislator. The committee votes to accept or reject the bill and its changes before sending it to: **the House or Senate floor for debate.**



## 4 LEGISLATORS DEBATE AND VOTE

Members of the House or Senate can now debate the bill. If the majority vote for and pass the bill, it moves to the other chamber to go through a similar process of committees, debate, and voting. Both chambers have to agree on the same version of the final bill before it goes to the Governor.



### DID YOU KNOW?

The House can vote four different ways, including an electronic voting system while the Senate only votes by voice, saying "yay" or "nay."

## 5 GOVERNOR ACTION

When the bill reaches the Governor, he or she can:

### ✓ APPROVE and PASS

The Governor signs the bill. The bill is law.

### THE BILL IS LAW



### The Governor can also:

#### Veto

When the Governor plans to veto a bill, he/she sends a letter to the Secretary of State. The legislature can override the veto with 2/3 vote of those present in both the House and the Senate and the bill will become law.

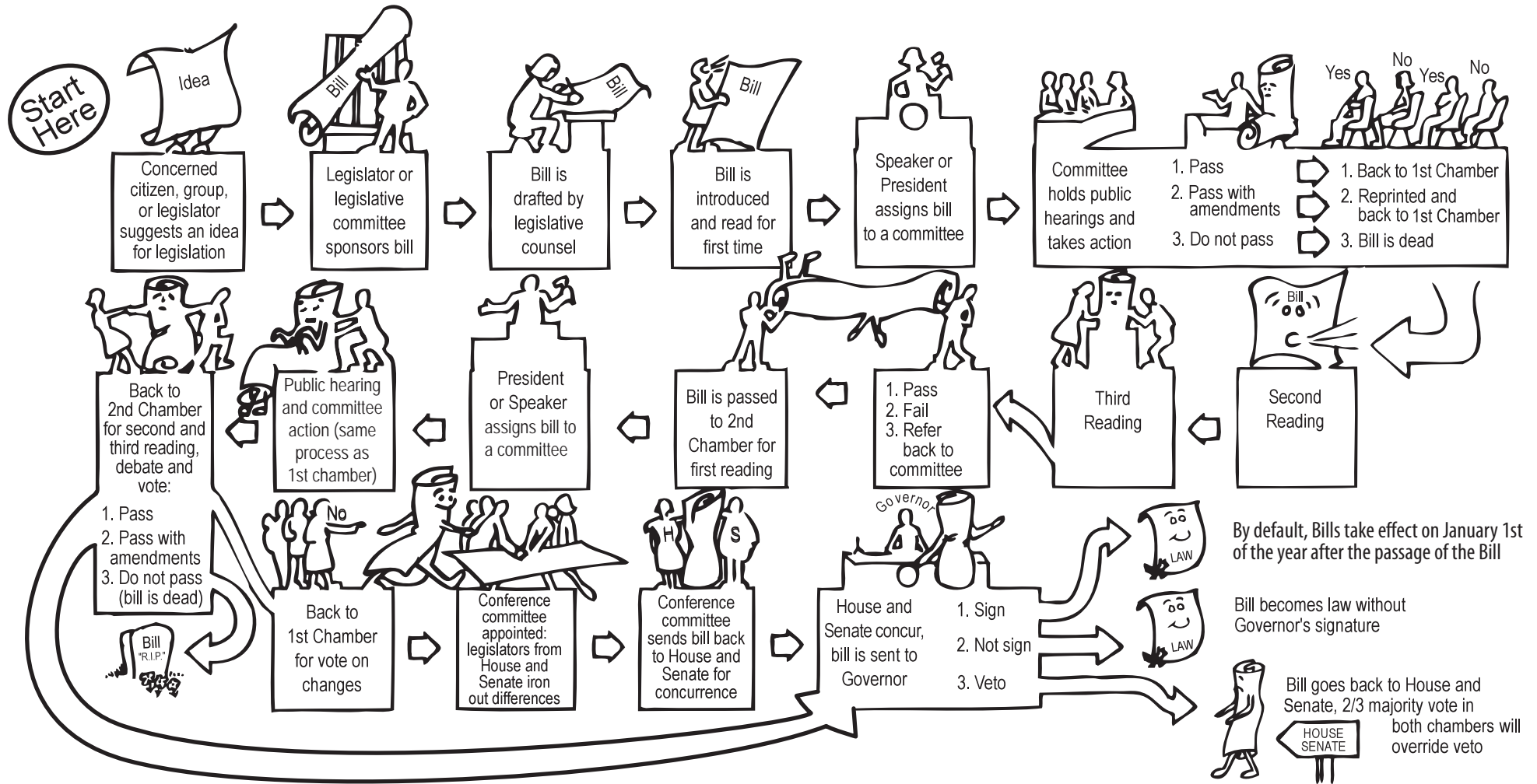
#### Choose no action

The Governor can decide to do nothing. The bill then automatically becomes law on January 1 of the year after the passage or the prescribed effective date on the bill.



# How an Idea Becomes Law

## A simple view of the Oregon Legislative Process



### The Oregon Legislative Assembly

The Oregon Legislative Assembly is state government's "board of directors." It is responsible for making laws dealing with Oregon's well-being, adopting the state's budget, and for setting public policy. The Legislative Assembly is made up of two bodies: the Senate and the House of Representatives. The Senate consists of 30 members elected for four-year terms. The House consists of 60 representatives elected for two-year terms. Each member of the legislature represents a district (an area determined by population). Every Oregonian is represented by one state Senator and one state Representative.

The legislature convenes annually in February at the State Capitol in Salem, but sessions may not exceed 160 days in odd-numbered years and 35 days in even-numbered years, unless extended by a two-thirds vote in each chamber. About 3,000 bills are considered in each odd-year session. Relying largely upon work done in committees, the legislature enacts about one-third of these bills into Law.

## 2021 Session Calendar

JANUARY						
S	M	T	W	T	F	S
					1 New Years Day	2
3	4	5	6	7	8	9
10	11 Org. Days - Swearing in	12 Trainings	13 Trainings	14 Trainings	15 LC Draft Request	16
17	18 MLK Day	19 Session begins	20	21	22	23
24/ 31	25	26	27	28	29	30

FEBRUARY						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15 President's Day	16	17	18	19 LC returns drafts	20
21	22	23 Measure Intro Deadline	24 Revenue Forecast	25	26	27
28						

MARCH						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19 Post Work Session	20
21	22	23	24	25	26	27
28	29	30	31			

APRIL						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13 1st Chamber WS Deadline	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

MAY						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14 Post work session	15
16	17	18	19 Revenue Forecast	20	21	22
23/ 30	24/ 31 Memorial Day	25	26	27	28 2nd Chamber WS Deadline	29

JUNE						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18 Target Sine Die	19
20	21	22	23	24	25	26
27 Constitutional Sine Die	29	29	30			

12/28/2020

Dates subject to the adoption of the 2021 Regular Session concurrent resolution.

<b>Organizational Day</b>	Member swearing in; first reading of pre-session filed bills.
<b>Training Days</b>	Member and staff virtual trainings.
<b>State Holiday</b>	Holiday
<b>Leg. Counsel Deadlines</b>	Deadlines for bills to be requested, returned by LC, and introduced (after these deadlines, drafts/intros count against per-legislator limits).
<b>Important Session Dates</b>	Does not apply to Rules, Revenue, or Joint Committees. Joint Transportation will adhere to the second chamber deadline only.
<b>Floor as Schedule Requires</b>	Senate and House floor sessions may be called as noted by chamber schedule(s).
<b>Regular Floor Sessions</b>	Senate and House floor sessions on all weekdays unless otherwise canceled.



## A GUIDE TO READING A LEGISLATIVE MEASURE

76th OREGON LEGISLATIVE ASSEMBLY--2012 Regular Session

LEGISLATIVE SESSION AND YEAR

### Senate Bill 1575

Sponsored by Senator PROZANSKI, Representatives SHEEHAN, WEIDNER; Senators BEYER, COURTNEY, DEVLIN, EDWARDS, JOHNSON, MONNES ANDERSON, STEINER HAYWARD, Representatives BARNHART, BEYER, HOLVEY, HOYLE, SCHAUFLE (Pre-session filed.)

**MEASURE NUMBER:** A member introduces a bill in the chamber in which the member serves. Bills raising revenue must originate in the House. The Desk assigns measure number.

#### SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Increases penalty for crime of disorderly conduct if crime is committed within 200 feet of property on which person knows funeral service is being conducted. Punishes by maximum of one year's imprisonment, \$6,250 fine, or both.

Declares emergency, effective on passage.

**SPONSORS:** Member(s) assuming responsibility for introducing measure.

#### A BILL FOR AN ACT

Relating to disorderly conduct in the second degree; amending ORS 166.025; and declaring an emergency.

**SUMMARY:** Also known as the Digest. Written by Legislative Counsel.

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

**SECTION 1.** ORS 166.025 is amended to read:

166.025. (1) A person commits the crime of disorderly conduct in the second degree if, with intent to cause public inconvenience, annoyance or alarm, or recklessly creating a risk thereof, the person:

**RELATING TO CLAUSE:** Measure contents must be "germane" to relating clause. Important for gut and stuff.

(a) Engages in fighting or in violent, tumultuous or threatening behavior;

(b) Makes unreasonable noise;

(c) Disturbs any lawful assembly of persons without lawful authority;

(d) Obstructs vehicular or pedestrian traffic on a public way;

*[(e) Congregates with other persons in a public place and refuses to comply with a lawful order of the police to disperse;]*

*[(f)]* (e) Initiates or circulates a report, knowing it to be false, concerning an alleged or impending fire, explosion, crime, catastrophe or other emergency; or

*[(g)]* (f) Creates a hazardous or physically offensive condition by any act which the person is not licensed or privileged to do.

(2)(a) Disorderly conduct in the second degree is a Class B misdemeanor.

(b) Notwithstanding paragraph (a) of this subsection, disorderly conduct in the second degree is a Class A misdemeanor if the crime is committed within 200 feet of the real property on which the person knows a funeral service is being conducted.

(3) As used in this section, "funeral service" means a burial or other memorial service for a deceased person.

**SECTION 2.** This 2012 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2012 Act takes effect on its passage.

**EXISTING LAW:** Current Oregon Revised Statutes (ORS) that will be modified.

**SECTION AND PROPOSED ACTION:** Each section of the ORS will be included.

**[Italic font in brackets]:** deleting current language from current statutes.

**Boldfaced font:** Adding new language to current statutes.

**NOTE:** Matter in boldfaced type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in boldfaced type.

**LC:** Legislative Concept number

LC 20

**EFFECTIVE DATE:** Date measure becomes law. Without an emergency clause, measure takes effect January 1 of the year after passage.

**EMERGENCY CLAUSE:** With emergency clause, measure takes effect either on the date specified by the measure, or is effective immediately, which means that the measure will take effect on the date the governor signs the legislation into law. Emergency Clauses may not be attached to measures raising revenue.

**OPERATIVE DATE:** If a bill requires administrative preparation before the bill is fully operative, an operative date is used to delay operation of all or part of the bill. If an operative date is used, the entire bill takes effect on its effective date. However, a specified part of the Act does not become operational until a later specified date. It is important to distinguish between items that are authorized on and after the effective date and items that are not authorized until the operative date.

**SUNSET CLAUSE:** a statement added to the end of a measure which causes the act to "sunset," or become ineffective, after a certain date.

## A GUIDE TO READING A LEGISLATIVE MEASURE

### TYPES OF MEASURES

**Measure** – a written document used by the Legislative Assembly to propose a law or to express itself as a body. There are six types of measures.

1. **Bill** - a measure that creates new law, amends or repeals existing law, appropriates money, prescribes fees, transfers functions from one agency to another, provides penalties, or takes other action.
2. **Memorial** – a measure adopted by either the House or the Senate to make a request of or express an opinion to Congress or the President of the United States, or both. It is not used to commemorate the dead.
3. **Joint Memorial** – a measure adopted by both houses and used to make a request of or to express an opinion to Congress, the President of the United States, or both. It is not used to commemorate the dead.
4. **Resolution** – a measure used by the House or the Senate to take an action that would affect only its own members, such as appointing a committee of its members, or expressing an opinion or sentiment on a matter of public interest.
5. **Concurrent Resolution** – a measure affecting actions or procedures of both houses of the Legislature such as joint sessions, appointments of joint committees and adjournments. A concurrent resolution is used to express sympathy, congratulations, commendation, or to commemorate the dead.
6. **Joint Resolution** – a measure used for proposing constitutional amendments, creating interim committees (ORS 171.610), provide for the printing of legislative publication, giving direction to a state agency, expressing legislative approval of action taken by someone else, or authorizing a kind of temporary action to be taken. A joint resolution may also authorize expenditures out of the legislative expense appropriations.

**Referendum** – measure put to a vote by a legislature

**Initiative** – measure petitioned by citizens

### TYPES OF LAW

**Oregon Revised Statutes (ORS)** – the ORS is a subject compilation of the Laws of Oregon. A multi-volume set of Oregon statutes, codified by classification system of subjects that are of a "general, public and permanent nature." Oregon Revised Statutes includes the Oregon and United States Constitutions, a general index, comparative section tables and annotations. A new edition of Oregon Revised Statutes is published by the Legislative Counsel Committee after adjournment of each regular session of the Legislative Assembly.” Also available online.

**Oregon Laws** (Session Laws) – a chronological compilation of laws passed by the Legislature and signed by the Governor published officially. Oregon Laws includes tables of Senate and House bills enacted during the session and tables of "sections amended, repealed or added to" and a general index. Available online and in Legislative Counsel.



## A GUIDE TO READING A LEGISLATIVE MEASURE

### ABRIDGED LEGISLATIVE GLOSSARY

**amendment** – proposed modification to the measure. Any member and any committee may ask the Office of the Legislative Counsel to draft an amendment to any bill. Must be “germane” to the relating clause (subject) of the bill. Amendments not marked confidential can be shared.

**assignment to Committee** – Speaker or President assigns measure to a committee.

**bill back** – a document used to introduce a measure into the formal legislative process. Information on bill back includes the sponsor(s), bill’s title and whose behalf the sponsor is introducing the bill. Legislative Counsel produces this bill back along with the draft bill for the requester of the measure.

**Chief Clerk of the House** - chief administrative officer of the House (Ramona Kenady Line).

**committee action** – Committee may hold public hearings and takes action. Pass = Back to first Chamber. Pass with amendments = Reprinted and back to Chamber. Do not pass = bill is dead.

**committee administrator** – professional staff for a substantive (policy) committee. When a measure is referred to a committee, the Committee Administrator will work with the Committee Chair to schedule the measure if the Chair decides the committee will consider the bill. The Committee Administrator is responsible for preparing the Staff Measure Summary (SMS) for committee members.

**committee assistant** – responsible for an audio recording of the proceedings and prepares minutes containing a “summary of discussion on any matter.”

**conflict amendments** – if the legislature passes two or more bills dealing with the same issue and the bills conflict, under section 22, Article IV of the Oregon Constitution, “the act last signed by the Governor shall control.” Typically, the conflict amendments will provide that, if the preferred and alternate versions both become law, the alternate version is repealed.

**“dash” (-) numbers** – each time the Publication Services section in the Office of the Legislative Counsel processes an amendment, the amendment receives -1, -2, -3... -n designations.

**The Desk** – the station of the Secretary of the Senate, or the station of the Chief Clerk of the House.

**engrossed bill** – version of bill with amendment(s). A bill is engrossed only after a committee has adopted the amendment(s) to a bill and sent the bill to the floor.

**enrolling** – when the second chamber has approved a bill, the Desk once more sends the bill to the Office of the Legislative Counsel. This time, the office converts the bill into its enrolled form (proofread and with added signature lines for the chief legislative officer of the chamber in which the bill started, the presiding officers, the Governor and the Secretary of State).

**first read** – a recitation of the measure's number and title by the Reading Clerk. The measure becomes public for the first time. Once read the Desk transmits the bill to the Senate President or the Speaker of the House.

## A GUIDE TO READING A LEGISLATIVE MEASURE

**gut and stuff** – gutting a bill’s content and replacing it with amendments leaving only the bill’s title intact.

**legislative concept (LC draft)** – draft of an idea for legislation prepared by Legislative Counsel. If the draft is introduced as a measure, it is given a bill number. For example SB 1575 (2012) was LC 20. The LC and a bill back are delivered to the Desk where it is assigned a bill number.

**overriding a veto** – Section 15b, Article V of the Oregon Constitution authorizes the legislature to override the Governor’s veto by obtaining 2/3 votes of the members present in each chamber.

**public hearing** – the meeting at which the Committee Administrator explains measure and the committee takes testimony.

**repassing** – if the second chamber amends and passes a bill, then the bill returns to the original chamber to decide whether to concur in the amendments and repass the bill.

**second reading** – a second recitation of the measure's number and title by the Reading Clerk. Second Reading occurs after the measure has been referred to committee, worked on, and reported back to the floor for a vote.

**Secretary of the Senate** – chief administrative officer of the Senate (Robert Taylor).

**sign or veto** – Sections 15a and 15b Article V of the Oregon Constitution give the Governor the authority to veto whole bills or “single items in appropriation bills.” During session, the Governor has 5 weekdays within which to veto a bill. The Governor may take up to 30 days from sine die to veto bills passed within the last 5 days of the session. The Governor must make a public announcement at least 5 days before the veto that he has the “possible intention” to veto the bill.

**staff measure summary (SMS)** – a brief, impartial description of a measure that must accompany the measure when it is reported out of committee.

**subsequent referral** – The President of the Senate or the Speaker of the House may place a subsequent referral to the Joint Committee on Ways and Means (JWM) on a substantive or policy bill after it is introduced in each respective chamber and as it is assigned to a substantive committee(s). The referral is at the sole discretion of the President or the Speaker; there are no House or Senate rules requiring a subsequent referral to JWM.

**third reading** – a third recitation of a measure's number and title by the Reading Clerk on the floor before a final vote by either Chamber

**work session** – the meeting at which a committee votes (take action) on a bill. Once the committee votes to pass a bill to the floor, the chair of the committee designates a member as the carrier of the bill. The carrier’s role is to explain the bill to members and lead the debate on the floor.

Custom Report  
Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2074</a>	<a href="#">HB 2074</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to prescription monitoring program fees; prescribing an effective date.</p> <p>Increases prescription monitoring program fees from \$25 to \$35.</p> <p>Relating to prescription monitoring program fees; creating new provisions; amending ORS 431A.880; and prescribing an effective date.</p> <p>Increases prescription monitoring program fees from \$25 to \$35.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">HB 2075</a>	<a href="#">HB 2075</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to radiation; declaring an emergency.</p> <p>Establishes vendor license and annual fee for persons engaging in certain conduct regarding radiation devices and equipment, including X-ray machines and tanning devices.</p> <p>Relating to radiation; creating new provisions; amending ORS 453.001, 453.605, 453.729 and 453.757; and declaring an emergency.</p> <p>Establishes vendor license and annual fee for persons engaging in certain conduct regarding radiation devices and equipment, including X-ray machines and tanning devices. Modifies registration fee for certain radiation devices and equipment from per machine basis to per tube basis. Increases registration fee for tanning devices.</p> <p>Becomes operative January 1, 2022.</p> <p>Declares emergency, effective on passage.</p>				

Custom Report  
Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2076</a>	<a href="#">HB 2076</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	

Relating to emergency medical services; prescribing an effective date.

Establishes Emergency Health Care Systems Program and Emergency Health Care System Advisory Board within Oregon Health Authority.

Relating to emergency medical services; creating new provisions; amending ORS 146.015, 181A.375, 353.450, 431A.055, 431A.100, 441.020, 442.507, 442.870, 445.030, 478.260, 682.017, 682.025, 682.031, 682.035, 682.041, 682.045, 682.047, 682.051, 682.056, 682.059, 682.062, 682.063, 682.066, 682.068, 682.075, 682.079, 682.085, 682.089, 682.105, 682.107, 682.204, 682.208, 682.216, 682.218, 682.220, 682.224 and 682.245; repealing ORS 431A.050, 431A.055, 431A.060, 431A.065, 431A.070, 431A.075, 431A.080, 431A.085, 431A.090, 431A.095, 431A.100, 431A.105, 431A.525, 431A.530, 682.027 and 682.039; and prescribing an effective date.

Establishes Emergency Health Care Systems Program and Emergency Health Care System Advisory Board within Oregon Health Authority. Directs authority to designate emergency health care centers for provision of cardiac and pediatric emergency health care. Modifies terminology related to emergency medical services. Authorizes Governor to make available for use emergency medical services personnel and equipment. Creates offense of unlawful operation of unlicensed emergency medical services agency. Punishes by maximum of 364 days' imprisonment, \$6,250 fine, or both. Becomes operative January 1, 2022.

Directs authority to designate emergency health care regions within state. Becomes operative January 1, 2023.

Directs authority to designate emergency health care centers for provision of stroke and trauma emergency health care. Directs program to establish emergency health care data systems for collection of information related to emergency health care in this state. Requires licensure for nontransport EMS service. Defines "nontransport EMS service." Becomes operative January 1, 2025.

Takes effect on 91st day following adjournment sine die.

<a href="#">HB 2078</a>	<a href="#">HB 2078</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown)	01/26/21 - Public Hearing held. 01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
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Relating to health.

Repeals electronic credentialing information program.

Relating to health; creating new provisions; amending ORS 243.105, 413.310, 413.572, 413.590, 441.223, 459A.200, 675.110, 677.228, 677.510, 678.101, 684.092, 685.102, 685.106 and 689.285; and repealing ORS 441.224, 441.226, 441.228, 441.229, 441.232 and 441.233.

Repeals electronic credentialing information program.

Removes requirement for Pain Management Commission to review pain management curricula of educational institutions. Modifies pain management education requirements for health professionals.

Removes requirement for Oregon Health Authority to annually report to Legislative Assembly on Oregon Health Information Technology program.

Aligns with federal law requirements about eligibility of temporary public employees to qualify for health benefit coverage.

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2079</a>	<a href="#">HB 2079</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	

Relating to health care providers.

Requires health care entities to obtain approval from Oregon Health Authority before any mergers, acquisitions or affiliations of entities that had \$25 million or more in net patient revenue in prior fiscal year or before mergers, acquisitions or affiliations that will result in one entity having increase in net patient revenue of \$10 million or more.

Relating to health care providers; creating new provisions; and amending ORS 413.032, 413.037, 413.101, 413.181, 415.013, 415.019 and 415.103.

Requires health care entities to obtain approval from Oregon Health Authority before any mergers, acquisitions or affiliations of entities that had \$25 million or more in net patient revenue in prior fiscal year or before mergers, acquisitions or affiliations that will result in one entity having increase in net patient revenue of \$10 million or more. Specifies procedures.

Requires Oregon Health Policy Board to establish criteria for approval of mergers, acquisitions and affiliations based on specified factors.

<a href="#">HB 2080</a>	<a href="#">HB 2080</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
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Relating to pharmaceuticals.

Establishes Office of Pharmaceutical Purchasing in Oregon Health Authority and specifies duties.

Relating to pharmaceuticals; creating new provisions; and amending ORS 413.032, 414.312, 414.314, 414.318, 414.320, 414.325, 414.326, 414.334, 414.337 and 689.185.

Establishes Office of Pharmaceutical Purchasing in Oregon Health Authority and specifies duties. Requires office to administer multistate prescription drug purchasing consortium.

Authorizes Oregon Health Authority to require prior authorization for drugs under specified conditions.

<a href="#">HB 2081</a>	<a href="#">HB 2081</a> <a href="#">INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	02/11/21 - Public Hearing scheduled. 01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	3:15PM 02/11/2021 House Committee Health Care Public Hearing Remote F
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Relating to health care costs.

Modifies Health Care Cost Growth Target Program and Health Care Cost Growth Target Implementation Committee.

Relating to health care costs; amending ORS 442.385 and 442.386 and sections 3, 4 and 5, chapter 560, Oregon Laws 2019.

Modifies Health Care Cost Growth Target Program and Health Care Cost Growth Target Implementation Committee.

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2084</a>	<a href="#">HB 2084 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care.</p> <p>Requires Oregon Health Authority to report to interim committees of Legislative Assembly related to health on impacts of federal changes arising from executive or legislative branches of federal government on access to health care in this state and to recommend legislation, if any, that is needed to ensure no diminution of access to quality, affordable health care by residents of this state.</p> <p>Relating to health care.</p> <p>Requires Oregon Health Authority to report to interim committees of Legislative Assembly related to health on impacts of federal changes arising from executive or legislative branches of federal government on access to health care in this state and to recommend legislation, if any, that is needed to ensure no diminution of access to quality, affordable health care by residents of this state.</p>				
<a href="#">HB 2087</a>	<a href="#">HB 2087 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care interpreters.</p> <p>Requires Oregon Health Authority to adopt rules to ensure that health care providers use health care interpreters, reimbursed by state, when interacting with medical assistance recipients who have limited English proficiency or who communicate in sign language.</p> <p>Relating to health care interpreters; creating new provisions; and amending ORS 413.550 and 413.552.</p> <p>Requires Oregon Health Authority to adopt rules to ensure that health care providers use health care interpreters, reimbursed by state, when interacting with medical assistance recipients who have limited English proficiency or who communicate in sign language.</p>				
<a href="#">HB 2164</a>	<a href="#">HB 2164 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Office of the Governor)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health; prescribing an effective date.</p> <p>Directs office of the Governor to study laws related to health and provide results to interim committees of Legislative Assembly no later than September 15, 2022.</p> <p>Relating to health; and prescribing an effective date.</p> <p>Directs office of the Governor to study laws related to health and provide results to interim committees of Legislative Assembly no later than September 15, 2022.</p> <p>Sunsets January 2, 2023.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">HB 2167</a>	<a href="#">HB 2167 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Office of the Governor)	01/19/21 - Referred to Rules. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to state entities.</p> <p>Directs Office of Governor to study and make recommendations regarding certain proposals relating to state boards and commissions.</p> <p>Relating to state entities.</p> <p>Directs Office of Governor to study and make recommendations regarding certain proposals relating to state boards and commissions. Requires office to submit report on findings by January 1, 2023.</p>				

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2222</a>	<a href="#">HB 2222</a> <a href="#">INTRO</a>	Rep Wilde (Presession filed)	01/19/21 - Referred to Rules. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to public meetings.</p> <p>Modifies definition of "meeting" for purposes of public meetings law to state that meeting may occur without regard to location or stated purpose for which members of governing body convene.</p> <p>Relating to public meetings; amending ORS 192.610, 192.660, 192.680, 244.290 and 244.350.</p> <p>Modifies definition of "meeting" for purposes of public meetings law to state that meeting may occur without regard to location or stated purpose for which members of governing body convene. Excludes one-on-one meetings of two members of governing body from definition of "meeting," even if serial one-on-one meetings take place between members of governing body.</p> <p>Establishes affirmative duty of chief administrative officer of public body or employee of public body who routinely and customarily advises governing body on public meetings law requirements to advise governing body on whether meeting content qualifies for executive session. Establishes joint and several liability for specified public body officers and employees who, with willful misconduct, fail or incorrectly advise governing body of meeting content's eligibility for executive session.</p> <p>Authorizes Oregon Government Ethics Commission to adopt rules establishing criteria for when official or employee of public body has affirmative duty to advise on meeting content qualification for executive session. Authorizes commission to impose civil penalties on members of governing body or specified officers or employees of public body for conducting executive sessions in which meeting content does not meet executive session requirements.</p>				
<a href="#">HB 2315</a>	<a href="#">HB 2315</a> <a href="#">INTRO</a>	Rep Alonso Leon; Rep Salinas (Presession filed)	02/04/21 - Work Session held. 01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to continuing education for professionals; prescribing an effective date.</p> <p>Directs Oregon Health Authority and specified professional regulatory boards to require licensees regulated by authority or board to complete six hours of continuing education related to suicide risk assessment, treatment and management every six years and to report completion of continuing education to authority or board.</p> <p>Relating to continuing education for professionals; creating new provisions; amending ORS 676.860; and prescribing an effective date.</p> <p>Directs Oregon Health Authority and specified professional regulatory boards to require licensees regulated by authority or board to complete six hours of continuing education related to suicide risk assessment, treatment and management every six years and to report completion of continuing education to authority or board. Allows authority and boards to establish minimum requirements that licensee must meet to be exempt from requirement to complete continuing education.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">HB 2321</a>	<a href="#">HB 2321</a> <a href="#">INTRO</a>	Rep Salinas (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care workers; declaring an emergency.</p> <p>Requires Oregon Health Authority to convene advisory committee to study adequacy of personal protective equipment provided to health care workers to protect against SARS-CoV-2 and to report findings to interim committee of Legislative Assembly.</p> <p>Relating to health care workers; and declaring an emergency.</p> <p>Requires Oregon Health Authority to convene advisory committee to study adequacy of personal protective equipment provided to health care workers to protect against SARS-CoV-2 and to report findings to interim committee of Legislative Assembly.</p> <p>Sunsets January 2, 2023.</p> <p>Declares emergency, effective on passage.</p>				



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Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
HB 2335	HB 2335 INTRO	Rep Bonham; Rep Levy; Sen Steiner Hayward (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to interstate health professional licensure compacts; declaring an emergency.</p> <p>Enacts interstate Nurse Licensure Compact.</p> <p>Relating to interstate health professional licensure compacts; creating new provisions; amending ORS 676.177, 677.080, 677.290, 678.021, 678.023 and 678.170; and declaring an emergency.</p> <p>Enacts interstate Nurse Licensure Compact. Permits Oregon State Board of Nursing to disclose specified information to Interstate Commission of Nurse Licensure Compact Administrators. Exempts individuals practicing nursing in this state under compact from restrictions on use of titles. Allows board to establish account to meet financial obligations imposed on State of Oregon as result of participation in compact. Continuously appropriates moneys from account to board for specified purpose.</p> <p>Enacts Interstate Medical Licensure Compact. Permits Oregon Medical Board to disclose specified information to Interstate Medical Licensure Compact Commission. Exempts individuals practicing medicine in this state under compact from restrictions on use of titles. Allows board to establish account to meet financial obligations imposed on State of Oregon as result of participation in compact. Continuously appropriates moneys from account to board for specified purpose.</p> <p>Declares emergency, effective on passage.</p>				
HB 2359	HB 2359 INTRO	Rep Nosse; Rep Ruiz; Rep Salinas; Sen Frederick (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care interpreters; declaring an emergency.</p> <p>Requires health care providers to work with health care interpreters from health care interpreter registry operated by Oregon Health Authority to provide interpretation services.</p> <p>Relating to health care interpreters; creating new provisions; amending ORS 192.630, 413.550, 413.552, 413.556, 413.558, 414.572 and 656.027; repealing ORS 657.048; and declaring an emergency.</p> <p>Requires health care providers to work with health care interpreters from health care interpreter registry operated by Oregon Health Authority to provide interpretation services. Requires authority to adopt rules to enforce requirement. Provides exceptions.</p> <p>Requires interpretation service companies to register with authority. Requires companies to only employ or contract with health care interpreters listed on health care registry, subject to exceptions. Requires Commissioner of Bureau of Labor and Industries to enforce requirement to only employ or contract with health care interpreters listed on registry.</p> <p>Requires Oregon Council on Health Care Interpreters to adopt code of ethics for health care interpreters and procedures to evaluation quality of health interpretation services.</p> <p>Requires authority to train and certify or qualify health care interpreters, maintain central registry of certified or qualified health care interpreters from which patients or health care providers can schedule appointments with health care interpreters and publish specified guidance to health care interpreters.</p> <p>Requires coordinated care organizations to use health care interpreters listed on health care interpreter registry.</p> <p>Makes certain health care interpreters subject workers for purposes of workers' compensation benefits.</p> <p>Declares emergency, effective on passage.</p>				



Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2362</a>	<a href="#">HB 2362</a> <a href="#">INTRO</a>	Rep Dexter; Rep Salinas (Presession filed)	02/09/21 - Public Hearing scheduled. 01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	3:15PM 02/09/2021 House Committee Health Care Public Hearing Remote F

Relating to health care providers; prescribing an effective date.

Requires health care entities to obtain approval from Oregon Health Authority before any mergers, acquisitions or affiliations of entities that had \$25 million or more in net patient revenue in preceding three fiscal years or before mergers, acquisitions or affiliations that will result in one entity having increase in net patient revenue of \$1 million or more.

Relating to health care providers; creating new provisions; amending ORS 413.032, 413.037, 413.101, 413.181, 415.013, 415.019 and 415.103; and prescribing an effective date.

Requires health care entities to obtain approval from Oregon Health Authority before any mergers, acquisitions or affiliations of entities that had \$25 million or more in net patient revenue in preceding three fiscal years or before mergers, acquisitions or affiliations that will result in one entity having increase in net patient revenue of \$1 million or more. Specifies procedures.

Requires Oregon Health Policy Board to establish criteria for approval of mergers, acquisitions and affiliations based on specified factors.

Takes effect on 91st day following adjournment sine die.

<a href="#">HB 2376</a>	<a href="#">HB 2376</a> <a href="#">INTRO</a>	Rep Prusak; Rep Schouten (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.
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Relating to naloxone; prescribing an effective date.

Requires health care provider who prescribes opioid to offer prescription for naloxone, or similar drug, and educational material under specified circumstances.

Relating to naloxone; creating new provisions; amending ORS 677.190, 678.111 and 679.140; and prescribing an effective date.

Requires health care provider who prescribes opioid to offer prescription for naloxone, or similar drug, and educational material under specified circumstances. Defines "health care provider." Allows health professional regulatory board to impose discipline for violation.

Becomes operative on January 1, 2022.

Takes effect on 91st day following adjournment sine die.

<a href="#">HB 2401</a>	<a href="#">HB 2401</a> <a href="#">INTRO</a>	Rep Neron; Sen Frederick; Sen Lieber (Presession filed)	01/19/21 - Referred to Business and Labor. 01/11/21 - First reading. Referred to Speaker's desk.
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Relating to employment protections; prescribing an effective date.

Makes certain actions taken by employer because of employee's service as member of board, commission, council or committee created by statute unlawful employment practice.

Relating to employment protections; creating new provisions; amending ORS 659A.885; and prescribing an effective date.

Makes certain actions taken by employer because of employee's service as member of board, commission, council or committee created by statute unlawful employment practice. Allows employee to bring civil action or file complaint with Commissioner of Bureau of Labor and Industries for violation.

Takes effect on 91st day following adjournment sine die.

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Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
HB 2459	HB 2459 INTRO	Rep Evans; Rep Nathanson; Rep Reardon (Presession filed)	01/29/21 - Assigned to Subcommittee On Civil Law. 01/19/21 - Referred to Judiciary. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to video conferencing.</p> <p>Includes in definition of "conversation" communication occurring through video conferencing program for purposes of statutes regulating recording of communications.</p> <p>Relating to video conferencing; amending ORS 165.535 and 165.540.</p> <p>Includes in definition of "conversation" communication occurring through video conferencing program for purposes of statutes regulating recording of communications. Prohibits recording of communication occurring through video conferencing program if participants are not informed of recording. Punishes by maximum of 364 days' imprisonment, \$6,250 fine, or both. Specifies exceptions.</p>				
HB 2461	HB 2461 INTRO	Rep Dexter; Rep Evans; Rep Holvey; Rep Nathanson; Rep Prusak; Rep Reardon; Rep Schouten (Presession filed)	02/04/21 - Public Hearing held. 01/19/21 - Referred to Veterans and Emergency Management with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to critical disaster preparedness; declaring an emergency.</p> <p>Directs Oregon Business Development Department to establish program to create Oregon Critical Disaster Preparedness Stockpile to ensure robust stock of emergency supplies and equipment.</p> <p>Relating to critical disaster preparedness; and declaring an emergency.</p> <p>Directs Oregon Business Development Department to establish program to create Oregon Critical Disaster Preparedness Stockpile to ensure robust stock of emergency supplies and equipment.</p> <p>Directs Oregon Homeland Security Council, in consultation with Oregon Health Authority and relevant state agencies, to develop list of essential equipment, materials, supplies, distribution channels and manufacturing capabilities for stockpile, including personal protective equipment, communicable disease testing equipment and all-hazards emergency surge supplies. Requires council to report to Legislative Assembly.</p> <p>Directs department to establish and administer Oregon Resiliency Partnership in consultation with other entities. Limits civil liability in certain circumstances.</p> <p>Declares emergency, effective on passage.</p>				
HB 2494	HB 2494 INTRO	Rep Salinas (Presession filed)	02/01/21 - Assigned to Subcommittee On COVID-19. 01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care; prescribing an effective date.</p> <p>Establishes legislative Task Force on the Impacts of COVID-19 on Health Care Delivery Systems to evaluate impacts of COVID-19 on health care delivery systems in this state.</p> <p>Relating to health care; and prescribing an effective date.</p> <p>Establishes legislative Task Force on the Impacts of COVID-19 on Health Care Delivery Systems to evaluate impacts of COVID-19 on health care delivery systems in this state.</p> <p>Sunsets December 31, 2022.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 2508</a>	<a href="#">HB 2508 INTRO</a>	Rep Alonso Leon; Rep Campos; Rep Clem; Rep Grayber; Rep Neron; Rep Prusak; Rep Schouten; Rep Wilde; Rep Williams; Sen Beyer; Sen Gorsek (Presession filed)	02/04/21 - Public Hearing held. 01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to telemedicine; declaring an emergency.</p> <p>Requires Oregon Health Authority to ensure reimbursement of health services delivered using telemedicine.</p> <p>Relating to telemedicine; creating new provisions; amending ORS 743A.058; and declaring an emergency.</p> <p>Requires Oregon Health Authority to ensure reimbursement of health services delivered using telemedicine.</p> <p>Modifies requirements for health benefit plan coverage of telemedicine.</p> <p>Declares emergency, effective on passage.</p>				
<a href="#">HB 2528</a>	<a href="#">HB 2528 INTRO</a>	Rep Sanchez (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to dental therapy; prescribing an effective date.</p> <p>Directs Oregon Board of Dentistry to issue dental therapist license to qualified applicant.</p> <p>Relating to dental therapy; creating new provisions; amending ORS 679.010, 679.140, 679.170, 679.230 and 679.250 and section 1, chapter 716, Oregon Laws 2011; and prescribing an effective date.</p> <p>Directs Oregon Board of Dentistry to issue dental therapist license to qualified applicant. Prohibits unlicensed use of title "dental therapist" and practice of dental therapy. Provides exceptions to prohibition. Adds dental therapist member to board.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">HB 2557</a>	<a href="#">HB 2557 INTRO</a>	Rep Fahey; Rep Meek; Rep Post; Rep Sanchez; Rep Schouten; Rep Wilde; Sen Beyer; Sen Dembrow; Sen Frederick; Sen Gelser; Sen Hansell (Presession filed)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to dental care for Pacific Islanders legally residing in Oregon under the Compact of Free Association.</p> <p>Establishes COFA Dental Program in Oregon Health Authority to provide dental care to low-income citizens of Pacific Islands in Compact of Free Association who reside in Oregon and lack access to affordable dental coverage.</p> <p>Relating to dental care for Pacific Islanders legally residing in Oregon under the Compact of Free Association; creating new provisions; and amending ORS 413.032 and 735.608.</p> <p>Establishes COFA Dental Program in Oregon Health Authority to provide dental care to low-income citizens of Pacific Islands in Compact of Free Association who reside in Oregon and lack access to affordable dental coverage. Specifies eligibility requirements for program and duties of authority in administering program.</p>				
<a href="#">HB 2591</a>	<a href="#">HB 2591 INTRO</a>	Rep Sollman; Rep Wilde (Presession filed)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to school-based health center grants.</p> <p>Allows mobile school-based health centers to qualify for safety net grants from Oregon Health Authority.</p> <p>Relating to school-based health center grants; amending ORS 413.225.</p> <p>Allows mobile school-based health centers to qualify for safety net grants from Oregon Health Authority.</p>				

Custom Report  
Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
HB 2627	HB 2627 INTRO	Rep Hayden; Rep Schouten (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to interim therapeutic restorations; prescribing an effective date.</p> <p>Allows expanded practice dental hygienist to perform interim therapeutic restoration.</p> <p>Relating to interim therapeutic restorations; creating new provisions; amending ORS 680.205; and prescribing an effective date.</p> <p>Allows expanded practice dental hygienist to perform interim therapeutic restoration. Requires agreement between dentist and expanded practice dental hygienist to include expanded practice dental hygienist's scope of practice regarding interim therapeutic restorations. Defines "interim therapeutic restoration."</p> <p>Directs Oregon Board of Dentistry to adopt rules to establish educational and instructional requirements for interim therapeutic restoration and to approve applications from education providers for training courses that meet requirements. Requires certain expanded practice dental hygienists to complete approved training course.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
HB 2638	HB 2638 INTRO	Rep Bonham; Rep Boshart Davis; Rep Breese-Iverson; Rep Drazan; Rep Gomberg; Rep Levy; Rep Moore-Green; Rep Nearman; Rep Owens; Rep Post; Rep Smith G (Presession filed)	01/29/21 - Assigned to Subcommittee On Civil Law. 01/19/21 - Referred to Judiciary. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to limitations of liability during the COVID-19 emergency.</p> <p>Limits liability for certain claims for damages arising out of acts or omissions taken during COVID-19 emergency period in reasonable compliance with government guidance related to COVID-19.</p> <p>Relating to limitations of liability during the COVID-19 emergency.</p> <p>Limits liability for certain claims for damages arising out of acts or omissions taken during COVID-19 emergency period in reasonable compliance with government guidance related to COVID-19.</p>				
HB 2752	HB 2752 INTRO	Rep Noble (Presession filed) (at the request of Brittany Ruiz)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to information regarding vaccines; prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine.</p> <p>Relating to information regarding vaccines; and prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine. Requires Oregon Health Authority to maintain website that provides specific vaccine information.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				

# Custom Report

Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
HB 2816	HB 2816 INTRO	Rep Dexter; Rep Nosse; Rep Prusak (Presession filed)	01/19/21 - Referred to Health Care with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to health care provider incentives; prescribing an effective date.</p> <p>Establishes BIPOC health care provider loan forgiveness program within Oregon Health Authority to provide loan repayment subsidies to BIPOC health care providers.</p> <p>Relating to health care provider incentives; and prescribing an effective date.</p> <p>Establishes BIPOC health care provider loan forgiveness program within Oregon Health Authority to provide loan repayment subsidies to BIPOC health care providers. Defines "BIPOC."</p> <p>Establishes BIPOC Health Care Provider Fund to carry out provisions of program.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
HB 2891	HB 2891 INTRO	Rep Evans; Rep Lewis; Rep Meek; Rep Noble; Rep Post; Rep Williams (Presession filed) (at the request of former Representative Carla Piluso)	02/04/21 - Public Hearing held. 01/19/21 - Referred to Veterans and Emergency Management. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to emergency preparedness; prescribing an effective date.</p> <p>Requires health care facilities, health care providers, local public health authorities and public and private safety agencies to maintain capacity, including sufficient amounts of certain supplies, to continue in normal operation for 120 days at 25 percent mortality rate.</p> <p>Relating to emergency preparedness; and prescribing an effective date.</p> <p>Requires health care facilities, health care providers, local public health authorities and public and private safety agencies to maintain capacity, including sufficient amounts of certain supplies, to continue in normal operation for 120 days at 25 percent mortality rate. Defines "25 percent mortality rate." Directs Oregon Health Authority and health professional regulatory boards to report to Office of Emergency Management. Directs office to report annually to interim committee of Legislative Assembly related to emergency preparedness.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
HB 2901	HB 2901 INTRO	Rep Evans; Rep Meek; Rep Post (Presession filed) (at the request of former Representative Carla Piluso)	01/19/21 - Referred to Health Care. 01/11/21 - First reading. Referred to Speaker's desk.	
<p>Relating to prescription drugs for veterans.</p> <p>Requires coordinated care organization drug outlets to dispense seven-day supply of prescription drug to veteran with disability, at no cost to veteran, if veteran is unable to obtain prescription drug through United States Department of Veterans Affairs.</p> <p>Relating to prescription drugs for veterans.</p> <p>Requires coordinated care organization drug outlets to dispense seven-day supply of prescription drug to veteran with disability, at no cost to veteran, if veteran is unable to obtain prescription drug through United States Department of Veterans Affairs.</p>				

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
HB 2927	HB 2927 INTRO	Rep Evans; Rep Gomberg; Rep Lewis; Rep Meek; Rep Morgan; Rep Noble; Rep Post; Rep Rayfield; Rep Williams (Presession filed) (at the request of former Representative Carla Piluso)	02/11/21 - Public Hearing scheduled. 01/19/21 - Referred to Veterans and Emergency Management with subsequent referral to Ways and Means. 01/11/21 - First reading. Referred to Speaker's desk.	3:15PM 02/11/2021 House Committee Veterans and Emergency Management Public Hearing Remote 170

Relating to emergency management.

Renames Office of Emergency Management as Oregon Department of Emergency Management.

Relating to emergency management; creating new provisions; and amending ORS 30.269, 182.535, 183.457, 195.260, 244.050, 264.348, 276A.300, 276A.326, 377.833, 399.035, 401.052, 401.054, 401.062, 401.072, 401.076, 401.082, 401.088, 401.092, 401.094, 401.096, 401.109, 401.165, 401.239, 401.305, 401.358, 401.364, 401.368, 401.534, 401.536, 401.551, 401.552, 401.654, 401.655, 401.657, 401.658, 401.661, 401.667, 401.900, 401.902, 401.904, 401.910, 401.915, 401.922, 401.950, 401.952, 401.955, 401.975, 401.977, 401.978, 402.015, 402.020, 402.210, 402.230, 403.120, 403.130, 403.132, 403.160, 403.165, 403.170, 403.235, 403.240, 403.250, 403.415, 403.425, 403.430, 403.435, 403.450, 404.100, 404.105, 404.110, 404.120, 404.125, 404.200, 433.441, 433.443, 433.448, 443.760, 453.327, 453.342, 453.362, 453.392, 453.394, 453.520, 453.825, 465.505, 466.620, 466.635, 468B.365, 468B.431, 469.533, 469.534, 469.535, 469.536, 476.020, 476.030, 476.050, 476.055, 476.090, 476.130, 476.210, 476.220, 476.270, 476.290, 476.515, 476.590, 476.680, 476.685, 476.735, 476.765, 476.806, 476.925, 478.270, 478.940, 479.180, 480.230, 480.450, 480.460, 540.482, 561.560, 657.665, 689.645, 731.820, 735.470 and 824.088 and sections 1, 3 and 4, chapter 85, Oregon Laws 2016, and section 13c, chapter 581, Oregon Laws 2019.

Renames Office of Emergency Management as Oregon Department of Emergency Management. Establishes department as independent state agency. Vests in department emergency authority regarding public health emergencies, emergency quarantines and conflagrations. Transfers rulemaking authority regarding nuclear emergencies from State Department of Energy to Oregon Department of Emergency Management. Directs department to carry out certain functions related to regional and statewide emergency preparedness.

Transfers Oregon Emergency Response System from Department of State Police to Oregon Department of Emergency Management.

Renames office of State Fire Marshal as Department of the State Fire Marshal and establishes department as independent state agency. Transfers search and rescue functions from Office of Emergency Management to department. Requires State Fire Marshal to establish guidelines for wildfire buffer zones that produce defensible spaces around lands in forestland-urban interface.

Transfers Oregon Homeland Security Council to Office of Governor and renames as Oregon Homeland Security Commission. Adds members to and modifies duties of commission.

Establishes Emergency Preparedness Advisory Council to advise and make policy recommendations to Oregon Homeland Security Commission regarding federal emergency support functions.

Establishes Local Government Emergency Management Advisory Council to provide advice and recommendations to Oregon Department of Emergency Management regarding department's emergency preparedness and response functions.

Becomes operative on July 1, 2023.



# Custom Report

Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">HB 3057</a>	<a href="#">HB 3057 INTRO</a>	Rep Dexter; Rep Noble; Rep Prusak; Rep Reynolds; Rep Salinas; Rep Schouten; Sen Patterson	02/08/21 - Public Hearing scheduled. 02/04/21 - Assigned to Subcommittee On COVID-19. 01/28/21 - Referred to Health Care.	3:15PM 02/08/2021 House Subcommittee On COVID-19 Public Hearing Remote 170
<p>Relating to the disclosure of information related to COVID-19; declaring an emergency.</p> <p>Authorizes Oregon Health Authority to disclose individually identifiable information related to COVID-19 to certain persons and under certain circumstances.</p> <p>Relating to the disclosure of information related to COVID-19; creating new provisions; amending ORS 433.008; and declaring an emergency.</p> <p>Authorizes Oregon Health Authority to disclose individually identifiable information related to COVID-19 to certain persons and under certain circumstances.</p> <p>Sunsets June 30, 2022.</p> <p>Declares emergency, effective on passage.</p>				
<a href="#">SB 11</a>	<a href="#">SB 11 INTRO</a>	Sen Beyer (Presession filed)	02/10/21 - Public Hearing held. 01/19/21 - Referred to Health Care. 01/11/21 - Introduction and first reading. Referred to President's desk.	1:00PM 02/10/2021 Senate Committee Health Care Public Hearing Remote B
<p>Relating to telemedicine.</p> <p>Requires health benefit plan to reimburse cost of covered telemedicine health service provided by health professional licensed or certified in this state if same health service is covered when provided in person.</p> <p>Relating to telemedicine; creating new provisions; and amending ORS 743A.058 and 743A.185.</p> <p>Requires health benefit plan to reimburse cost of covered telemedicine health service provided by health professional licensed or certified in this state if same health service is covered when provided in person.</p>				
<a href="#">SB 61</a>	<a href="#">SB 61 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Oregon Government Ethics Commission)	01/19/21 - Referred to Rules. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to advice offered by Oregon Government Ethics Commission.</p> <p>Authorizes Oregon Government Ethics Commission to provide written commission advisory opinions, staff advisory opinions and oral or written staff advice on application of executive session provisions of Oregon public meetings law.</p> <p>Relating to advice offered by Oregon Government Ethics Commission; amending ORS 192.660, 244.280, 244.282 and 244.284.</p> <p>Authorizes Oregon Government Ethics Commission to provide written commission advisory opinions, staff advisory opinions and oral or written staff advice on application of executive session provisions of Oregon public meetings law. Grants specified safe harbor provisions to persons who rely in good faith on commission opinions or advice.</p>				
<a href="#">SB 99</a>	<a href="#">SB 99 INTRO</a>	Presession filed (at the request of Governor Kate Brown for Board of Medical Imaging)	02/01/21 - Public Hearing held. 01/19/21 - Referred to Health Care. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to Board of Medical Imaging; prescribing an effective date.</p> <p>Allows Board of Medical Imaging designee to perform inspections related to medical imaging and X-ray machines.</p> <p>Relating to Board of Medical Imaging; creating new provisions; amending ORS 688.595; and prescribing an effective date.</p> <p>Allows Board of Medical Imaging designee to perform inspections related to medical imaging and X-ray machines.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				

Custom Report  
Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">SB 254</a>	<a href="#">SB 254</a> <a href="#">INTRO</a>	Presession filed (at the request of Senate Interim Committee on Rules and Executive Appointments)	01/19/21 - Referred to Veterans and Emergency Preparedness. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to health care; declaring an emergency.</p> <p>Removes ability of parent to decline required immunizations against restrictable diseases on behalf of child for reason other than child's indicated medical diagnosis.</p> <p>Relating to health care; creating new provisions; amending ORS 433.102, 433.235, 433.255, 433.260, 433.267, 433.269, 433.273 and 433.284; and declaring an emergency.</p> <p>Removes ability of parent to decline required immunizations against restrictable diseases on behalf of child for reason other than child's indicated medical diagnosis. Allows child who is not immunized or exempt for reason of indicated medical diagnosis to attend school that provides education program through online courses. Prohibits child from attending in person specified school-related events, meetings and opportunities. Allows Oregon Health Authority to recommend diseases in addition to restrictable diseases against which children may be immunized.</p> <p>Directs boards that regulate certain licensed health care practitioners to review documents completed by licensed health care practitioners granting exemptions from immunization requirements because of indicated medical diagnosis. Defines "licensed health care practitioner." Requires boards to annually report to authority on results of review. Requires authority to report annually to Legislative Assembly on reports submitted to boards.</p> <p>Directs authority to establish outreach and education plan regarding disease control in schools.</p> <p>Allows child who is not immunized to continue attending school in person until August 1, 2022. Allows child who is not immunized and has schedule for immunizations approved by authority to continue attending school in person after August 1, 2022.</p> <p>Declares emergency, effective on passage.</p>				
<a href="#">SB 423</a>	<a href="#">SB 423</a> <a href="#">INTRO</a>	Sen Manning Jr (Presession filed) (at the request of Dale Penn - Providence Health and Services)	02/10/21 - Public Hearing held. 1:00PM 01/19/21 - Referred to Health Care. 01/11/21 - Introduction and first reading. Referred to President's desk.	02/10/2021 Senate Committee Health Care Public Hearing Remote B
<p>Relating to telemedicine; prescribing an effective date.</p> <p>Allows patient located in Oregon to receive health care services through telemedicine from specified out-of-state health care provider.</p> <p>Relating to telemedicine; and prescribing an effective date.</p> <p>Allows patient located in Oregon to receive health care services through telemedicine from specified out-of-state health care provider. Defines "telemedicine."</p> <p>Takes effect on 91st day following adjournment sine die.</p>				



Custom Report  
Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">SB 454</a>	<a href="#">SB 454 INTRO</a>	Sen Knopp (Presession filed)	01/19/21 - Referred to Veterans and Emergency Preparedness. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to ingredients in vaccines; prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine.</p> <p>Relating to ingredients in vaccines; and prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine. Requires Oregon Health Authority to maintain website that provides specific vaccine information.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">SB 488</a>	<a href="#">SB 488 INTRO</a>	Sen Taylor (Presession filed)	01/19/21 - Referred to Labor and Business. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to the compensability of COVID-19 for the purposes of workers' compensation; declaring an emergency.</p> <p>Adds exposure to or infection by SARS-CoV-2 to definition of occupational disease for purposes of workers' compensation.</p> <p>Relating to the compensability of COVID-19 for the purposes of workers' compensation; creating new provisions; amending ORS 656.802; and declaring an emergency.</p> <p>Adds exposure to or infection by SARS-CoV-2 to definition of occupational disease for purposes of workers' compensation. Specifies presumptions as to compensability for occupational disease or occupational injury that apply to subject worker's death, disability, impairment of health, loss of work time and expenses of medical treatment or services, including diagnostic or preventive medical treatment or services, as result of exposure to SARS-CoV-2 or COVID-19.</p> <p>Sunsets provisions on 180th day following expiration or termination of Governor's declaration of emergency concerning COVID-19 pandemic, including any extension of declaration.</p> <p>Declares emergency, effective on passage.</p>				
<a href="#">SB 505</a>	<a href="#">SB 505 INTRO</a>	Sen Thatcher (Presession filed)	01/19/21 - Referred to Veterans and Emergency Preparedness. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to ingredients in vaccines; prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine.</p> <p>Relating to ingredients in vaccines; and prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine. Requires Oregon Health Authority to maintain website that provides specific vaccine information.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">SB 557</a>	<a href="#">SB 557 INTRO</a>	Rep Fahey; Rep Meek; Rep Post; Rep Sanchez; Rep Schouten; Rep Smith G; Rep Wilde; Sen Beyer; Sen Dembrow; Sen Frederick; Sen Gelser; Sen Hansell (Presession filed)	01/19/21 - Referred to Health Care. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to dental care for Pacific Islanders legally residing in Oregon under the Compact of Free Association.</p> <p>Establishes COFA Dental Program in Oregon Health Authority to provide dental care to low-income citizens of Pacific Islands in Compact of Free Association who reside in Oregon and lack access to affordable dental coverage.</p> <p>Relating to dental care for Pacific Islanders legally residing in Oregon under the Compact of Free Association; creating new provisions; and amending ORS 413.032 and 735.608.</p> <p>Establishes COFA Dental Program in Oregon Health Authority to provide dental care to low-income citizens of Pacific Islands in Compact of Free Association who reside in Oregon and lack access to affordable dental coverage. Specifies eligibility requirements for program and duties of authority in administering program.</p>				
<a href="#">SB 640</a>	<a href="#">SB 640 INTRO</a>	Sen Hansell (Presession filed)	02/03/21 - Public Hearing Scheduled. 01/19/21 - Referred to Health Care. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to tribal health; declaring an emergency.</p> <p>Establishes Indian Health Scholarship Program to provide free tuition and fees for qualifying Indian health profession students in exchange for student commitment to work at tribal service site after graduation.</p> <p>Relating to tribal health; creating new provisions; amending ORS 676.454 and 676.467; and declaring an emergency.</p> <p>Establishes Indian Health Scholarship Program to provide free tuition and fees for qualifying Indian health profession students in exchange for student commitment to work at tribal service site after graduation.</p> <p>Appropriates moneys for 2021-2023 biennium to Oregon Health and Science University for purpose of administering Indian Health Scholarship Program.</p> <p>Declares emergency, effective July 1, 2021.</p>				
<a href="#">SB 655</a>	<a href="#">SB 655 INTRO</a>	Sen Linthicum (Presession filed)	01/19/21 - Referred to Veterans and Emergency Preparedness. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to ingredients in vaccines; prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine.</p> <p>Relating to ingredients in vaccines; and prescribing an effective date.</p> <p>Requires licensed health care provider to provide vaccine information packet to patient to whom licensed health care provider administers vaccine. Requires Oregon Health Authority to maintain website that provides specific vaccine information. Takes effect on 91st day following adjournment sine die.</p>				

# Custom Report

Report Date: February 8, 2021

Bill Number	Bill Number	Bill Sponsor	Last Three Actions	Next Hearing
<a href="#">SB 666</a>	<a href="#">SB 666</a> <a href="#">INTRO</a>	Sen Linthicum (Presession filed)	01/19/21 - Referred to Judiciary and Ballot Measure 110 Implementation. 01/11/21 - Introduction and first reading. Referred to President's desk.	
<p>Relating to public meetings.</p> <p>Modifies public meeting notice requirements for meetings held in executive session.</p> <p>Relating to public meetings; amending ORS 192.640 and 192.660.</p> <p>Modifies public meeting notice requirements for meetings held in executive session. Removes labor negotiations exception for executive session.</p>				
<a href="#">SB 697</a>	<a href="#">SB 697</a> <a href="#">INTRO</a>	Sen Knopp	02/10/21 - Public Hearing held. 01/27/21 - Referred to Health Care. 01/22/21 - Introduction and first reading. Referred to President's desk.	1:00PM 02/10/2021 Senate Committee Health Care Public Hearing Remote B
<p>Relating to telemedical health services; prescribing an effective date.</p> <p>Prescribes additional requirements for health benefit plan coverage of telemedical health services.</p> <p>Relating to telemedical health services; amending ORS 743A.058 and 743A.185; and prescribing an effective date.</p> <p>Prescribes additional requirements for health benefit plan coverage of telemedical health services.</p> <p>Takes effect on 91st day following adjournment sine die.</p>				
<a href="#">SB 5511</a>	<a href="#">SB 5511</a> <a href="#">INTRO</a>	Presession filed (at the request of Oregon Department of Administrative Services)	02/03/21 - Public Hearing held. 01/24/21 - Assigned to Subcommittee On Education. 01/15/21 - Referred to Ways and Means.	
<p>Relating to the financial administration of the Oregon Board of Dentistry; declaring an emergency.</p> <p>Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, but excluding lottery funds and federal funds, collected or received by Oregon Board of Dentistry.</p> <p>Relating to the financial administration of the Oregon Board of Dentistry; and declaring an emergency.</p> <p>Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, but excluding lottery funds and federal funds, collected or received by Oregon Board of Dentistry.</p> <p>Declares emergency, effective July 1, 2021.</p>				

# 2021 AADB MID-YEAR MEETING

Preliminary Program



**We're going virtual!**

**February 26-28, 2021**



President Robert B. Zena,  
DMD

AADB Thanks Our Program  
Committee

Chair:

James Sparks, DDS (OK)

Vice Chair:

Tonia Socha-Mower, MBA,  
EdD ( c ) (AADB)

Brian Barnett (MO)

Sherry Campbell, RDH,  
CDHC (AL)

John Carbery, DMD (WA)

Bobby Carmen, DDS (OK)

Cliff Feingold, DDS (NC)

Frank Maggio, DDS (IL)

D. Kevin Moore, DDS (NV)

Laura Richoux, RDH (MS)

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American Association of  
Dental Boards

211 E. Chicago Avenue, Ste. 760  
Chicago, IL 60611  
312-440-7464  
[info@dentalboards.org](mailto:info@dentalboards.org)



Attachment #5

## About AADB

The American Association of Dental Boards is a national association that encourages the highest standards of dental education. The AADB promotes higher and uniform standards of qualification for dental practitioners. Membership is comprised of boards of dentistry, advanced education boards, present and past members of those boards, board administrators, board attorneys, educators, and oral health stakeholders.

## Our Mission

To serve as a resource by providing a national forum for exchange, development, and dissemination of information to assist dental regulatory boards with their obligation to protect the public.

## About AADB's Meeting

The AADB Meeting provides an excellent forum for keeping up to date with state board concerns. Programs are designed to allow opportunities for interaction among all participants, including board members, dentists, therapists, dental hygienists, educators, board attorneys, and dental specialty associations. Panels and small discussion groups exchange ideas and information. Participants take away valuable information on current issues and all aspects of dental and dental hygiene regulation.

SmileDirectClub is dedicated to working with state dental boards and has committed to being the 2021 AADB Mid-Year Diamond Sponsor.



# MEETING AGENDA

\*\*\*Please note the times listed below are in Eastern Standard Time \*\*\*

## Friday, Feb. 26 - Welcome Reception

- 6:00 p.m. Virtual Check-in & Meet and Greet with Sponsors
- 7:00 p.m. Welcome Toast with President Zena
- 7:20 p.m. Comedy Set with Paul Morrissey



Paul was raised as a sports fanatic in the tiny town of Oswego, in upstate New York. After four years of playing college basketball, somehow he graduated. Aside from playing in the NBA, his dream job was to talk about sports for a living. Paul then moved to California after landing a television sports anchor job but found out quickly that he was “too much of a comedian” for TV news. After he was fired, Paul took his unique sense of humor to comedy club and college stages all over the country.

Paul was selected to perform at the HBO Comedy Festival in Las Vegas. Morrissey has also been a finalist in several national comedy competitions including Wendy’s Comedy Challenge, Comedy Central’s Open Mic Fight and Maxim’s Real Men of Comedy. Morrissey’s big break came when he made his network television debut on “The Late, Late Show” on CBS. He was so well received that Paul has been asked back 5 times!

Morrissey also released his debut CD, “Good Seats Still Available,” which gets regular airplay on SiriusXM Satellite Radio. He has appeared twice on The Late Show with David Letterman on CBS and on Comedy Central.

- 8:00 p.m. Meet and Greet with Sponsors Cont.

## Saturday, Feb. 27- General Assembly I

- 12:00 - 12:15 p.m. **President’s Opening Remarks**  
Robert B. Zena, DMD, President, AADB
- 12:15 - 12:25 p.m. **Executive Director’s Report**  
Tonia Socha-Mower, MBA, EdD (c), Executive Director
- 12:25 - 1:15 p.m. **U.S. Public Health Service**  
Rear Admiral Timothy Ricks, DMD, MPH, FICD, Chief Dental Officer
- 1:15 - 1:20 p.m. **Virtual Exhibit Hall Opens**
- 1:20 - 1:40 p.m. **Virtual Networking Break**
- 1:40 - 2:00 p.m. **Centers for Disease Control and Prevention**  
Casey Hannan, MPH, Director of the Division of Oral Health



<b>2:00 - 2:20 p.m.</b>	<b>Update from Dental Education in Response to COVID-19</b> Denice Stewart, DDS, MHSA, Chief Policy Officer, ADEA
<b>2:20 - 2:40 p.m.</b>	<b>Interprofessional Collaboration to Confront the Opioid Epidemic</b>  Humayun 'Hank' Chaudry, DO, MS, MACP, FRCP, MACOI, President & CEO of the Federation of State Medical Boards  Aisha Salman, Acting Director of the National Academy of Medicine Action Collaborative on Countering the US Opioid Epidemic
<b>2:40 - 3:00 p.m.</b>	<b>AADB Open Forum: State Board Issues</b> Frank Maggio, DDS, AADB Member and Moderator
<b>3:00 - 3:10 p.m.</b>	<b>Break</b>
<b>3:10 - 3:20 p.m.</b>	<b>Presidential Toast</b>
<b>3:30 - 4:30p.m.</b>	<b>Medical and Dental Parameters of Sleep Apnea</b>  David Schwartz, DDS, President, American Academy of Dental Sleep Medicine  Alejandra Lastra, MD, Director, Sleep Medicine Fellowship & Assistant Professor, Division of Pulmonary, Critical Care and Sleep Medicine, Rush University Hospital & President-Elect, Illinois Sleep Society

## **Sunday, Feb. 28 - General Assembly II**

<b>12:00 - 12:20 p.m.</b>	<b>Diamond Sponsor Welcome</b> Susan Greenspon Rammelt, Chief Legal Officer, EVP Business Affairs, SmileDirectClub
<b>12:20 - 1:00 p.m.</b>	<b>Increasing Access to Care through Telehealth</b>  Brant Herman, Co-Founder and CEO, MouthWatch, LLC  Vincente Calderón, OD, CEO, Aspire Health Solutions ©
<b>1:00 - 1:15 p.m.</b>	<b>Sponsorship Recognition</b>
<b>1:15 - 1:35 p.m.</b>	<b>Break</b> <b>Virtual Exhibit Hall Open for Networking</b>
<b>1:35 - 2:35 p.m.</b>	<b>Anesthesia in the Dental Office</b>  Jade Miller, DDS, Chair of the Safety Committee, American Academy of Pediatric Dentistry  Michael Almeida, MSN, CRNA, President, Illinois Association of Nurse Anesthetists

Eugene Vayman, DNAP, CRNA, Quantum Anesthesia Services

2:35 - 3:00 p.m.

**AADB Representative Reports: CDEL, CODA,  
JCNDE, CERP & DANB**

3:00pm

**Adjournment**

## Speaker Biographies



**Michael Almeida, MSN, CRNA**

***President, Illinois Association of Nurse Anesthetists***

Undergraduate BSN from Saint Francis Medical Center College of Nursing in 2006.

Graduate degree from Decatur Memorial Hospital/Bradley University Nurse Anesthesia Program in 2012.

Mr. Almeida has been practicing as a CRNA in a variety of settings from a Level 1 trauma center to outpatient Surgery centers as well as Critical Access Hospitals. He is a current partner/owner in a CRNA group providing coverage in the central Illinois area. He is the current president of the Illinois Association of Nurse Anesthetists and has held a variety of positions within the organization throughout his career and has presented at CRNA conferences in the state of Illinois.



**Humayun "Hank" Chaudhry, DO, MS, MACP, FRCP (Lon.)**

***President and Chief Executive Officer, Federation of State Medical Boards (FSMB) of the United States***

Dr. Humayun "Hank" Chaudhry is the President and Chief Executive Officer (CEO) of the Federation of State Medical Boards (FSMB) of the United States, which represents all of the nation's state and territorial licensing boards for medicine and co-owns the United States Medical Licensing Examination (USMLE). From 2016 to 2018, Dr. Chaudhry served as the elected Chair of the International Association of Medical Regulatory Authorities (IAMRA), which has 118 member organizations from more than 49 nations. In 2016, Dr. Chaudhry was recognized by

Modern Healthcare magazine as one of the 50 Most Influential Physician Executives and Leaders in America.

Dr. Chaudhry is a graduate of New York University, the New York Institute of Technology's College of Osteopathic Medicine and the Harvard TH Chan School of Public Health. He did his medical internship at St. Barnabas Hospital, New York, followed by an ACGME-accredited residency in Internal Medicine at NYU-Winthrop Hospital, New York, where he spent an additional year as Chief Medical Resident. He was a diplomate of the American Board of Internal Medicine from 1996-2006 and of the American Osteopathic Board of Internal Medicine from 2006-2016. He is a Master of the American College of Physicians and a Fellow of the Royal College of Physicians of Edinburgh and of London.

In New York, he served for six years as Assistant Dean and Chair of the Department of Medicine at his alma mater, and five years as a residency program director and hospital executive. He spent 14 years with the United States Air Force Reserve, rising to the rank of Major and serving as a Flight Surgeon attached to the 732nd Airlift Squadron at McGuire Air Force Base, New Jersey. Dr. Chaudhry spent more than two years as Health Commissioner for Suffolk County, New York, overseeing 1,300 employees and a budget of \$400 million. He is a co-author of *Fundamentals of Clinical Medicine, 4th edition* and of *Medical Licensing and Discipline in America*.



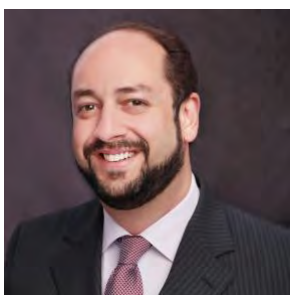


**Casey Hannan, MPH**

***Director of the Division of Oral Health***

Mr. Hannan is the Director of the Division of Oral Health (DOH) in CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), where he directs programs, and develops and implements policies and strategies to achieve the mission of the division. Previously, he was Chief of the Arthritis, Epilepsy, and Well-Being Branch in NCCDPHP's Division of Population Health. Mr. Hannan also previously served as the Associate Director of Policy, Partnerships, and Communications in CDC's Division of Nutrition, Physical Activity, and Obesity. Since coming to CDC in 1996, Mr. Hannan has received two HHS Secretary's Awards

for Distinguished Service for developing national health objectives and health communication materials, and three Special Act of Service Awards related to his accomplishments in accountability measures, strategic planning, and national leadership conferences. He is a 30-year veteran of the public health workforce and has worked in community-based, medical center, university, and government settings. He holds an MPH from the School of Public Health at the University of Michigan.



**Brant E. Herman**

***Co-Founder and CEO, MouthWatch***

Brant E. Herman, Co-Founder and CEO, is the executive leader of MouthWatch. His overall responsibilities include product development, industry relations, strategic partnerships, and day-to-day operations. Widely known in the field of teledentistry, Brant is a frequent public speaker and author of articles in leading oral health-related publications explaining the benefits of teledentistry to patients, practitioners, and policy makers.

Since starting the company in 2012, Brant has actively advocated the use of enhanced visual communication technology between patients and providers, overseeing the development of both hardware and software products.

Under his leadership, the company has experienced significant growth and market presence. MouthWatch products are used by over 18,000 practices in all states and in many countries across the globe. Brant also spearheaded the Teledentistry Innovation Awards to bring attention to innovators and pioneers of teledentistry.

Prior to forming MouthWatch, Brant founded a health and wellness company, worked as a Dental Practice Manager and as an Operations Manager in a medical billing and health insurance claims processing company.

Brant studied Organizational Communication at Sonoma State University and Uppsala University in Sweden and grew his passion for building companies during the first Silicon Valley technology boom. He currently lives in Central New Jersey, close to the MouthWatch headquarters, with his wife, son, and daughter. He loves cooking, running, traveling, coaching sports and spending time with family and friends.



**Alejandra C. Lastra, MD**

***Director, Sleep Medicine Fellowship & Assistant Professor, Division of Pulmonary, Critical Care and Sleep Medicine, Rush University Hospital & President-Elect, Illinois Sleep Society***

Alejandra C. Lastra, MD is the director of the Sleep Medicine Fellowship, and assistant professor in the Division of Pulmonary, Critical Care and Sleep Medicine at Rush University Medical Center in Chicago. She is a recognized member of the American Academy of Sleep Medicine (AASM), serving as Vice-Chair of the AASM Educational Committee. As President-Elect of the Illinois Sleep Society, she is currently leading the development of a multidisciplinary/multi-center educational platform in the region. Dr.

Lastra is passionate about technology's role in medical education and is a graduate of the Online Teaching and Course Design class from Rush Center for Teaching Excellence and Innovation. She developed and is currently the director of the continuous medical education program at the Rush Sleep Disorders Service & Research Center, and the education co-director of the Rush Center for Sinus, Allergy and Asthma Care. Her clinical and research interests involve home sleep testing, COPD-OSA overlap syndrome, non-invasive positive pressure ventilation in cardiopulmonary conditions and central sleep apnea disorders. She leads clinical programs involving inpatient sleep screening with portable monitors and hypoglossal nerve stimulation in collaboration with otolaryngology.



### **Frank Maggio, DDS**

Dr. Maggio was born in Chicago and raised in a dental family. From a young age he was involved with dentistry and it continues to be his passion. Upon completion of dental school, he served his country in the United States Army. It was at that time that he was able to obtain a California dental license. He returned to Illinois and he completed his residency in Periodontics. In 1975 he established his practice of Periodontics and Implantology in Elgin, Illinois. For decades, Dr. Maggio has taught in the Department of Periodontology at multiple dental universities including Loyola University (his alma mater), University of Illinois Chicago and University of Buffalo. He is currently an Instructor for Dental Assisting at Elgin Community College near his hometown. Dr. Maggio is an active member of various dental associations including the ADA, ADEA, and Illinois State Dental Society where he served as President. He is currently a Board Member for Fox River Valley Dental Society and past Board Member of various organizations including the Illinois Society of Periodontology, ADA Foundation, American Board of Dental Examiners and National Foundation of Dentistry for the Handicapped.



### **Jade Miller, DDS**

#### ***Chair Safety Committee, American Academy of Pediatric Dentistry***

Dr. Jade Miller is a graduate of the University of the Pacific School of Dentistry and the residency program at Children's Hospital Medical Center in Cincinnati, Ohio. Board-certified in pediatric dentistry, Dr. Miller has maintained a private practice in Reno, Nevada, since 1983. Dr. Miller previously served as the president of the American Academy of Pediatric Dentistry (AAPD) from 2016-2017. He has held the role of member of the Board of Trustees American Academy of Pediatric Dentistry, member of the Board of Trustees for the AAPD Foundation, and chair of the AAPD Committee on Safety. In organized dentistry, he has held appointments as chair of the Committee on Anesthesiology for the ADA Council on Dental Education and Licensure, as member of the ADA Advisory Committee on Evidence-Based Dentistry, as the Nevada Delegate to the American Dental Association and as the president of the Nevada Dental Association and the Northern Nevada Dental Society. Dr. Miller served as chairman of the Nevada State Board of Health, and president, examiner and sedation examiner for the Nevada State Board of Dental Examiners. Additionally, he holds academic appointments at the University of Nevada's School of Medicine-Cranial Facial Anomaly Team, the University of the Pacific's Arthur Dugoni School of Dentistry and the University of Washington's School of Dentistry.



**Susan Greenspon Rammelt**  
***Chief Legal Officer, EVP Business Strategy & Corporate Secretary,***  
***SmileDirectClub***

Susan Greenspon Rammelt is Chief Legal Officer Counsel, EVP of Business Strategy and Corporate Secretary of SmileDirectClub, the global oral care company and creator of the first medtech platform for teeth straightening. Susan Greenspon Rammelt has served as SmileDirectClub's Chief Legal Officer since April 2018, Secretary since March 2019, and as a member of SmileDirectClub's board since August 2019.

She has also served as General Counsel of Camelot since April 2018. Prior to joining SmileDirectClub, she was a corporate law partner at Foley & Lardner LLP since 2017, where she represented domestic and international enterprises. Prior to that, Susan was a partner at Dentons US LLP. Susan Greenspon Rammelt has over 30 years of experience as a corporate attorney, focusing on mergers and acquisitions, financings, restructurings, corporate governance, and general corporate counseling, particularly in the retail and beauty industries.



**Rear Admiral Timothy Ricks, DMD, MPH, FICD**  
***Chief Dental Officer, US Public Health Service***

RADM Timothy L. Ricks, DMD, MPH, FICD has served as the Chief Professional Officer for the Dental Category since September 2018. As the Chief Professional Officer, RADM Ricks advises the Office of the Surgeon General and the U.S. Department of Health and Human Services (HHS) on the recruitment, assignment, deployment, retention, and career development of oral health professionals. He is also responsible for overseeing the development of the second-ever Surgeon General's Report on Oral Health, and he chairs the USPHS Oral Health Coordinating Committee.

Dr. Ricks holds a Bachelor of Science degree from Delta State University, a Master of Public Health Degree from the University of Nevada, Reno, and received his dental degree from the University of Mississippi. He completed a dental public health residency with the Indian Health Service and is a board-certified Diplomate of the American Board of Dental Public Health and a Fellow of the International College of Dentists.



**Aisha Salman, MPH**  
***Program Officer, National Academy of Medicine***

Aisha Salman is a Program Officer at the National Academy of Medicine (NAM) and is the interim director of the Action Collaborative on Countering the U.S. Opioid Epidemic. Prior to joining the NAM in 2019, she served as a Program Implementation Manager with the University of Pennsylvania's Center for Community and Population Health, where she helped translate clinical research into pilot programs. She also has experience as a Strategy and Operations Consultant for the Federal Healthcare Practice at Deloitte. Aisha has a Masters of Public Health from the George Washington University with a concentration in global health program design, monitoring, and evaluation.



**David Schwartz, DDS**

***President, American Academy of Dental Sleep Medicine***

David Schwartz, DDS is President of the American Academy of Dental Sleep Medicine (AADSM) and a Diplomate of the American Board of Dental Sleep Medicine (ABDSM). He has lectured on many aspects of dental sleep medicine and authored and co-authored various articles with the specific intent of continuing to change patients' lives worldwide. He has a general restorative dental practice in Chicagoland and has focused on dental sleep medicine for more than 22 years. He is also the director of dental sleep medicine at The Center for Sleep Medicine, a multidisciplinary sleep center.



**Denice Stewart, DDS, MHSA**

***Chief Policy Officer, American Dental Education Association***

Denice Stewart, D.D.S., M.H.S.A., is Chief Policy Officer at the American Dental Education Association (ADEA), leading the Office of Policy, Research and Diversity. ADEA's members include all 76 U.S. and Canadian dental schools, over 800 allied and advanced dental education programs, 66 corporations and more than 20,000 individuals.

She received her D.D.S. at the University of North Carolina at Chapel Hill School of Dentistry, completed a General Practice Residency at Wilmington Medical Center (now Christiana Medical Center) in Delaware, and obtained a Master's in Health Services Administration from the University of Michigan School of Public Health. Prior to taking her position at ADEA, Dr. Stewart served as Senior Associate Dean for Clinical Affairs and Professor of Community Dentistry at the Oregon Health & Science University School of Dentistry. She has also held faculty positions at the University of Michigan School of Dentistry and the University of Pennsylvania School of Dental Medicine and she currently is an adjunct faculty at Rutgers University School of Dental Medicine. In addition, Dr. Stewart practiced dentistry in both a private practice and a community health center and was dental program administrator for Blue Cross Blue Shield of Michigan.



**Eugene Vayman DNAP, CRNA**

***Quantum Anesthesia Services***

-17 years of clinical experience in all surgical specialties, including trauma anesthesia and OB.

-Current owner of Quantum Anesthesia Services, a mobile anesthesia service providing turn key dental anesthesia services to 60+ dental practitioners throughout Illinois and Wisconsin

-Anesthesia provider for UIC School of Dentistry, department of Oral & Maxillofacial Surgery

-Teach anesthesia didactics at UIC School of Dentistry oral surgery residency program

**AADB Speaker Disclosures**

*No other speakers have relevant financial relationships to disclose.*

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Delaware  
District of Columbia  
Maine  
Maryland  
Massachusetts  
New Hampshire  
New Jersey  
New York  
Pennsylvania  
Rhode Island  
Vermont  
West Virginia

## West

Alaska  
Arizona  
California  
Colorado  
Hawaii  
Idaho  
Montana  
Nevada  
New Mexico  
Oregon  
Utah  
Washington  
Wyoming

## North

Illinois  
Indiana  
Iowa  
Kansas  
Michigan  
Minnesota  
Missouri  
Nebraska  
North Dakota  
Ohio  
Oklahoma  
South Dakota  
Wisconsin

## South

Alabama  
Arkansas  
Florida  
Georgia  
Kentucky  
Louisiana  
Mississippi  
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Puerto Rico  
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## American Association of Dental Administrators Mid-Year Meeting Preliminary Agenda Tuesday March 2, 2021 1:00 p.m. – 4:00 p.m. CST

This meeting will be held virtually using Zoom. Use the link below to join.

<https://us02web.zoom.us/j/86447742023?pwd=ZStMTmJnaldldldzZEU2U203RTkrZz09>

Welcome and Introduction of Attendees

Minutes from October 30, 2020 Annual Meeting

Treasurer's Report

Membership Report

Web Site Report

Annual Meeting October 30-31, 2021

-Preliminary Agenda Planning

-Accommodations

AADB Administrator Member Update

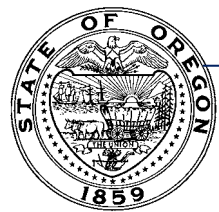
Roundtable Discussion of pre-selected topics:

COVID-19 Issues

Teledentistry

Occupational licensing

Adjourn



# Oregon

Statewide Diversity, Equity, & Inclusion Conference



## 2020 Statewide Diversity, Equity, & Inclusion Conference Post-Event Executive Report

*Prepared by:*  
Eric Engelson  
2020 Conference Co-Chair

# Executive Summary

Like many organizations in 2020, the Statewide Diversity, Equity, & Inclusion Conference Committee was tasked with overcoming many unforeseen challenges in order to plan and host our annual statewide conference. In addition to responding to the ongoing COVID-19 pandemic, this past year our country and communities saw a surge of national conversations focused on systemic racism and oppression. As these national conversations remained prevalent throughout the summer, it re-affirmed our belief as a Committee that the time and resources committed to this conference are more critical than ever to educate State of Oregon employees about the communities and individuals they serve, to provide resources and tools that enable us as public servants to better reflect our stated values of equity and inclusion, and to promote a more culturally-aware and inclusive workforce.

Due to the ongoing COVID-19 pandemic, for the first time in conference history, the 2020 Statewide Diversity, Equity, & Inclusion Conference was held virtually throughout the days of October 27, 28 and 29. The virtual format provided significant expense reductions from previous years – which were primarily related to facility rental and event services. In-addition to reduced expenses, the virtual format afforded our event the ability to offer a greater variation of session start times and increase accessibility. The result was historical; more than 4,900 state employees from 50 different state departments, agencies, boards, and commissions attended at least one virtual session. Responses from our audience show the virtual format provided an overwhelmingly positive development in the accessibility of our conference; we were able to offer captioning and ASL interpreters for every session and provide recorded sessions for on-demand viewing on iLearn.

The decrease in expenses for the 2020 conference could not have come at a more opportune time as some state agencies have been heavily impacted by reduced revenues in the past year. Recognizing these hardships, the Statewide Diversity, Equity, and Inclusion Conference Planning Committee remains grateful for the agencies who were able to maintain their contribution commitments that allowed this event to continue. These contributions allowed for not only their employees to participate at this professional development event, but also enabled the employees of non-contributing agencies, boards and commissions to experience this event, some for the first time.

Utilizing a virtual conference platform afforded us the opportunity to host the conference during the current pandemic. The new platform also provided us with areas to work on for future conferences, such as developing guidelines for audience engagement that promotes an inclusive learning environment for all and identifies methods for intervening in exchanges between attendees that poorly represent the values of diversity, equity and inclusion.

Overall, our Planning Committee is excited about the future of this conference and we look forward to providing state employees with more educational trainings in the future!



## By The Numbers

**4,969** = Number of state employees that attended at least 1 virtual session  
(Highest in conference history)

**11,858** = Combined attendance for the 3-day virtual conference  
(For comparison: the in-person event would normally have a 2-day capacity of 2,000 participants)

**2,372** = Average number of attendees per session block

**\$4.46** = Cost per attendee to offer this year's 3-day virtual conference

**50** = Number of departments, agencies, boards, and commissions that had employees attend this year's virtual conference

**32** = Number of departments, agencies, boards, and commissions that made contributions to fund this year's event

**3.5** = Average length of hours for each virtual session block. Traditionally, the in-person event required employees to dedicate 1-2 days to attend the conference.

## Breakdown of Post-Event Survey Responses

**Link to in-depth survey summaries:** <https://bit.ly/2VBWKOo>

- Over 1,800 event attendees responded to the survey
- 85% of respondents said that the conference was "Good" or "Excellent"
- 55% of respondents indicated that this was their first time attending the conference
  - 838 respondents indicated that the virtual environment allowed them to attend this year as opposed to in-person conferences in previous years

### **Session topics that were rated the highest includes:**

1. Gerardo Ochoa: Building Inclusive Teams
  - 86% positive (n=889)
2. Oregon Historical Society: Race in Oregon History: A Historical Perspective
  - 86% positive (n=824)
3. Emily Purry: The Importance of Intersectionality
  - 86% positive (n=871)
4. Emily Drew: Why Equity? Equity as a Value, Practice, & Assumption
  - 85% positive (n=789)
5. Nancy Thomas: Emotional Intelligence in Race Reckoning Today
  - 85% positive (n=919)

**\*\*no speaker rated below 67%**

## Breakdown of Conference Expenses

Expense Item	Actual	Forecasted
Zoom Webinar Subscription	\$5,090	\$5,000
Presenter Fees	\$15,000	\$15,000
Additional Event Services (i.e. ADA Accommodation, etc.)	\$3,859	\$5,000
Total:	\$23,949	\$25,000
2020 Department Contributions	\$83,450	
Residual funds from the 2020 event will enable the committee to secure the necessary conference components, such as securing presenters and services well in advance, to ensure a successful 2021 event.		

## Final Takeaways

### What Worked:

- Virtual Format – increased attendance & decreased expenses
- Recruitment of speakers on a national-scale in order to offer topics that are relevant to national and local conversations
- Ample preparation with support staff and presenters translated to a mostly smooth virtual conference experience despite it being the first virtual event in conference history
- Leveraging iLearn for conference registration and sharing recorded sessions post-event
- Re-structured department contributions for virtual event

### Things to Consider In the Future

- Virtual vs In-Person vs Hybrid event format
- Develop virtual conference structures that encourage a welcoming and engaging learning environment and that address defensiveness and white fragility
- Development of standalone conference webpage
- Develop relationships with department leadership to increase awareness and improve communications
- Create a feedback loop to agency leadership/HR providing insight into survey data and common themes in attendee responses that can provide information and context for agency Affirmative Action planning and agency DEI efforts

## PROJECT KICK-OFF MESSAGES

**HR, Payroll and Time Tracking all in Workday.** The rollout of the Workday product as the enterprise HR solution required a highly manual and labor intensive integration between Workday and the legacy Payroll system. Early in 2020, the Payroll & Time Tracking Replacement project team conducted a fit gap analysis of Workday Payroll to ensure it meets Oregon's needs. The Workday solution already contains all the information needed to process payroll and setup user-friendly time tracking options.

IN-SCOPE	OUT-OF-SCOPE
Replacing the Oregon State Payroll Application (OSPA)	Complex scheduling
Replacing ePayroll and agency time tracking systems	Replacing the Statewide Financial Management Application (SFMA)
Replacing the Leave Accrual and Reporting System (LARS)	KRONOS – ODOT's Time Tracking System for complex project tracking

## HIGH LEVEL PROJECT PHASE DESCRIPTIONS

### Architect & Configure Phases | February 2021 - September 2021

- Configure payroll and time tracking modules and business processes
- Begin building and testing integrations with other state government systems
- Ramp up change management activities for all agencies

### End-to-End Testing Phase | October 2021 - January 2022

- Conduct system-wide testing including integrations with State systems
- Some users will be involved so they can get their first look at the new system
- Start developing training materials

### Parallel Testing Phase | February 2022 - April 2022

- Conduct system-wide testing with agency payroll and HR users.
- Continue training materials development and schedule training labs

### User Acceptance Testing | April 2022 – May 2022

- Hands on testing and training for payroll users

### Training | April 2022 – July 2022

- Various methods of training will be used
- All State employees need to learn how to enter their time
- Managers need to learn how to approve time

### State-wide Project Go-live | July 1, 2022

- Last payment from legacy system will be June 30, 2022
- First payment from Workday will be July 15, 2022

# Frequently Asked Questions

## PAYROLL AND TIME TRACKING REPLACEMENT PROJECT

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# Payroll Replacement: July 2022

## General Questions

### *What is being replaced?*

- Current payroll system, Oregon State Payroll Application (OSPA)
- ePayroll time tracking system
- Any agency-specific time tracking systems (except for ODOT)
- Leave accrual system

### *What are we replacing these systems with?*

- Workday payroll, time tracking and leave accrual

### *What is Workday?*

- Workday is the current HR system that the State went live with in February 2019
- [Workday login](#)

### *Why is DAS implementing a new Payroll System now?*

- [Project Fact Sheet](#)
- OSPA (the current payroll system) has been paying employees since 1986 and there are very few IT experts available with the programming knowledge to maintain it. Updating to Workday's payroll module removes this risk because Workday is constantly maintained through a software-as-a-service contract.
- In addition, every month Workday has to send critical employee information to OSPA, but the interface between the systems is difficult to maintain. Having your HR and payroll information contained only in Workday removes this risk.

### *Where can I find information about the Payroll & Time Tracking Replacement Project?*

- Project Information, Resources and Contact Information are available on the [Project Website](#)
- Agency Project Payroll Champions and agency project teams will be able to answer questions specific to your agency.
- There will be communication sent out on a regular basis in addition to the resources noted here.

### *Who is impacted by the PTT Replacement Project?*

- All State Employees from the Executive, Legislative and Judicial branches of state government will convert to WD for time tracking and leave requests in July 2022.
- ODOT will continue to use TAMS/Kronos for their time tracking and leave requests.

*What is the timeline for the implementation of Workday for Payroll, Time Tracking and Leave Accrual?*

- [Project Timeline](#) – this link shows a timeline for the project and the different phases.
- Important Dates: Project fact sheet link
  - August 1, 2021 – Executive Branch Agencies, FLSA Non-exempt, eligible for OT will convert from Salary to Hourly (additional FAQs regarding this change in the section below)
  - July 1, 2022 – Workday will go live for Payroll, Time Tracking and Leave Accrual for all Executive, Legislative and Judicial branch state employees.

*Who is on the Payroll & Time Tracking (PTT) Replacement Project Team?*

- [Project Team Bio's](#)
- The Project team comes from a wide network of state agencies and is committed to collaborating with all agencies and state employees to ensure payroll continues to happen timely and accurately for all state employees.
- Some agencies will have their own Internal Project team in addition to the DAS Project Team. Please consult with your payroll manager to find out about the structure of your internal project team.

*Who is the executive sponsor for this project?*

- Brian Deforest, DAS Chief Administrative Officer, is the executive sponsor for the Payroll and Time Tracking Replacement Project.
- Nakeia Daniels, OYA Deputy Director, is the co-sponsor for this project.

*What is a Payroll Project Champion?*

- A Payroll Project Champion or PPC is the assigned contact at your agency for the Payroll Time Tracking Replacement Project.

*Who is the Payroll Project Champion for in my agency?*

- Click [here](#) to see who has been already identified as your Payroll Project Champion. Check back later as we continue to update this list.

*What training will I receive for the new Workday Time Tracking and Leave Accrual system?*

- An online foundational training will be developed by the DAS PTT (Payroll and Time Tracking) Project team.
- All additional training modules or sessions will be developed in coordination with your agency trainers and/or Payroll Project Champion.



*How often will I receive communication about the status of the PTT Replacement Project?*

- As we move closer to go-live (July 1, 2022) there will be an increase in communication to inform you of important training dates. If you wish to get an update on the project then please reach out to your agency's Payroll Project Champion.
- Project Payroll Champions will communicate regularly with their Agency's leadership team to pass along important updates on the project.
- There will be newsletters, videos and email updates sent regularly. The PTT Project Web site is available as a resource as well: <https://www.oregon.gov/das/HR/Pages/Payroll-time-tracking.aspx>

*Who can I contact if I have questions about this project?*

- Please reach out to your [Payroll Project Champion](#). (Please note that not all Payroll Project Champions have been identified at this time. We will continue to update this list periodically.)
- If your Agency does not yet have a Payroll Project Champion identified, please reach out to your HR and/or Payroll office.
- You can also send an email to [osps.workday@oregon.gov](mailto:osps.workday@oregon.gov)

*When did the Payroll Time Tracking Replacement Project officially kick-off?*

- The PTT Replacement Project officially kicked off on Wednesday, Jan 13, 2021.

# Salary to Hourly Change: August 2021

## Who/What is impacted

### *What is the change from salary to hourly?*

- In August of 2021, the State of Oregon will change all FLSA non-exempt employees who are overtime eligible from being paid on a salary basis to an hourly basis.

### *Who will be impacted by this?*

- Executive branch FLSA non-exempt employees who are represented by collective bargaining agreements will be impacted by this switch. Employees who are unrepresented and work at an agency that is not lead by an elected official will also be impacted.

### *Will employees who are FLSA exempt positions that get OT be impacted?*

- No, at this time only those employees who are FLSA Non-Exempt Employees will be changed from salary to hourly.

### *Will employees who are FLSA Exempt and get straight time (not OT) be impacted?*

- No, at this time only those employees who are FLSA Non-Exempt Employees will be changed from salary to hourly.

### *What is FLSA? How do I check if I'm non-exempt?*

- The Fair Labor Standards Act (FLSA) establishes minimum wage, overtime pay, recordkeeping, and youth employment standards affecting employees in the private sector and in Federal, State, and local governments.
- Employees can view their FLSA status in Workday. Please see the (["Am I Impacted" job aid](#)) for instructions.

## How will this impact me?

### *I do not use ePayroll for time tracking how will I be impacted by this?*

- Please contact your agency payroll office for specific instructions on how this will be handled.

### *How will this switch impact my time entry and pay?*

- This switch will end the automatic forecasting of regular hours on your timesheet. Employees will have to enter time in order to receive pay on the 1<sup>st</sup> of the month.

### *Will my annual salary change as a result of moving to hourly time tracking?*

- No, your annual salary will remain the same even though your pay each month will fluctuate based on what your actual hours worked were.

*Will employees need to be clocking in/out?*

- This switch will not change how employees record time in ePayroll or their agency time tracking system.

*I currently complete a hand-written time sheet. How will this impact me?*

- Please contact your agency payroll office for specific instructions on how this will be handled.

*Will the change from salary to hourly have any impact on my Direct Deposit authorization to my bank account?*

- No, your Direct Deposit via ACH will remain in place unless you have changes to your bank accounts on your ACH Authorization.
- Contact your Agency Payroll representative if you need to make any Direct Deposit application changes.

## MISC Questions

*If I miss entering my time how do I get paid?*

- Please contact your agency payroll office for specific instructions on how this will be handled.

*Does this change violate current wage and hour laws?*

- BOLI states paydays must be regular and no more than 35 days apart. The changes we are making will keep our same pay days which will not be more than 35 days apart.

*Is this change going to part of the collective bargaining agreements?*

- The larger unions have been informed of this change and are in support of it. The Department of Administrative Services-Labor Relations Units in the process of informing the remaining unions and will be making any necessary changes if needed.

*The proposed timeline for the FLSA Non-Exempt Employees from salary to hourly change is scheduled for August 2021. Can agencies select another date, for example push it out to November 2021 or January 2022?*

- No, agencies are not able to set their own dates for this change. This is to ensure pay equity across the enterprise in compensation within the same bargaining units.

# ASSOCIATION REPORTS

**Nothing to report under this tab**

# COMMITTEE REPORTS



**AMERICAN BOARD OF DENTAL EXAMINERS, INC.**

**William Pappas, D.D.S., President**  
**Jeffery Hartsog, D.M.D., Vice-President**  
**Conrad McVea, III, D.D.S., Secretary**  
**Renee McCoy-Collins, D.D.S., Treasurer**  
**Bruce Barrette, D.D.S., Past President**

**Report of the 16<sup>th</sup> Annual Meeting of the American  
Board of Dental Examiners, Inc (ADEX)  
November 7, 2020  
'Virtual' Meeting**

The following are highlights of the 16th Annual ADEX 'Virtual' Meeting:

The ADEX House of Representatives consists of Member States and Jurisdictions, District Hygiene and District Consumer Representatives.

2020 – 2021 Officers were elected: Dr. William Pappas, NV, President; Dr. Jeffery Hartsog, MS, Vice-President; Dr. Conrad "Chip" McVea, III, LA, Secretary; Dr. Renee McCoy-Collins, DC, Treasurer. Dr. Bruce Barrette, WI, will return as Immediate Past President.

ADEX Board of Directors:

- Appointment of Scott Houfek, DDS, WY, District 2 Director.
- Appointment of Julie Galloway, DDS, IL, District 5 Director.
- Appointment of Wesley Thomas, DMD, DC, District 8 Director.
- Appointment of Rosa M Rodriguez, DMD, PR, District 11 Director.

Adopted changes by the ADEX Dental Examination Committee to the ADEX Dental Examination:

**2022 Exam Changes**

**Endodontics**

Consideration of Anterior Endo Procedure Criteria Change: Anterior Endo: Apical Portion

ACC Apical portion of the canal is prepared to the anatomical apex of the tooth or  $\leq 3.0$  mm short of the anatomical apex. Change to  $\leq 2.0$  mm

DEF (C) Apical portion is under-prepared  $> 3.0$  mm short of the anatomical apex. Change to  $> 2.0$  mm

**Restorative: (Changes for 2021)**

- The use of a rubber dam is required from start to submission of patient for grading of the final restoration in both the manikin and patient examinations. NOTE: At calibration, all Restorative Captains must be informed the use of a rubber dam is required from start to submission of patient for grading of the final restoration in both the manikin

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**Telephone (503) 724-1104**  
**[OFFICE@adexexams.org](mailto:OFFICE@adexexams.org)**  
**[www.adexexams.org](http://www.adexexams.org)**

and patient examinations. All examiners will be asked to attempt to grade the preparations and modifications even if the placement of the rubber dam is subpar.

- Remove all references to liners except for indirect and direct pulp caps.

## Scoring

Calling for FOUR (4) unique modification request denials will result in 'Call for Chief' and review for exam termination.

## Prosthodontics

No Changes to Report

## Periodontics

No Changes to Report

Adopted changes by the ADEX Dental Hygiene Examination Committee to the ADEX Dental Hygiene Examination:

## Exam Changes to be Implemented As Soon As Possible

### MTCE Changes Only

**Soft Tissue Damage:** Error in tissue management will result in the assessment of penalty points according to the following criteria:

- One point deducted for each site of minor soft tissue damage, up to three sites
- The presence of four or more minor soft tissue damage sites or one major soft tissue damage site results in an automatic failure.

#Minor Soft Tissue Damage: There is slight soft tissue damage that is inconsistent with the procedure. Minor soft tissue damage includes: A laceration/abrasions that is  $\leq 3\text{mm}$ ; A laceration or injury that would not result in the need for suturing, perio packing, or further follow-up treatment if this were on a patient.

#Major Soft Tissue Damage includes: A laceration/abrasions that is  $> 3\text{mm}$  and that would require sutures, perio packing, or further follow-up treatment; A laceration/injury that would result in exposure of alveolar bone, flap, or amputation of papilla if this were on a patient.

**Hard Tissue Damage:** Error in tissue management will result in the assessment of penalty points according to the following criteria:

- One point deducted for each site of minor hard tissue damage, up to three sites
- The presence of four or more minor hard tissue damage sites or one major hard tissue damage site results in an automatic failure.

# Minor Hard Tissue Damage includes slight hard tissue damage that is inconsistent with the procedure or pre-existing condition. Minor Tissue damage may include: all hard tissue surface abrasion(s) that would not require additional definitive treatment if this were on a patient.

# Major Hard Tissue Damage includes major damage to the hard tissue that is inconsistent with the procedure and pre-existing condition. Major Tissue damage may include all hard tissue surface abrasions that would require additional definitive treatment if this were on a patient.



**\*\*Patient Examination-PTCE:** Reinstatement of coronal polishing in the ADEX PTCE. **Change for 2021**

**ADEX House of Representatives:**

- **Bylaws**

Revisions proposed to the ADEX Bylaws concerning redistricting was deferred until an in person at the 17<sup>th</sup> Annual Meeting of ADEX by vote of the ADEX House of Representatives. All member board appointed House of Representative members were sent copies of the proposed bylaws changes with a descriptive memo by Bylaws Chair, Dr. Patricia Parker.

\*\*\*\*\*

**17<sup>th</sup> Annual ADEX Annual Meeting is August 6-7, 2020**



THE COMMISSION ON **DENTAL COMPETENCY** ASSESSMENTS

1304 CONCOURSE DRIVE, SUITE 100 | LINTHICUM, MD 21090

TEL: 301-563-3300 | FAX: 301-563-3307

[cdcaexams.org](http://cdcaexams.org)

Mr. Stephen Prisby  
Oregon Board of Dentistry  
1500 SW 1st Ave #770  
Portland, OR 97201

February 9, 2021

Dear Mr. Prisby,

Greetings from the CDCA! We are pleased so many of you attended our State Board Presidents, Vice Presidents, and Executive Directors' Forum last month. It was just one of a series of events that together were Virtual Annual Meeting, 2021. We offer the summary below for you and your board.

We will be contacting you again periodically throughout the year and appreciate any pertinent updates affecting licensure examinations in your state, as well as any changes to your roster or meeting schedule you can share!

### CDCA Annual Meeting Summary

The CDCA held its Annual Meeting virtually January 5-9, 2021. Nearly 600 participants took part in the General Assembly on Saturday.

Chairman Dr. Harvey Weingarten announced CDCA now consists of 36 jurisdictions with the addition of Iowa and Alaska near the close of 2020. As of January 1, every US state that allows an independent third-party examination accepts the CDCA administered ADEX Dental Examination. (Delaware conducts their own exam, and New York only allows PGY-1).

The CDCA now delivers examinations at 51 of the 66 dental schools and 108 of the 303 dental hygiene schools in the US and Canada.

Director of Examinations, Dr. Ellis Hall, reported preliminary results from the class of 2020. With the advent of the COVID pandemic, the cohort became the first to experience non-patient examinations approved by State Boards of Dentistry. More than 2,000 dental candidates successfully demonstrated readiness for practice utilizing the CompeDont™ technology for Restorative examinations.



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A Mode Effect Study is planned for the Manikin Treatment Clinical Examination (MTCE) in Dental Hygiene to compare candidate performance on manikin and patient-based procedures.

The new members of the Board of Directors are as follows: Kathleen J. Gazzola, CDA, RDH, BS, MA (Rhode Island) and David Baasch, DDS (Vermont). Attending state contingents elected CDCA Steering Committee Members for 2020-2021. Dr. Patricia Parker, Ms. Jill Mason, RDH will represent Oregon.

CDCA anticipates an in-person gathering at the Gaylord Rockies Resort and Conference Center for its next Annual Meeting in January 2022.

Stakeholders may access [2021 exam schedules](#) and [ADEX Exam portability](#) maps via the CDCA website.

State Dental Board members interested in participating in the assessment process but have not done so may email Ms. Kimber Cobb at [kcobb@cdcaexams.org](mailto:kcobb@cdcaexams.org).

Sincerely,

Kimber Cobb

National Director, Licensure Acceptance and Portability



The Commission on Dental Competency Assessments

1304 Concourse Drive, Suite 100 | Linthicum, MD | 21090

443.270.4626 | [kcobb@cdcaexams.org](mailto:kcobb@cdcaexams.org) | [www.cdcaexams.org](http://www.cdcaexams.org)

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BUSINESS  
&  
RULES



## OFFICE OF THE HOUSE SPEAKER

## OFFICE OF THE SENATE PRESIDENT

900 Court St., N.E.

Salem OR 97301

January 7, 2021

Danny Moran, 503-986-1204

[danny.moran@oregonlegislature.gov](mailto:danny.moran@oregonlegislature.gov)

Johnmartin Sherman-Lewis, 503-986-1605

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## Oregon Legislature Releases Capitol Operations Safety Plan for 2021 Session

*Plan ensures safety and public participation during pandemic*

SALEM, Ore. – The Oregon Legislature today released its Capitol Operations Safety Plan for the upcoming 2021 Legislative Session. The plan provides a framework for how to convene safely for the upcoming session while ensuring transparency and public participation during the ongoing COVID-19 pandemic that has claimed the lives of more than 1,500 Oregonians.

The goal of the plan is to balance the following priorities:

- Safety – for the public, building employees, legislators and their staff
- Transparency – to ensure that the process is clear and encourages public input
- Strong public participation – to make sure proposed legislation receives public review
- The completion of the Legislature’s business – to meet the needs of the state

“As we continue to address the hardship brought on by the pandemic, this plan will ensure safety, transparency, and strong public participation in the 2021 legislative session,” House Speaker Tina Kotek said. “With essential safety protocols in place to prevent the spread of COVID-19, Oregonians from across the state will be able to testify at every public hearing remotely to have their voices heard in the Capitol. This plan will require an unprecedented level of coordination and communication to make this session a success for the people of Oregon. As we work toward a more equitable recovery from the pandemic and other crises, it will be critical to hear as much as possible from Oregonians in every community.”

“We have never seen a session like this before. We need to keep members and staff safe,” Senate President Peter Courtney said. “Legislative staff worked hard to come up with a plan that is safe and transparent. Every session, Oregonians make their voices heard on issues they care about. We need these voices. This plan will make the legislative process more accessible to Oregonians across the state.”

The Capitol Operations Safety Plan is the product of a three-month, thorough review of all building operations. The review was led by a core team of nonpartisan Capitol staff, which included members of the Oregon Capitol Club and the Capitol Press Association, as well as a bipartisan group of legislators and staff members. The goals of the core team were to develop a plan that complies with public health directives and guidelines while maximizing opportunities for public engagement.

Public health officials from the Oregon Health Authority (OHA) have reviewed and approved of the plan. Infectious disease experts from Oregon Health & Sciences University (OHSU) have toured the Capitol, reviewed written mitigation efforts, and found the operations plan to be thorough and well-conceived.

The session will begin with committees meeting remotely and physical entry to the Capitol permitted for authorized personnel. Floor sessions will be limited to necessary business only, with daily floor sessions beginning in April. If public health conditions improve, public entry to the Capitol will be expanded in accordance with public health protocols.

Authorized personnel who work in the building, including legislators, are instructed to follow public health workplace rules set by Oregon Occupational Safety and Health (OSHA), including mask usage and maintaining six feet of physical distance from others. Members will be permitted to have staff on-site but will be limited to the office occupancy limits. Remote work will be strongly encouraged for all other staff and legislative agencies.

The Presiding Officers will work with Democratic and Republican caucus leaders to determine when in-person work in the Capitol can be expanded. Currently, Marion County is among the 23 of 36 Oregon counties in the Extreme Risk category. County conditions will be monitored weekly beginning in February to determine the potential for expanded entry.

The Legislature will convene on Monday, January 11 for the swearing in of new members and the start of Organizational Days. The Legislative Session will begin on Tuesday, January 19.

###

# Capitol Operations Safety Plan

2021 LEGISLATIVE SESSION

JANUARY 7, 2021

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## INTRODUCTION

The COVID-19 pandemic has taken an unprecedented toll on Oregon, the country, and the world. We extend our deepest condolences to all who have been impacted by this pandemic, and to the family and friends of all Oregonians who have lost their lives.

Every state is grappling with how to operate in session during this pandemic. We are committed to maintaining a safe workplace and reducing the likelihood of transmission of COVID-19 among occupants, while maintaining and ensuring public access to the legislative process. This operations plan considers the best practices of other legislatures and acknowledges the real toll COVID-19 has had on the lives of members and staff in other Capitols across the country. Our goal is to balance the following priorities during the 2021 legislative session:

- Safety
- Transparency
- Strong public participation
- The completion of the Legislature's business

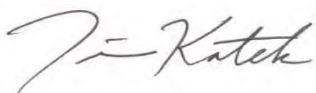
Given the fluidity of the pandemic and the highly contagious nature of the virus, we will regularly work with public health officials to track key public health indicators and metrics to ensure legislative operations are as safe and effective as possible for members and Legislative Branch staff, while maintaining a transparent process and engagement of the public. All legislators had the opportunity to submit feedback on the plans before they were completed. We finalized plans to begin session following final reviews by the Oregon Health Authority (OHA) and academic public health and infectious diseases experts at Oregon Health & Science University (OHSU). Protocols will be periodically reviewed during the session.

To ensure robust public input in the legislative process, we are expanding the ways members of the public can access and participate. This will include the ability to submit audio and video testimony to legislative committees, an extended public record for all public meetings, and more time for amendments to be posted prior to committee action. We will encourage chairs of each committee to avoid holding a public hearing and work session on the same day when possible.

Legislative Administration will enhance public outreach communications, so the general public is aware of legislative processes before coming to the Capitol. Legislative Administration will also revamp the existing 1-800 number so Oregonians can learn how to testify in committee, view the committee schedule, and find their legislator. Committee sign-ups will be more accessible and language support services will be made available.

We appreciate Oregonians' commitment to each other and their adaptability during these unusual times. Your legislature is committed to doing the people's work in the best way possible to make sure we meet the needs of the state.

Thank you,



House Speaker Tina Kotek



Senate President Peter Courtney

## HOW TO READ THIS DOCUMENT

This document is intended to serve as a blueprint for how the 2021 legislative session will operate based on current and best available information. It is informed by recommendations from the Core Team (see *background*). Core Team recommendations are elaborated upon in the appendices for alternative operations should the pandemic abate.

This document is organized into three major sections:

- Part I includes general operating procedures regardless of the status of the building;
- Part II outlines chamber protocol specific to operations on the House and Senate floors;
- Part III identifies changes to committee procedures to ensure transparency and access; and
- The Appendix includes internal agency plans and directives for Capitol occupants, and recommendations from the Core Team and Sub Teams for Capitol operations should the building allow physical entry by the general public.

Prior to final adoption, this document was circulated for final feedback from legislative members and staff, and provided to OHA and OHSU for final review.

As Oregonians adhere to public health guidance to curb the spread of the virus, Legislative Leadership is also committed to modeling best public health behavior to ensure the safety of all who enter the Capitol.

## BACKGROUND

The planning process began in September of last year with the creation of the Core Team. This team was tasked with creating operational recommendations for the 2021 legislative session.

The process included:

1. Establishing a core team to identify risks, develop plans, and provide recommendations to leadership.
2. Convening sub-teams to consider specific solutions in each of the main operational areas: House, Senate, Capitol, Committee, Agency, and Public Access.
3. Communicating progress and final plans to members, employees, Capitol tenants, and the public.
4. Implementing the final approved plan.

The initial planning guidance was:

- Consideration of best, worst, and most likely scenarios.
- Compliance with public health directives and guidelines.
- Maximizing opportunities for public engagement.

### Core Team Membership

#### Non-Partisan Offices

Legislative Fiscal Office  
Legislative Revenue Office  
Legislative Policy and Research Office  
Legislative Counsel

#### House of Representatives

House Republican Office  
House Democratic Office  
House Speaker's Office  
Chief Clerk

#### Senate

Senate Republican Office  
Senate Democratic Office  
Senate President's Office  
Secretary of Senate

Interim Legislative Equity Officer  
 Human Resources  
 Chief Information Officer  
 Facilities Manager  
 CAMS Project Director  
 Oregon State Police  
 Interim Legislative Administrator  
 Visitor Services  
**Others:** Capitol Club & Capitol  
 Press

Legislative Aide, HD 29  
 Legislative Aide, HD 07  
 Members:  
 Rep. Drazan  
 Rep. Evans

Legislative Assistant, SD 04  
 Members:  
 Sen. Girod  
 Sen. Wagner

### **Sub Team Focus Areas**

House	Senate	Capitol	Committee	Agency	Public
Chamber	Chamber	Operations	Operations	Operations	Access

## PART I: GENERAL OPERATING PROCEDURES

### BUILDING SAFETY MEASURES

The following safety measures will be in place as a baseline for session operations in 2021.

#### **Public Health: Supplies and Equipment**

Legislative Administration should monitor and consider our stockpiles of personal protective equipment (PPE), sanitizers, and disinfectants. The current count, rate of consumption, and rate of replenishment of all items below factor into these decisions:

- Personal Protective Equipment: N95 masks (respirators), cloth masks, gloves, protective suits (for custodial staff).
- Sanitizers: soap, hand sanitizer.
- Disinfectants: antibacterial wipes and sprays.
- Other Supply: trash bags, paper towels, toilet paper, seat covers.

**Personal Safety:** Oregon State Police and Legislative Administration will release a safety plan for members and staff that will include enhanced guidance for capitol demonstrations. This plan will include support for staff who feel unsafe traveling to and from their vehicles, when members and staff should use the panic button, and additional guidance.

### PUBLIC HEALTH GUIDANCE

#### **Face Masks**

Any person authorized to work on-site during the legislative session must wear a face mask or respirator in all legislative facilities unless alone in their office. An appropriate face mask will cover the mouth and nose, and be made of sturdy cloth. Bandanas and other thinner materials do not provide enough protection. A respirator (N95 mask) provides the most protection. Face shields do not provide enough protection and, if worn, should be accompanied by a cloth mask. Respirators (N95), cloth masks, and face shields are available in Room 49 upon request. Individuals will be responsible for the maintenance of their own mask (see *appendix*). Facemasks or respirators should always be worn unless alone in an office (masks must be worn in communal spaces that are single occupancy, like restrooms). Congregating in public spaces is not advised and should be avoided. Staff and members are strongly encouraged to be mindful of their surroundings to avoid unintended gatherings.

#### **Staffing**

All staff are encouraged to work off-site, with on-site work limited to the number of personnel that can be accommodated according to square footage requirements (one staff person per member office, except for caucus and presiding officer offices who have more square footage: see *appendix*). Interns, second assistants, and other legislative assistants are encouraged to work remotely. Caucus offices can assist members in producing a staffing plan for the 2021 session. Legislative branch agencies will encourage staff to work off-site with on-site work limited to their respective agency plans (see *appendix*).

## Communal Spaces

- One-way hallways, direction of travel signage, and “keep to the right” signs for stairwells will be posted to maintain physical distancing as much as possible.
- Occupancy limits on elevators are posted (1 – 2 people, depending on the elevator).
- Elimination of communal food and/or drink. Includes but is not limited to:
  - Shared coffee pots, refrigerators, or water pitchers.
  - Water fountains. Members are advised to bring their own reusable drinking container, but bottled water and soft drinks will be available daily.
  - Buffet-style meals, candy dishes, etc.
- Although House and Senate lounges will not be used for routine operations (at least until health circumstances and related guidance change), the member lounges will have take-away prepackaged food items available.
- No eating or drinking near another person.
- Placement of hand sanitizer in multiple locations (high traffic, entrances, exits). Occupants are strongly encouraged to perform frequent hand washing or cleansing hands with an alcohol-based sanitizer when hands are not visibly soiled.
- The basement café will not be available for the 2021 session.
- The Capitol Club office area will not be available until public entry is permitted.

## Exposure Notification

- Please see the November 16, 2020 memo from Legislative Administration (linked in *appendix*) for protocols regarding a known COVID-19 event.

## Vaccinations

- As supply grows and criteria expanded, legislators (and the public generally) may have access to vaccinations during the legislative session. It is unclear if vaccines will prevent infection and transmission, although vaccines will protect individuals from disease and severe illness. Growing access to vaccinations does not absolve the responsibility of each staff and member to adhere to other COVID-19 prevention measures as outlined in this document.

## CAPITOL ENTRY FOR AUTHORIZED PERSONNEL

The session will begin with committees meeting remotely, limiting floor sessions where possible, and physical access to the Capitol permitted for authorized personnel (contract workers, legislative employees, legislative members, Treasurer’s Office, Governor’s Office, Secretary of State’s Office, Oregon State Police). If public health conditions improve and the metrics permit, authorized personnel will be expanded to include the public, subject to relevant public health protocols (e.g., occupancy limit if necessary).

## Metrics for Expanding Entry to the Capitol

- The Capitol shall remain open only to authorized personnel when Marion County remains in extreme, high, or moderate risk, according to [OHA’s Risk and Protection Framework](#).

- When Marion County enters Moderate Risk status, an evaluation group consisting of the Presiding Officers, caucus leaders, and supported by the OHA, shall direct the Legislative Administrator to develop a framework – based on subgroup recommendations – to expand in-person access to the Capitol and increase staff presence in the building in anticipation of entering the Lower Risk category.
- When Marion County enters the Lower Risk category, entry to the Capitol shall be expanded to members of the public.

The metrics evaluation advisory group will begin meeting weekly in February to review the Capitol risk level with support from the Oregon Health Authority. If public health metrics are met, the Legislative Administrator shall advise the Presiding Officers and shall begin planning to expand authorized access to the Capitol in accordance with recommendations from the Core Team (see *appendix*). Changes to building operations and safety protocol will begin, if appropriate, in March.

## ORGANIZATIONAL DAYS

In the House for the convening on January 11, members will be called to the floor in cohorts for swearing in, given the occupancy restrictions. In the Senate, members may remain in the chamber area (as defined by rule). No joint session will be held that day, and the Governor’s State of the State address will be broadcast virtually on a different day.

All activities will be livestreamed online.

## Training

Pre-session training will include mandatory and optional modules that will be available through our Online Learning Portal. Training modules will come available between late December and the first week of January, depending upon the topic. Notification of available training and relevant information was sent to members by Legislative Administration on Wednesday, December 30, 2020. Please reference that email.

## ON-SITE EXPECTATIONS OF STAFF, MEMBERS, AND PRESS

It is expected that all authorized personnel will adhere to the following:

### Entry

- Authorized personnel must not enter the building if displaying any COVID-19 symptoms (see this [link](#) for symptoms and [this link](#) to use the virtual CDC tool).
- Wash hands regularly and refrain from touching the face or masks.
- Be familiar with [coughing and sneezing etiquette](#).
- All personnel shall use their badges to enter the Capitol for contact tracing purposes.
- Non-badged media must check in at the Capitol Press Corps office to be able to enter the Capitol.

### Conducting Business

Employees, members, and the press must always maintain at least six feet of distance, when feasible. Requests for additional barriers and PPE can be made of Facility Services in Room 49. However, physical barriers are no

substitute for physical distancing and mask wearing. Physical barriers can be an additional tool for lowering risk in areas like a reception desk, etc.

It is strongly recommended that all meetings of authorized personnel occur virtually, unless it is impossible to do so. Members may have varying preferences for scheduling meetings with the public. Members are encouraged to contact their respective caucus offices for support organizing their session schedule. For example, some members may prefer to use Zoom for an “open meeting hour,” while others may want 15-minute virtual meetings scheduled, etc.

## PART II: CHAMBER PROTOCOL

In both chambers, seating will be arranged in the side aisles in order to maintain six feet of distance. The honorary page program will be delayed until building entry is expanded to the general public, and floor staff will operate doors to reduce touchpoints.

Members can request additional audio assistance from Information Services by contacting [dan.rapoza@oregonlegislature.gov](mailto:dan.rapoza@oregonlegislature.gov) or [ben.hatch@oregonlegislature.gov](mailto:ben.hatch@oregonlegislature.gov). Information Services can assist members with loop feedback mechanisms to elevate audio or provide Bluetooth functionality for most hearing assistance devices.

### HOUSE FLOOR

**Document Distribution:** There will be no hard-copy floor distribution of documents – e.g., floor letters, executive appointment calendars/rosters, amendments, etc. All official distribution will be done electronically and posted on OLIS. Floor letters should be sent to the Clerk’s office via email. Floor letters will be posted on OLIS. The Clerk will announce on the floor the availability online of said documents.

**Scripts:** Scripts for motions or agenda items will continue to be printed as hard copies and placed on member desks. Staff will observe all sanitation protocols to minimize public health risks when distributing script pages.

**Quorum:** Once quorum is reached; a quorum will be presumed unless questioned. Members will be limited based on occupancy guidance unless, upon public health review, the Legislature can safely permit more members to be on the floor.

**Number of People in the Chamber:** The main floor has a recommended occupancy limit of 45 people (five in each side aisle, 35 in the main section). Up to six staff may have a permanent presence on the floor (three from the Clerk’s office, one from each caucus office, and one from the Speaker’s office). This permits as many as 39 members to be on the main floor at any time. Up to 20 members may occupy the third-floor gallery (except the North Gallery, see “Press” below) and are encouraged to do so to minimize any grouping near the floor entrances. Members may watch floor activities from their offices if preferred, but they must be aware of reducing any bottlenecks at entrances and remain physically distanced while waiting to have their vote recognized.

**Press:** The North Gallery is reserved for accredited members of the press. Staff and members are not permitted in this area.

**Invocation/Opening:** It is encouraged that any invocation or opening ceremony be given by members or staff already in the chamber to minimize variance in the number of persons on the chamber floor and reduce exposure until public health guidelines are revised, pursuant to a change in the public health emergency.

**Carriers:** Members who are assigned to be bill carriers need to have access to their desks while they are carrying a measure. Members must keep their mask on when speaking and should speak loudly. The Clerk will alert the presiding officer if the speech is inaudible.

**Debate:** Members who wish to participate in debate will depress their right-to-speak button to get in the queue. If a member is not in the chamber due to public health concerns or occupancy restrictions, but does wish to speak



to an issue, the member will notify their whip or caucus leader (either directly or through a caucus staff member in the chamber) and the designated whip or caucus leader may depress their right-to-speak button. The presiding officer, chief clerk, and reading clerk need to be attentive to the potential for a slowing of the debate due to the fluid process to get “in the queue.” Following debate and prior to recognizing the closer, the presiding officer will announce that “debate will be closed in one minute.” The countdown will commence immediately following the announcement. The Chief Clerk will keep the time and notify the presiding officer when the time has elapsed. If nobody wishes to be recognized, the presiding officer will recognize the closer. Once the closer has commenced, the presiding officer will not return to debate. Members within six feet of any member speaking should move away from the speaking member, providing at least six feet of distance while the speaking member is at their desk. Members must keep their mask on when speaking and should speak loudly. The Clerk will alert the presiding officer if the speech is inaudible.

**Roll Call/Voting:** The 30-second window for voting is removed. Voting will take as long as it takes to record the votes of all present members. After the names of all members have been called, a five-minute countdown will begin. The presiding officer will determine when the vote is closed.

**Floor Presence:** To the degree possible, the Speaker, the Speaker Pro Tempore, the Democratic and Republican leaders, and the Democratic and Republican whips (or a designee) will need to have a regular presence on the traditional chamber floor. The House chamber is exclusively reserved for the following: members of the House, staff of the Chief Clerk’s Office, staff of the Speaker’s Office, staff of each caucus office, and, if the carrier of a measure or a member asking a question of the carrier requests, LC, LFO, LRO, and LPRO staff. Staff should not sit at or use another member’s desk or chairs, even if unoccupied.

**Unanimous Consent Procedure:** If the Speaker requests to suspend the rules, it will be announced clearly from the rostrum and presumed without objection. Other voice votes will be presumed without objection. This does not preclude any member on the floor of the House from objecting and requesting a roll call vote be taken on any question.

**Rule Changes:** Required rule changes necessary to implement this operations safety plan should be particular to the 2021 Regular Session and be removed or rendered inoperative once the public health emergency ends, is contained, or Capitol entry otherwise broadened according to public health metrics. Rule changes adopted unrelated to the public health emergency would remain operative.

## SENATE FLOOR

**Document Distribution:** No hard-copy floor distribution of documents – floor letters, executive appointment calendars/rosters, amendments. All official distribution will be done electronically and posted on OLIS. Floor letters should be sent to the secretary’s office via email. Floor letters will be posted on OLIS.

**Scripts:** Scripts for motions or agenda items will continue to be printed as hard-copies and placed on member desks. Staff will observe all sanitation protocols to minimize public health risks when distributing script pages.

**Quorum:** To establish a quorum, the Senate Reading Clerk will slowly call the roll. Once the entire roll has been called and quorum is reached, a quorum will be presumed unless questioned.

**Invocation/Opening:** Given by members or staff already in the chamber to minimize variance in the number of persons on the chamber floor and to reduce exposure until public health guidelines are revised, pursuant to a change in the public health emergency.

**Carriers:** Members who are assigned to be carriers need to have access to their desks while they are carrying a measure.

**Debate:** Members who wish to participate in debate will depress their right-to-speak button to get in the queue. If a member is not in the chamber due to public health concerns but does wish to speak to an issue, the member will notify their whip or caucus leader (either directly or through a caucus staff member in the chamber) and the designated whip or caucus leader may depress their right-to-speak button. The presiding officer, secretary, and reading clerk need to be attentive to the potential for a slowing of the debate due to the fluid process to get “in the queue.”

**Roll Call:** For each vote, the reading clerk will slowly call the roll. Caucus staff will assist with the voting procedure by contacting members off the floor (in the chamber area or in member office area), informing them of the need to return to the floor for voting if they are not on the floor at the beginning of a vote. Voting from the side aisles and 3<sup>rd</sup> floor gallery will be allowed. Members must follow Senate rules and vote audibly to facilitate transparency, in a time when the Capitol may have limited access for the public and more persons may be streaming Senate floor sessions via device.

**Unanimous Consent Procedure:** If the President requests that the rules be suspended, it will initially be a “unanimous consent” request. This does not preclude either caucus leader or a member from objecting and requesting a roll call vote on any question.

#### **Seating and Staff:**

- The Senate floor and chamber area will be reserved for the following: members of the Senate, Secretary of the Senate staff essential to floor session functioning, and very limited other staff essential for legislative procedures. No more than one staff member from each of the following offices – SPO, SDO, SRO – will be allowed on the floor at one time. LPRO, LFO, LRO, LC or other member staff will be allowed only as necessary and required by a member. Such staff may need to remain on the side aisle for consultation, depending on the number of persons allowed on the Senate floor per public health guidelines. Secretary of the Senate and caucus staff on the floor will facilitate the process required to limit/control nonpartisan staff movement and access to chamber floor.
- The Senate President, President Pro Tempore, and caucus leadership should remain on the floor during the entire floor session to facilitate the process.
- Press/Media – Limited to no more than two persons on each side aisle of chamber floor. Additional media may be physically distanced in the North gallery.

**Note:** Senate Rules will likely need to be modified to account for changes made pursuant to the public health emergency. The Senate Chamber subgroup anticipates that such required rule changes would be minimal and particular to the 2021 Regular Session and would be removed or rendered inoperative once the public health ends, is contained, or capitol entry otherwise broadened according to public health metrics.

## PART III: COMMITTEE OPERATIONS

The legislature is a committee-driven body. Remote access to committees has expanded input opportunities to many who do not live near the Capitol or who cannot plan their day around a trip to the Capitol. The unique circumstances of COVID-19 have expanded how the public engages with the Legislature, and it also requires additional transparency during all committee interactions. In accordance with guidance from Legislative Counsel, the following protocols shall be maintained as regularly as possible:

















- Committee business shall be completed remotely. Committee rooms will not be set up to accommodate in-person participation by members. Members may stream committee meetings from their Capitol offices or from places outside of the Capitol.
- Transparency:
  - Members shall remain on camera as much as possible and notify the chair or committee staff if they need to have their camera off for more than a few minutes;
  - Chat features shall not be used for deliberation.
  - Public testimony shall be expanded to include video testimony.
  - Each chamber shall adopt rules to increase the amount of time an amendment must be posted prior to committee action (note: this will require a House and Senate rule change).
  - A contract for cable access television is being pursued to broaden awareness of legislative activities. This program can stream one live event at a time. Legislative Administration will develop a rotating schedule of committee meetings and floor debate.
  - All committee meetings and floor sessions will remain publicly live-streamed online and recorded.
  - Chairs will be encouraged to avoid scheduling work sessions and public hearings on the same day unless necessary.
  - Public testimony sign-up will be open until the meeting begins. Chairs may reopen a public hearing at their discretion if previously closed on the same day to hear additional public testimony.
- Access:
  - Committee agendas shall state the approximate time by which an item will begin so the public is not waiting unnecessarily on a phone line or in a Teams queue. This will be a tentative time schedule subject to change according to availability and the volume of testimony. Chairs are encouraged to announce any anticipated changes to the schedule at the start of each meeting.
  - The public record will be extended by 24 hours after the start of each public hearing.
  - Call-in, video, and written testimony will be accepted.
  - Viewing stations will be set up on the Capitol Mall.
  - Local government partners will be asked to facilitate links or referrals to the Legislature's 1-800 line or the Capitol webpage to let the public know when session begins.
  - Each chamber will propose increases to the amount of time an amendment must be posted prior to committee action.
- Capacity:

- An automated testimony uploader will be completed by the beginning of session, providing more capacity for committee staff to support members of the public who need assistance testifying.

Note: some of these protocols will require changes to House and Senate chamber rules in addition to changes to committee rules.

## APPENDIX

### TABLE OF RESOURCES

OSHA Information			
OSHA Rule Requirement Summary	 OR OSHA Rule Requirements_26Oc	OSHA Infection Control Assessment	 OSHA Infection Control Assessment
OSHA Risk Assessment	 OSHA Risk Assessment Form.dc		
Legislative Agency Recommended Internal Operations for limited, hybrid, and full Capitol entry			
Legislative Policy & Research Office	 LPRO Agency Plan.docx	Legislative Fiscal Office	 LFO - AgencyPlan Draft 101920 (002).d
Legislative Counsel	 LC PlanTemplate final 10-29 .docx	Legislative Revenue Office	 LRO - Agency Plan Draft.docx
Legislative Administration			
Sub-Team Initial Draft Recommendations for limited, hybrid, and full Capitol entry			
Senate Chamber Operations	 2021 Senate Chamber Operation	House Chamber Operations	 Conceptual House Floor Framework 20
Committee Operations	 Memo - Committee Ops.pdf	Public Access	 Subteam Recommendation_Pi
Capitol Operations	 Legislative Administration Ope		 Public Access Subgroup_Capitol P
Other Documentation			
Exposure Notification Process	 Exposure Notification Process	LC Opinion on 2021 session constraints	 LC opinion on 2021 Session Constraints.
Occupancy <ul style="list-style-type: none"><li>Adjusted Occupancy Open based on 35 sq ft/person in a completely open space</li><li>W/furniture considers loss of square footage due to furniture in the space The black number is based on 35 sq ft/person (OHA guidance)</li></ul>			 Capitol_Occupancy.xlsx



## OHA 2021 Request Legislation

The 10-year strategic goal of Oregon Health Authority (OHA) is to eliminate health inequities. The 2021-2023 biennium offers OHA and partners an opportunity to advance this goal through legislation.

The OHA and Oregon Health Policy Board defined health equity: Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances. Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments, to address: The equitable distribution or redistribution of resources and power; and Recognizing, reconciling and rectifying historical and contemporary injustices.

The package of legislation OHA has requested for 2021 presents opportunities to: (1) increase access to quality behavioral health services and reduce inequities in the behavioral health system; (2) address systemic racism and health inequities in the health care system; and (3) breakdown barriers to health in our communities.

OHA's requests will continue to be shaped by community partner input and feedback. OHA will proactively partner with other stakeholders regarding proposals that will help reduce health inequities.

Below is a summary for each of OHA's legislative requests.

### **Improve access and quality of behavioral health services and decrease behavioral health inequities**

#### **1. Increase Access and Quality of Behavioral Health Services (HB 2086)**

Governor Brown issued an Executive Order in October 2019 to convene the Behavioral Health Advisory Council. The council developed recommendations aimed at improving access to effective behavioral health services and supports for all adults and transitional-aged youth with serious mental illness or co-occurring mental illness and substance use disorders. The Council recommended policies and funding to address behavioral health needed program and service capacity; a culturally and linguistically appropriate workforce; and housing and residential needs.

## **2. Improve Treatment of Co-occurring Disorders (SB 67)**

The behavioral health workforce is not consistently trained to screen, assess, or treat co-occurring disorders (such as mental health *and* substance use, or problem gambling or intellectual *and* a developmental disabilities (I/DD) diagnosis). Additionally, Oregon facilities are credentialed or licensed as either substance use or mental health facilities, creating barriers to care for individuals seeking treatment. There is not a billing code for co-occurring disorders and there are separate funding sources for substance use and mental health. This results in lack of data for co-occurring disorders. Lastly, providers are required to complete separate assessment screenings and tools for mental health and substance use disorder (the American Society of Addiction Medicine (ASAM)). This placeholder request will be used to address barriers to having a comprehensive system that treats the behavioral health needs of the individual holistically.

## **3. Expand Recovery Housing for Harm Reduction (SB 69)**

Current statute only allows for funding of recovery housing that is Alcohol and Drug Free, whereas a full range of options are necessary to ensure a continuum of care that embraces harm reduction as well as abstinence-based recovery. The proposed solution changes statutory language to allow for multiples treatment models in housing.

## **4. Fill gaps in system of care (SB 68)**

The System of Care (SOC) Advisory Council is directed under SB 1 (2019) to improve the effectiveness and efficacy of child serving state agencies and the continuum of care that provides services to youth ages 0-25 by providing centralized and impartial forum for statewide policy development, funding strategy recommendations and planning. The recommendations to the legislature and agency directors are highly likely to include the need for new legislation and changes or updates to existing statutes in order to address continuum of care gaps and needs and develop and more functional SOC for Oregon.

## **5. Improve Suicide Data Reporting and Uniform Postvention Response (SB 66)**

ORS 418.735 does not require medical examiners or law enforcement to report a suspected suicide death to the local mental health authorities (LMHAs), which creates inconsistent and unreliable suicide postvention responses. Currently, postvention response varies widely across the state – and in some counties there is no postvention response from the local mental health authority. This proposal changes the Oregon Revised Statute (ORS) 418.735 to address these concerns.

## **6. Ban Flavored Tobacco Sales (HB 2148)**

The proposal will ban the sale of all flavored tobacco products and Inhalant Delivery Systems (IDS) such as e-cigarettes or vape products. The flavor ban includes mint and menthol, as well as “concept flavors” such as “jazz” and “red”. The proposal also will ban online and telephonic sales of all tobacco products to Oregon addresses, which would create parity with cigarettes and smokeless tobacco. Federal regulations prohibited flavored cigarettes, except for menthol flavored cigarettes, in 2009, but since then, a multitude of new flavored tobacco products designed to get around that prohibition have entered the market. These include e-cigarettes and vaping products, flavored little cigars, and novel alternative tobacco products.

## **7. Create Tobacco Retail Licensure (HB 2071)**

In Oregon, even as tobacco use remains the top preventable cause of death and disability in the state, no state license is required to sell tobacco products or inhalant delivery systems (IDS). In 2019, 16% of Oregon tobacco retailers illegally sold a tobacco product to a person under the age of 21. Without a state license, there is limited capacity to effectively enforce tobacco sales laws such as the minimum legal sales age. Statewide Tobacco Retailer Licensure will ensure retail store owners are held accountable for illegally selling tobacco to underage persons and for following other state and local tobacco regulations. Fees from licensing allow for sustainable administration and enforcement of the program, including regular inspection. Enforcement action is taken on the retailers, not on the youth buyer. Other states with tobacco retail licenses show that it can reduce youth access to tobacco products.

## **8. Maintain Prescription Drugs Monitoring Program (HB 2074)**

The Prescription Drug Monitoring Program (PDMP) allows prescribers to be fully informed of the prescription history of their patients when prescribing controlled substances. The PDMP was created by statute in 2009 and since then has expanded substantially in both function and size. New enhancements include interstate data sharing, health information technology (HIT) integration, improved user interface, and collection of additional drugs and fields for clinical use and research purposes, all of which keep the PDMP in line with legislative mandates and with emerging best practices. However, this growth has increased the cost of operation so that is no longer covered by the \$25 annual fee paid by Oregon healthcare licensees. This proposal increases that fee to \$35, to maintain sufficient capacity for program operations and database functions.

## **9. Oregon State Hospital (OSH) Technical Corrections (SB 72)**

OHA proposes three statutory changes to ensure appropriate and efficient procedures at the state hospital. 1) OHA is seeking a technical fix to ORS 127.720 to include ORS 426.701 to the list of types of commitments cited in the statute. ORS 426.701 took effect after ORS 127.720 was last amended and therefore was inadvertently excluded. 2) OSH is currently unable to include outpatient services in the cost of care to a patient while at the state hospital. While OSH has a medical and dental clinic, patients at OSH come to the hospital with a variety of medical needs. Some needs, including terminal illnesses and surgeries, require sending patients to receive care at a facility outside OSH. OHA proposes amending ORS 179.701 to remove the language excluding outpatient services in the cost of care, which will allow OSH to include these costs of care in compliance with Medicare requirements.

## **10. Access to Criminal Justice Data for Behavioral Health Outcomes (SB 73)**

OHA does not currently have access to Oregon criminal justice information that would allow the agency to track outcomes for consumers. OHA proposes changes to state statute to authorize the agency to access this information with appropriate parameters for the use and handling of the information.

## **11. Aid and Assist Placeholder (SB 71)**

OHA maintains a placeholder to address unforeseen issues with ORS 161.370 that may arise during the legislative session.



# **Reduce barriers to health and health inequities in our communities**

## **12. Expand and Sustain Tribal Traditional Health Workers (HB 2088)**

OHA proposes to create a sixth traditional health worker (THW) category in statute. The services, training, qualifications, and certification of the Tribal Traditional Health Worker would be defined in administrative rule. Tribes are providing critical health services to tribal members, but many of these providers and practices do not fit within the five existing Traditional Health Worker categories. Creating a sixth, separate THW category for tribes would allow the tribes and urban Indian health program to receive reimbursement using tribal based practices and curricula developed by the tribes themselves.

## **13. Expand Regional Health Equity Coalitions (RHEC) (SB 70)**

OHA is proposing a statewide expansion of the RHEC program, as well as defining RHECs and the RHEC model in statute to ensure fidelity. The RHECs have the expertise based in lived experience to identify most critical and regionally specific health equity issues, while crafting policy, system, and environmental solutions. Meaningfully impacting these issues and health inequities in general requires sustained, long-term efforts with dedicated fiscal investment. Specific benefits of sustained/expanded funding include: increased opportunities for coordinated care organizations (CCOs) to partner with RHECs, offer technical assistance and training to build CCO's capacity around health equity and the social determinants of health; providing coalitions the level of autonomy needed to improve health equity in meaningful and appropriate ways that ensures anti-racist priorities are not compromised; growing the necessary capacity of Oregon to address health equity issues in culturally specific and effective ways; creating additional opportunities to sustainably address issues related to avoidable policy and system barriers which may help lower costs to health and other related systems.

## **14. Modernize Public Health (HB 2073)**

For the past two biennia, the state Legislature has invested in modernizing state, local, and Tribal public health to more nimbly respond to emerging health issues. This bill is a placeholder for potential statutory fixes, to help streamline delivery of public health services. It is tied to an agency budget request of \$30 million.

## **15. Improve Home Health Care Oversight (HB 2072)**

Home Health Agencies (HHAs) provide skilled medical nursing services and other therapeutic services to patients in their homes. OHA is responsible for ensuring the quality of client care, complaint investigations and triennial surveys. OHA proposes raising fees to support the necessary regulation of home health licensees and in doing so to protect their clients. Current fee levels no longer support the cost of the regular surveys and complaint investigations.

## **16. Sustain Radiation Protection Services (HB 2075)**

Radiation Protection Services (RPS) is charged to be the state radiation control program protecting Oregonians from unnecessary or harmful exposure and to promote beneficial uses of radiation. The program regulates over 4,200 registrants and licensees who provide services to patients and the public using 14,000 radiation devices and sources for medical, industrial, academic and research applications. Without additional funding to meet increasing demand, RPS will not be able to complete facility inspections of all registrants to ensure radiation devices/sources are being used safely and within manufacturer specifications. This proposal would raise several fees paid by registrants and licensees, which will also better align Oregon's fee structure with the Washington and California tube-based fee models, and better ensure that Registrants are paying a registration fee based upon RPS staff's inspection time required to ensure safe machine operation.

## **17. Modernize Emergency Medical Services (HB 2076)**

Oregon does not currently have a comprehensive Emergency Medical Services (EMS) & Trauma system. There is no unifying individual, agency, or plan for the provision of emergency medical services throughout state government, no system for regionalization of emergency medical services to treat time-sensitive emergencies, and no plan that will allow for surge capacity in the event of a medium or large size disaster. This proposal provides for an integrated Emergency Healthcare System that recognizes problems, determines which services needed and then delivers the patient to those resources. Such a system can provide for better coordination of emergency care, regionalization to allow smaller agencies to benefit from economies of scale, improved targeted transport of patients to regional specialty centers, and improved assessment, triage and transfer from small general hospital to regional referral centers.

## **18. Remediate Lead-Based Paint Hazards (HB 2077)**

Lead-based paint is a source of neurotoxin exposure that continues to be a critical environmental health risk, particularly among young children. However, despite delegated authority to enforce federal regulations on lead-based paint, OHA does not have the authority to require property owners, schools, or child care centers to properly assess and decontaminate a residence or facility. OHA can issue a citation if work was performed by uncertified firms or if lead-safe work practices were not followed but cannot mandate cleanup or issue stop-work orders in case of ongoing unsafe work. This proposal would add statutory authority for OHA to compel cleanup of a lead-contaminated site when OHA has determined a property owner has violated lead-based paint requirements, and to issue a stop-work order if necessary.

## **19. Technical Fixes for Public Health (SB 64)**

This proposal contains several minor fixes to ease implementation of public health laws, tentatively including: bringing state law into alignment with federal regulations on lead-based paint remediation; clarifying the definitions of "health officer" and "local public health administrator"; allowing School Health Services Planning Grant Sites to pursue either a School-Based Health Center (SBHC) or an alternative model (school nursing) as best fits their community needs.

# **Reduce health inequities in the healthcare system and realize better care, better health, and lower costs**

## **20. Provide a Cover All People Pilot (LC 681; bill number TBD)**

To expand affordable healthcare access in Oregon and ensure all people have coverage, this proposal is for a pilot program of a Medicaid-like product. The goal is build on the success of the Oregon's CCO model. The proposal would build a state-funded subsidy structure to provide health care services to individuals who are typically the most underserved and marginalized. These subsidy structures will be based on 1) the Affordable Care Act (ACA) affordability framework for individuals whose income is under 400% of the federal poverty level (FPL) and 2) ACA expansion population experience for individuals whose income is under 138% of FPL.

Note that Cover All People is a Governor's Office bill based on a recommendation from the Governor's Racial Justice Council. OHA supports the bill, but it is not our request.

## **21. Improve Language Access and Health Care Interpreters (HCI) Workforce (HB 2087)**

OHA is proposing to expand and support quality language access services for improved health outcomes for limited English proficient (LEP) and sign language patients. The proposal is built to benefit both urban and rural communities in Oregon and will allow linguistically competent services to be utilized throughout the state. By strengthening existing requirements to work with trained HCIs, the proposal will ensure that Coordinated Care Organizations (CCOs), provider networks and interpreting agencies, work with Qualified and Certified HCIs. To that end, this is a needed step to professionalize Oregon's HCI workforce and ensure that a stable supply of quality trained interpreters is available across the state, especially in rural communities experiencing growth in LEP populations.

## **22. Enforce Cost Growth of Health Care (HB 2081)**

OHA is seeking legislative authority to implement mechanisms to hold insurers and providers accountable for containing health care costs and meeting the annual cost growth target established by Senate Bill 889 (2019) and adopted by the Oregon Health Policy Board. SB 889, which passed with broad bipartisan support, directed the OHA to work with stakeholders and consumers to set a Sustainable Health Care Cost Growth Target that would apply to insurance companies, hospitals and healthcare providers, so that healthcare costs do not outpace wages or the state's economy.

SB 889 directed OHA to begin data collection and public reporting on the cost growth target. However, additional legislative authority is needed before any insurers or providers can be held accountable for meeting the annual health care cost growth target. Specific recommendations for accountability and enforcement (such as requiring performance improvement plans for payers or providers who exceed the cost growth target) will be made by the Implementation Committee by December 2020 and introduced as legislation for the 2021 session. COVID-19 and its economic impact highlighted the continued need for the state to develop policies and programs that ensure affordable healthcare for all Oregonians.

### **23. Create Statewide Value-Based Payment System (HB 2082)**

OHA is proposing to work with a multi-stakeholder Advisory Committee under the direction of the Oregon Health Policy Board to develop a roadmap to increase utilization of payments that are based on health outcomes. Currently payments based on the number of services provided is still the predominant form of payment for health care in Oregon. The committee's work could include consideration and alignment of new payment methodologies so that providers are not faced with cascading and different payment structures for patients and consider health equity as a component of value-based payment arrangements. The committee would also be charged with identifying potential infrastructure needs as well as possible roadmap components like milestones and benchmarks.

### **24. Leverage State's Purchasing Power to Reduce Pharmacy Costs (HB 2080)**

OHA is proposing legislation to address three issues to increase its bargaining power in negotiations with prescription drug manufacturers. First, OHA will clarify its authority to require that providers receive authorization from the state prior to prescribing drugs whose manufacturers have not negotiated satisfactory terms with state purchasers. Second, OHA is requesting the legislature direct the Agency and CCOs to collaboratively develop a drug-purchasing plan that will improve member and provider experience while containing costs. Third, OHA seeks legislative authority to create a multi-agency pharmacy purchasing collaborative.

### **25. Leverage Purchasing Power of the Marketplace (SB 65)**

Currently, the Marketplace for purchasing health plan coverage under the ACA is administered by the Oregon's Department of Consumer and Business Services (DCBS). OHA and DCBS are proposing to move responsibility for running the Marketplace to OHA. This would allow OHA to coordinate improving quality and reducing cost in health care coverage across Medicaid, public employee plans and ACA plans sold through the Marketplace. This move would significantly enhance OHA's ability to align new payment methodologies and expand on models for better coordinating patient care and health equity.

### **26. Review Health Care Mergers and Acquisitions for Health Equity (HB 2079)**

In order to ensure Oregon's private market health care system transformation aligns with our core priority health care principles of better care, better health, and lower costs along with our health equity goals, OHA is seeking enhanced regulatory authority over certain proposed mergers and acquisitions involving major health systems in Oregon. The proposal mirrors the Oregon Health Policy Board (OHPB) approved framework OHA uses when reviewing and approving mergers and acquisitions involving Coordinated Care Organizations and also uses the OHPB-approved definition of health equity. The process will guarantee transparency and provide an opportunity for public input when consideration of a proposed merger and acquisition is warranted. The proposal will be amended to reflect a two-step process in which the Agency will develop an implementation plan which requires legislative approval for before implementation.

## **27. Align Purchasing Power Across PEBB/OEBB and Other Public Purchasers (HB 2083)**

OHA proposes to expand the Public Employees Benefit (PEBB) and Oregon Educators Benefit Board (OEBB) enrollment footprint and procurement capability. The proposal will provide additional special procurement authority for joint purchasing initiatives by PEBB and OEBB to allow new models of care that improve value of health plans offered by the boards. It also adds resources to offer affordable health plan options to local governments and enroll interested entities.

## **28. Technical Fixes for Health Policy and Analytics (HB 2078)**

OHA's Health Policy and Analytics Division needs to make minor technical corrections to implement existing statutes as intended. The changes include: removing Common Credentialing; eliminating requirement for the Pain Management Commission to perform curriculum reviews; revising requirements for licensed professionals to periodically complete a pain management education program; discontinuing the Palliative Care and Quality of Life Interdisciplinary Advisory Council or reducing the annual meeting requirements from two to one; and amending PEBB's statute so it aligns with the Affordable Care Act regarding the coverage of temporary employees.

# # #

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoken language interpreters
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please contact Matthew Green at 503-983-8257, 711 TTY, [matthew.green@dhsoha.state.or.us](mailto:matthew.green@dhsoha.state.or.us).



1/21/2021

Oregon Board of Dentistry  
1500 SW 1<sup>st</sup> Avenue, Suite 770  
Portland, OR 97201

Continuing Dental  
Education Department  
tel 503-494-8857  
[dewey\\_a@ohsu.edu](mailto:dewey_a@ohsu.edu)  
[www.ohsu.edu/cde](http://www.ohsu.edu/cde)  
Mail code: SD CDE  
2730 SW Moody Ave  
Portland OR 97201

Dear Ms. Nye and Mr. Prisby

OHSU School of Dentistry CE would like to request the board's consideration for a slight revision of the currently approved Dental Based Immunization Training program. We have received feedback from a great deal of dentists who are only looking to administer vaccine in a volunteering manner, and not seeking to go through the full immunization training program. With the evolution of the COVID-19 vaccine availability, along with an increase of dentists inquiring about the current training, we have an updated process we are seeking approval for.

Attached are two different requests: 1) A request for the modification of the current immunization program, in response to the Oregon Health Authority change in training, and 2) A request for a specific/fast track COVID & Flu vaccination certificate program. We are confident that with addition of the COVID & Flu fast track, we can get more dentists through training in a faster amount of time. We are also confident that with the slight revision to the existing immunization program as a result of the change in the OHA training, we will appeal to dentists with a more direct training program.

We were told the next dental board meeting isn't until February 19, 2021, but with the urgency of getting more of Oregon vaccinated we are asking if you can make an exception to pass this through before your next meeting.

Thank you for your time and consideration.

A handwritten signature in black ink, appearing to read "Alexandria Case". The signature is stylized with a long horizontal line extending to the right.

Alexandria Case  
CDE Program Director  
Continuing Dental Education  
OHSU School of Dentistry  
2730 SW Moody Ave  
Portland, OR. 97201  
(503)494-8857  
[www.ohsu.edu/cde](http://www.ohsu.edu/cde)

# Proposal to the Oregon Board of Dentistry to Modify the Vaccine Administration Training Curriculum

The Oregon Health & Science University School of Dentistry (SOD) seeks approval to modify the OHSU Dental-Based Immunization Certificate Program that trains dentists to administer vaccinations and upon satisfactory completion of the course requirements, results in a Certificate indicating credentialing for that dentist to administer vaccinations.

## **Background**

The Oregon Health Authority has revised and refined their training recommendations to now exclude the ALERT IIS modules as part of the training. As the modules are currently required in this Oregon State Board of Dentistry-approved course, and the currently listed OHA-hosted ALERT IIS Video Modules no longer available, the completion of the OHSU Dental-Based Immunization Certificate Program has been held up for many of the course participants.

Guidance for the ALERT IIS enrollment and the establishment of a User access and Super User access is a responsibility that the OHA feels is best done by their experts, for which they have assigned personnel to assist dentists with this endeavor.

## **Purpose**

Due to the backlog of course participants waiting for credentialing, and the new perspective from the Oregon Health Authority that the OHA no longer requires this training as part of the SoD Immunization Certificate curriculum, we seek to modify the required curriculum to reflect the OHA content expertise. To that end, we are requesting Oregon Board of Dentistry's approval for a modified curriculum, supported by Ms. Amanda Timmons at OHA, to simplify, yet still credential dentists licensed in Oregon with the Dental-Based Immunization Certificate Program.

## **Proposed Modification to the Curriculum**

### ***Part 1 (didactic)***

Remove the ALERT IIS Module viewing requirement.

Provide this information for dental offices wishing to become vaccine-administering sites:

#### ***FOR THE DENTAL OFFICES INDEPENDENTLY PROVIDING VACCINATIONS\****

To fulfill vaccination reporting as required in OAR 410-123-1262, YOU WILL NEED TO ENROLL WITH OREGON HEALTH AUTHORITY'S ALERT IIS AND ESTABLISH USER ACCESS. Contact the OHA for instructions. The ALERT IIS training page is:

<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/IMMUNIZATIONPROVIDERRESOURCES/Pages/COVIDTraining.aspx>

The dental specific page is:

<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/IMMUNIZATIONPROVIDERRESOURCES/Pages/Dentists.aspx>

*\*Note: The Oregon Health Authority no longer requires this training as part of the SoD Immunization Certificate curriculum.*

### ***Part 2 (Hands-on Training)***

Unchanged

The dentist's staff member is required to take and maintain documentation of all required subsequent ALERT IIS training; the School of Dentistry does not require documentation of required subsequent ALERT IIS training.

# Proposal to the Oregon Board of Dentistry to Offer a Focused COVID-19 and Influenza Vaccination Training Certificate

The Oregon Health & Science University School of Dentistry (SOD) seeks approval for a new Vaccine Training Program that limits the trained dentist to a COVID-19 and Influenza Vaccine Administration Certificate. Similar in nature to the OHSU Dental-Based Immunization Certificate Program that has already been approved by the Oregon Board of Dentistry, this proposed training limits the certificate holder to COVID-19 and Influenza vaccination administration.

## **Background**

OHSU School of Dentistry has trained 200 dentists (an additional 100+ will be trained by the end of January 2021) to give an IM injection in our Hands-on Training sessions after having taken the extensive (9-10 hour) online training. When queried at our Hands-on Training, dentists are excited about giving the COVID-19 vaccine to the public, primarily by volunteering at a Public Health event. Additionally, some expressed interest in giving the Influenza vaccine in Fall 2021, but many were unsure if they wished to really pursue administering vaccines in their own office. With the recommendation by and support from the Oregon Health Authority, those practitioners that are limiting their vaccine administration activities to volunteer efforts or as part of an already ALERT IIS-enrolled establishment would not be required to do the ALERT IIS modules.

Ninety-nine percent of course participants stated they do not plan to give other available vaccines to children and asked why they had to take the CDC and VFC modules related to childhood vaccines.

The States of California and Washington recently expedited the dentist workforce qualifications for COVID-19 vaccine administration to be shorter set of module viewings. This is an attempt to increase the workforce available to administer the COVID-19 vaccines to the public.

## **Purpose**

The rationale for this proposal of a focused course that results in a Certificate of Achievement for vaccine administration *limited to COVID-19 and Influenza* is to increase the available workforce for vaccinators as well as tailor a course to the participants' specific intent.

To that end, we are requesting Oregon Board of Dentistry's approval for a new curriculum, supported by Ms. Amanda Timmons at OHA, to streamline, yet still certify dentists licensed in Oregon to give both the COVID-19 and Influenza vaccine. This may become a model for the nation.

## **Proposed Curriculum**

### ***VACCINE ADMINISTRATION LIMITED TO COVID-19 AND INFLUENZA, Part 1 (didactic)***

The dentist must successfully complete the following COVID-19 and Influenza training modules and view videos:

1. Review these OHSU COVID-19 overview slides:  
<https://www.ohsu.edu/sites/default/files/2021-01/COVID-19%20Vaccination%20Training%201-13.pdf>
2. "What Every Clinician Should Know about COVID-19 Vaccine Safety Webinar" (49 minutes)  
[https://emergency.cdc.gov/coca/calls/2020/callinfo\\_121420.asp](https://emergency.cdc.gov/coca/calls/2020/callinfo_121420.asp)
3. Completes these modules/videos (***only if using the Pfizer vaccine***):
  - a. Pfizer-BioNTech COVID-19 Vaccine: "What Healthcare Professionals Need to Know":

The following videos are all available at: <https://www.cvdvaccine-us.com/product-storage-and-dry-ice>

(Video) Chapter 1. Storage and Handling: (10 minutes)

(Video) Chapter 2. Prep and Administration: (12 minutes)

(Video) Chapter 3. Returning the Thermal Shipping Container

- b. Review the Pfizer EUA Factsheet for Healthcare Providers Administering Vaccine: (30 pages)  
<https://www.fda.gov/media/144413/download>



- c. Review the Pfizer EUA Factsheet for Recipients and Care Givers: (6 pages)  
<https://www.fda.gov/media/144414/download>

***\*Dentists who have completed the OHSU vaccine training course and current VFC/VAP providers are not required to complete the following CDC training modules (d. and e.):***

- d. CDC Module CDC Vaccine Administration:  
<https://www2.cdc.gov/vaccines/ed/vaxadmin/va/ce.asp>
- e. CDC Module CDC Vaccine Storage and Handling:  
<https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/sh/ce.asp>

**4. Completes these training modules/videos (*only if using the Moderna vaccine*):**

- a. Moderna Vaccine: What Healthcare Professionals Need to Know:  
<https://www2.cdc.gov/vaccines/ed/covid19/moderna/index.asp>
- b. (Video) Moderna Storage and Handling: (8 minutes)  
<https://www.modernatx.com/covid19vaccine-eua/providers/storage-handling>
- c. Review the Moderna EUA Fact Sheet for Healthcare Providers Administering the Vaccine: (22 pages)  
<https://www.fda.gov/media/144637/download>
- d. Review the Moderna EUA Fact Sheet for Recipients and Care Givers: (5 pages)  
<https://www.fda.gov/media/144638/download>

***\*Dentists who have completed the OHSU vaccine training course and current VFC/VAP providers are not required to complete the following CDC training modules (e. and f.):***

- e. CDC Module CDC Vaccine Administration:  
<https://www2.cdc.gov/vaccines/ed/vaxadmin/va/ce.asp>
- f. CDC Module CDC Vaccine Storage and Handling:  
<https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/sh/ce.asp>

- 5. Review the “Influenza and COVID Summary Recommendations”:  
<https://www.covid19treatmentguidelines.nih.gov/special-populations/influenza/>
- 6. Review the VAERS (Vaccine Adverse Event Reporting System) webpage:  
<https://vaers.hhs.gov/>
- 7. Review “V-Safe After Vaccination Health Checker”:  
<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html>

- 8. **FOR THE DENTAL OFFICES INDEPENDENTLY PROVIDING VACCINATIONS\***  
To fulfill vaccination reporting as required in OAR 410-123-1262, YOU WILL NEED TO ENROLL WITH OREGON HEALTH AUTHORITY’S ALERT IIS AND ESTABLISH USER ACCESS. Contact the OHA for instructions. The ALERT IIS Training Page is:

<https://www.oregon.gov/oha/PH/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/Pages/COVIDTraining.aspx>

The dental specific page is:

<https://www.oregon.gov/oha/PH/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/Pages/Dentists.aspx>

*\*Note: The Oregon Health Authority no longer requires this training as part of the SoD Immunization Certificate curriculum.*

## **VACCINE ADMINISTRATION LIMITED TO COVID AND INFLUENZA, Part 2 (Hands-on Training)**

Dentists may enroll in Part 2, Hands-On training only after submitting documentation of completion of Part 1.

Dentists will review all SoD training videos emailed to them prior to attending the Hands-On class, including how to screen, educate, prepare and safely administer an intramuscular injection, how to palpate the acromion process, and how to use a VanishPont syringe.

After successful completion of Parts 1 and 2, and submitting all required documentation, the dentist will be issued a COVID-19 and Influenza Immunization Training Certificate.

If the dentist plans to administer any additional COVID-19 vaccines as they become available, they must take and maintain documentation of the vaccine manufacturer's training modules found at the Oregon Health Authority's website:

<https://www.oregon.gov/oha/PH/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/Pages/COVIDTraining.aspx>

The dentist is required to take and maintain documentation of all required annual training for every vaccine as updates become available; the School of Dentistry does not require documentation of subsequent or additional COVID-19 and Influenza vaccine training documentation.

The dentist's staff member is required to take and maintain documentation of all required subsequent ALERT IIS training; the School of Dentistry does not require documentation of required subsequent ALERT IIS training.

If the dentist seeks a comprehensive Immunization Certificate, they may enroll in the original OHSU School of Dentistry immunization training program without repeating modules they have taken. The School of Dentistry requires documentation of completion of this training to award a full Immunization Certificate.



# Oregon

Kate Brown, Governor

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

**TO:** OBD Board Members

**FROM:** Stephen Prisby, OBD Executive Director

**DATE:** January 22, 2021

**SUBJECT:** OHSU Vaccine Course Modification & Fast Track Request

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On Friday, January 22, 2021 I received a request from OHSU's Alexandria Case regarding Board approval of a modification of the current immunization program and to fast track the Covid & Flu vaccination certificate program (see attached). I had our two dentists on staff- one of whom has completed the OHSU vaccine training course, along with our attorney review. I also checked to see that OHA Immunization was OK with the proposal. The consensus was that all approved and recommended the Board accept this as proposed.

I emailed the information to President Martinez and copied the Board Members. At President Martinez' direction, I approved the request on behalf of the Board on January 22, 2021 and that the Board would ratify that decision at the February Board Meeting

I ask that the Board ratify my decision to approve the attached OHSU request as proposed.

**From:** Oregon OSHA <[ordcbs@public.govdelivery.com](mailto:ordcbs@public.govdelivery.com)>

**Sent:** Monday, February 1, 2021 12:17 PM

**To:** [stephen.prisby@state.or.us](mailto:stephen.prisby@state.or.us) <[stephen.prisby@state.or.us](mailto:stephen.prisby@state.or.us)>

**Subject:** Proposed Rulemaking: Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces

## Division 1 General Administrative Rules update from *Oregon OSHA*

Having trouble viewing this email? [View it as a Web page.](#) style="color: #1d5782;">View it as a web page.

### **Oregon OSHA's Proposal on Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces**

Due to the COVID-19 pandemic and in line with Oregon Health Authority guidelines, the hearings will be held virtually. Oregon OSHA offices remain closed to the public.

#### ***Virtual Public Hearings Scheduled for:***

<b>Date</b>	<b>Time</b>
<b>February 23, 2021</b>	<b>10:00 am</b>

Please register for Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces on Feb. 23, 2021 at 10AM PDT at:

<https://attendee.gotowebinar.com/register/5814548853272412685>

<b>February 26, 2021</b>	<b>10:00 am</b>
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Please register for Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces on Feb. 26, 2021 at 10AM PDT at:

<https://attendee.gotowebinar.com/register/970905463802940941>

<b>March 3, 2021</b>	<b>5:00 pm</b>
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Please register for Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces (Spanish) on Mar. 3, 2021 at 5PM PDT at:

<https://attendee.gotowebinar.com/register/1458368446419305229>

<b>March 4, 2021</b>	<b>5:00 pm</b>
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Please register for Rules Addressing the COVID-19 Public Health Emergency in All Oregon Workplaces on Mar. 4, 2021 at 5PM PDT at:

<https://attendee.gotowebinar.com/register/729995869087475725>

After registering for a webinar, you will receive a confirmation email containing information about joining the webinar. In order to ensure as many people as possible are able to testify, Oregon OSHA reserves the right to restrict testimony to no more than 5 minutes.

***Rule summary:***

This rule protects workers throughout the state in the context of the current public health emergency, which has not abated as might have been expected in 2020. Oregon OSHA adopted a temporary rule on November 6, 2020 that is set to expire on May 4, 2021. The temporary rule included significant public discussion that was used to refine the rule through multiple drafts. As the temporary rule is set to expire, the public emergency remains a significant concern in Oregon and it is necessary to extend most of the provisions from the temporary rule. In replacing the temporary rule with a permanent rule, some provisions were expanded as more information became available in relation to the transmission of the virus. If Oregon OSHA does not pursue permanent rulemaking for this continuing pandemic, workers will be less than fully protected and subject to the uncertainties of public health guidance rather than the relative clarity of a rule designed specifically to address Oregon workplaces. It is expected that this rule will be repealed once it is no longer necessary to address the COVID-19 pandemic. Please visit our web site [osha.oregon.gov](https://osha.oregon.gov) Click 'Rules and laws' in the Common resources column and view our proposed rules, or select other rule activity from this page.

Please click [here](#) for a direct link to the proposed rulemaking documents, including text of changes from the temporary rule to the permanent rule.

***When does this happen:*** Adoption tentatively will be in May 2021.

***To get a copy:***  
Proposed rules

Our web site – [osha.oregon.gov](https://osha.oregon.gov) Rules and laws, then,  
Or call 503-947-7449

***To comment:***  
OSHA

Department of Consumer and Business Services/Oregon  
PO BOX 14480  
Salem OR 97309-0405  
E-mail – [tech.web@oregon.gov](mailto:tech.web@oregon.gov)  
Fax – 503-947-7461

***Comment period closes:*** April 2, 2021

***Oregon OSHA contact:*** Matthew Kaiser, Central Office @ 503-947-7386

or email at [Matthew.C.Kaiser@oregon.gov](mailto:Matthew.C.Kaiser@oregon.gov)

Division 1, General Administrative Rules are available on the [Oregon OSHA website](#).

**About Oregon OSHA:**

Oregon OSHA is a division of the Department of Consumer and Business Services, enforces the state's workplace safety and health rules and works to improve workplace safety and health for all Oregon workers. For more information, go to [osha.oregon.gov](https://osha.oregon.gov).

The Department of Consumer and Business Services is Oregon's largest business regulatory and consumer protection agency. For more information, go to [www.oregon.gov/DCBS/](https://www.oregon.gov/DCBS/) or follow [twitter.com/OregonDCBS](https://twitter.com/OregonDCBS).

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# CORRESPONDENCE

**From:** Melissa Turner <[melissaturnerllc@gmail.com](mailto:melissaturnerllc@gmail.com)>  
**Sent:** Friday, December 11, 2020 1:40 PM  
**To:** PRISBY Stephen \*OBD <[Stephen.PRISBY@oregondentistry.org](mailto:Stephen.PRISBY@oregondentistry.org)>; OBD Info \* OBD <[information@oregondentistry.org](mailto:information@oregondentistry.org)>  
**Subject:** proposal for next board meeting

Dear OBD Board Members,

As an Expanded Practice dental hygienist with 15 years of clinical experience around the country, in addition to being a KOL, speaker, author, and founder of multiple national dental brands, I would like to submit a proposal for the next board meeting:

As the State of Oregon faces the immediate daunting task of providing mass numbers of vaccinations to its citizens, I recognize an opportunity to assist and meet the needs in our communities by proposing that dental hygienists could effectively contribute to the solution. *I am requesting an emergency action by the board to consider a revision of our state scope of practice law and rules to temporarily allow for the training of and practice privilege for hygienists to give vaccinations.*

To best facilitate the massive need for impending implementation of the SARS-CoV-2 vaccination, I felt it important to explore the role of dental hygienists as care providers in Oregon. In order to make the possibility more efficient, I am suggesting that the privilege be effective for hygienists who can own a clinical hygiene practice or who can work in collaboration with medical practices, public health entities, pharmacies, hospitals and clinics (i.e. hygienists who hold an Expanded Practice permit).

This would require the board to identify and publish an appropriate pathway for proper training and implementation.

These are dire times and require an all-hands-on-deck approach and solution. The Oregon dental community has proven to be a leader and at the forefront of innovation throughout the country, and it is my hope that we can together set an example for other states to follow.

Please feel free to reach out with any questions or discussion.

Respectfully,  
Melissa Turner, BASDH, RDHEP, EFDA

--

**Melissa Turner, BASDH, RDHEP**  
Dental Influencer | Advisor | Consultant | Thought Leader  
Chief Hygiene Officer, [Cellerant Consulting](#)  
717-682-2419  
[Facebook](#) [Twitter](#) [Instagram](#) [LinkedIn](#)  
*Join the [American Mobile Dentistry Alliance](#) today!*  
*Save the date for the second annual [NMDC on March 4-6, 2021.](#)*



To the Oregon Board of Dentistry,

My name is Pamela Lynch. I am an Expanded Practice Dental Hygienist. I am writing to you to request an emergency rules revision to include Register Dental Hygienists and Expanded Practice dental hygienists (RDH and EPDH) be trained and permitted to deliver vaccinations.

When dentistry was shut down in March, I chose not returned to work except at my independent practice to mitigate exposure risks to myself, my family, and the community. I'm in a high-risk category and just became a grandmother. I donated all my PPE to the cause, then had to work for weeks to find a dental supply company to sell to my small practice to replace what I donated.

From 1880 to 1906, we were called Dental Nurses until Alfred C. Fones changed the name to Dental Hygienists. Had the name not changed, and members of my profession were still called Dental Nurses, this large body of licensed professionals would not have been overlooked. Dental hygienists need to be included and utilized as providers to administer vaccines during this Covid-19 emergency.

Medical physicians routinely utilize unlicensed Medical Assistants to administer injections, (including Botox and fillers). Below is taken from the Oregon Medical Board.

## Use of Unlicensed Healthcare Personnel

With ever-increasing demands on the time and resources of physicians, the role of unregulated healthcare personnel is expanding. As a result, high quality patient care depends on the contributions of a wide variety of personnel, including medical assistants. When establishing expectations and limitations for medical assistants in a medical office, the OMB advises that patient safety should be the primary factor.

The physician is responsible for ensuring that the medical assistant is qualified and competent to perform any delegated services. It is within the physician's judgment to determine that the medical assistant's education, training and experience is sufficient to ensure competence in performing the service at the appropriate standard of care. Performance of delegated services is held to the same standard of care applied to the supervising physician, and the physician is ultimately accountable for the actions of his or her supervised personnel.

Unlicensed healthcare personnel must be adequately supervised by a licensed physician. Examples of supervision include verifying the correct medication and dosage prior to administration of medicine by a medical assistant and being physically present in the facility when services are performed by a medical assistant.

The physician may not allow any unlicensed healthcare personnel to practice medicine as defined by the Oregon Medical Practice Act. Unlicensed healthcare personnel may not provide independent medical judgment. Therefore, medical assistants should not provide assessments, interpretations, or diagnoses and should not perform invasive procedures.

Physicians should exercise caution when employing a person who has education and training as a healthcare professional but is working as an unlicensed medical assistant. In this situation, it may be tempting for the physician to delegate (or the medical assistant to perform) duties beyond the scope of unlicensed healthcare personnel.

Medical assistants and other unlicensed healthcare personnel must maintain patient confidentiality to the same standards required of physicians. Medical

assistants must be clearly identified by title when performing duties. This can be accomplished through wearing a name tag with the designation of “medical assistant” and clearly introducing oneself as a “medical assistant” in oral communications with patients and other professionals.

In order to fulfill its mission to protect the health, safety and wellbeing of Oregonians, the OMB asks physicians to follow these guidelines and to be mindful of patient safety when delegating services to other healthcare personnel.

*-Adopted October 2012*

<https://www.oregon.gov/omb/board/Philosophy/Pages/Use-of-Unlicensed-Healthcare-Personnel.aspx>

I, along with my colleagues, want to be part of the solution to help our community. *Please utilize us.*

Thank you for your consideration.

Sincerely,  
Pamela Lynch, BSDH, EPDH, LAe

**From:** Laura Crosby <[laura.anne1212@gmail.com](mailto:laura.anne1212@gmail.com)>  
**Sent:** Thursday, February 4, 2021 11:16 AM  
**To:** OBD Info \* OBD <[information@oregondentistry.org](mailto:information@oregondentistry.org)>  
**Subject:** Requestes to allow RDH personnel to give COVID vaccines

To Whom It May Concern:

I am a currently licensed RDH in the state of Oregon. I am also a retired (25 years) RN in Oregon. I have signed up with SERVE-OR and I know that over 10 years since being an active RN is considered too long to administer vaccines. The required skills in giving injections as an active RDH still hold true. I am submitting this comment on behalf of many dental hygienists in my community. We agree that our skills are underutilized in this current pandemic. We would like to be considered to be vaccinators if possible. Our manual dexterity, patient skills and knowledge of more difficult injection techniques would be a great and needed asset in the mass vaccination program.

Thank you for your time and consideration-

Sincerely,

Laura Crosby  
[laura.anne1212@gmail.com](mailto:laura.anne1212@gmail.com)  
Oregon RDH license # H2537  
541 990-2398

**From:** John E. Kasper, PhD, CAE <[jkasper@adaausa.org](mailto:jkasper@adaausa.org)>  
**Sent:** Tuesday, February 2, 2021 5:29 PM  
**To:** [jkasper@adaausa.org](mailto:jkasper@adaausa.org) <[jkasper@adaausa.org](mailto:jkasper@adaausa.org)>  
**Cc:** [bfox@adaausa.org](mailto:bfox@adaausa.org) <[bfox@adaausa.org](mailto:bfox@adaausa.org)>  
**Subject:** Mandatory Infection Control Education at the State Level

Dear State Board of Dentistry:

Attached to this email please find a communication from American Dental Assistants Association (ADAA) President Betty Fox concerning the association's position on mandatory infection control education for the oral healthcare team, to include a requirement that ALL dental assistants have a minimum of 12 hours of CODA, ADA CERP, or AGD PACE-approved didactic and 4 hours of clinical education in infection control, including performance evaluation.

ADAA has a series of AGD PACE approved courses that would qualify for this education. ADAA has also created a clinical component made up of performance evaluations to provide guidance for the content to be included in the didactic portion of the mandated education.

The ADAA would be happy to provide any assistance in your deliberations regarding infection control education for dental assistants.

Please let us know how else we may help.

Thank you for all your efforts in this regard.

John E. Kasper, PhD, CAE



**John E. Kasper, PhD, CAE**  
**Executive Director**  
**American Dental Assistants Association**  
140 North Bloomingdale Road  
Bloomingdale, IL 60108-1017  
telephone: 630-994-4247  
fax: 630-351-8490  
email: [jkasper@adaausa.org](mailto:jkasper@adaausa.org)



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140 N. Bloomingdale Road  
Bloomingdale, IL 60108-1017  
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[www.adaausa.org](http://www.adaausa.org)

Memo to: State Boards of Dentistry

From: Betty Fox, AS, CDA, RDA, FADAA  
President, ADAA

Date: February 2, 2021

Subject: Mandatory Infection Control Education at the State Level

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As the regulatory agency ultimately in charge of the protection of the public through licensing requirements for oral healthcare practitioners in the state, we are contacting you today to ask for your support in adopting the following important infection control guideline for the oral healthcare team practicing in your state. Of course, it is the state's prerogative to identify what is best for its citizens. The materials referred to in this correspondence are designed to provide guidance and assistance to the states in that endeavor.

The American Dental Assistants Association (ADAA) is the professional association in the United States whose mission is to advance the careers of dental assistants and to advocate for the dental assisting profession in matters of education, professional activities, credentialing and legislation. We promote the ideals and growth of the association which aid in the accessibility and delivery of quality oral health care to the public. ADAA works for the safety, health, and protection for all dental patients as well as the oral health care team and advocates that infection control laws, regulations, guidelines and best practices be mandated through government regulations.

The ADAA recognizes that mandatory education standards in infection control do not exist nationally for dental assistants. This means that someone with no background and knowledge in dentistry and infection control could be working in the dental office, participating in patient treatment and all facets of infection control. The coronavirus pandemic has magnified the importance of this issue and the need for education prior to being responsible for infection control in a dental setting.

Infection control education is at the forefront of the fight against coronavirus. The Centers for Disease Control emphasizes that "Ongoing education and training of DHCP are critical." See <https://www.cdc.gov/oralhealth/infectioncontrol/pdf/safe-care2.pdf>.

According to the World Dental Federation (FDI), "Although the principles of infection prevention and control remain unchanged, new technologies, materials, equipment and updated data require continuous evaluation of current infection control practices and continuous education for the oral health team." See <https://www.fdiworlddental.org/resources/policy-statements/infection-prevention-and-control-in-dental-practice>.

**In light of this, ADAA believes that mandatory infection control education for the oral healthcare team should be implemented to include a requirement that ALL dental assistants have a minimum of 12 hours of CODA, ADA CERP, or AGD PACE-approved didactic and 4 hours of clinical education in infection control, including performance evaluation.**

---

*"The people who make dental assisting a profession!"*

ADAA has a series of AGD PACE approved courses that would qualify for this education. ADAA has also created a clinical component made up of performance evaluations to provide guidance for the content to be included in the didactic portion of the mandated education.

The ADAA would be happy to provide any assistance in your deliberations regarding infection control education for dental assistants.

Please let us know how else we may help.

BF/jek

S:\ADAA\Legislation\sbod\_template\_infection\_control.pdf

# OTHER ISSUES



# Oregon

Kate Brown, Governor

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

**TO:** OBD Board Members

**FROM:** Stephen Prisby, OBD Executive Director

**DATE:** February 5, 2021

**SUBJECT:** Strategic Planning Survey Results and Time for Board Feedback On Next Steps

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The OBD Strategic Planning Survey responses through February 4, 2021 are attached for your review.

We are seeking out more consumers to respond to the survey as well.

We will discuss the next steps and direction the Board Members want to go.

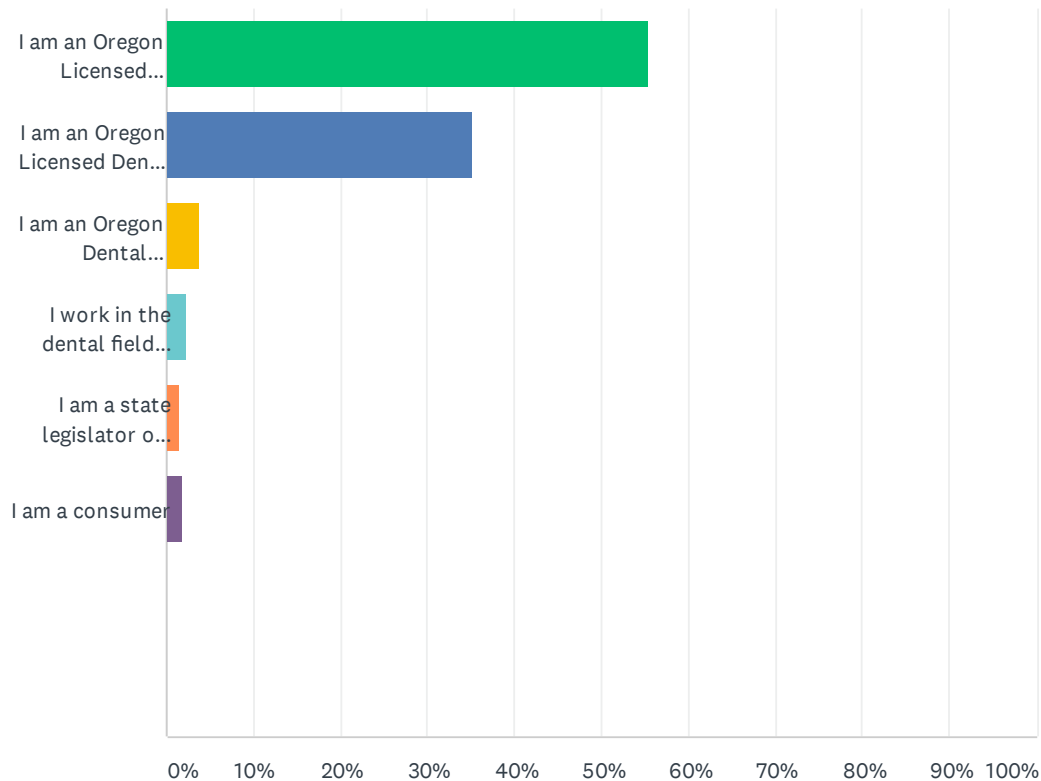
Since the Board will be onboarding two new Board Members this spring and a new dental investigator, you may want to wait until June to start any meaningful work on this project. Also, we may be able to gather more consumer feedback with the extended timeframe.

The Board could create a Strategic Planning Ad Hoc Planning Committee to focus exclusively on this endeavor. I look forward to our discussion at the February 19<sup>th</sup> Board meeting.



## Q1 Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

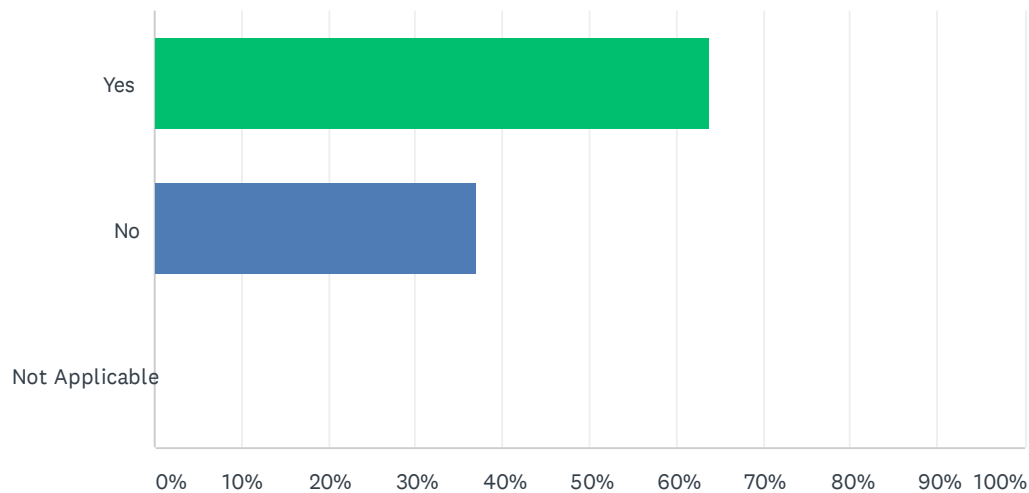
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
I am an Oregon Licensed Dentist	55.47%	147
I am an Oregon Licensed Dental Hygienist	35.09%	93
I am an Oregon Dental Assistant	3.77%	10
I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)	2.26%	6
I am a state legislator or state government official	1.51%	4
I am a consumer	1.89%	5
Total Respondents:		
265		

## Q2 Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

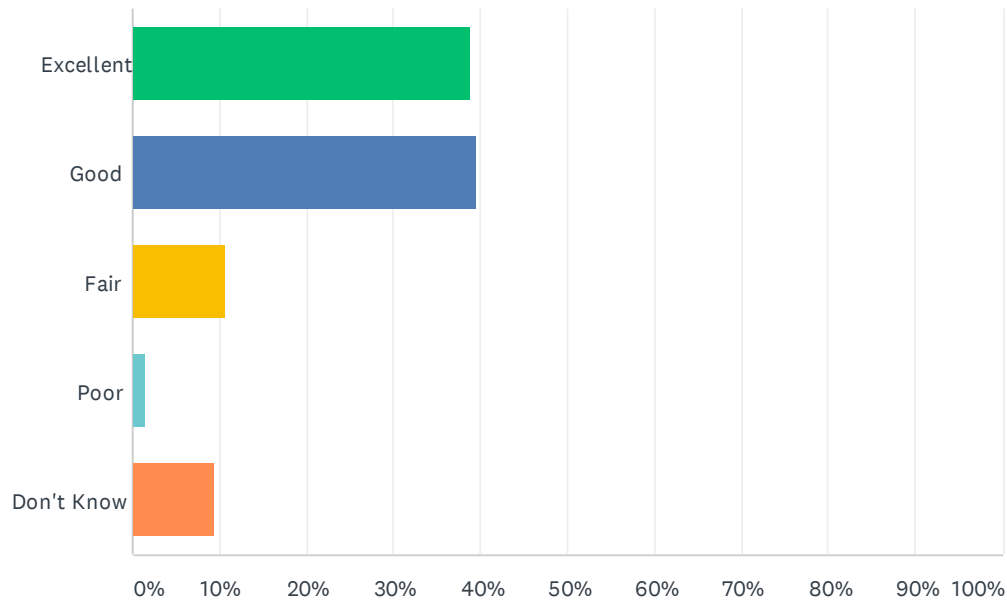
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	63.77%	169
No	36.98%	98
Not Applicable	0.00%	0
Total Respondents: 265		

### Q3 How would you rate your overall experience with Oregon Board of Dentistry Staff?

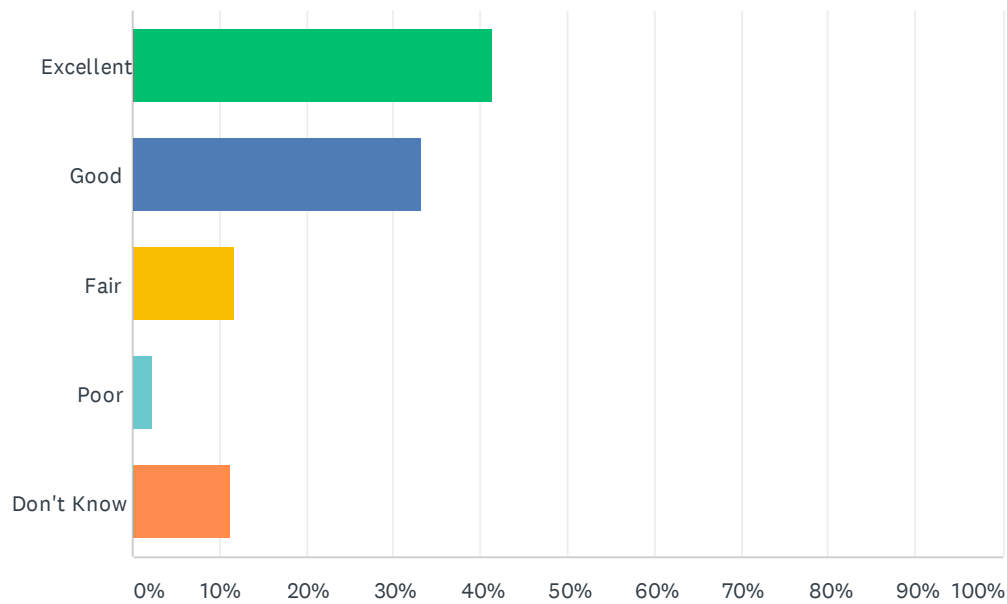
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
Excellent	38.87%	103
Good	39.62%	105
Fair	10.57%	28
Poor	1.51%	4
Don't Know	9.43%	25
TOTAL		265

## Q4 How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

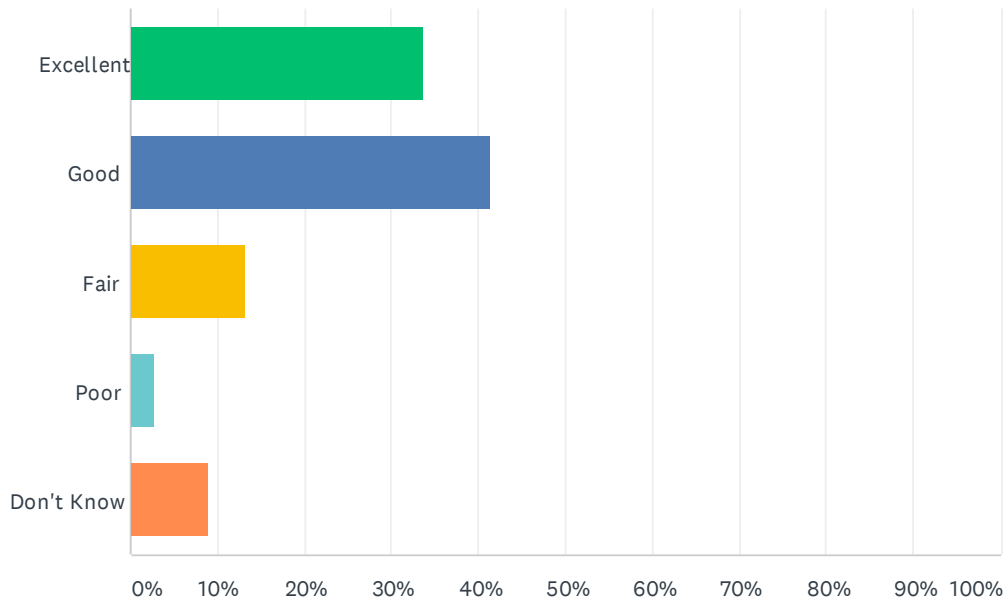
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
Excellent	41.51%	110
Good	33.21%	88
Fair	11.70%	31
Poor	2.26%	6
Don't Know	11.32%	30
TOTAL		265

## Q5 How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

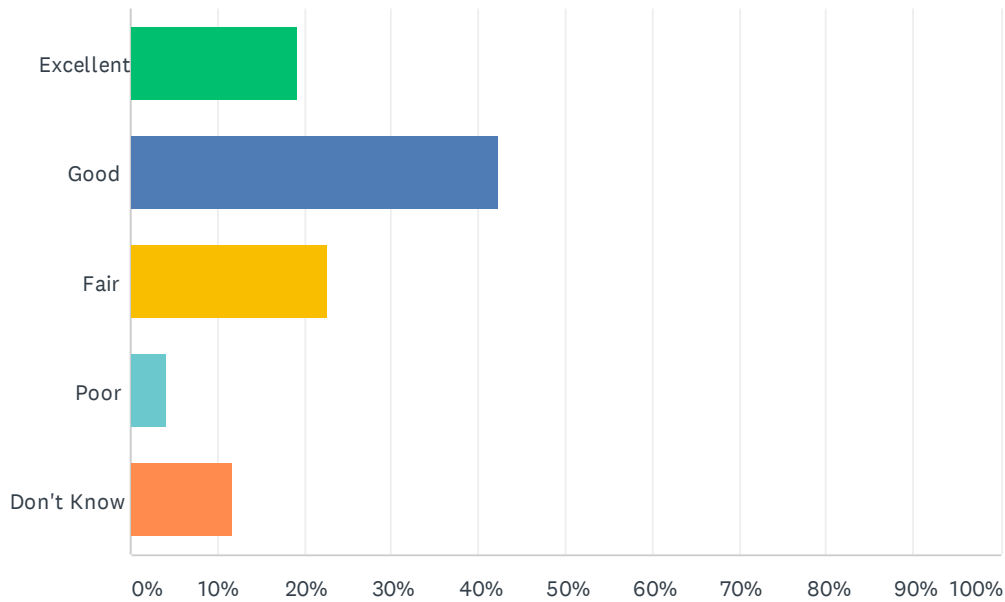
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
Excellent	33.58%	89
Good	41.51%	110
Fair	13.21%	35
Poor	2.64%	7
Don't Know	9.06%	24
TOTAL		265

## Q6 How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

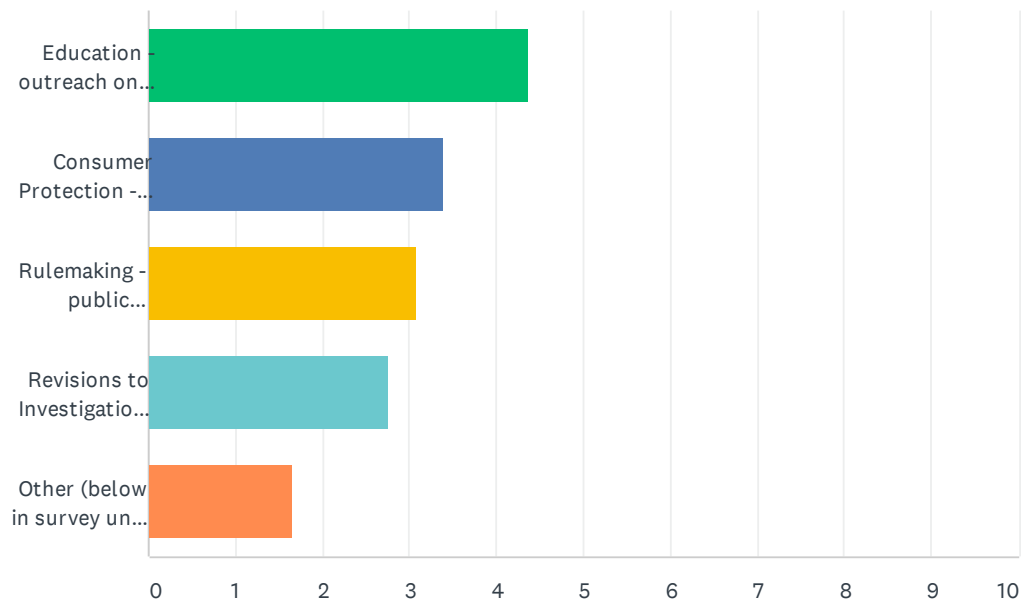
Answered: 265 Skipped: 0



ANSWER CHOICES	RESPONSES	
Excellent	19.25%	51
Good	42.26%	112
Fair	22.64%	60
Poor	4.15%	11
Don't Know	11.70%	31
TOTAL		265

## Q7 Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Answered: 258 Skipped: 7



	1	2	3	4	5	TOTAL	SCORE
Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	65.00% 156	18.33% 44	8.75% 21	5.42% 13	2.50% 6	240	4.38
Consumer Protection - communication with consumers to highlight some area of oral healthcare	13.56% 32	40.25% 95	22.46% 53	18.22% 43	5.51% 13	236	3.38
Rulemaking - public meetings, public participation and implementation	9.58% 23	23.75% 57	36.25% 87	25.00% 60	5.42% 13	240	3.07
Revisions to Investigations, enforcement and compliance activities	9.50% 23	14.46% 35	26.86% 65	40.91% 99	8.26% 20	242	2.76
Other (below in survey under comments describe the area the OBD should focus on more intently)	8.21% 17	4.35% 9	6.28% 13	6.76% 14	74.40% 154	207	1.65

**Q8 What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?**

Answered: 203   Skipped: 62



## Q9 How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Answered: 168   Skipped: 97

**Q10 Any additional information that the Oregon Board of Dentistry should consider during strategic planning?**

Answered: 143   Skipped: 122

#1

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:32:34 PM  
**Last Modified:** Friday, December 11, 2020 12:36:13 PM  
**Time Spent:** 00:03:38  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** Poor

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

all the cowboys doing things they should not...it is a travesty!

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Have no idea

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

doing a better job of controlling the bad care in this state...it is epidemic in nature

---

#2

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:39:40 PM  
**Last Modified:** Friday, December 11, 2020 12:42:53 PM  
**Time Spent:** 00:03:13  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Due to Biden, economy will fail causing less dentistry to be done, thereby causing stress for dentists.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

?

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

?

---

#3

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:41:48 PM  
**Last Modified:** Friday, December 11, 2020 12:43:54 PM  
**Time Spent:** 00:02:05  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#4

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:39:59 PM  
**Last Modified:** Friday, December 11, 2020 12:44:22 PM  
**Time Spent:** 00:04:22  
**IP Address:** 1

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## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Increased higher education across ALL dental professional regarding infection control practices, there are a lot of uneducated assistants, lazy Drs and RDHs out there when it comes to the importance of strict infection control

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Outreach programs in high schools through the state

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

---

#5

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:39:52 PM  
**Last Modified:** Friday, December 11, 2020 12:45:17 PM  
**Time Spent:** 00:05:24  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Poor**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

poor quality and public dental health due to HMO/PPO/DMO etc.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Market place

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

More concern about public education about dental insurance issues

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#6

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:44:38 PM  
**Last Modified:** Friday, December 11, 2020 12:47:23 PM  
**Time Spent:** 00:02:44  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dentists giving vaccinations

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Work with local dentist to make it easier to create new dental assistant and dental hygienist programs that are affordable and well respected and make sure all students get all credentials needed so they are fully certified upon graduation

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Making it easier for dentist to get license to provide vaccinations when it is some thing we do basically every day giving injections. And dentists that have their class to moderate sedation permit it should be absolute easy to do because we already know how to draw meds!!

---

#7

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:39:32 PM  
**Last Modified:** Friday, December 11, 2020 12:47:54 PM  
**Time Spent:** 00:08:22  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

protection of staff from communicable disease.

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

In box 7above, what should the board focus on more intently. I brought a board complaint against almost three years ago. Nothing has been done to resolve the issue. So, more intent focus here would be great. If this is not resolved, the statute of the board requiring a dentist to own a practice is meaningless.

---



#8

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:44:22 PM  
**Last Modified:** Friday, December 11, 2020 12:48:03 PM  
**Time Spent:** 00:03:41  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Infectious diseases/ protocol

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

community out reach

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

talk to office staff not just dentist

---

#9

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:44:53 PM  
**Last Modified:** Friday, December 11, 2020 12:48:54 PM  
**Time Spent:** 00:04:01  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

pressure to have practice ownership be nondentist

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

have board reflect the population

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#10

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:47:55 PM  
**Last Modified:** Friday, December 11, 2020 12:52:16 PM  
**Time Spent:** 00:04:20  
**IP Address:**

---

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The role of for profit corporations administering services through OHP and the lack of accountability of how tax payer dollars are spent.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

It can't

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

See #8 for what I feel should be the 31 focus of the OBD

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#11

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:45:20 PM  
**Last Modified:** Friday, December 11, 2020 12:53:26 PM  
**Time Spent:** 00:08:05  
**IP Address:**

---

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Addressing infection control guidances and recommendations.

Considering orofacial myofunctional therapy

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Allow dental hygienists to be under general supervision of medical doctors in addition to dentists or remove the current supervision requirements for dental hygienists, allowing them to practice independently

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

N/A

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#12

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:42:11 PM  
**Last Modified:** Friday, December 11, 2020 12:57:55 PM  
**Time Spent:** 00:15:44  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Practicing safely in a pandemic  
Managing corporate dentistry

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#13

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:02:28 PM  
**Last Modified:** Friday, December 11, 2020 1:07:04 PM  
**Time Spent:** 00:04:35  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#14

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:00:40 PM  
**Last Modified:** Friday, December 11, 2020 1:07:19 PM  
**Time Spent:** 00:06:38  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid and infection control. PPE and stress on providers. Patient safety in a dental setting and covid making the consumer and public more aware.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#15

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:05:12 PM  
**Last Modified:** Friday, December 11, 2020 1:09:22 PM  
**Time Spent:** 00:04:10  
**IP Address:**

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

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**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Ways to ensure consumers are protected in regards to purchases of dental oral health aids thru an office

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

The rules need to continue to be enforced evenly and with regard for protection of our patients we serve. If nothing else, make language skill part of the dental education process

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#16

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:07:50 PM  
**Last Modified:** Friday, December 11, 2020 1:09:39 PM  
**Time Spent:** 00:01:49  
**IP Address:** 8

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#17

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:50:57 PM  
**Last Modified:** Friday, December 11, 2020 1:13:36 PM  
**Time Spent:** 00:22:39  
**IP Address:** 0

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

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**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

churn, multiple short appointments, to increase revenues in FQHC dental practices. Multiple blocks with associated risks when longer visit would be in patient's best interest.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

connect to leadership in diverse communities--Native American, Hispanic, Asian, Arabic--with information on opportunities for dental health professions scholarships and educational support. Work with professional associations encouraging their members to mentor interested individuals, incentivize that with CE credit for maintaining licensure.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#18

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:55:15 PM  
**Last Modified:** Friday, December 11, 2020 1:17:31 PM  
**Time Spent:** 00:22:16  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Costs of education, supplies and equipment, overhead and legal protection have grown exponentially while income has lagged for many dentists; especially for those choosing to treat disadvantaged populations and patients in economically depressed areas of Oregon.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Try focusing on helping DENTISTS who might well be struggling financially and/or emotionally at this time. Less red tape and regulations and more supportive, encouraging communication would be greatly appreciated. Those with unconventional ideas should feel welcome to share those ideas.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Probably.

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#19

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:00:38 PM  
**Last Modified:** Friday, December 11, 2020 1:17:42 PM  
**Time Spent:** 00:17:04  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>3</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I am a retired licensed dentist. I have been involved with helping provide free dental care through free Medical Dental Vision clinics. I would like to see consideration given to make it much easier to recruit out of state licensed Dentists and Hygienist to volunteer for several days in this type of free clinics. Examples are Washington, Idaho, Arizona, Michigan, California, and Hawaii that I am aware of. It is not for long periods of time maybe from 1-10 days in any given year. I believe this would help serve the Homeless, non-insured, under-insured, and low income individuals of our state. There is a limit of providers who are willing to give of their time to do something like this. Thanks for your time.



#20

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:17:37 PM  
**Last Modified:** Friday, December 11, 2020 1:18:26 PM  
**Time Spent:** 00:00:49  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a consumer

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

N/A

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

N/A

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#21

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:16:30 PM  
**Last Modified:** Friday, December 11, 2020 1:19:52 PM  
**Time Spent:** 00:03:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>5</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

How to protect People from poor dentistry, especially when corporations are protecting their employee dentists from liability. Improving ethics among dentists.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't see that as the OBD's role. The Dental School might be a better place to focus on that.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#22

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:28:27 PM  
**Last Modified:** Friday, December 11, 2020 1:33:26 PM  
**Time Spent:** 00:04:58  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

#23

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:33:53 PM  
**Last Modified:** Friday, December 11, 2020 1:39:24 PM  
**Time Spent:** 00:05:30  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Further engagement/opportunity for dental providers to provide vaccination and other tests/services (cancer risk, oral-systemic disease connections, etc.)  
Ongoing changes to opioid use  
Virtual education  
Virtual/teledentistry

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## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Consider reaching out (especially to specialists, particularly oral medicine, oral pathology, oral radiology) to aide in clinical skills development, diagnostic acumen and reading/interpreting CBCT/advanced imaging  
Expand virtual but LIVE teaching platforms in these areas

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no additional comments

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#24

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:53:51 PM  
**Last Modified:** Friday, December 11, 2020 2:01:01 PM  
**Time Spent:** 00:07:09  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Mandated Dental Unit Waterline Testing, Improved HVAC engineering controls

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I would love the board to give the Dental Industry more guidance on keeping the public safe during this pandemic when they utilize dental services. Help us obtain proper PPE to protect the public.

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#25

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:52:20 PM  
**Last Modified:** Friday, December 11, 2020 2:03:13 PM  
**Time Spent:** 00:10:53  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

We have a workplace shortage of qualified dental auxiliary. Increasing regulations from several agencies have made the administrative work required of owners/dentists more challenging to keep up with in terms of both knowledge and time required

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Make minority groups aware of the dental field as a career. In the field(s) of dental auxiliary, men are a minority as the vast majority of our workforce are women.

---

### Q10

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#26

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:57:36 PM  
**Last Modified:** Friday, December 11, 2020 2:14:20 PM  
**Time Spent:** 00:16:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Lack of 'checks and balances' when in-office crown-making machines are used.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Start a series of 'Dental Career Days' that would be located in areas like Hermiston, Independence, Woodburn and other centers with high population rates of hispanic, black, PacRim and other minorities.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Construct conduits for dental-specific information from state offices like OHA. While ODA has tried to be this conduit, the Pandemic has shown problems in that non-members are often left out, and OHA can 'ignore' ODA a bit more than it could an official SoO group like the Board.

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#27

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 2:14:28 PM  
**Last Modified:** Friday, December 11, 2020 2:24:40 PM  
**Time Spent:** 00:10:12  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Larger corporate offices with dentists who just want to be employees rather than owners. Not that these dentists won't be good dentists but the corporate atmosphere is not always in the patients best interest.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure how the OBD can influence that. It seems this is more of a market place decision.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#28

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:49:44 PM  
**Last Modified:** Friday, December 11, 2020 2:26:08 PM  
**Time Spent:** 01:36:23  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I would assume any planning in the future for Dentistry will have to include how to deal with the increasing amount of corporate dentistry and it's squeeze out of the private, general dentist. In less than 10 years solo practice will be a thing of the past.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Sounds like the Board is trying to make up another role for it to play in the selection of new dentist into Oregon on race, gender, and sexual preference. Board should ask itself why this questions even needs to be addressed, do they have evidence that diversity and inclusiveness does not exist in Oregon dentistry? Maybe the Boards believes there is not enough Black Live Matter's agenda to shed on those of us who live south of Portland.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Meetings should be held in Salem, Eugene, and Medford/Ashland areas for feedback and ideas for strategic planning. same forum presentations as study clubs do. This would insure that you get a complete compilation of ideas from the "whole " State of Oregon dentists, just not all Portland.

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#29

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 2:26:56 PM  
**Last Modified:** Friday, December 11, 2020 2:29:24 PM  
**Time Spent:** 00:02:28  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#30

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 1:31:58 PM  
**Last Modified:** Friday, December 11, 2020 2:33:11 PM  
**Time Spent:** 01:01:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Can't think of anything. I've been out of clinical hygiene since COVID hit.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

No, I'm not racist, but this question is silly. People shouldn't have to hire someone based on genitalia or skin pigmentation. I don't care what color my provider is. I care if they do a good job. I don't care what color /gender my coworkers are as long as we respect each other and work well together. You can only hire from the pool of people who apply for the job. The state cannot control what color people are who apply for jobs.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Leave political garbage out of your strategizing and focus on people's oral health. Everything down to sports is politicized now. Does the dentist need to be too? Please forgive my attitude. I'm just so tired of this.

---

#31

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 12:47:24 PM  
**Last Modified:** Friday, December 11, 2020 2:48:32 PM  
**Time Spent:** 02:01:07  
**IP Address:** 9

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

There would be a better quality of health for patients if the OBD had compulsory standards for referrals. For example, referrals to the periodontist. If a patient who has a periodontal pocket greater than 5mm, receives SRP (or some other treatment like a flap procedure) and after one year the area is 6mm or greater they should be referred to a specialist. (Likewise, if the patient declines SRP they would be immediately referred to a specialist.). This would do a variety of things. First of all, it would allow patients to get a second opinion on areas that are not responding well. Secondly, it encourages patients to be more involved in the outcome of their own care, as most would like to avoid going to specialists and would see this as a guidepost or more serious warning. And third, it would help patients understand why they may need to come for periodontal maintenance more often and that it may need to be more assertive. It is difficult to say for sure, but I believe there could be another silver lining. Earlier in my career as a hygienist, I tended to feel bad treating perio disease in its early phases. (Interestingly, this is true even though I am periodontally involved myself.). Somehow, it seemed like I was fail these patients. I was! I just did not realized that it was because I was not being more assertive in treating the disease process. This may be serve to help all of us to be more proactive in treating patients.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I am uncertain.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Sometimes changes are made to the rules as an amendment and it actually makes things unclear. This is really not good. The rules should be written in such a straight forward manner that a person does not have to consult the board for clarification. This is especially true for the rules about hygiene and patients receiving nitrous oxide or sedatives. It is writing in a very unclear manner. Someone on the board verbally told me that patients could have both. I asked them to confirm it an email and they changed what they told me. I am not surprised. I believe that the person was a new board member. Still, this shows how poorly written the rule is.

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#32

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 2:46:45 PM  
**Last Modified:** Friday, December 11, 2020 2:49:18 PM  
**Time Spent:** 00:02:33  
**IP Address:** 1

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#33

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 3:15:52 PM  
**Last Modified:** Friday, December 11, 2020 3:19:48 PM  
**Time Spent:** 00:03:56  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols  
(presentations, newsletters, Eblasts, website)

**1**

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Cost of providing dentistry, trying to maintain all record keeping and dealing with changes of COVID versus the cost of the dental work.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#34

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 3:14:39 PM  
**Last Modified:** Friday, December 11, 2020 3:26:38 PM  
**Time Spent:** 00:11:59  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Consider changing verbiage for nitrous oxide to allow permit holders to administer to two patients at once instead of one. This could help decrease access concerns and reliance on more advanced pharmacology management techniques.

#35

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 3:42:14 PM  
**Last Modified:** Friday, December 11, 2020 3:48:12 PM  
**Time Spent:** 00:05:58  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

vaccination strategy

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#36

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 4:04:08 PM  
**Last Modified:** Friday, December 11, 2020 4:07:16 PM  
**Time Spent:** 00:03:07  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#37

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 4:08:14 PM  
**Last Modified:** Friday, December 11, 2020 4:10:09 PM  
**Time Spent:** 00:01:54  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>5</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#38

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 4:10:13 PM  
**Last Modified:** Friday, December 11, 2020 4:15:06 PM  
**Time Spent:** 00:04:52  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Poor**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Poor**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Poor dental education. Lack of credentialling

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Find better qualified people. Take the politics out of appointments. Find the best not the socially or politically connected

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Control the out of control poorly trained dentists

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#39

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 4:15:09 PM  
**Last Modified:** Friday, December 11, 2020 4:16:53 PM  
**Time Spent:** 00:01:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#40

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 3:01:01 PM  
**Last Modified:** Friday, December 11, 2020 4:20:53 PM  
**Time Spent:** 01:19:51  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** **Respondent skipped this question**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

While the Covid pandemic introduced overall hygiene of dental staff/dr, I hope there is better way to keep the profession's cleanliness. Clinical staff should not be allowed to have long nails, or acrylic nails--currently, there is only mild advice to refrain but it is not enforced. Hand hygiene of the professionals is so important. I appreciate the handwashing emphasis, and would like to see more strict hygiene requirements put on the clinical team's finger nails and hair. Thank you for the great work!

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I think equality, not just diversity, is important. For example, putting all races/ethnic groups in visual material (brochure, website, etc.) is great for "diversity" but it seems (not specifically the Board, but just in general) stereotype still remains. When presenting a doctor and suffering patients, the patients are often minority population, and the doctor is Caucasian. For doctor and patient, it is rare that the stereotypical races are reversed, i.e., hispanic or black doctor and white patient. So while I appreciate the effort to develop "more diversity" I would like to see more equal representation of roles and racial & ethnic categories.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I used to see the board's purpose often being "to protect the public" but did not see the dental professionals from public (individuals). Dental professionals are paying for the Board's service also, and I feel similar protection is much appreciated. Also to say "public protection" or "to protect the public" makes it sound like the profession is an expected danger to the public--I find it very strange. The current website's mission statement is so much better stated, and I appreciate it very much.

As for PPE requirements, this may not be the Board's decision, but it is much needed help to have a guideline on what mask/gloves, etc. are MANDATORY, which are recommended and optional, which are not required but highly regarded, etc. When it comes to everyday clinic specific concerns, many times the guidelines are vague on whether it must be carried out, or just a would-be-nice recommendation. Especially during the pandemic time things are changing always, it would be helpful to see more concrete, specific, strict rules. Again, thank you for your work!

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#41

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 5:28:27 PM  
**Last Modified:** Friday, December 11, 2020 5:33:07 PM  
**Time Spent:** 00:04:39  
**IP Address:** 5

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

allowing EPDH's the ability upon training to perform ATR in the areas we serve

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

maintain a diverse and inclusive board

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

n/a

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#42

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 6:26:12 PM  
**Last Modified:** Friday, December 11, 2020 6:30:02 PM  
**Time Spent:** 00:03:50  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Ethics

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#43

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 7:13:20 PM  
**Last Modified:** Friday, December 11, 2020 7:23:38 PM  
**Time Spent:** 00:10:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid19 has caused many changes in the oral healthcare industry and there is a possibility of other emerging viruses that the WHO is keeping an eye on. We need to be prepared for another epidemic or pandemic to keep oral healthcare care running smoothly and safely.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Unsure.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Unsure.

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#44

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 7:24:04 PM  
**Last Modified:** Friday, December 11, 2020 7:28:05 PM  
**Time Spent:** 00:04:00  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid PPE

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

starting in high school with more focused career education

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#45

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 7:42:48 PM  
**Last Modified:** Friday, December 11, 2020 7:50:44 PM  
**Time Spent:** 00:07:55  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Protections for employees health and safety with regard to pandemic. Equal standardized rules and not just optional guidelines.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Start recruiting in high school. Lots of diversity in DMDs but hygienist and assistants could be done in high schools.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

None

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#46

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 8:01:36 PM  
**Last Modified:** Friday, December 11, 2020 8:06:59 PM  
**Time Spent:** 00:05:22  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	2

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Offer options for continued education either on line during this Covid time or conference when appropriate.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Continue to e mail with meetings and updates in board requirements.

---

## Q10

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#47

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, December 11, 2020 8:55:57 PM  
**Last Modified:** Friday, December 11, 2020 9:00:52 PM  
**Time Spent:** 00:04:55  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Expanded functions of hygienists, independent hygiene practice, allows for more accessible and affordable routine care. Would also stop hygienists from leaving the industry as much.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Look into expanding the functions of hygienists or allowing them to independently practice as other states do

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The ability for hygienists to practice independently would be a real game changer!

---



#48

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 12, 2020 7:26:15 AM  
**Last Modified:** Saturday, December 12, 2020 7:28:13 AM  
**Time Spent:** 00:01:58  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

COVID and vaccinations

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#49

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 12, 2020 11:02:52 AM  
**Last Modified:** Saturday, December 12, 2020 11:08:03 AM  
**Time Spent:** 00:05:10  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

widen the scope of dentistry to include treatment of the head and neck outside the oral environment

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't think there is a need for change

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#50

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 12, 2020 11:31:12 AM  
**Last Modified:** Saturday, December 12, 2020 11:33:47 AM  
**Time Spent:** 00:02:35  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Difficulties associated with continuing education in the era of covid

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Is that the Board's role? I think not

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#51

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 12, 2020 1:50:17 PM  
**Last Modified:** Saturday, December 12, 2020 1:53:23 PM  
**Time Spent:** 00:03:05  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Public awareness of infection control and covid protocols

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Public service and efucation

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#52

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 12, 2020 11:19:25 PM  
**Last Modified:** Saturday, December 12, 2020 11:23:04 PM  
**Time Spent:** 00:03:38  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Inaccurate info on websites and tv and newspaper ads

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#53

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 9:00:21 AM  
**Last Modified:** Sunday, December 13, 2020 9:15:15 AM  
**Time Spent:** 00:14:54  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Loss of quality of care using the guise of access to care.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I do not believe that is the role of the BOD. The role of the BOD is to fairly and with professional knowledge, interpret and administer the legislative rules associated with dental licensure

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Stay focused on the primary role and not become more than as defined by the Oregon legislature

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#54

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 12:15:27 PM  
**Last Modified:** Sunday, December 13, 2020 12:42:06 PM  
**Time Spent:** 00:26:38  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

There is a growing interest in healthcare integration and involvement by all healthcare disciplines to improve overall health; Oregon Board of Dentistry should monitor trends and support training to expand scope of practice where appropriate.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Developing a more diverse and inclusive oral healthcare workforce is the responsibility of all of us in the profession to increase public awareness of career opportunities in dentistry and to proactively and earnestly recruit from diverse communities. The Board of Dentistry can contribute by supporting efforts to develop entry level training programs that focus on recruiting and educating from communities of color as well as from rural and frontier communities of Oregon.

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Continue with virtual meetings as an option even after the pandemic is under control - public members from outside the Portland Metro area have difficulty making the trip to attend in-person meetings.

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#55

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 9:00:21 AM  
**Last Modified:** Sunday, December 13, 2020 1:48:13 PM  
**Time Spent:** 04:47:52  
**IP Address:** 54

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Loss of quality of care using the guise of access to care.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I do not believe that is the role of the BOD. The role of the BOD is to fairly and with professional knowledge, interpret and administer the legislative rules associated with dental licensure

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Stay focused on the primary role and not become more than as defined by the Oregon legislature

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#56

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 1:28:18 PM  
**Last Modified:** Sunday, December 13, 2020 1:49:50 PM  
**Time Spent:** 00:21:31  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

foreign practitioners who have not been trained as thoroughly as u.s. trained dentists. direct to public treatment that does not have a dentist evaluation for safety. (the ortho people that don't use dentists. i have a hard enough time with ortho (i'm a general dentist) so for some computer to manipulate someone's mouth with no supervision doesn't seem safe to me).

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

i'm not impressed with the standard definition of diversity. if we're talking racism (decisions based on race) i am not for this. if we're talking including people of all different backgrounds with no thought regarding race, but based on socioeconomic and ideologies then the best way would be to get the word about how oral health affects overall health is the best way. those people attracted to that link will seek out our profession, those who don't like the freedom and responsibility that comes with it will stay away.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

overall the board does well. i think it could be a little more friendly in dealing with complaints. it comes down with a pretty heavy hand sometimes before the facts are known ( i understand the need to take complaints seriously) but sometimes dentists can be treated more guilty than innocent until the decision is made regarding the validity of the complaint. i think the boards biggest job should be to make sure we as dentists are providing safe treatments and helping to get training if we are not. i think seeing to it that we are politically correct and making sure we are meeting numbers is not in the public's best interest. we should also be making sure that during this covid time or any other pandemic, that we are using sound scientific methods and not feel good measures. we should let government agencies know when they are over-reaching or demanding practices that don't make virological sense. people are more than willing to let the government declare an emergency when a danger comes along. but once the danger has data, knee jerk reactions should stop.

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#57

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 1:58:42 PM  
**Last Modified:** Sunday, December 13, 2020 2:07:11 PM  
**Time Spent:** 00:08:28  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Poor

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Able to see fewer patients per hour with the Covid situation that is not going away. Higher costs of service and less take home pay from a dangerous combat zone work environment.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Fluoride!

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Expanded duties to qualified staff members. Dentists should diagnose and cut hard and soft tissue

---

#58

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 13, 2020 9:00:21 AM  
**Last Modified:** Sunday, December 13, 2020 4:54:48 PM  
**Time Spent:** 07:54:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Loss of quality of care using the guise of access to care.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I do not believe that is the role of the BOD. The role of the BOD is to fairly and with professional knowledge, interpret and administer the legislative rules associated with dental licensure

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Stay focused on the primary role and not become more than as defined by the Oregon legislature

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#59

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 5:06:34 AM  
**Last Modified:** Monday, December 14, 2020 5:08:21 AM  
**Time Spent:** 00:01:47  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#60

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 7:02:09 AM  
**Last Modified:** Monday, December 14, 2020 7:05:05 AM  
**Time Spent:** 00:02:55  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

none

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

unknown

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

none

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#61

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 7:26:31 AM  
**Last Modified:** Monday, December 14, 2020 7:29:12 AM  
**Time Spent:** 00:02:41  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Online seivices--like ortho treatment

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

support education programs

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#62

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 8:42:30 AM  
**Last Modified:** Monday, December 14, 2020 8:45:30 AM  
**Time Spent:** 00:02:59  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	4
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Too much direct to consumer products that are irreversible in nature.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Enforce the true problems out there and spend less focus on administrative enforcement that portrays licensed dentist as a criminal

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Reach out to the board certified specialists in the state to support and guide acceptable vs nonacceptable care in Oregon

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#63

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 9:12:53 AM  
**Last Modified:** Monday, December 14, 2020 9:19:51 AM  
**Time Spent:** 00:06:58  
**IP Address:** 17

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Time taken out of treatment time with Covid infection control protocols

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Add an intermediate level between being X-ray certified so that assistants could do coronal polishing without being an EFDA. Allow EFDAs to do sealants with direct supervision without being certified.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Nothing comes to mind right now

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#64

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 9:04:57 AM  
**Last Modified:** Monday, December 14, 2020 9:37:59 AM  
**Time Spent:** 00:33:01  
**IP Address:** 8

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I'd like to see the board pursue recommendations to the OHA and the Governors office regarding best practices during this pandemic (and any future crisis'). You may already be doing this, but sure seems like OHA and the Governor's office are not listening to anyone and making up their own arbitrary rules with no basis on evidence or scientific principles.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

What does this mean? We aren't going to have more men applying for DA positions, so how can we develop a more diverse DA workforce. I understand that this is supposed to help reduce discrimination. Based on the huge need for well-trained staff, most offices will be happy to hire any qualified individual regardless of their demographics.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#65

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 12:42:25 PM  
**Last Modified:** Monday, December 14, 2020 1:00:54 PM  
**Time Spent:** 00:18:29  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

1. Corporate dental offices focus on remedial dental care instead of long term oral health goals and planning. The result is complex dental problems arising overtime increasing patient costs, tooth loss and over treatment. In addition, corporate dental clinics are over treating periodontal disease. As a 27 yr dentist, periodontal therapy should not be completed on young adults with reversible gingivitis.

Corporate dental implant offices focusing on all on 4 concept when patients have teeth that can be saved. I am witnessing many patients being advised to have all teeth out and restored with all on 4 dental implant solutions. In the last 10 years, I have seen a shift from comprehensive patient based care to financial driven treatment plans.

2. Dental school education is producing students without adequate clinical skills for procedures such as, endo, complex patient diagnosis.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

1. Increase in patient centered oral care programs.
  2. Patient focus care will attract the most qualified work force who are willing to treat patient needs.
- 

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I recommend the board of dentistry set up peer review in place of board only evaluations for complaint's against dental professionals. Many excellent dentists have been fined for things that are not well defined or obscure in the dental practice act. A peer review board will allow fellow dentists review the boards decision and insure board actions are appropriate to provide the intended behavioral changes desired.

---

#66

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 2:10:06 PM  
**Last Modified:** Monday, December 14, 2020 2:15:21 PM  
**Time Spent:** 00:05:14  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Corporate dentistry  
Access to care

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Occasional meeting with component Dental Societies

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#67

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 14, 2020 5:08:04 PM  
**Last Modified:** Monday, December 14, 2020 5:26:34 PM  
**Time Spent:** 00:18:30  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Poor**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

- 1, the profusion of poor executed dentistry for profit.
  - 2, the inadequate education of current dental school graduates.
  - 3, Profit driven fraud & assault of short-lived 'all on 4' implant entities.
  4. The in-ability of the dental community to call the board to clarify [I want to do the right thing] simple questions without probability of prosecution.
- 

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Is this "comments"? Please, become a functional part of growing healthy/quality dental care. Many of us choose to do our best work, and the rest 'should'. We should all be able to ask OBD for guidance on how to do better, our best, to seek clarity of OBD's interpretations of their rules, without being punished for asking... Your current style and action plans do incite fear, but fear is neither respect nor functional. Fear of our governing body does not help raise the standard of dental quality for the populous of Oregon. Thank you for trying.

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#68

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 15, 2020 10:55:18 AM  
**Last Modified:** Tuesday, December 15, 2020 10:57:19 AM  
**Time Spent:** 00:02:01  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a state legislator or state government official

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Other (below in survey under comments describe the area the OBD should focus on more intently) **1**

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

none

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

n/a

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

none

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#69

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 15, 2020 11:06:48 AM  
**Last Modified:** Tuesday, December 15, 2020 11:11:02 AM  
**Time Spent:** 00:04:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a state legislator or state government official

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Technology changes

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Insure the Board is diverse and inclusive and have Board members to develop a strategy.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

#70

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 15, 2020 9:16:12 PM  
**Last Modified:** Tuesday, December 15, 2020 9:24:29 PM  
**Time Spent:** 00:08:16  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

How to help vaccinate our patients and advocating for our fields health care workers to both get vaccinated ourselves as essential workers, and how to vaccinate our patients for covid

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

This role is best left to the education branches of our field. That is the entry point for diversification. Just license everyone who is qualified is your role

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Other than doing what is in your power to support our vaccinations, and ability to vaccinate for covid you have been doing a good job

---

#71

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 16, 2020 11:32:01 AM  
**Last Modified:** Wednesday, December 16, 2020 11:34:36 AM  
**Time Spent:** 00:02:34  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a state legislator or state government official

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

teledentistry  
interstate licensure

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

unsure

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

none

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#72

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 16, 2020 12:28:30 PM  
**Last Modified:** Wednesday, December 16, 2020 12:56:38 PM  
**Time Spent:** 00:28:08  
**IP Address:** 74

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

OBD needs to evaluate national standard of care aligning with state regulatory requirement and local needs for changes of workforce, institution delivery setting and technology.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Through appropriate education and training.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Focus on its mission -"to promote high quality oral health care in the State of Oregon by equitably regulating dental professionals."

---

#73

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 17, 2020 6:29:04 AM  
**Last Modified:** Thursday, December 17, 2020 6:30:32 AM  
**Time Spent:** 00:01:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am a consumer**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	<b>2</b>
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Revisions to Investigations, enforcement and compliance activities	<b>1</b>
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**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#74

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 17, 2020 10:17:57 AM  
**Last Modified:** Thursday, December 17, 2020 10:27:44 AM  
**Time Spent:** 00:09:47  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	5
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Affordability of dentistry

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Support and implement CURRENT dental hygienists into expanding as dental therapists or mid-Level practitioners.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

More Missions of Mercy clinics which support more than just single fixes. Let's do more makeovers and get these folks back to work, or out of pain over the long term. We need to be more holistic in our patient care delivery.

---

#75

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 17, 2020 10:16:39 AM  
**Last Modified:** Thursday, December 17, 2020 10:28:11 AM  
**Time Spent:** 00:11:31  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Excellent

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Don't Know

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

the pandemic; shortage of PPE; new ways of treating. Additional stress and resulting increase in substance abuse / MH problems

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

reach out to school systems

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#76

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 17, 2020 10:26:43 AM  
**Last Modified:** Thursday, December 17, 2020 11:11:29 AM  
**Time Spent:** 00:44:46  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Poor

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	2

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Maintaining specifications regarding specialists / general dentists and advertising.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Unknown

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Streamlining the dental license application process. This is an area needs huge improvements.  
The medical board has a much better system.

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#77

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 17, 2020 12:33:42 PM  
**Last Modified:** Thursday, December 17, 2020 12:38:59 PM  
**Time Spent:** 00:05:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Good

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Good

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	4
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

How discipline for the Licensees are handled.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

None

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#78

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 19, 2020 4:13:11 PM  
**Last Modified:** Saturday, December 19, 2020 4:17:12 PM  
**Time Spent:** 00:04:00  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Poor

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Poor

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	4
Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	2

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

teledentistry/COVID protocols/insurance industry reform/ timely responsiveness in investigations

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

education

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Please find a way to cut down the time it takes to get an investigation completed as having been through one the waiting is demoralizing

---

#79

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, December 20, 2020 9:21:42 PM  
**Last Modified:** Sunday, December 20, 2020 9:23:32 PM  
**Time Spent:** 00:01:49  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

CBCT

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Nope.

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#80

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 7:59:24 AM  
**Last Modified:** Monday, December 21, 2020 8:16:26 AM  
**Time Spent:** 00:17:02  
**IP Address:** 58

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Definitive plan for COVID-19 response (or any other disease with similar contagion) I feel every authority is saying different requirements ant it is very confusing.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Be more inline with what the OHA is saying along with other health organizations.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

None

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#81

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:30:15 AM  
**Last Modified:** Monday, December 21, 2020 10:31:29 AM  
**Time Spent:** 00:01:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>3</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#82

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:30:57 AM  
**Last Modified:** Monday, December 21, 2020 10:32:50 AM  
**Time Spent:** 00:01:53  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid  
Vaccinations

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

IDK

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#83

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:28:50 AM  
**Last Modified:** Monday, December 21, 2020 10:33:01 AM  
**Time Spent:** 00:04:11  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Everything regarding COVID 19 from office protocol, PPE standards, vaccines, oral health care implications, etc.

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure.

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#84

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:35:29 AM  
**Last Modified:** Monday, December 21, 2020 10:36:02 AM  
**Time Spent:** 00:00:32  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a consumer

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>3</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#85

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:37:09 AM  
**Last Modified:** Monday, December 21, 2020 10:39:53 AM  
**Time Spent:** 00:02:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Poor

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Poor

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Poor

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dentures for the general public.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Less rule, less investigation.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

LESS RULES.

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#86

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:38:21 AM  
**Last Modified:** Monday, December 21, 2020 10:40:11 AM  
**Time Spent:** 00:01:50  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Excellent

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Excellent

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#87

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:39:12 AM  
**Last Modified:** Monday, December 21, 2020 10:40:30 AM  
**Time Spent:** 00:01:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#88

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:39:25 AM  
**Last Modified:** Monday, December 21, 2020 10:41:35 AM  
**Time Spent:** 00:02:10  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

?

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#89

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:32:46 AM  
**Last Modified:** Monday, December 21, 2020 10:43:30 AM  
**Time Spent:** 00:10:44  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I feel OBD could serve as a more prominent voice in addressing current fads or trends that appear for patients. Examples include oil pulling, charcoal dentists, online ortho etc. I need a sourced compilation of the science; one that updates more quickly, is more current than the ADA'S glacial speed.

Thanks for all you do!

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## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Advertise dental careers more aggressively in low exposure areas!

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

More contact & community building for all of us in solo practices, rural settings.

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#90

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:41:12 AM  
**Last Modified:** Monday, December 21, 2020 10:44:30 AM  
**Time Spent:** 00:03:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#91

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:38:57 AM  
**Last Modified:** Monday, December 21, 2020 10:48:42 AM  
**Time Spent:** 00:09:45  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

advancements in technology and procedures

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

By identifying licensees who may have challenges and instead of applying fines and penalties, make an attempt to have that individual make an effort towards becoming a better provider by correcting and educating themselves and subsequently follow up to create a win / win situation

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

There needs to be a major revision to how the OBD investigates, enforces and assures compliance, example if there is a complaint against a licensee, that should not allow the OBD to "turn over every rock" attempting to justify a fine and penalty, rather the investigation should be limited to the complaint,  
There are many models in other states that work much more efficiently and have better outcomes to both the consumers and providers (i.e. Idaho, Washington, etc)

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#92

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:47:04 AM  
**Last Modified:** Monday, December 21, 2020 10:48:45 AM  
**Time Spent:** 00:01:41  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#93

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:46:28 AM  
**Last Modified:** Monday, December 21, 2020 10:52:40 AM  
**Time Spent:** 00:06:12  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Poor**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Insurance compensation is not increasing either the lowering of the value of the dollar making it more difficult to help folks with plans that are lower end. Can the board help? I don't know.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't believe that is the Boards role

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#94

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:49:08 AM  
**Last Modified:** Monday, December 21, 2020 10:53:13 AM  
**Time Spent:** 00:04:04  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Online (social media) dentistry - at home kits for ortho - simply dental info (brush - IP HC - diet on oral health)

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#95

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:46:33 AM  
**Last Modified:** Monday, December 21, 2020 10:54:22 AM  
**Time Spent:** 00:07:48  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Fluoridate the water!!

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I am shocked by the cost of healthcare to the citizens of OR. Having come from a fluoridated state, do NOT understand why systemic fluoride has not been put into place to preserve the dentition of citizens. There is NO priority of oral healthcare among most native Oregonians!

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I can look at films from an incoming new patient prior to their arrival and I can immediately discern they are from CA. They are always surprised and they ask me how I knew that. My reply is always the same: "You have all of your teeth."

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#96

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:35:11 AM  
**Last Modified:** Monday, December 21, 2020 10:54:25 AM  
**Time Spent:** 00:19:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Corporate dentistry and lack of standards (not meeting the standard of care) - we see so much untreated caries by Willamette Dental with no consequences. DSO's and pressure on dentist owners to meet quota's.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Our workforce is fine.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

do not know

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#97

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:53:25 AM  
**Last Modified:** Monday, December 21, 2020 10:54:25 AM  
**Time Spent:** 00:00:59  
**IP Address:** 4

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#98

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:52:35 AM  
**Last Modified:** Monday, December 21, 2020 10:58:54 AM  
**Time Spent:** 00:06:19  
**IP Address:** 9

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>5</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dental Insurance dictating the future of dentistry, with horrible coverage and denials, and minimal coverage. Maximum benefits were \$1500 in 1964 and still the same after 56 years, pathetic compared to medical insurance changes.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#99

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:58:33 AM  
**Last Modified:** Monday, December 21, 2020 11:00:47 AM  
**Time Spent:** 00:02:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#100

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:59:32 AM  
**Last Modified:** Monday, December 21, 2020 11:01:18 AM  
**Time Spent:** 00:01:45  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

PPE

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Doing fine by adding culturally diversity training as a CE requirement

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#101

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:03:32 AM  
**Last Modified:** Monday, December 21, 2020 11:06:21 AM  
**Time Spent:** 00:02:48  
**IP Address:** 0

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Poor

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

More lawsuits/complaints about COVID w/regards to patients and dental offices despite the evidence office has been showing to be safe. In addition, more failure to refer to specialists and we are in the age of the "super GP" and COVID has given 1 million reasons to keep things in house too long.

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#102

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:58:54 AM  
**Last Modified:** Monday, December 21, 2020 11:06:37 AM  
**Time Spent:** 00:07:42  
**IP Address:** 5

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

- COVID-19 - clear and precise about what is mandated and what is a guideline
  - PPO's stronghold on our profession
  - Make the oregon dental practice act easier to navigate
- 

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Promote more practice ownership by persons of color.  
Instead of simply electing more minorities and women to the board, promote more understanding of persons of color's experiences in dentistry.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Continue to have your colleagues' backs! It's a rough profession and patients can really get the best of us at times.

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#103

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:00:57 AM  
**Last Modified:** Monday, December 21, 2020 11:11:48 AM  
**Time Spent:** 00:10:51  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Efficacy of silver diamine

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Partner with the Dental and Hygiene assisting programs to assist their outreach

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The OBD and especially Teresa Haines has been awesome.

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#104

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:09:18 AM  
**Last Modified:** Monday, December 21, 2020 11:11:57 AM  
**Time Spent:** 00:02:39  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#105

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:12:42 AM  
**Last Modified:** Monday, December 21, 2020 11:16:25 AM  
**Time Spent:** 00:03:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols  
(presentations, newsletters, Eblasts, website)

1

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Regulations affecting clinical training of dental providers in educational institutions; allowance or provision for appropriate simulation etc. to combat virus scares for now and the future. Intent: to ensure qualified graduates continue to be released into the field at a rate that will meet the dental needs of Oregonians.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Create committees that address this issue to a greater depth. Collaboration with association may be a way to start--similar to Joint Commissions at the national level.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Continuing efforts to ensure dental care is considered "essential."

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#106

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:08:16 AM  
**Last Modified:** Monday, December 21, 2020 11:19:22 AM  
**Time Spent:** 00:11:05  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Mail-in dentistry (ie Smile Direct Club) is a very negative direction for dentistry to head. There needs to be more regulation with these companies.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't believe that this is a role for OBD.

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Previous actions from the board have made many dentists less willing to call and discuss concerns and questions with the board. For example, a dentist called to ask about a situation he was trying to resolve. Instead of helping come up with a solution, the board cited the dentist which also appeared as an action on his license. There was never a risk to a patient. It was a clerical issue. The board should never make its licensees afraid to call with a question for fear of citation.

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#107

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:30:48 AM  
**Last Modified:** Monday, December 21, 2020 11:36:15 AM  
**Time Spent:** 00:05:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

If covid been spread via a dental office.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

More standardization of the dental assistant programs.  
Graduates from certain programs are not very well trained.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Educating the OHA how their rules affect the delivery of  
dentistry in the state, not always in a positive way.

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#108

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:30:46 AM  
**Last Modified:** Monday, December 21, 2020 11:43:07 AM  
**Time Spent:** 00:12:20  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Poorly trained dental students with limited skills. The push for licensure without a clinical skills test makes this worse. With the ever-increasing complexity of the profession, I would recommend requiring a one year GPR or equivalent for new practitioners to gain licensure in the state.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

In my opinion, that is not within the scope of responsibility of the Board. There are other avenues for this to occur.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#109

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:41:36 AM  
**Last Modified:** Monday, December 21, 2020 11:46:46 AM  
**Time Spent:** 00:05:10  
**IP Address:** 01

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Pandemic info.

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Making licensure easier for people moving into our state that hold a license in another state. Basically honoring the hygiene license they have and issuing an oregon license.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Not sure

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#110

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:58:18 AM  
**Last Modified:** Monday, December 21, 2020 12:01:53 PM  
**Time Spent:** 00:03:34  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>2</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Use of Lasers, Dentists ability to do Pre hospital Heath Screenings if qualified

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#111

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 11:57:02 AM  
**Last Modified:** Monday, December 21, 2020 12:06:58 PM  
**Time Spent:** 00:09:55  
**IP Address:** 9

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

True independent practice for dental hygienists

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Open the field into the medical professions and facilities, for both dentists and dental hygienists

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Dental assistants perform too many dental procedures they are not formally trained for. As a former dental assistant, I thought I knew it all, until I went to dental hygiene college. All dental staff should have a accredited college degree for their particular duties..

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#112

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:01:21 PM  
**Last Modified:** Monday, December 21, 2020 12:09:02 PM  
**Time Spent:** 00:07:40  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Interoperable EHR for private dental offices and the ability to gather that data.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

It's good that you are requiring cultural competency training. It may be useful to specifically require trauma-informed care training, perhaps within the cultural competency requirements. Dentists are being called out in public health publications as lacking that knowledge.

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No.

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#113

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:12:35 PM  
**Last Modified:** Monday, December 21, 2020 12:15:33 PM  
**Time Spent:** 00:02:57  
**IP Address:** 0

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#114

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:18:00 PM  
**Last Modified:** Monday, December 21, 2020 12:19:23 PM  
**Time Spent:** 00:01:23  
**IP Address:** 0

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#115

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:17:35 PM  
**Last Modified:** Monday, December 21, 2020 12:25:02 PM  
**Time Spent:** 00:07:27  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

There seems to be ever increasing layers of mandates and rules from several government agencies that licensed dentists are required to follow. Some, if not most of these mandates make no material impact regarding the protection of the public. The trend seems to be that agencies who make the most rules are the most effective. It has to stop somewhere. Please use care when promulgating the rules. We are drowning.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Does diversion and inclusion in the oral healthcare workforce fall under the mission of the OBD?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#116

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:12:05 PM  
**Last Modified:** Monday, December 21, 2020 12:26:23 PM  
**Time Spent:** 00:14:18  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The reality that soon we will have Dental therapists practicing both outside and inside of Native American communities. Our statutes and rules need to be ready for that. Dental professionals (Dentists and Dental Hygienists) should both have opportunities to give vaccinations.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Reaching out to communities that are diverse, and educating about the opportunities within the profession.

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#117

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:17:39 PM  
**Last Modified:** Monday, December 21, 2020 12:27:23 PM  
**Time Spent:** 00:09:43  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

1. The hygienists need to be governed by a separate board. Like nurses.
  2. Solo practices are becoming obsolete.
  3. Allow someone other than a dentist to own a practice.
  4. Dentistry is healthcare, not spa care
- 

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Understand that people come in different shapes, colors, sizes and sexes.  
And ages.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

It's 2020—don't charge is to pay our fees online.

Also, the survey we are forced to take during renewal needs to be either free or the fees built into the renewal itself. I didn't ask to take a survey and I certainly shouldn't have to PAY to take one

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#118

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:34:58 PM  
**Last Modified:** Monday, December 21, 2020 12:37:11 PM  
**Time Spent:** 00:02:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#119

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:48:04 PM  
**Last Modified:** Monday, December 21, 2020 12:52:44 PM  
**Time Spent:** 00:04:39  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	4

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I am seeing a lower standard of care due to the industry becoming more controlled by large practices.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

The OBD could reach out to high schools in lower class areas to talk about career opportunities.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#120

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:58:35 AM  
**Last Modified:** Monday, December 21, 2020 12:53:52 PM  
**Time Spent:** 01:55:16  
**IP Address:** 4

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Clinical Staffing support

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

N/A

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I think it would be helpful to change the process for dental assistant credentialing. It is demoralizing to a new assistant, and negatively impacts the office team, to be able to get someone trained and considered competent to only have them have to stop fully functioning while waiting for the credentialing process to take place. I don't see any good reason for this mandate, and recommend it is done away with.

The other issue we are having is each person that comes in to review doctor licensing applications has different requirements for different answers, it has not been streamlined and has had a significant negative impact on our group practice. Some calibration between reviewers would be greatly appreciated so that our doctors can get to work as soon as they are ready. The licensing has been an ongoing problem.

These two items would definitely be a big help for us being able to function at the capacity we need to in order to service our growing patient base.

---

#121

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:50:44 PM  
**Last Modified:** Monday, December 21, 2020 12:55:48 PM  
**Time Spent:** 00:05:04  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The huge rise in large corporate dental entities squeezing out the smaller practices.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#122

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:56:35 PM  
**Last Modified:** Monday, December 21, 2020 12:58:48 PM  
**Time Spent:** 00:02:12  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

training dentist to vaccinate

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

offering the course to learn to vaccinate

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Continuing to keep dentists in the healthcare group that has adequate access to PPE, vaccines, etc.

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#123

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:01:00 PM  
**Last Modified:** Monday, December 21, 2020 1:02:24 PM  
**Time Spent:** 00:01:23  
**IP Address:** 1

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Mid-level providers

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#124

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:00:41 PM  
**Last Modified:** Monday, December 21, 2020 1:04:29 PM  
**Time Spent:** 00:03:48  
**IP Address:** 68

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Untrained providers. OHP contracted corporations not following the same rules required of private practitioners.

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

This is out of the scope of the OBD.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

-

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#125

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 12:43:11 PM  
**Last Modified:** Monday, December 21, 2020 1:19:47 PM  
**Time Spent:** 00:36:35  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>

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**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#126

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:22:26 PM  
**Last Modified:** Monday, December 21, 2020 1:28:30 PM  
**Time Spent:** 00:06:03  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

dUE TO MASSIVE BUDGET SHORTFALLS, WE SHOULD VERY MUCH CONSIDER BRINGING THE FLUORIDE CONVERSATION TO THE FRONT AGAIN. wE KNOW IT REDUCES Caries rates by 60% when added to the public water source. This would go a long way in reducing not only the money the state pays for childhood caries treatment but also the massive pain and suffering it causes. We could give all registered voters coupons for free water filtrations systems to add to their tap or a pour over Britta like filter, thus eliminating the claims of medicating against their will while covering the most vulnerable populations.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Still on the fl- kick... it would cover the most vulnerable, which would include all high risk kids.

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#127

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:34:09 PM  
**Last Modified:** Monday, December 21, 2020 1:38:03 PM  
**Time Spent:** 00:03:53  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Excellent

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Good

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Integration into medical primary care: electronic health records and more basic primary care (vaccines, blood pressure, etc.) occurring in the dental setting.

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Need a mid-level provider: DHAT or DTs. But scope of practice should be flexible - a significant portion of the dentist scope should be within scope for DTs if Oregon is truly going to improve oral health access.

## Q10

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?



#128

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:47:23 PM  
**Last Modified:** Monday, December 21, 2020 1:49:52 PM  
**Time Spent:** 00:02:28  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Dental Assistant

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#129

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 1:40:16 PM  
**Last Modified:** Monday, December 21, 2020 1:51:17 PM  
**Time Spent:** 00:11:01  
**IP Address:** 8

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Oral Health is directly related to the body

Digital dentistry is moving forward at record speed and I believe the focus should be on implementation of intra-oral camera photos for documentation, in addition to x-rays, and digitally scanned impressions to reduce the "human error" and impression material distortion

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I've always worked with a diverse team

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The dental team makes the practice. A qualified team not only protects the patients but also the dentist. There needs to be more focus on CE's for assistants and encouragement to further knowledge and credentials

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#130

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 2:23:30 PM  
**Last Modified:** Monday, December 21, 2020 2:30:43 PM  
**Time Spent:** 00:07:12  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I still prefer practice ownership (decision making) by dentist.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Look like you want others to see you...  
Add and include more diverse individuals.

---

### Q10

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#131

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 2:47:40 PM  
**Last Modified:** Monday, December 21, 2020 2:54:09 PM  
**Time Spent:** 00:06:28  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Board examinations and what that consists of (removing patient portion of the examination), portability of licenses, guidance on infection control protocol, including PPE for personnel

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Great question, a board exam in another language would go a long way. Allowing interpreters at the board exams when needed. Having information available in a language other than English.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Thank you

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#132

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 2:54:33 PM  
**Last Modified:** Monday, December 21, 2020 2:55:46 PM  
**Time Spent:** 00:01:13  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

introduction of dental therapists

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#133

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 3:04:09 PM  
**Last Modified:** Monday, December 21, 2020 3:06:09 PM  
**Time Spent:** 00:02:00  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Over reach of government

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't know

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#134

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 3:05:00 PM  
**Last Modified:** Monday, December 21, 2020 3:11:47 PM  
**Time Spent:** 00:06:47  
**IP Address:** 45

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Right now Covid -19

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

As a newly licensed hygienist in Oregon , I can not answer this until I understand the baseline demographic of the Healthcare workforce in the State

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#135

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 3:13:27 PM  
**Last Modified:** Monday, December 21, 2020 3:17:05 PM  
**Time Spent:** 00:03:37  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#136

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 4:23:11 PM  
**Last Modified:** Monday, December 21, 2020 4:24:29 PM  
**Time Spent:** 00:01:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

mid level provider-Dental therapy

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#137

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 5:18:49 PM  
**Last Modified:** Monday, December 21, 2020 5:20:53 PM  
**Time Spent:** 00:02:04  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#138

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 5:30:08 PM  
**Last Modified:** Monday, December 21, 2020 5:37:34 PM  
**Time Spent:** 00:07:26  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Other (below in survey under comments describe the area the OBD should focus on more intently) **5**

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

More online communication

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

More communication

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Application forms and software are not conducive

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#139

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 5:46:39 PM  
**Last Modified:** Monday, December 21, 2020 5:48:28 PM  
**Time Spent:** 00:01:49  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

NA

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

NA

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

NO- thank you!

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#140

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 5:39:06 PM  
**Last Modified:** Monday, December 21, 2020 5:59:29 PM  
**Time Spent:** 00:20:23  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The increase in corporate dental practice conglomerates will push the dental industry in a direction of profit rather than healing art for the benefit of the patient.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

It is not the job of the Board to influence Diversity. The Board should stay neutral and allow the diversity to develop on it's own as there are plenty of influences currently effecting the course of diversity in Oregon.

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I think the Board should prepare itself to regulate an unprofessional profit motive adversely affecting the quality of care.

---

#141

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:13:26 PM  
**Last Modified:** Monday, December 21, 2020 6:17:42 PM  
**Time Spent:** 00:04:16  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dentistry needs to be safe for the provider and the patient. With such heavy financial issues that have been caused by the pandemic, the board needs to be diligent in the enforcement of proper care.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure of this question, don't t think I know what you are asking for.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Not sure.

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#142

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:21:23 PM  
**Last Modified:** Monday, December 21, 2020 6:23:26 PM  
**Time Spent:** 00:02:03  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

N/A

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

N/A

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#143

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:25:58 PM  
**Last Modified:** Monday, December 21, 2020 6:29:32 PM  
**Time Spent:** 00:03:34  
**IP Address:** 5

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	5
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Insurance reimbursements (moda delta pop) is making it impossible to provide high quality care

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't think this is an issue for our governing body

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

How damaging corporate dentistry and large insurance carriers have been for the next generation of dentists

---



#144

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:33:41 PM  
**Last Modified:** Monday, December 21, 2020 6:36:58 PM  
**Time Spent:** 00:03:16  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

None at this time

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Education potential licensees

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#145

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:35:16 PM  
**Last Modified:** Monday, December 21, 2020 6:37:33 PM  
**Time Spent:** 00:02:16  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Safety during pandemic,

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#146

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 6:54:30 PM  
**Last Modified:** Monday, December 21, 2020 7:05:59 PM  
**Time Spent:** 00:11:29  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

More emphasis on helping dentists care for patients, less emphasis on regulation and rules.

This could mean making insurance companies pay for better procedures that are standard of care, like implants and fluoride.

Maybe fluoridating the water.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

This is antithetical to having the best workforce. Just hire the best people, whoever they are. Any identifiers other than human, should be removed from all applications. Let the achievements speak for themselves.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Did I mention fluoridating the water?

I mean we wear masks even after being vaccinated, oh just kidding we're not "health care" workers so we're not vaccinated first, mmhmm riiiiiiight. But we wear masks, when the easiest, cheapest, and most effective measure to decrease childhood caries is to add fluoride to the water. Why haven't we done this? We are a mockery of all the other states.

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#147

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 7:19:54 PM  
**Last Modified:** Monday, December 21, 2020 7:24:06 PM  
**Time Spent:** 00:04:12  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	4
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	2

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Access to reputable PPE that is also fordable.

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

make sur the schools are accepting a more divers population.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#148

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 7:36:12 PM  
**Last Modified:** Monday, December 21, 2020 7:37:55 PM  
**Time Spent:** 00:01:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#149

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 8:51:54 PM  
**Last Modified:** Monday, December 21, 2020 8:59:08 PM  
**Time Spent:** 00:07:13  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

N/A

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Cultural sensitivity training

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

N/A

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#150

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 9:17:41 PM  
**Last Modified:** Monday, December 21, 2020 9:19:17 PM  
**Time Spent:** 00:01:35  
**IP Address:** 0

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>1</b>

---

**Q8****Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9****Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10****Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#151

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:00:03 PM  
**Last Modified:** Monday, December 21, 2020 10:00:46 PM  
**Time Spent:** 00:00:43  
**IP Address:** 7

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Poor

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#152

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 21, 2020 10:02:18 PM  
**Last Modified:** Monday, December 21, 2020 10:05:36 PM  
**Time Spent:** 00:03:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#153

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 12:03:39 AM  
**Last Modified:** Tuesday, December 22, 2020 12:07:24 AM  
**Time Spent:** 00:03:44  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Impact of covid 19 on the industry

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

By making sure diverse workers get hired AND at the same wages as the majority workers

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No more ideas

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#154

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 8:06:51 AM  
**Last Modified:** Tuesday, December 22, 2020 8:09:53 AM  
**Time Spent:** 00:03:02  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Creating relationships with primary care physicians.  
Indigent care

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Unknown

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#155

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 8:09:17 AM  
**Last Modified:** Tuesday, December 22, 2020 8:11:57 AM  
**Time Spent:** 00:02:39  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes ,**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months? **No**

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	4
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Teledentistry

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Expand the abilities of the mid level practitioner

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Educate the public about SDF

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#156

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 8:36:08 AM  
**Last Modified:** Tuesday, December 22, 2020 9:10:54 AM  
**Time Spent:** 00:34:46  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Cost of PPE, OHP providers leaving the field, Lack of access to care

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I am not sure at this point, I would need to learn more about the OBD

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

none at this time

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#157

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 9:38:44 AM  
**Last Modified:** Tuesday, December 22, 2020 9:44:38 AM  
**Time Spent:** 00:05:54  
**IP Address:** 51

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Tele-Dentistry

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Provide outreach programs in other languages.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

1. Create an algorithmic table for CE requirements integrated with various sedation permits.
  2. Strengthen outreach to providers regarding opioid guidance. And maybe even create office printouts for staff and patients.
-

#158

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 10:34:20 AM  
**Last Modified:** Tuesday, December 22, 2020 10:46:42 AM  
**Time Spent:** 00:12:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Fluoride being taken out of public water systems and not being put into those without out it. More education and legislation to focus on safety and benefits of fluoride in water.

Simplification/education regarding medical billing of vaccinations.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Funding to attract those who may not be able to afford schooling

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Programs and resources that simplify and help us as dentists (practice owners) to fulfill OSHA and HIPPA requirements. "One stop shopping website with accurate information."

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#159

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 12:49:19 PM  
**Last Modified:** Tuesday, December 22, 2020 12:54:51 PM  
**Time Spent:** 00:05:32  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Remove rule requiring mannequin or live patient testing for licensure

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Don't know

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Accept all other state boards

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#160

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 1:03:15 PM  
**Last Modified:** Tuesday, December 22, 2020 1:05:02 PM  
**Time Spent:** 00:01:46  
**IP Address:** 75

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#161

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 2:10:00 PM  
**Last Modified:** Tuesday, December 22, 2020 2:16:10 PM  
**Time Spent:** 00:06:09  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Stay out of it! Let market forces naturally take care of this. Really!!! Don't get into mandating diversity and inclusion. Continuing education to increase awareness is a good and acceptable route..... but not regulation, and not forced taking of these classes.

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#162

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 2:30:47 PM  
**Last Modified:** Tuesday, December 22, 2020 2:32:17 PM  
**Time Spent:** 00:01:29  
**IP Address:** 8

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

None

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

None

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

None

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#163

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 3:25:11 PM  
**Last Modified:** Tuesday, December 22, 2020 3:43:26 PM  
**Time Spent:** 00:18:14  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Revisions to Investigations, enforcement and compliance activities	2
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Other (below in survey under comments describe the area the OBD should focus on more intently)	3
--	---

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Making sure GD's doing advanced specialist procedures are qualified

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

quality dental education and continued post graduate training

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Tighter regulations on allowing GD's doing advanced specialist procedures

---



#164

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 22, 2020 3:48:57 PM  
**Last Modified:** Tuesday, December 22, 2020 3:52:27 PM  
**Time Spent:** 00:03:29  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Non-patient license exams.

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#165

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 23, 2020 7:51:31 AM  
**Last Modified:** Wednesday, December 23, 2020 7:53:42 AM  
**Time Spent:** 00:02:10  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid restrictions

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

unsure. I know that we are needing a part time hygienist and it is difficult to find one

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#166

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 23, 2020 8:06:55 AM  
**Last Modified:** Wednesday, December 23, 2020 8:11:56 AM  
**Time Spent:** 00:05:00  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	1
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Whole human health being seen in the oral cavity and addressed by dental staff

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

You shouldn't we don't need more mandates that don't have a thing to do with dentistry.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Stick to what you know.

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#167

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 23, 2020 7:44:44 AM  
**Last Modified:** Wednesday, December 23, 2020 9:42:39 AM  
**Time Spent:** 01:57:55  
**IP Address:** 0

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#168

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 23, 2020 2:36:10 PM  
**Last Modified:** Wednesday, December 23, 2020 2:40:30 PM  
**Time Spent:** 00:04:19  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare  
workforce?

I hope that with any business or organization, the best people and most qualified are hired and that diversity is not chosen just for the  
sake of diversity.

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#169

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 23, 2020 11:27:51 PM  
**Last Modified:** Wednesday, December 23, 2020 11:36:32 PM  
**Time Spent:** 00:08:41  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>5</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

My fear is that the board will require all dental professionals to get the COVID-19 vaccine, and regardless of someone's stance/view on this topic, I do not believe it should be enforced/required. I would seriously consider changing professions if this comes to fruition. Please allow us to freedom to choose. I love and am passionate about my profession and want to continue practicing. Thank you for considering all angles. I genuinely appreciate it.

#170

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 24, 2020 3:28:29 PM  
**Last Modified:** Thursday, December 24, 2020 3:30:19 PM  
**Time Spent:** 00:01:50  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am a state legislator or state government official

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

TeleDentistry. Dental profession compact.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#171

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, December 24, 2020 9:28:15 PM  
**Last Modified:** Thursday, December 24, 2020 9:29:00 PM  
**Time Spent:** 00:00:44  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am a consumer**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#172

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 26, 2020 8:16:55 AM  
**Last Modified:** Saturday, December 26, 2020 8:25:23 AM  
**Time Spent:** 00:08:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Infection control training and certificate requirements for those who perform duties including environmental disinfection, instrument processing, equipment operation and maintenance and documentation. Look to DANB/OSAP and The DALE Foundation. Dentists providing vaccines for patients and how to better educate the public about this option. What training is required for the dentists, etc.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Feature stories of dentists, hygienists and dental assistants of color. Develop task force to address this issue.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I think the OBD does a great job! Thank you!

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#173

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 26, 2020 1:24:08 PM  
**Last Modified:** Saturday, December 26, 2020 1:30:36 PM  
**Time Spent:** 00:06:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am a consumer**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Less practical experience for new graduates (based upon what I've been told but I lack personal knowledge).

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#174

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, December 26, 2020 7:37:04 PM  
**Last Modified:** Saturday, December 26, 2020 7:41:10 PM  
**Time Spent:** 00:04:05  
**IP Address:** 1

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Lack of availability of PPE and qualified support staff

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Should not involve the Board

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#175

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 28, 2020 6:18:34 AM  
**Last Modified:** Monday, December 28, 2020 6:20:58 AM  
**Time Spent:** 00:02:23  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#176

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 28, 2020 6:27:39 AM  
**Last Modified:** Monday, December 28, 2020 6:31:47 AM  
**Time Spent:** 00:04:07  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Poor**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Poor**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid protection

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I'm not sure

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#177

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 28, 2020 9:23:09 AM  
**Last Modified:** Monday, December 28, 2020 9:29:26 AM  
**Time Spent:** 00:06:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

COVID! Why are some of the larger corporate companies open with minimal precautions, some having never closed and other offices still unable to open because they can't meet safety requirements.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Licensing for dental assistants is needed. It creates more accountability

---

### Q10

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#178

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, December 28, 2020 3:12:16 PM  
**Last Modified:** Monday, December 28, 2020 3:14:14 PM  
**Time Spent:** 00:01:57  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Excellent

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Good

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

#179

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 1:25:59 AM  
**Last Modified:** Tuesday, December 29, 2020 1:59:56 AM  
**Time Spent:** 00:33:56  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Changes to dentistry because of Covid-19. Patient aware of changes and more concern that they are protected at their visits. Continue to update and encourage more information to prove protocols are followed. Remember the dental assistants are the ones performing these critical functions.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Encourage dentists to recognize the importance of each team member. The board to enforce proper training for staff doing their jobs. Follow through with established Rules including the ICE exam for new employees

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Include dental assistants when planning updates, surveys, and articles. Assistants do the work of sterilization and proper follow up of testing and other requirements for the dental office.

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#180

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 8:04:01 AM  
**Last Modified:** Tuesday, December 29, 2020 8:12:46 AM  
**Time Spent:** 00:08:44  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dental assistant be able to give injections

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I'm not sure

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Enhance what dental assistants can do

---

#181

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 8:10:25 AM  
**Last Modified:** Tuesday, December 29, 2020 8:16:42 AM  
**Time Spent:** 00:06:17  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Patients wanting to be able to choose which services they want and how often. I do not let patients go more than 24 months without radiographs due to the fact that it is not recommended by the ADA and patients get extremely upset with me because they want to choose when they get certain services, and I wish there was a way I could get them to be able to sign a consent to waive their right to bring litigation against me. I wish they could choose their services they want and Their right to not go back on me due to their choices.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I am not sure there is an issue

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

None that I can think of

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#182

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 8:38:39 AM  
**Last Modified:** Tuesday, December 29, 2020 8:44:42 AM  
**Time Spent:** 00:06:02  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Dental Assistant**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Be more informative throughout the State. Newspaper, internet and television. Especially during this Covid-19 outbreak, let the public know what is acceptable, safety precautions etc...

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#183

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 12:23:10 PM  
**Last Modified:** Tuesday, December 29, 2020 12:31:03 PM  
**Time Spent:** 00:07:52  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Dental Assistant

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid for dental staff and patients

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not sure, it is already a very diverse oral healthcare workforce :)

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Again, the pandemic has hurt our industry I. So many ways. I believe that dental staff has been at the front lines of this pandemic, it would be nice to have recognition. Not sure the public recognizes our role and the dangers of our work in caring for patients to oral healthcare needs. Thank you!

---



#184

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 3:22:16 PM  
**Last Modified:** Tuesday, December 29, 2020 3:29:26 PM  
**Time Spent:** 00:07:10  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Do it yourself dentistry  
Overtreatment

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

This needs to come from the schools and outreach long before licensure

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The consumer protection section meaning consumer education leads to more questions on making sure consumers know what the board does and these avenues are open to them, but it's not the board's job to educate them about dentistry. I hadn't thought of the board's "job" of consumer protection to be educational, but maybe I'm the one who needs to be educated. I'm primarily concerned that a few bad apples spoil the reputations of the rest of us.

---

#185

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, December 29, 2020 7:05:09 PM  
**Last Modified:** Tuesday, December 29, 2020 7:07:13 PM  
**Time Spent:** 00:02:04  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes ,

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months? **No**

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>

---

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#186

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 30, 2020 9:16:23 AM  
**Last Modified:** Wednesday, December 30, 2020 9:25:14 AM  
**Time Spent:** 00:08:51  
**IP Address:** 13

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	4
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Ever increasing rules and regulations. There ought to be a better system for assessing and complying with all the new and existing regulations. Instead of just making more rules, create a system of tools to aid the private practicing dentist in their compliance.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

?

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Make it easier to practice density, not harder.

---

#187

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, December 30, 2020 9:10:36 AM  
**Last Modified:** Wednesday, December 30, 2020 9:47:50 AM  
**Time Spent:** 00:37:14  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Government over reach into private business and dental practice.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Allow licensed dentists to educate, train, and certify their staff to become "EFDA" employees instead of requiring specific higher education programs to become certified.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Allow dental practices to follow national CDC and OSHA guidelines and break away from the Oregon Health Authority and Oregon OSHA.

---



#188

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 01, 2021 12:24:31 AM  
**Last Modified:** Friday, January 01, 2021 12:29:01 AM  
**Time Spent:** 00:04:30  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Poor

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Ongoing changes with COVID. The board had VERY minimal information for a long time on anything having to do with COVID.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#189

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 03, 2021 8:50:29 AM  
**Last Modified:** Sunday, January 03, 2021 9:13:41 AM  
**Time Spent:** 00:23:11  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	2

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

we will eventually follow the medical model, with more non doctoral, independent practitioners. I personally have found their experience and training insufficient at times.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Encourage out reach for oral hygiene education. Most of what I fix is completely preventable.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Try to remember almost all of your licensees want to do good. Don't play gotcha games.

---

#190

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, January 04, 2021 7:13:28 AM  
**Last Modified:** Monday, January 04, 2021 7:23:07 AM  
**Time Spent:** 00:09:38  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

I work in the dental field, but I am not a Licensee or dental assistant (office staff, insurance, association or related health entity)

**Q2**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

Yes

**Q3**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

Excellent

**Q4**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

Excellent

**Q5**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

Good

**Q6**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

Good

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	2

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I believe that all dental boards in the US--including the Oregon Board--would greatly benefit from close scrutinization of underlying assumptions. In short, what are the true reasons that licensed professionals appear before boards for potential disciplinary action?

---

## Q9

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I would like to thank the Board for its work in protecting the public.

---

#191

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, January 04, 2021 2:48:04 PM  
**Last Modified:** Monday, January 04, 2021 2:49:45 PM  
**Time Spent:** 00:01:40  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#192

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, January 05, 2021 1:54:41 AM  
**Last Modified:** Tuesday, January 05, 2021 2:05:41 AM  
**Time Spent:** 00:11:00  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Dental Assistant

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

To allow more patients to receive care in a timely manner, EFDA dental assistants are ready to take on more duties. Especially in a community health setting would this be beneficial. Specifically it would interesting exploring the idea of allowing EFDA assistants to take a course in dental anesthesia at a level on par with the dental hygienist in order to pass the hygiene WREB anesthesia boards.

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Additional expanded duties for EFDA assistants: dental local anesthesia, cementation of permanent crowns. Coursework on par with the level of training received by a dental hygienist.

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#193

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, January 05, 2021 8:22:31 AM  
**Last Modified:** Tuesday, January 05, 2021 8:27:52 AM  
**Time Spent:** 00:05:20  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

telehealth

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not necessary

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#194

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, January 05, 2021 9:43:49 AM  
**Last Modified:** Tuesday, January 05, 2021 9:45:44 AM  
**Time Spent:** 00:01:55  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

a plan to get the vaccines into dentists' offices. There are so many unused vaccines right now without organizations stepping up to use more. we need to be a part of the solution

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#195

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:10:14 AM  
**Last Modified:** Friday, January 08, 2021 10:14:24 AM  
**Time Spent:** 00:04:10  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Corporate posturing

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Not a vital concern

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#196

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:12:37 AM  
**Last Modified:** Friday, January 08, 2021 10:14:30 AM  
**Time Spent:** 00:01:53  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>3</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#197

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:13:25 AM  
**Last Modified:** Friday, January 08, 2021 10:16:58 AM  
**Time Spent:** 00:03:33  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid related implications with oral health

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Reach out to large HMO or group practices to offer more information and services.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

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#198

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:17:52 AM  
**Last Modified:** Friday, January 08, 2021 10:19:32 AM  
**Time Spent:** 00:01:39  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Let hygiene give vaccines

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Broader hygiene scope of practice

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Hygiene give vaccines

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#199

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:25:36 AM  
**Last Modified:** Friday, January 08, 2021 10:27:16 AM  
**Time Spent:** 00:01:40  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#200

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:38:32 AM  
**Last Modified:** Friday, January 08, 2021 10:40:31 AM  
**Time Spent:** 00:01:59  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

0

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#201

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:38:48 AM  
**Last Modified:** Friday, January 08, 2021 10:41:58 AM  
**Time Spent:** 00:03:10  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

There continue to be serious issues with dentists doing surgery and with more dentists involved, we see more and more injured patients.

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

None. This is not the job of the Oregon Board of Dentistry.

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#202

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:15:17 AM  
**Last Modified:** Friday, January 08, 2021 10:56:24 AM  
**Time Spent:** 00:41:06  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#203

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:54:05 AM  
**Last Modified:** Friday, January 08, 2021 10:58:29 AM  
**Time Spent:** 00:04:23  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The proliferation of franchise dentistry

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Promote rural dental clinics with student loan forgiveness to newer dentists in underserved areas with more experience dentist mentorship

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Keep up the good work

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#204

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:58:45 AM  
**Last Modified:** Friday, January 08, 2021 11:01:01 AM  
**Time Spent:** 00:02:15  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#205

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:58:34 AM  
**Last Modified:** Friday, January 08, 2021 11:01:07 AM  
**Time Spent:** 00:02:33  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Other (below in survey under comments describe the area the OBD should focus on more intently) **5**

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid and patient safety.

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Getting dental providers moved to a higher priority on vaccine list.

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#206

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:08:09 AM  
**Last Modified:** Friday, January 08, 2021 11:09:40 AM  
**Time Spent:** 00:01:30  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

COVID

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

---

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#207

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:18:01 AM  
**Last Modified:** Friday, January 08, 2021 11:20:52 AM  
**Time Spent:** 00:02:51  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Don't Know**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare  
workforce?

Seems like it is pretty inclusive-- you can get too PC!

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#208

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:26:56 AM  
**Last Modified:** Friday, January 08, 2021 11:28:41 AM  
**Time Spent:** 00:01:44  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#209

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:22:51 AM  
**Last Modified:** Friday, January 08, 2021 11:29:12 AM  
**Time Spent:** 00:06:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Consumer Protection - communication with consumers to highlight some area of oral healthcare **2**

Other (below in survey under comments describe the area the OBD should focus on more intently) **3**

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

CE

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#210

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:28:26 AM  
**Last Modified:** Friday, January 08, 2021 11:33:50 AM  
**Time Spent:** 00:05:24  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#211

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:19:26 AM  
**Last Modified:** Friday, January 08, 2021 11:43:33 AM  
**Time Spent:** 01:24:07  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	1

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## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

I would like to see the board talk more about professional mentoring and how important small group education is to keeping you calibrated in our profession over time. People who practice in a silo I find get themselves in trouble more than those that have other professionals to discuss cases with, educate together etc.

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## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

No idea how you can attract a more diverse professional society, comes from colleges and high schools really IMHO.

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## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

I know the board does not choose their board members, but I believe it is important to choose individuals to represent the profession that do lots of different kinds of dentistry. For example general dentists should have education, skill set and practice more specialty procedures. This gives that board member a perspective that is broad and deep. If we have board members who only do fillings and crowns you don't know a deep knowledge base to judge their peers. If there were a way to revamp the selection process that would be great. We can't choose people based on gender, sexual orientation and skin color, it needs to be a skill based education. The board shouldn't know or care about the color of a discipline's skin etc. Then that bias could not be a bias.

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#212

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:41:39 AM  
**Last Modified:** Friday, January 08, 2021 11:47:17 AM  
**Time Spent:** 00:05:38  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

corporate America (billionaires) taking over control of healthcare

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

promoting practitioner autonomy with responsible oversight

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#213

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:49:24 AM  
**Last Modified:** Friday, January 08, 2021 11:51:19 AM  
**Time Spent:** 00:01:54  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

None

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#214

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:48:58 AM  
**Last Modified:** Friday, January 08, 2021 11:57:28 AM  
**Time Spent:** 00:08:30  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Ha ha! COVID changing everything!

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Is that the role of the board?

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Not sure.

My interaction in renewal during COVID was A PROCESS for sure. But got it done. COVID, fires and CPR. Renewal process impaired and added stress. Hard to get through and my letter of explanation sent back. Nothing personal.

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#215

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 12:21:59 PM  
**Last Modified:** Friday, January 08, 2021 12:27:11 PM  
**Time Spent:** 00:05:12  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>5</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The legalization of hard drugs and combating the effect it will have on everyone.

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#216

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 12:25:02 PM  
**Last Modified:** Friday, January 08, 2021 12:27:59 PM  
**Time Spent:** 00:02:56  
**IP Address:** 2

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Access to immunization resources and education on new regulations as they are released

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

d

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

d

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#217

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 11:59:13 AM  
**Last Modified:** Friday, January 08, 2021 12:31:59 PM  
**Time Spent:** 00:32:45  
**IP Address:** 20

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Dental office workers need to be paid for time away from work due to COVID exposure ,COVID illness and possible reactions associated with the vaccine.

There are shortcomings in our industry due to many private practices .

Should be an integral part of OSHA legislation and not left up to individual employers.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Encourage employers through training to hire a more diverse staff .The employees need to reflect the wide spectrum of backgrounds of our patients.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

In the event of another health crisis the Board must ensure dental office workers receive vaccines/tx alongside our medical care teams.

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#218

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 12:29:29 PM  
**Last Modified:** Friday, January 08, 2021 12:39:50 PM  
**Time Spent:** 00:10:21  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

How to help people in poverty. Does the Board have any power to change the type/amount of Oregon Health Plan dental services that exist? Can people in lower income brackets get help for tooth replacement instead of extraction? This would boost the general socioeconomic health of Oregon. I am also a public school teacher, and concerned about this,

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Create a committee to research this, allow partnerships with local high schools to reach out to students of color and low socioeconomic status who may be interested. Provide internships and scholarship programs to high school students. Career and Technical programs in high schools are good contacts.

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Look at how our populations are being served, can they receive education and care? People with poor dental health do not receive the same job opportunities, and the cycle of poverty continues.

#219

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 12:56:55 PM  
**Last Modified:** Friday, January 08, 2021 12:59:20 PM  
**Time Spent:** 00:02:24  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Revisions to Investigations, enforcement and compliance activities **1**

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid 19

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Unknown

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**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#220

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 12:55:57 PM  
**Last Modified:** Friday, January 08, 2021 1:02:21 PM  
**Time Spent:** 00:06:24  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Other (below in survey under comments describe the area the OBD should focus on more intently) **1**

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Opening the dental hygiene profession to full independent practice. Particularly allowing for services to be provided in the medical setting, ie: hospitals, clinics, etc.

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Giving full independent practice to the dental hygiene profession.

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Requiring more education and credentialing of dental assistants in various rolls, not just on the job training.

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#221

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 1:49:45 PM  
**Last Modified:** Friday, January 08, 2021 1:50:29 PM  
**Time Spent:** 00:00:43  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#222

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 1:46:26 PM  
**Last Modified:** Friday, January 08, 2021 1:51:31 PM  
**Time Spent:** 00:05:04  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	4

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Limiting virtual/teledentistry ie smiledirect. Keeping dental offices open despite pandemic.

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't know

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

My nitrous license took a long time to process. I would say a more streamlined sedation permit process.

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#223

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 2:21:37 PM  
**Last Modified:** Friday, January 08, 2021 2:34:27 PM  
**Time Spent:** 00:12:49  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Don't Know

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	5
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Quality of care is diminishing and overtreatment is perhaps not rampant but moving that direction. The increase in non owned clinics is pushing this as dentists graduate with an increasing debt and need to service that debt.

---

## Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

That is not the mission as stated on the OBD website nor the job for which I believe the OBD exists. I know its the current rage but the OBD mission is to protect the public, not advocate for a particular political philosophy.

---

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

It is very important that OBD advocates for the use of patients in testing for licensure. The use of models completely takes any decision making out of the exam. Believe me , I know! If the licensure exam becomes any more diluted then I would ask, "why does the OBD even continue to exist? Perhaps you should just tell the public to 'be aware'"

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#224

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 2:17:03 PM  
**Last Modified:** Friday, January 08, 2021 2:40:52 PM  
**Time Spent:** 00:23:48  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The OBD and its' mission should be supportive of patients and oral health care patients. Too often it is focused on punitive rule making. While rules and enforcement are vital to protect the public - OBD could much more to change their perception in the community from one of enforcer to one of supporter. I know colleagues that are afraid even to call the board about questions because they don't want to even be on their radar. That's completely opposite to what it should be.

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Hire staff with intention that come from diverse backgrounds. Leverage organized dentistry to be more visible in the community. Incorporate this into your mission as an organization and take steps toward attaining it

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The OBD is too cloistered from the rest of healthcare. I would encourage the board to consider having a nurse, physician, pharmacist or other healthcare professional as well as patient advocates in leadership roles. If we are going to solve lack of oral health access we need to expand provider scope of practice. Quality standards and the oral health of Oregonians would improved if hygienists and assistants were allowed to do much more. I think the BOD has a critical role in setting high standards of professional development and patient safety. If it's mission does not already include improving the oral health of Oregonians - it should incorporate it. Thanks!

---

#225

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 2:38:56 PM  
**Last Modified:** Friday, January 08, 2021 2:43:05 PM  
**Time Spent:** 00:04:08  
**IP Address:** 36

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

To advocate for dental professionals to be considered health care workers.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Benefits

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

More communication regarding the vaccine.

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#226

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 2:52:41 PM  
**Last Modified:** Friday, January 08, 2021 2:56:22 PM  
**Time Spent:** 00:03:41  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Currently, the biggest focus is COVID and how to help keep practices open and treating patients effectively.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#227

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 3:07:15 PM  
**Last Modified:** Friday, January 08, 2021 3:08:43 PM  
**Time Spent:** 00:01:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Don't Know**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

---

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#228

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 3:37:04 PM  
**Last Modified:** Friday, January 08, 2021 3:45:25 PM  
**Time Spent:** 00:08:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

rules and regulations re: online patient care and consultations

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

recruiting professionals of a more diverse background to serve or work within the Oregon Board of Dentistry

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

To Build in a collaborative practice arrangement/ plate form that includes adjunct professionals who treat oral facial health issues, ie Speech Language Therapist, Orofacial Myofunctional Therapist, Sleep doctors, and ENT specialist within the field fo general dentistry, oral surgery, and orthodontics.

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#229

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 4:30:04 PM  
**Last Modified:** Friday, January 08, 2021 4:32:50 PM  
**Time Spent:** 00:02:45  
**IP Address:** 3

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Teledentistry rules

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Encouraging more public dentistry

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#230

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 5:13:34 PM  
**Last Modified:** Friday, January 08, 2021 5:15:45 PM  
**Time Spent:** 00:02:11  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Don't Know

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#231

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 5:20:59 PM  
**Last Modified:** Friday, January 08, 2021 5:23:49 PM  
**Time Spent:** 00:02:50  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Not allowing mid levels to practice dentistry in Oregon. They tend to not be any cheaper, and also work in urban areas that already have access to care.

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**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#232

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 5:50:14 PM  
**Last Modified:** Friday, January 08, 2021 6:02:11 PM  
**Time Spent:** 00:11:56  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral healthcare	1
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Expansion of Oregon Health Plan

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Expansion of entry level dental auxiliary roles easing barriers to further opportunities for those that feel excluded from jobs in dentistry.

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Not sure how to phrase this but maybe expanded options to mitigate consumer frustrations with their dental experiences. Maybe to reach mutually beneficial solutions to disputes.

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#233

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 6:52:27 PM  
**Last Modified:** Friday, January 08, 2021 6:54:26 PM  
**Time Spent:** 00:01:59  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

None

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

No changes

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Nope

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#234

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 7:00:07 PM  
**Last Modified:** Friday, January 08, 2021 7:05:11 PM  
**Time Spent:** 00:05:03  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7** **Respondent skipped this question**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

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**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

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**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

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#235

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 7:35:30 PM  
**Last Modified:** Friday, January 08, 2021 7:38:01 PM  
**Time Spent:** 00:02:31  
**IP Address:** 6

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Poor

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

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### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Administrative law overreach

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

We don't need that

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

You should inform and leave it at that

---



#236

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 8:44:02 PM  
**Last Modified:** Friday, January 08, 2021 8:47:35 PM  
**Time Spent:** 00:03:32  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid-19 considerations

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### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

not sure

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#237

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 9:23:45 PM  
**Last Modified:** Friday, January 08, 2021 9:25:47 PM  
**Time Spent:** 00:02:01  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#238

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 9:33:45 PM  
**Last Modified:** Friday, January 08, 2021 9:41:12 PM  
**Time Spent:** 00:07:26  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	1
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Liability for giving vaccines and billing medical ins for them?

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't know if it is up to the OBD to make things more diverse and inclusive. What does that have to do with governing us?

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### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Stick to overseeing our dentistry not our diversity.

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#239

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 9:42:58 PM  
**Last Modified:** Friday, January 08, 2021 9:45:19 PM  
**Time Spent:** 00:02:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?



#240

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:13:25 PM  
**Last Modified:** Friday, January 08, 2021 10:15:36 PM  
**Time Spent:** 00:02:11  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Excellent

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#241

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:24:19 PM  
**Last Modified:** Friday, January 08, 2021 10:25:51 PM  
**Time Spent:** 00:01:31  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Don't Know

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Don't Know

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#242

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, January 08, 2021 10:38:56 PM  
**Last Modified:** Friday, January 08, 2021 10:44:32 PM  
**Time Spent:** 00:05:35  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Excellent

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>4</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

PPE usage because of COVID-19.  
Dental and dental hygiene reciprocity with other states licensing agencies.

---

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

---

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

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#243

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, January 09, 2021 8:49:18 AM  
**Last Modified:** Saturday, January 09, 2021 8:58:39 AM  
**Time Spent:** 00:09:21  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

non certified individuals practicing orthodontic care

---

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

no idea

---

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

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#244

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, January 09, 2021 8:47:40 AM  
**Last Modified:** Saturday, January 09, 2021 9:05:26 AM  
**Time Spent:** 00:17:45  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Health insurance organizations still don't seem to recognize that overall healthcare costs are lower, medical and dental combined, when people follow-up on oral healthcare. The insurance companies would be saving money if they covered preventative care, especially multiple period maintenance visits.

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Insuring excellent, AFFORDABLE, professional oral healthcare is available to the minority populations would inspire a more diverse workforce. Except for emergency care dentistry is often seen as a luxury.

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No.

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#245

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, January 09, 2021 9:44:58 AM  
**Last Modified:** Saturday, January 09, 2021 9:46:17 AM  
**Time Spent:** 00:01:19  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Good

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Good

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>2</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#246

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, January 09, 2021 3:06:12 PM  
**Last Modified:** Saturday, January 09, 2021 3:09:39 PM  
**Time Spent:** 00:03:27  
**IP Address:**

## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** Good

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** Excellent

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** Excellent

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** Fair

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	3
Consumer Protection - communication with consumers to highlight some area of oral healthcare	2
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

---

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Mid level Care provided by DH and DA for more access to care in rural areas

---

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Open minded to change

---

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

COVID -19 accessibility for vaccines

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#247

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Saturday, January 09, 2021 2:59:44 PM  
**Last Modified:** Saturday, January 09, 2021 5:26:26 PM  
**Time Spent:** 02:26:42  
**IP Address:** 07

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral healthcare	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

---

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Access to dental care, and disparities in receiving dental care, needs to continue to be addressed, both through individual altruistic efforts and through policy. There are many groups of people (low SES, immigrants, minorities, elderly, etc) who do not generally receive the dental care they need, understand how to access the care available and often lack knowledge concerning oral health. As a profession, we need to better address dental care disparities, or our independence and autonomy, as a profession, will be at risk as the public trust/goodwill that has been granted to us will erode. Just as social justice reform is both in the news and impacting many organizations, both public and private, let's be proactive and ardent in our responsibility to tangibly diminish endemic oral health care disparities through both policy and personal philanthropy.

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**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

OHSU SOD has been admitting more diverse classes over the past ten years and this will continue to increase our profession's representation of historically underrepresented groups. The best way to have a more diverse workforce is to train/license dentists who are from, or identify with these groups. Unfortunately, it seems that the majority of dental school candidates are not from the underrepresented groups. I think this is to encourage dentists to make an effort to plant the seed of "becoming a dentist" in the minds of these young adults as they cross our paths, both in our offices and private lives. The historical stereotype of a dentist may also contribute to the lack of a diverse candidate pool for dental school. This could be mitigated by showcasing dentists who are from/identify with underrepresented groups utilizing social media, print, and television. I think we should make a concerted effort to do this because, whether intentionally or due to unconscious bias, dentistry historically has been a white/male profession. For example, if a local news station is doing a story about the MOM, have the volunteer dentist(s) highlighted in the story be from an underrepresented group. Do the same thing with pictures used in social media accounts. The face of dentistry needs to look like we want it to look in the future if we want to attract diverse people into our community.

The OBOD may want to consider how foreign dentists are licensed to practice in Oregon. The process/requirements may be exactly how it should be, or maybe it could be structured to be more welcoming while still holding to high standards.

The OBOD could also actively recruit potential candidates to board positions and salaried appointments that would increase the diversity represented (This may already take place).

The required two hours of CE in Cultural Competency will also contribute to this effort. Keep up the good work.

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no response

#248

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 6:47:25 AM  
**Last Modified:** Sunday, January 10, 2021 6:53:39 AM  
**Time Spent:** 00:06:14  
**IP Address:** 97.120.213.109

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	2
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

with Covid-19 affecting us so heavily, there should be more guidelines for new tasks set in place for all staff members. ie: dentists doing vaccinations: what will be the role of staff

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

more outreach to colleges for recruiting students who may not consider dentistry ( in all job positions)

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

#249

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 9:12:26 AM  
**Last Modified:** Sunday, January 10, 2021 9:14:19 AM  
**Time Spent:** 00:01:53  
**IP Address:** 66.220.124.100

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Fair**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>4</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>1</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#250

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 12:25:34 PM  
**Last Modified:** Sunday, January 10, 2021 12:29:22 PM  
**Time Spent:** 00:03:47  
**IP Address:** 73.25.20.108

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Don't Know**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

increase in corporate dentistry and a competition advantage they use over small private practices

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

education opportunities starting at high school level

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

no

#251

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 12:40:35 PM  
**Last Modified:** Sunday, January 10, 2021 12:43:26 PM  
**Time Spent:** 00:02:50  
**IP Address:** 73.157.138.57

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---



**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>5</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#252

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 5:01:17 PM  
**Last Modified:** Sunday, January 10, 2021 5:12:14 PM  
**Time Spent:** 00:10:57  
**IP Address:** 66.115.149.100

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Don't Know**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Poor**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

## Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral	1
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	3

## Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

The COVID vaccine response is extremely disappointing and discouraging. It feels like our profession was forgotten. We gladly gave up our PPE but are left out on the vaccine organization. To little too late. No organization in getting it done

## Q9

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

## Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

More forward think and action

#253

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Sunday, January 10, 2021 8:40:44 PM  
**Last Modified:** Sunday, January 10, 2021 8:42:44 PM  
**Time Spent:** 00:01:59  
**IP Address:** 174.204.196.50

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## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dental Hygienist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** Yes

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** Poor

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>2</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>4</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#254

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, January 11, 2021 8:49:28 AM  
**Last Modified:** Monday, January 11, 2021 8:53:36 AM  
**Time Spent:** 00:04:08  
**IP Address:** 67.160.130.43

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Revisions to Investigations, enforcement and compliance activities	1
--	---

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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

not sure

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

not sure

#255

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, January 11, 2021 8:53:48 AM  
**Last Modified:** Monday, January 11, 2021 8:56:43 AM  
**Time Spent:** 00:02:55  
**IP Address:** 76.115.147.199

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---



**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Revisions to Investigations, enforcement and compliance activities	3
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**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

OHSA REGULATIONS

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

GREAT

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

HELPING WITH OSHA REGULATIONS

#256

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, January 11, 2021 9:20:42 AM  
**Last Modified:** Monday, January 11, 2021 9:52:11 AM  
**Time Spent:** 00:31:29  
**IP Address:** 68.116.52.186

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>2</b>
Rulemaking - public meetings, public participation and implementation	<b>3</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

PPE regulations and respiratory precautions in the dental office

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Education of the dental staff and community

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

How to help the dental practitioner understand current and changing guidance on best practice dentistry during this changing and evolving time.

#257

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, January 13, 2021 8:06:34 AM  
**Last Modified:** Wednesday, January 13, 2021 8:08:21 AM  
**Time Spent:** 00:01:46  
**IP Address:** 71.8.162.132

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>1</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>3</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>4</b>
Other (below in survey under comments describe the area the OBD should focus on more intently)	<b>5</b>

**Q8**

**Respondent skipped this question**

What trends or changes do you see affecting the oral  
healthcare industry that the Oregon Board of Dentistry  
should consider when developing its new strategic plan?

**Q9**

**Respondent skipped this question**

How could the Oregon Board of Dentistry play a role in  
developing a more diverse and inclusive oral healthcare  
workforce?

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of  
Dentistry should consider during strategic planning?

#258

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, January 14, 2021 1:12:50 PM  
**Last Modified:** Thursday, January 14, 2021 1:19:43 PM  
**Time Spent:** 00:06:53  
**IP Address:** 71.188.97.107

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Consumer Protection - communication with consumers to highlight some area of oral healthcare 5

Other (below in survey under comments describe the area the OBD should focus on mor 4

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Covid-19 and related infection control methods and vaccination.

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I think Oregon board of dentistry is doing a great job regarding diversity.

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

If there is a plan regarding Covid -19 vaccination .

#259

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, January 14, 2021 3:42:53 PM  
**Last Modified:** Thursday, January 14, 2021 3:53:28 PM  
**Time Spent:** 00:10:35  
**IP Address:** 67.170.183.212

---

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---



**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Rulemaking - public meetings, public participation and implementation	<b>1</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

HPV exams should be done routinely.

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

no opinion

**Q10**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

If obtaining a license in Oregon, the process could limit fact checking on other state licenses, wrong doing etc to 20 years. I had to go back 49 years!

#260

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, January 19, 2021 9:50:32 PM  
**Last Modified:** Tuesday, January 19, 2021 9:56:20 PM  
**Time Spent:** 00:05:48  
**IP Address:** 73.37.5.47

---

## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Fair**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7**

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	<b>5</b>
Consumer Protection - communication with consumers to highlight some area of oral	<b>1</b>
Rulemaking - public meetings, public participation and implementation	<b>2</b>
Revisions to Investigations, enforcement and compliance activities	<b>3</b>

**Q8**

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Please take a thorough look at the history of all the regulations put forth. Remove those which are no longer applicable to make room for all the new ones. Please do not add more rules and regulations. We are all committed to patient welfare and quality care and compliance. Don't punish/offend and inconvenience the many so you can regulate the few who do not have altruism and quality as their motive.

**Q9**

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Make the profession seem welcoming instead of threatening and stressful.

**Q10**

**Respondent skipped this question**

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

#261

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, January 20, 2021 3:26:44 PM  
**Last Modified:** Wednesday, January 20, 2021 3:37:36 PM  
**Time Spent:** 00:10:51  
**IP Address:** 76.115.103.96

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dental Hygienist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Fair**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Fair**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Poor**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Poor**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral	3
Rulemaking - public meetings, public participation and implementation	4
Revisions to Investigations, enforcement and compliance activities	5
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Technology- OBD is way behind!

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

By actively reaching out to communities of color and asking what help they need in order to be involved

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Licensing process- slow, inefficient, exhausting. Why on Earth are you MAILING applicants when asking for supplemental forms/info? Why is the application on paper and mailed at all? Why isn't there an easy way for an applicant to check the status of their application (an individualized, online checklist that informs an applicant where they are in the process, what they missed, and what OBD needs to continue/finish)? The unnecessary and obvious inefficiencies in this process are numerous and mind boggling!

#262

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, January 21, 2021 4:57:02 PM  
**Last Modified:** Thursday, January 21, 2021 5:04:33 PM  
**Time Spent:** 00:07:31  
**IP Address:** 50.43.0.97

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Not allowing middle level provider to practice dentistry.

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Host a storytelling webinar to understand the perspective of dental providers in color. Dentists are predominantly white. I would like to hear the stories of dentists in color, how their race and ethnic background affected their profession. I would like to promote their voices. I would like to acknowledge the extra challenge that they might have faced in their profession because of racial injustice and prejudice.

### Q10

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

#263

**COMPLETE**

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**Started:** Monday, January 25, 2021 11:36:59 AM  
**Last Modified:** Monday, January 25, 2021 11:43:46 AM  
**Time Spent:** 00:06:47  
**IP Address:** 71.193.250.100

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **No**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---



### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral	3
Rulemaking - public meetings, public participation and implementation	2
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

In my opinion, informing all dentists across the state that using products such as SDF without a proper PARQ offering traditional treatment or using SDF just to get paid by insurance company even though they know traditional treatment is needed ASAP are instances that could be construed as malpractice. Sorry, I've seen these happen all to often in last 18 months to patients referred to or transferring to my practice.

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Tough question. This is the kind of question you debate in classrooms for hours to come up with solutions.

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

Thank you for keeping us informed!

#264

**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, January 26, 2021 5:08:38 AM  
**Last Modified:** Tuesday, January 26, 2021 5:16:02 AM  
**Time Spent:** 00:07:23  
**IP Address:** 45.131.192.92

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Good**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Good**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Good**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Excellent**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	2
Consumer Protection - communication with consumers to highlight some area of oral	4
Rulemaking - public meetings, public participation and implementation	5
Revisions to Investigations, enforcement and compliance activities	3
Other (below in survey under comments describe the area the OBD should focus on more intently)	1

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Increase freedom in the market. Freedom protects the consumer

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

Let freedom in the market determine the diversity. Freedom will reflect the wishes and desires of the individuals, regardless of color, gender, etc.

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

The number one goal of the board should be to increase freedom in the market. The freedom will protect the consumer, ensure fair diversity, lower costs of care, increase availability of care. This should be the number one priority of the board.

#265

**COMPLETE**

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**Last Modified:** Thursday, January 28, 2021 4:47:23 PM  
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**IP Address:** 204.195.11.166

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## Page 1: Strategic Planning Preparation Survey

**Q1** **I am an Oregon Licensed Dentist**

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** **Yes**

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** **Excellent**

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** **Excellent**

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** **Excellent**

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** **Good**

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

### Q7

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

Education - outreach on statutes, rules & protocols (presentations, newsletters, Eblasts, website)	1
Consumer Protection - communication with consumers to highlight some area of oral	2
Rulemaking - public meetings, public participation and implementation	3
Revisions to Investigations, enforcement and compliance activities	4
Other (below in survey under comments describe the area the OBD should focus on more intently)	5

### Q8

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

Not so much a new trend, but as offices seek out patients to their offices, there seems to be an increase of offers that may be classified as fee splitting. Without education and enforcement, allowing this to continue will normalize this behavior and make it difficult to control.

### Q9

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

I don't see this workforce issue as a major obligation of the Board of Dentistry. Appropriate and ethical practice along with safety for the patient are what I see as major duties and responsibilities of the Board. So to accomplish this, licensing and certification of dental team members, upholding CODA educational standards as the gold standard for education and training, assuring care provided to BIPOC is of the same standard as provided to others. While this will not address workforce issues, I don't feel that workforce issues are an obligation of the board per se. Now one area where the board could have an impact, would be to embrace alternative pathways of education and training, while upholding the CODA standards. And I suppose having proportionate BIPOC representation on the board itself would be helpful.

### Q10

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

No

#266

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 02, 2021 8:11:06 PM  
**Last Modified:** Tuesday, February 02, 2021 8:12:47 PM  
**Time Spent:** 00:01:40  
**IP Address:** 73.240.52.127

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## Page 1: Strategic Planning Preparation Survey

**Q1** I am an Oregon Licensed Dentist

Which best describes your relationship to the Oregon Board of Dentistry? (choose only one, your primary role)

---

**Q2** No

Have you interacted with the Oregon Board of Dentistry through email, mail, telephone or in person over the last 12 months?

---

**Q3** Fair

How would you rate your overall experience with Oregon Board of Dentistry Staff?

---

**Q4** Fair

How do you rate the knowledge and expertise of the Oregon Board of Dentistry Staff?

---

**Q5** Fair

How do you rate the availability of information when communicating with the Oregon Board of Dentistry in any manner?

---

**Q6** Good

How do you rate the Oregon Board of Dentistry Website in finding the information you were looking for?

---

**Q7** Respondent skipped this question

Rank (1 is most important, 5 is least important) areas that you believe the OBD should focus on more intently, in upcoming strategic planning

---

**Q8**

Respondent skipped this question

What trends or changes do you see affecting the oral healthcare industry that the Oregon Board of Dentistry should consider when developing its new strategic plan?

---

**Q9**

Respondent skipped this question

How could the Oregon Board of Dentistry play a role in developing a more diverse and inclusive oral healthcare workforce?

**Q10**

Respondent skipped this question

Any additional information that the Oregon Board of Dentistry should consider during strategic planning?

# State of Oregon Health Professionals' Services Program

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## Performance Audit of the Health Professionals' Services Program

January 2021





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## RESULTS

IBH met most contractual requirements, generally met required minimal success rate standards, and submitted to the Boards invoices and reports that were accurate and supported by substantiating documentation. However, this audit also revealed instances of minor mis-calculations in reporting one (1) performance metric and several instances in which IBH did not meet certain contract provisions related to outreach and training, quality assurance program requirements, and reporting requirements.

## BACKGROUND AND PURPOSE

In 2010, the Oregon State Legislature established the Health Professionals' Service Program (HPSP) to assist health providers with substance abuse and/or mental health disorders and to protect the public from licensees unable to practice safely due to one or both disorders.

In 2017, the Oregon Medical Board, Dental Board, Board of Nursing, and Board of Pharmacy ("the Boards") collectively executed a contract (MSA) with Integrated Behavioral Health Solutions, LLC (IBH), to provide the following services:

- Licensee monitoring, including licensee enrollment and case monitoring, workplace monitoring and reporting, and random toxicology testing.
- Outreach and training to licensees, third-party evaluators, consultants, treatment providers, and licensee supervisors.
- Quality assessment and performance improvement, including establishing formal policies and procedures, required minimum staffing levels, obtaining and reporting licensee and stakeholder input, and performance measurement.
- Periodic reporting on licensee enrollment, compliance, and other factors.

The Boards compensate IBH, and each Board is responsible to pay a proportional share, based on a formula accounting for total licensees and those enrolled in the program.

## KEY FINDINGS

- Amounts invoiced by IBH adhered to contract payment provisions. Monthly program fees were correctly calculated based on the number of licensees and enrollees of each Board, and each Board was billed their proportional share of the monthly program fee.
- IBH employed sound controls over licensee monitoring, including administering the appropriate number of toxicology tests, establishing a monitoring agreement with the licensee, ensuring routine communication between the monitor and licensee, and establishing protocols for agreement and workplace monitors.
- IBH could not demonstrate that it provided all required educational materials and outreach presentations to licensees, third-party evaluators, consultants, treatment providers, and Licensee supervisors (workplace monitors), and stakeholders.
- IBH met most Quality Assessment and Performance Improvement Program requirements, but opportunities for improvement remain. This includes ensuring it adheres to MSA provisions regarding the frequency of licensee surveys—which conflicted with informal agreements—and Agreement Monitoring staffing levels. Between July 2017 and June 2020, IBH did not meet staffing requirements 17 percent of the time.
- IBH met many, but not all, MSA reporting requirements. Monthly reports did not always include adequate information regarding licensees in compliance with monitoring agreements and geographical information. IBH did not regularly submit quarterly reports on outreach activities; bi-annual reports on licensee or stakeholder input were not always submitted timely; and IBH did not submit annual financial reports at all. In some cases, this resulted from conflicts between existing MSA requirements and informal agreements between IBH and the Boards.
- Opportunities exist to better clarify contract language and expectations, including ensuring the frequency of licensee survey reporting (along with exit interviews and stakeholder surveys) and reporting requirements reflect actual practice and meet the needs of the Boards.

## KEY RECOMMENDATIONS

- Evaluate MSA provisions, where IBH non-compliance was noted in this report, to ensure the provisions reflects the Boards' expectations and desired practice, and monitor compliance accordingly.
- Ensure IBH provides all required educational materials and outreach efforts. In doing so, we recommend that this include creating a formal training manual for potential workplace monitors.
- Ensure IBH provides adequate FTE levels for each year's pricing tier; consideration should be given to the inclusion of FTE levels in the required benchmark reporting and penalty structure.
- Ensure accuracy in reporting performance statistics; while only one reporting inaccuracy was identified, consistent methodologies for calculating success rates against performance benchmarks is essential for program monitoring.

## Introduction and Background

The Oregon Health Professionals' Services Program (HPSP or Program) was established in 2010 to provide assistance to all licensed health providers in the State of Oregon. The following four (4) licensing boards elected to offer the Program as an alternative-to-discipline: the Oregon Medical Board, Oregon State Board of Nursing, Oregon Board of Pharmacy, and Oregon Board of Dentistry (herein referred to collectively as "the Boards"). The HPSP was established to protect the public from Licensees who are unable to practice safely due to substance abuse and/or mental health disorders.

The administration of the Program has evolved over the past decade. Prior to 2010, each licensing board managed its own program to monitor Licensees that were diagnosed with substance abuse and/or mental health disorders that could impede their ability to practice safely. In July 2010, the Oregon State Legislature designated the Oregon Health Authority to oversee the Program. The Oregon Health Authority contracted with Integrated Behavioral Health Solutions, LLC (IBH), formerly doing business as Reliant Behavioral Health, LLC, to serve as a third-party administrator for the Program. In 2016, the Oregon Legislature adopted House Bill 4016, which shifted responsibility to manage the Program from Oregon Health Authority back to the licensing boards.



In 2017, the Boards entered into a Master Service Agreement (MSA) with IBH for a four-year term (July 1, 2017 through June 30, 2021) and an optional four-year extension through June 30, 2025. This agreement detailed general requirements related to service delivery and compensation, and included four (4) subordinate Work Order Contracts (WOC) between IBH and each board detailing board specific requirements for monitoring Licensees. Under this agreement, IBH is responsible for providing monitoring, toxicology testing, and group meetings for enrolled Licensees, along with various administrative duties, such as maintaining the HPSP website, creating HPSP brochures, providing informational presentations annually, and maintaining a database of HPSP enrollees. Of the four (4) licensing boards, the Medical Board serves as the contract manager, while oversight of the HPSP and IBH's administration of the Program is performed by a Program Advisory Committee (PAC), comprising of Board and IBH representatives, which meets quarterly to discuss HPSP daily operations, challenges, contract compliance, and opportunities for improvement. In addition, MSA and Oregon Revised Statute §676.194 also established a Program Work Group that meets as needed to "facilitate the establishment and continuation of the HPSP."

## Program Overview

Individuals licensed through any of the Boards must be diagnosed with a substance abuse or mental health disorder and be “referred” to the HPSP in order to participate in the Program. Generally, a Licensee may be referred to the Program in one of two ways: Board-referred enrollment or self-referred enrollment. When a Licensee is Board-referred by the Board of Dentistry, Board of Nursing, and Medical Board, HPSP serves as an alternative to discipline. The Board of Pharmacy utilizes HPSP as a required element of their disciplinary program. The Board-referral and self-referral processes are described below.

- ✓ Board-Referred Enrollment: Individuals may be referred to the HPSP through investigation or through their License application, in which a Licensee must divulge if they have a substance abuse disorder or mental health diagnosis that may impair their ability to practice safely. The Board will obtain a third-party evaluation of the Licensee to receive a diagnosis of a substance abuse disorder and/or mental health disorder, and treatment options. The licensing board will then refer the Licensee to the HPSP by submitting the referral (including a description of any Board-imposed or recommended restrictions on Licensee’s professional practice), the evaluation documentation, and the Licensee’s written consent, to IBH. IBH then enrolls the individual; informs the Licensee of Program requirements, benefits, risks, and confidentiality limitations; and obtains the Licensee’s signed consent for services agreement, signed Monitoring Agreement, and a deposit to cover all costs associated with toxicology testing. Within three (3) business days of enrollment, IBH assigns an Agreement Monitor to serve as the case manager for the enrolled licensee, meet regularly with the Licensee, and monitor compliance with the established monitoring agreement.
- ✓ Self-Referred Enrollment: In general, individual Licensees recognizing that they have been diagnosed with a substance abuse or mental health disorder that may impede their ability to practice in a safe manner may, without being subject to a disciplinary proceeding, enroll themselves into the HPSP as a way to get the help they need. Consistent with the purpose of the Program, allowing the self-referral of Licensees further protects the public from Licensees who may be unable to practice safely due to substance abuse and/or mental health disorders. Participation in the Program is largely similar for those that are self- or Board-referred. However, the Licensee’s entry and enrollment into the Program differs from the Board-referral process.

A Licensee initiates the first steps of self-referred enrollment by contacting IBH, either through e-mail or telephone. At this point, IBH confirms eligibility by ensuring the Licensee is licensed in good standing by their respective board and, similar to the Board-referral process, submitting the Licensee to an independent evaluation for diagnosis and treatment plan, at the Licensee’s expense. If the Licensee is in good standing with their respective board and is independently diagnosed with a substance abuse and/or mental health disorder, IBH will obtain the Licensee’s signed consent and monitoring agreements; authorization for disclosure and exchanges of confidential information between IBH, the licensing board, and the Licensee’s employer; and conduct a safe-practice investigation, which may include interviews with employers, co-workers, family, and significant others, to determine if a Licensee has practiced while impaired or has presented a danger to the public. If the investigation finds that a Licensee presents, or has ever presented, a danger to the public, IBH must immediately notify the licensing board.

If a Licensee begins steps towards enrollment in HPSP, but fails to progress through the steps of self-enrollment, IBH is mandated to report the Licensee to the Board within one (1) business day for substantial non-compliance for failure to complete enrollment. A self-referred Licensee's participation in HPSP will remain confidential from their licensing board unless the self-enrolled Licensee is substantially non-compliant, at which point IBH must notify the licensing board and the Licensee is re-categorized as Board-referred.

Licensees from the Medical Board, Board of Pharmacy, and Board of Nursing can be enrolled in the Program through a Board-referral or a self-referral. Licensees from the Board of Dentistry may only be Board-referred. Regardless of whether a Licensee is Board-referred or self-referred, the individuals' participation in the Program remains largely the same. Once enrolled, IBH establishes an individualized monitoring program, which requires the Licensee to take a toxicology test within ten business days and meet with their Agreement Monitor within five business days. Throughout the enrollment period, Licensees must meet with their assigned Agreement Monitor as required by their monitoring agreement—either weekly, semi-monthly, or monthly—and must take periodic and randomly scheduled toxicology tests. For the Medical Board, Board of Dentistry, and Board of Pharmacy Licensees must receive a minimum of 36 randomized toxicology tests their first year in HPSP, 24 in their second year, and 18 in their third year, unless modified by the licensing board. The Board of Nursing requires Licensees to receive a minimum of 24 randomized toxicology tests their first year in HPSP, and 18 in their second year. The duration of a Licensee's enrollment varies by licensing board—typically between two (2) and five years. After completion of HPSP, IBH e-mails the Licensee an exit interview survey.

EXHIBIT 1. LICENSEE HPSP ENROLLMENT LIFECYCLE



Source: Auditor-generated from interviews with Board and IBH.

## Contract Services & Compensation

The Boards' contract with IBH sets forth annual compensation ranges—between \$1.1 million and \$1.2 million—for IBH's services. In return, the MSA requires IBH to provide specific services and provide a variety of deliverables that can generally be categorized into four (4) categories: outreach and training, Licensee monitoring, quality control and performance measurement, and periodic program reporting. On the following pages, we provide an overview of each.

## Contractor Compensation

The Boards' contract with IBH provides for a not-to-exceed maximum compensation limit of \$4,550,000, though actual compensation is based on the number of Licensees served through the Program. The Boards compensate IBH through a monthly service fee, which is assessed and re-calculated based on a tiered fee structure tied to enrollment every six (6) months in January and July. As shown in Exhibit 2, tiers are assigned by calculating the median number of Licensees enrolled in the Program at a point in time, and total Licensees that were enrolled and participating in HPSP during the fiscal year.

EXHIBIT 2. CONTRACT TIERED ANNUAL PROGRAM FEES

Tier	Licensees	Agreement Monitor FTE	Annual Compensation	Monthly Compensation
Tier One	0-250	5.65	\$1,098,056	\$91,505
Tier Two	251-300	5.80	\$1,106,306	\$92,192
Tier Three	301-350	6.80	\$1,161,306	\$96,776
Tier Four	351-400	7.80	\$1,216,306	\$101,359

Source: Master Service Agreement.

Once the tier is determined, the share each licensing board is required to pay is prorated based on the number of eligible and enrolled individuals licensed through each Board. To calculate the proportion each board is responsible to cover, the Boards split the total monthly fee in half, allocating 50 percent of the cost to Board eligible Licensees and 50 percent of the cost to Board participating Licensees. In Exhibit 3, we provide an example of the fee calculation from December 30, 2018 that was used to set the monthly invoice amount for the period of January 1 through June 30, 2019. During this period, there were 216 participating Licensees—Tier One—at the time the fee was calculated and the Annual Program Fee was set to \$1,098,056, or a monthly fee of \$91,505 (see the purple highlighted cells in Exhibit 2 and Exhibit 3).

EXHIBIT 3. EXAMPLE PROGRAM FEE DISTRIBUTED BY BOARD, JANUARY THRU JUNE 2019

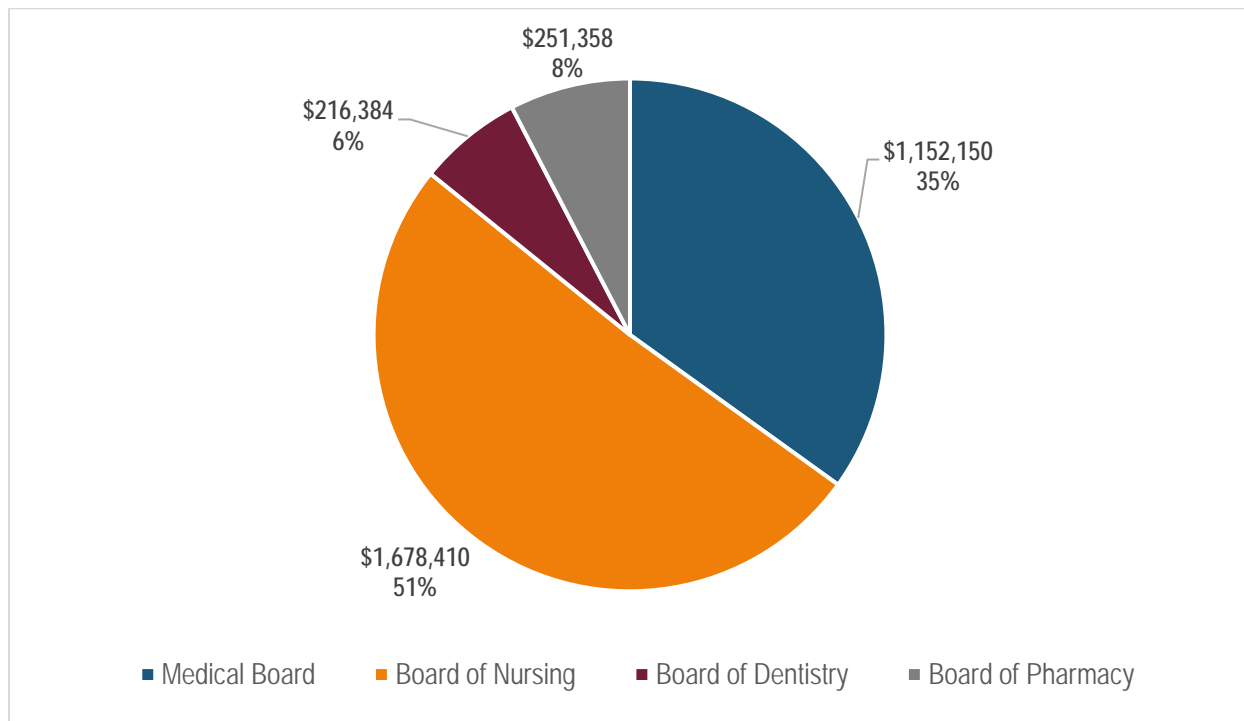
Board	Board's Eligible Licensees	Board's Participating Licensees	Fee Eligible Licensees	Fee Participating Licensees	Board Total Fee	Percentage
Board of Nursing	48,891	87	\$27,036	\$18,428	\$45,464	49.7%
Medical Board	22,702	97	\$12,554	\$20,546	\$33,100	36.2%
Board of Pharmacy	4,515	22	\$2,497	\$4,660	\$7,157	7.8%
Board of Dentistry	6,629	10	\$3,666	\$2,118	\$5,784	6.3%
Total	82,737	216	\$45,753	\$45,752	\$91,505	100%

Source: Oregon Medical Board.

Between July 1, 2017 and June 30, 2020, the Boards were invoiced nearly \$3.3 million as compensation to IBH, with the Board of Nursing and the Medical Board collectively paying 86 percent of the total cost of the Program, as illustrated in Exhibit 4.



#### EXHIBIT 4: HPSP COST DISTRIBUTION AMONG LICENSING BOARDS, JULY 2017 THROUGH JUNE 2020



Source: Auditor-generated from IBH Weekly Report as of July 1, 2020.

#### Licensee Monitoring

IBH is required to operate a statewide standardized monitoring program for Licensees who have been diagnosed with a substance abuse and/or mental health disorder. IBH must monitor Licensees to assess whether Licensees are at risk of not practicing safely or professionally due to their substance abuse, mental health disorder, or dual diagnosis. If Licensees pose a risk, IBH must report the Licensee to the Boards. The contract stipulates that this must be done through a combination of:

- ✓ Case Monitoring: Licensees are subject to a formal individualized Monitoring Agreement. IBH develops the Monitoring Agreement by reviewing a Licensee's relevant information and the third-party evaluator's evaluation report and recommended treatment plan. The Monitoring Agreement outlines the minimum length of time a Licensee must be enrolled in HPSP, which must be two (2) years or longer; a Board-approved treatment plan designed by a third-party evaluator; limits on a Licensee's discretion to practice; and toxicology testing requirements. Agreement Monitors are employed and assigned by IBH to monitor Licensees' compliance with Monitoring Agreements. Licensees must meet at regularly scheduled intervals with Licensees (either weekly, semi-monthly, or monthly basis); the frequency of meetings is Licensee and Board dependent. Meetings must be voice-to-voice—which may be by telephone, face-to-face, or by internet or video communications. At least one (1) time per year, IBH must send a Licensee status report to the Boards' oversight staff for review (MSA §2.10-2.11).

- ✓ Workplace Monitoring and Reporting: IBH is responsible for implementing a process to assess a Licensee's employer's ability to supervise Licensee. This includes establishing minimum educational or training standards and requirements for supervisor and workplace monitor skills and knowledge that can be used by employers to ensure effective supervision of Licensees in practice. IBH is also required to provide online training to licensee supervisors and workplace monitors, including education and information to Licensee employers and other stakeholders regarding the signs and symptoms of relapse, including, but not limited to regional seminars and educational programs. IBH does this by finding, where applicable, workplace monitors for Licensees.



IBH provides workplace monitors with training early within a Licensees enrollment in HPSP. Workplace monitors submit reports to IBH monthly, which must include information relating to the **Licensee's performance**, changes in behavior, and lack of attendance or tardiness, or other issues of concern. If a workplace monitor notices something significant, they are required to contact IBH within 24 hours (MSA §2.8).

- ✓ Random Toxicology Testing: The MSA requires Licensees to receive at least 24 randomized toxicology tests in the first year of enrollment, and at least 18 for their remaining years in the Program. At least 55 percent of the testing must be completed on Mondays, Fridays, or Saturdays. IBH does not notify Licensees in advance of a scheduled toxicology test; rather, Licensees are required to call IBH's Interactive Voice Response (IVR) system, app, or web portal daily (except Sunday) to see if they have been scheduled for a test that day. The notification also informs the Licensee of the panel they need to test. A missed toxicology test, inconclusive results, or a refusal to take a test are all considered instances of non-compliance and must be reported to the Licensing Board. Licensees with a mental health diagnosis receive randomized toxicology tests only if recommended by the third-party evaluator or the Licensing Board.

## Outreach and Training

The MSA requires IBH to provide Board-approved educational materials to Board Licensees; third-party evaluators, consultants, and treatment providers; and Licensee supervisors. This is intended to ensure that



all Licensees, their employers, and potential treatment providers are aware of the HPSP and relevant Program benefits and requirements. In addition, the Boards and IBH agreed to amend the outreach requirement to include outreach to other stakeholders, such as health professional students and schools. This agreement was formally memorialized in writing through a written waiver approved by Board representatives. There must be at least 12 outreach presentations each year (one (1) per month and two (2) per year per region), and all content must be Board-approved. At each presentation, there must be a sign-in sheet that IBH retains for two (2) years. Additionally, IBH must provide orientation for all Board-approved independent third-party evaluators, consultants, and treatment providers. Any orientation material must be reviewed by the Board during the Program Advisory Committee to ensure that the materials are generic enough to be used by all four (4) Boards. In instances where Licensees have supervisors, IBH shall provide Board-approved training to supervisors, and this training must be posted online to IBH's HPSP webpage.

### **Quality Control and Performance Measurement**

The MSA requires IBH to maintain an effective, on-going, data-driven Quality Assessment and Performance Improvement Program (QAPIP), which must include four (4) facets. First, as part of the QAPIP, IBH must establish formal and updated policies and procedures to which all IBH Program staff, subcontractors, and other service providers are trained and adhere. Second, IBH must incorporate into the policies and procedures protocols addressing the retention of staff, subcontractors, and other service providers, and ensuring IBH will dedicate a minimum number of staff to serve the Board's enrollees.

Third, the MSA requires IBH to give stakeholders and Licensees opportunities to provide feedback on IBH's administration of the Program, including administering (a) exit interviews of all Licensees who have successfully completed the Program within three (3) months of their completion of the Program; (b) a quarterly satisfaction survey of a representative sample of Licensees enrolled in the Program; and (c) a semi-annual stakeholder satisfaction survey of a representative sample of professional health associations, other employers, independent third-party evaluators and treatment providers, and the Boards.

Lastly, IBH must measure and report on its performance under the MSA. Each month, IBH is required to submit a self-assessment report on its adherence to 16 performance benchmark criteria established in the contract, as shown in Exhibit 5. If IBH does not meet or exceed the minimum success rate, the invoiced amount must be reduced by five (5) percent for each benchmark that was missed, with a maximum of 15 percent reduction per month or termination of contract. Two (2) out of the 16 performance benchmarks are based on the reporting month's actual performance, while the remaining 14 performance benchmarks are evaluated on a six-month average during the first year and rolling 12-month average in subsequent years. In the event that the Boards believe IBH did not meet a performance measure the Boards will notify IBH of the perceived missed benchmark. If IBH disagrees with the Boards assessment, it must respond within five days to contest. As of June 2020, there has been no reduction in compensation.

**EXHIBIT 5: PERFORMANCE METRICS FOR MSA**

No.	Contract Requirement	Minimum Success Rate	Performance Period
1	Enroll Board-referred Licensee in Program on date all Licensee signed specific consent forms are received. (MSA § 2.2.2)	100%	Multi-Month Average <sup>1</sup>
2	Report Licensee to Board if Licensee fails to contact HPSP within one (1) business day after Licensee is scheduled to report to HPSP. (MSA § 2.2.3)	90%	Multi-Month Average <sup>1</sup>
3	Conduct self-refereed Licensee safe-practice investigations within 15 days. (MSA § 2.4.3)	90%	Multi-Month Average <sup>1</sup>
4	Ensure Agreement Monitor meets with Licensee within first five business days of enrollment (exception if licensee is in treatment program). (MSA § 2.11.2.a)	90%	Multi-Month Average <sup>1</sup>
5	Ensure Agreement Monitor meets with Licensee on weekly, semimonthly, or monthly basis, as determined by IBH oversight or referring-board (exception if Licensee is in treatment program). (MSA § 2.11.2.b)	85%	Multi-Month Average <sup>1</sup>
6	Conduct at least 55 percent of toxicology testing on Mondays, Fridays, or Saturdays. (MSA § 2.12.2)	90%	Multi-Month Average <sup>1</sup>
7	Ensure Licensee receives baseline toxicology test with 10 business days of the date IBH enrolls Licensee. (MSA § 1213.1.a)	90%	Multi-Month Average <sup>1</sup>
8	Provide minimum toxicology testing for all Licensees with substance use disorders. (MSA § 1213.1.b)	95%	Multi-Month Average <sup>1</sup>
9	Ensure that Licensee with substance use disorder or dual diagnosis receives a minimum of 24 customized, random toxicology tests per year during first year of enrollment in HPSP with a minimum of 18 customized, random toxicology tests per year thereafter unless otherwise specified by Board. (MSA § 1213.1.c)	90%	Multi-Month Average <sup>1</sup>
10	Ensure Licensee diagnosed with a substance use disorder or who are dually diagnosed with a co-occurring mental health disorder receive a final customized toxicology test, and the sample test is negative, before Licensee is deemed to have successfully completed HPSP. (MSA § 1213.1.e)	100%	Multi-Month Average <sup>1</sup>
11	No later than 5:00 p.m. PT on Thursdays, provide the following (MSA § 2.17.1.a): <ul style="list-style-type: none"> <li>List of Licensees who are enrolled in the Program during the subject week to all participating Boards</li> <li>List of Licensees who have successfully completed the Program during that week to all participating Boards</li> </ul>	90%	Monthly
12	Submit noncompliance reports to participating Boards within one (1) business day after IBH learns of and confirms the noncompliance. (MSA § 2.17.2)	95%	Multi-Month Average <sup>1</sup>
13	Conduct initial and update reviews within 14 business days of Licensee's enrollment in Program or update. (MSA § 3.2.c)	85%	Multi-Month Average <sup>1</sup>
14	Report unusual or critical Program noncompliance incidents to affected Board and Program Work Group within one (1) business day. (MSA § 4.5)	90%	Multi-Month Average <sup>1</sup>
15	Ensure Licensee has the opportunity to have exit interview. (MSA § 4.7)	90%	Multi-Month Average <sup>1</sup>
16	Disclose to the Licensee's board within one (1) business day of any information the court authorizes it to disclose. (MSA § 10.4)	100%	Monthly

Source: MSA between the Boards and IBH.

Note: (1) Performance assessed every six (6) months the first year, then assessed based on a rolling 12-month average in subsequent years.

## Periodic Reporting

The MSA requires IBH to submit five standardized and periodic reports, as illustrated in Exhibit 6.

- ✓ Weekly Reports: IBH submits a weekly census of Licensees enrolled in the Program, indicating the Licensees' respective licensing board and the Licensees' status as self- or Board-referred, as well as any instances of non-compliance with Licensee monitoring agreements.
- ✓ Monthly Reports: Along with monthly invoices, IBH submits a Monthly Report that focuses on the services rendered on behalf of each licensing board and a self-assessment of its own performance with respect to a series of performance benchmarks. This includes information related to:
  - Active Licensees
  - Enrollment and Disenrollment Data
  - Safe-Practice Investigations
  - Assessment of Licensee Employers
  - Compliance Reports Submitted
  - Weekly Reports Submitted
  - Monthly Reports Submitted
  - Reports Sent to Employers
  - Non-Compliance Reports Submitted
  - Bi-Annual Stakeholder Survey Reports
  - Annual Utilization Reports
  - Court Orders Requested
- ✓ Quarterly Reports: The MSA requires IBH to provide quarterly presentations to the Program Advisory Board on outreach presentations conducted. In addition, the MSA requires IBH to send surveys to Licensees quarterly to gauge their satisfaction with the Program.
- ✓ Bi-Annual Reports: In January and July of each year, IBH must report the results of its Licensee and stakeholder exit interviews and surveys.
- ✓ Annual Reports: IBH must submit, once a year, financial records for the fiscal year related to HPSP-related revenues, expenses, and profit percentages.

EXHIBIT 6: REGULAR CONTRACTOR REQUIRED REPORTS



Source: MSA between the Boards and IBH § 4, 7, and 11.1.c.

In addition to these regularly scheduled reporting requirements, IBH is required to report to the Boards within 24-hours of when IBH becomes aware of instances of substantial noncompliance or when IBH is presented with a court order.

## Scope and Methodology

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Sjoberg Evashenk Consulting was hired by the Boards to conduct an independent performance audit of IBH compliance with the MSA and each of the four (4) subordinate WOCs through which IBH provides services to each licensing board. Specifically, the objectives included whether:

- IBH (a) met required minimal success rate standards as defined in the MSA (Exhibit A, 5. Program Performance Criteria); (b) provided invoices and reports that are accurate and supported by substantiating documentation; and (c) based reported results and invoices on sound and appropriate calculation methods.
- IBH and each licensing board complied with the WOCs (Scope of Work, including MSA § 3.2, and Exhibit A-1 Board Modifications to Exhibit A) established by each Board.

To meet the audit's objectives, we performed the following audit evaluation procedures:

- Interviewed management and staff at each of the four (4) licensing boards to gain an understanding of HPSP program requirements, roles and responsibilities, expectations of IBH, and practices in place to oversee and manage the contract.
- Interviewed IBH management and staff to gain an understanding of processes, internal controls, systems, and tools in place to administer the HPSP program and fulfill MSA and WOCs requirements; this included practices to oversee participating Licensees, conduct and report the results of required surveys, invoice the Boards, and prepare and submit management and performance reports.
- Conducted a comprehensive review of the MSA as well as the four (4) WOCs, and identified all performance and deliverable obligations of IBH, including any Board specific provisions and required minimal success rate standards (or "benchmarks") as defined in Exhibit A, 5. Program Performance Criteria.
- Selected a sample of 48 monthly invoices and examined all relevant underlying support to determine whether invoices were mathematically accurate, amounts and services invoiced were allowable per the MSA and WOCs, and information reported were accurate and reliable; this included verifying performance reported tied to underlying documentation and determining whether penalties were accurately calculated and assessed when established targets and requirements were not met.
- Selected a sample of weekly, monthly, quarterly, bi-annual, and annual reports submitted by IBH to the Boards in Fiscal Years 2017-18, 2018-19, and 2019-20 to ensure required information and elements were reported, reports were submitted timely, and amounts reported tied to underlying supporting documents.

Audit fieldwork was performed between July and October 2020. On November 18, 2020, a draft of this report was provided to IBH management for review and discussion and an Exit Conference was held on December 22, 2020. Responses and feedback provided by IBH management were considered and incorporated where applicable in the final report. IBH management generally agreed with the findings

and recommendations presented in this report and provided a written response to the report, which is incorporated as Appendix A of this report.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

## Audit Findings

Overall, this audit found that IBH materially complied with its contract with the Boards. With relatively few exceptions, IBH submitted to the Boards invoices and reports that were accurate and supported by substantiating documentation; reported results and invoices were based on sound and appropriate calculation methods; and IBH generally met required minimal success rate standards as defined in the MSA and complied with many relevant provisions of the respective WOCs. However, this audit also revealed instances of minor mis-calculations in reporting one (1) performance metric and several instances where IBH could not demonstrate it met certain contract provisions, particularly those related to outreach and training; quality assurance program requirements; and reporting requirements. Because of this, IBH did not provide the full level of service as described in the contract and, in one case, compensation to IBH could have been reduced as a result. The remainder of this report describes each of these conclusions in more detail.

### Amounts Invoiced Adhered to Contract Payment Provisions

A review of all six (6) program fees calculated every six (6) months during the audit period found that the Boards and IBH appropriately calculated and distributed the fee amongst the Boards in compliance with MSA fee calculation provisions, as shown in Exhibit 7. In addition, our review of invoices submitted by IBH to the Boards for 12 sample months (48 invoices total) found that amounts invoiced complied with contract payment provisions.

**EXHIBIT 7. PROGRAM FEE CALCULATION AND MONTHLY INVOICE TESTING RESULTS**

Invoice Period	Monthly Program Fee	Annual Program Fee Correctly Calculated?	Months Reviewed	Number of Invoices Reviewed	Amounts Invoiced Accurate and in Compliance with MSA?
July - December 2017	\$91,505	Yes	2	8	Yes
January - June 2018	\$91,505	Yes	2	8	Yes
July - December 2018	\$91,505	Yes	2	8	Yes
January - June 2019	\$91,687	Yes	2	8	Yes
July - December 2019	\$91,505	Yes	2	8	Yes
January - June 2020	\$92,192	Yes	2	8	Yes

Source: Auditor-generated based on review of invoices submitted by IBH to the Boards and Medical Board documentation supporting program fee calculations.

### IBH Employed Sound Controls Over Licensee Monitoring

Each licensing board serves different constituencies and Licensees in different healthcare professions serving different populations. To enable each Board to impose monitoring requirements that each finds necessary to best protect the public from their respective Licensees who may be unable to practice safely due to substance abuse and/or mental health disorders, the MSA establishes subordinate WOCs between each licensing board and IBH that define these unique monitoring requirements. As described previously,

this includes case monitoring, workplace monitoring and reporting, and random toxicology testing. For instance, some of the specialized monitoring requirements imposed by the licensing boards include:

- The Medical Board, Board of Pharmacy, and Board of Dentistry all require a minimum of 36 toxicology tests for a Licensee's first year, 24 the subsequent, and 18 for the remaining years in HPSP.
- The Medical Board requires Licensees who must go to Consultation Group Meetings to have an attendance rate of 90 percent.
- Board of Dentistry requires Licensees to be enrolled in HPSP for a minimum of five years.

Our review of IBH's protocols for establishing Licensees in HPSP showed that once a Licensee is enrolled, IBH's staff create an account for the Licensee with their toxicology contractor in order for the Licensee to receive their first toxicology test within ten days of enrollment. The Licensee must have their first meeting with the Agreement Monitor within five days of enrollment. For the duration of their time enrolled in HPSP, Licensees will meet regularly with their Agreement Monitor and call the IVR line Monday-Saturday for a toxicology-testing notification.

While WOC-specific requirements are not measured or reported as part of the Quality Assessment and Performance Improvement Program (QAPIP), we evaluated IBH's processes for establishing individual monitoring agreements and selected a sample of 10 Licensee records to assess the manner in which IBH implemented the agreements. Overall, we found that IBH's practices for monitoring Licensees is generally compliant with the MSA and subordinate WOCs. All 10 Licensees received the appropriate number of toxicology tests and were enrolled in HPSP for the necessary duration, with the exception of two (2) Licensees who left the Program early due to suspension.

While this audit found that IBH met toxicology testing requirements set forth in the MSA and WOCs, we found that its reporting on case monitoring activities did not always adhere to contractual requirements. As mentioned previously, Licensee monitoring agreements and the MSA § 2.11.2.b require Licensees to communicate with their Agreement Monitor at least once a month through voice-to-voice contact. The frequency of Licensee's compliance with this requirement is reported monthly to the Boards through their performance measures. As discussed later in this report, our review of 12 of the 36 reporting periods identified five (5) instances of inconsistencies in IBH's calculation and reporting of this requirement. This included instances in which IBH included voicemail and e-mail communications, along with voice-to-voice, in their monthly performance reporting. In addition, the Medical Board requires licensees attend Consultation Group Meetings with an attendance rate of 90 percent, our review found that IBH had a process in place to schedule and to track Consultation Group Meeting attendance.

## **IBH Could Not Demonstrate that it Provided All Required Educational Materials and Outreach Presentations**

The MSA requires IBH to provide outreach presentations to Licensees and training materials to third-party evaluators, consultants, treatment providers, and Licensee supervisors (workplace monitors). In addition, the Boards issued a written waiver that expanded the audience for outreach presentations to include



students. The purpose of this outreach is, in part, to provide education and information to Licensee employers and other stakeholders, such as students, regarding the signs and symptoms of relapse, including but not limited to, regional seminars and educational programs (MSA 2.8.5). Below, we describe outreach- and training-related requirements and our assessment of IBH's compliance. We found that IBH generally did not meet established outreach and education requirements set forth in the MSA.

## Outreach Presentations

The MSA § 11.1 requires IBH to conduct a minimum of one (1) outreach presentation per month and at least 12 outreach presentations per year throughout the term of the contract; to provide a minimum of two (2) outreach presentations per region per year; to obtain pre-approval of the presentation materials by the Program Advisory Committee at least one (1) week prior to the presentation; and to retain signed attendance sheets for a minimum of two (2) years following the presentation. On a quarterly basis, as described later in this report, IBH must “provide a list of outreach presentations conducted including location, time, and number of participants to the Program Advisory Committee” (MSA § 11.1.c).

- ✓ Minimum Outreach Presentations: To assess whether IBH conducted at least one (1) outreach presentation per month as required by the MSA § 11.1.a, we requested a list of outreach presentations conducted for five sample months. Our review found that for two (2) of the five (5) months sampled IBH did not conduct at least one (1) outreach presentation, as required. We also found that in other months during the audit period, IBH provided more than the minimum required outreach. For example, in May 2018 IBH conducted three (3) outreach presentations.

While the contract does not specifically state the purpose or intent of this outreach, it appears that the purpose is threefold: (a) to ensure Licensees, as well as their peers and their supervisors, are aware of the HPSP and are informed regarding its purpose and potential benefits; (b) to inform Licensees, their peers, and supervisors of the signs and symptoms of mental health disorders and/or substance abuse; and (c) to ensure health professional students are informed of available programs and issues they may face in the workplace. In this respect, the minimum outreach requirements contained in the MSA are important to ensuring the success of the HPSP in protecting the public from Licensees who are unable to practice safely due to substance abuse and/or mental health disorders.

According to IBH, although the contract required one (1) outreach presentation per month, this requirement was interpreted to mean an average of one (1) outreach presentation per month.

- ✓ Quarterly List of Outreach Presentation Provided to the Program Advisory Committee: As discussed later in this report, our review of four (4) quarters found that IBH did not provide any written lists of outreach presentations to the Program Advisory Committee. To assess whether IBH verbally discussed outreach presentations and presented the required information we reviewed meeting minutes for the quarters sampled. Our review found that for two (2) of the four (4) sampled quarters there was no discussion of outreach presentations in the meeting minutes. For the remaining two (2) quarters, the meeting minutes indicated that outreach presentations were discussed; however, it was unclear if all required information, including the location, time, and



number of participants, was discussed based on the meeting minutes alone. It does not appear IBH consistently meets this requirement as defined in MSA § 11.1.c.

While IBH provided an internal tracking log of outreach presentations conducted between July 1, 2017 and June 25, 2018, the list provided did not always include the location, time, and number of participants, as required by the MSA. We also found no indication that this list was provided to the Boards, as required.

- ✓ Pre-Approval of Presentation Content: According to IBH, the Boards pre-approved the outreach content prior to the execution of the MSA. While IBH provided documentation demonstrating pre-approval of one presentation and indicated the presentation slides were used as a basis for developing future presentation content, it was unclear whether presentation materials had changed over the years and no subsequent pre-approvals were provided. Regardless, the Program Advisory Committee does not pre-approve presentation content in writing at least one (1) week prior to the presentation as required by MSA § 11.1.d.

The Program Advisory Committee pre-approval is an important control established in the MSA as it provides the Boards with an opportunity to review current outreach material and assess whether materials are relevant to the current environment, whether gaps exist in presentation materials, and whether modifications are necessary. As the Program and environment in which the Program is operating change over the years, and as gaps in stakeholder understanding of the Program become evident, it becomes increasingly important to ensure presentation content remains relevant.

- ✓ Outreach Presentation Attendance List: Although MSA § 11.1.f requires IBH to ensure each presentation has an attendance sign in sheet, provided by location or by Contractor, and requires IBH to maintain a copy of attendance sign-in sheets for two (2) years, IBH was unable to provide sign-in sheets for the seven (7) presentations sampled. According to IBH, the requirement for sign-in sheets was deemed unnecessary by the Program Advisory Committee prior to the MSA. While we found no documentation that the Boards agreed to amend the contract or to no longer require the retention of sign-in sheets, the absence of sign-in sheets makes it difficult to verify whether scheduled presentations actually occurred and to assess the coverage actually achieved through IBH's outreach efforts.

The purpose of the HPSP is to protect the public from Licensees who are unable to practice safely due to their diagnosis, and self-referral is an important aspect of the Program for most licensing boards, allowing Licensees that recognize a potential problem and the potential assistance the HPSP may offer to participate in the Program. As noted earlier, these requirements were designed as an essential element of the Program by informing employers and other stakeholders regarding the signs and symptoms of relapse and help to ensure Licensees enrolled in the program adhere to program requirements. Any shortage in outreach or training could undermine the effectiveness of the Program, and could increase the risk that stakeholders and workplace monitors may not recognize the signs and symptoms of relapse and could potentially impact the safety and quality of care provided.

## Training Materials

For Licensee supervisors and workplace monitors, IBH must provide orientation, educational, and training materials. Minimum educational and/or training standards and requirements for supervisor and workplace monitor skills and knowledge that can be used by employers to ensure effective supervision of Licensees in work settings must be established (MSA § 2.8.4). This training must be pre-approved by the Program Advisory Committee and available in both electronic and physical format. There must also be online training materials for workplace monitors.

According to IBH, workplace monitors receive training on their first phone call with the Licensee's Agreement Monitor. During the initial call, the Agreement Monitor informs the workplace monitor of the requirements. IBH has a list of assessment questions that covers the potential workplace monitor's relationship with the Licensee, any potential conflicts of interest, and the notifying and reporting responsibilities of a workplace monitor. Additionally, the monthly report that the workplace monitor submits to IBH serves as a monthly reminder of the responsibilities and requirements of a workplace monitor.

While this is generally a sound practice and appears compliant with the MSA and WOCs, IBH could not provide evidence that all trainings were pre-approved by the Program Advisory Committee or that it made trainings for all licensing boards available online, as required. IBH indicated that the Program Advisory Committee waived the requirement for the other licensing boards to have online training materials during the July 2017 committee meeting; however, a review of the meeting minutes only indicated that the "Board of Nursing training [will be] updated on IBH website" and did not indicate that the requirement was waived for the other three Boards.

## IBH Met Most Quality Assessment and Performance Improvement Program Requirements, but Opportunities for Improvement Remain

The MSA requires IBH to evaluate and maintain an effective, on-going, data-driven QAPIP that includes ensuring staff, subcontractors, and other service providers meet health profession standards necessary for credentialing. In addition to retaining qualified staff, IBH must maintain, update, and implement formal QAPIP policies and procedures; obtain stakeholder and Licensee input and feedback; maintain minimum levels of staffing; and measure and evaluate service levels in accordance with established benchmarks. Our conclusions regarding IBH's performance with respect to each of these requirements is presented below.

### Policies and Procedures

IBH must maintain and update a fully-implemented QAPIP policies and procedures manual, and ensure that all of their staff, subcontractors, and other service providers are trained on the QAPIP. According to IBH, the QAPIP policies and procedures are published on IBH's website as HPSP's guidelines. These 31 guidelines cover many topics related to IBH, such as guidelines for hair testing, confidentiality and record release, criminal background checks, and medical director responsibility for case review. In addition, IBH developed a number of internal policies and procedures to guide its operations, including checklist and written processes for non-compliance reporting.

## Stakeholder and Licensee Feedback

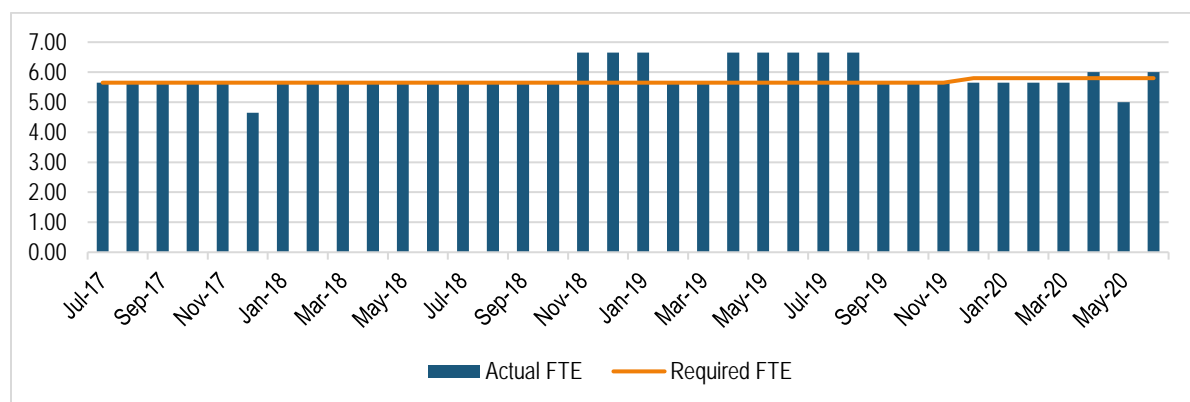
IBH must ensure stakeholders are given routine opportunities to provide feedback to IBH's administration of HPSP, and communicate that feedback to the Boards. IBH accomplishes this in two ways: feedback forms and regular surveys. Beginning in 2017, each of the Boards has a complaint and feedback form for HPSP accessible on their website. The Board of Dentistry and Board of Pharmacy allow for feedback through an online browser survey form, while the Board of Nursing and Medical Board both utilize the same feedback form that Licensees must download and fax or mail to their respective licensing board.

The MSA requires IBH to also send surveys to Licensees participating in HPSP, Licensees who have successfully completed HPSP, and HPSP stakeholders. Licensees, according to the MSA, must be sent surveys every quarter. However, IBH only sends surveys bi-annually, referencing an informal decision made by the Program Advisory Committee that changed the requirement from quarterly to twice per year. According to IBH, this change from quarterly to bi-annual surveys occurred in 2012 because generally low response rates from survey participants resulted in relatively little to report on a quarterly basis. This would have occurred during the term of the prior contract—between IBH and the Oregon Health Authority—preceding the current MSA. While it is possible that this requirement was a remnant of the prior contract and that it was not the intent of the Boards to require quarterly surveys, we were unable to substantiate this. If the Boards have indeed changed this contractual requirement, we recommend memorializing the decision in a formal committee resolution or contract amendment. IBH meets the exit-interview and stakeholder satisfaction survey content requirements.

## Staff Levels

The QAPIP must have a policy to retain sufficient Agreement Monitor staffing levels. Additionally, IBH compensation is tied to how many Licensees are enrolled in HPSP and how many Agreement Monitors must be employed. During the 36 months of the audit period, IBH only had six (6) months where they did not meet the required FTE, or about 17 percent of the time. According to IBH, in the six (6) months where the requirement was not met, they were actively recruiting to hire additional Agreement Monitors to comply with the minimum contractual requirement. In the months that IBH did not have the required FTE, the Boards were paying for costs that IBH at the time was not incurring. The contract does not include provisions for liquidated damages or penalties if this provision is not met.

**EXHIBIT 8. AGREEMENT MONITORS FULL-TIME EQUIVALENT STAFFING LEVELS: REQUIRED VS. ACTUAL**



Source: Auditor generated based on FTE reported by IBH

## IBH Generally Met Performance Requirements

We reviewed and validated all 16 performance benchmarks for 12 of the 36 months, or one-third of the monthly performance reports between July 2017 and June 2020 submitted by IBH. As discussed earlier, IBH submits monthly performance reports that report IBH's actual performance for the reporting month, and average performance over time. Penalties and damages are evaluated based on either the actual performance for the month or the average performance over the period specified dependent on the benchmark metric. Generally, we were able to validate all data that IBH reported to the Boards, and any discrepancies noted were still within the margin of IBH meeting the minimum performance required, as shown in Exhibit 9.

### EXHIBIT 9: PERFORMANCE BENCHMARK SAMPLE TESTING RESULTS

Contract Requirement	July 2017 <sup>1</sup>	Oct 2017 <sup>1</sup>	Dec 2017	Feb 2018 <sup>1</sup>	June 2018	July 2018	Dec 2018	March 2019	June 2019	Aug 2019	Dec 2019	June 2020
Benchmark 1. §2.2.2	N/A	N/A	×	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 2. § 2.2.3	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 3. § 2.4.3	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 4. § 2.11.2.a	N/A	N/A	✓	N/A	✓ <sup>3</sup>	✓	✓	✓	✓	✓	✓	✓
Benchmark 5. § 2.11.2.b	N/A	N/A	✓	N/A <sup>2</sup>	✓	✓	✓	✓ <sup>2</sup>	✓ <sup>2</sup>	✓ <sup>2</sup>	✓ <sup>2</sup>	✓
Benchmark 6. § 2.12.2	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 7. § 1213.1.a	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 8. § 1213.1.b	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 9. § 1213.1.c	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 10. § 1213.1.e	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 11. § 2.17.1.a	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 12. § 2.17.2	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 13. § 3.2.c	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 14. § 4.5	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 15. § 4.7	N/A	N/A	✓	N/A	✓	✓	✓	✓	✓	✓	✓	✓
Benchmark 16. § 10.4	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Source: Auditor-generated based on review of sample of monthly reports and supporting performance data.

Note (1): During the first year of the contract, performance was to be evaluated every six (6) months (December 2017 and June 2018). Following the first year, the performance was to be evaluated monthly based on a rolling year average.

(2) Amount reported in monthly report did not agree with underlying support.

(3) Amount reported in monthly invoice was lower than the performance requirement; missed monthly performance was waived by the Medical Board.

Key: ✓ = requirement was met, × = requirement was not met, N/A = not applicable

IBH did not meet one (1) of the performance measures during the first six-month period of the contract. The MSA requires 100% of Licensees to be enrolled on the same day a Licensee signs the last consent form (MSA § 2.2.2); in July 2017, IBH only enrolled three (3) of four (4) Licensees (75 percent) by the day of their last consent form. When the performance was averaged in December 2017, IBH reported that the requirement was not met, with 26 of the 27 Licensees enrolled (96.3 percent). If the Boards had determined to assess penalties, management would have needed to send a letter to IBH listing the performance requirements missed by IBH. The Boards never reached out to IBH to recover penalties.

The largest variation we observed was the calculation of Licensee compliance with Agreement Monitor check-ins. The performance measurement requires at least 85 percent of Licensees have voice-to-voice contact with their Agreement Monitor (MSA § 2.11.2.b). When reporting in the months February 2018, March 2019, June 2019, August 2019, and December 2019, we found that the performance IBH submitted was incorrectly calculated. For four (4) of the months, IBH included contact that cannot be considered voice-to-voice, such as voicemail or e-mail communication. In the other month, the calculation appears to be an arithmetic issue, where IBH incorrectly counted the number of Licensees who reported weekly. Despite these errors, we found that IBH still performed within the performance criteria—in many cases actual performance was better than performance reported.

## **While IBH Met Many of the Reporting and Deliverable Requirements Established in the MSA, It Did Not Meet Several Requirements**

The MSA requires five (5) separate reporting intervals and reporting requirements for IBH to meet. As described previously, IBH is required to submit weekly, monthly, quarterly, bi-annual, and annual reports, each of which is designed to demonstrate compliance with key performance requirements set forth in the MSA and to help ensure quality program service delivery. To assess whether IBH met reporting requirements, including required information and timelines where applicable, we requested support for each reporting requirement for sample periods over the audit period. While our review found that while IBH met many of the reporting requirements, we noted instances where some required reports were not submitted or submitted timely and/or required information was not reported as required. Below, we present the results of our review of IBH's compliance with each of the five reporting intervals and requirements for periods sampled.

### **Weekly Reporting Requirements**

The contract requires IBH to submit a weekly report to the Boards, by 5:00 p.m. each Thursday. The weekly report must include the number of Licensees enrolled in HPSP, including the number of Licensee that are Board-referred and self-referred, and a breakdown of Licensees enrolled in HPSP by Board, including the number of Licensees Board-referred and self-referred. Our review of six (6) weekly reports submitted during the audit period, found that all six (6) reports were submitted by the deadline and contained the required information, as shown in Exhibit 10. In addition, although not required in the MSA, in all six (6) weekly reports selected for review, IBH reported the number of licensees with compliant and non-compliant status as of the time of the report.

**EXHIBIT 10. WEEKLY REPORTING REQUIREMENTS SAMPLE TESTING RESULTS**

Reporting Requirement	Fiscal Year 2017-2018		Fiscal Year 2018-2019		Fiscal Year 2019-2020	
	December 21, 2017	June 7, 2018	July 19, 2018	March 28, 2019	August 8, 2019	June 4, 2020
<b>List of Self-Referred and Board Licensees by Health Board</b>						
Reported Submitted Timely?	Yes	Yes	Yes	Yes	Yes	Yes
Required Information Included?	Yes	Yes	Yes	Yes	Yes	Yes

Source: Auditor-generated based on review of a sample of weekly reported submitted by IBH.

**Monthly Reporting Requirements**

Each month, IBH is required to report its compliance with the 16 Program Performance Criteria established in the MSA (as shown in Exhibit 4 in the Program Overview MSA § of this report) and the following five (5) enrollment statistics:

- Number of Licensees referred to HPSP during the month, including each Licensees referral source, health profession, and Oregon county of residence, or if living in a different state, the state
- Number of Licensees IBH enrolled during the month, including each Licensee's referral source, health profession, and state geographic region
- Number and percentage of Licensees who are in compliance with their monitoring agreements for the subject month
- Number and percentage of Licensees, by Board, who received substantial non-compliance (as defined by Oregon Statute)
- Number of Licensees who successfully completed the Contractor's monitoring program during the month

IBH includes this information as an attachment to the monthly invoices it submits to each Board by the 15<sup>th</sup> of each month. As shown in Exhibit 11, our review of six (6) sampled monthly reports over the audit period found that while IBH submitted the reports on-time, the monthly reports submitted did not always include all required enrollment statistics.

# EXHIBIT 11. MONTHLY REPORTING CONTRACT COMPLIANCE

Reporting Requirement	Fiscal Year 2017-2018		Fiscal Year 2018-2019		Fiscal Year 2019-2020	
	July 2017 Medical Board	February 2018 Nursing Board	December 2018 Pharmacy Board	March 2019 Dental Board	August 2019 Medical Board	June 2020 Board of Nursing
<b>Enrollment Figures</b>						
Reported Submitted on Time?	Yes	Yes	Yes	Yes	Yes	Yes
Required Information Included?	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>
<b>Performance Benchmarking</b>						
Reported Submitted on Time?	Yes	Yes	Yes	Yes	Yes	Yes
Required Information Included?	Yes	Yes	Yes	Yes	Yes	Yes

Source: Auditor-generated based on review of monthly reports submitted by IBH.

Note: (1) Monthly report was missing three (3) required data elements required by MSA § 7.2.d, 7.2.e, and 7.2.b.3

Specifically, the monthly reports were all missing the following three (3) required data elements:

- ✓ Number and Percentage of Licensees in Compliance with Monitoring Agreements (MSA § 7.2.d): IBH is required to report the number and percentage of Licensees who are in compliance with Monitoring Agreements for the month. While the percentage of Licensees who were in compliance with their monitoring agreement was not reported in the monthly report, our review of weekly reports found that IBH reported the number of Licensees who were in compliance with their Monitoring Agreements in all six (6) weekly reports sampled.
- ✓ Number and Percentage of Licensees with Substantial Non-Compliance Reports (MSA § 7.2.e): IBH is required to report the number and percentage of Licensees who received substantial non-compliance reports during the month. IBH reports the number of substantially non-compliant (and compliant) Licensees on the weekly reports. On the monthly report, IBH instead reports the number of substantial non-compliance reports submitted to each Board that month.
- ✓ Licensee Geographical Location (MSA § 7.2.b.3): IBH is required to report the numbers of Licensees enrolled by geographic region or number of Licensees referred to HPSP by county of residence.

According to IBH, the monthly invoice and report were submitted in the format specified by each of the WOCs. Specifically, the individual WOCs include a monthly invoice and reporting template which does not include the three (3) missing enrollment statistics in the template although required by the MSA. In this case, the MSA and WOCs are in conflict.



## Quarterly Reports

The MSA requires IBH to report to the Program Advisory Committee on all outreach activities on a quarterly basis, and to perform and report on the results of quarterly Licensee satisfaction surveys. Specifically, MSA § 11.1.c requires IBH to provide a list of outreach presentations conducted including location, time, and number of participants to the Program Advisory Committee quarterly and MSA § 4.8 requires IBH to send quarterly satisfaction surveys to Licensees participating HPSP. As shown in Exhibit 12, our review of four (4) quarters sampled found that IBH did not meet at least one (1) reporting requirement in each of the four (4) quarters reviewed.

**EXHIBIT 12. QUARTERLY REPORTING REQUIREMENTS COMPLIANCE**

	Fiscal Year 2017-2018		Fiscal Year 2018-2019	Fiscal Year 2019-2020
	Q1	Q4	Q3	Q3
<b>List of Outreach Presentations</b>				
Required Information Included?	Yes	No <sup>2</sup>	Yes	No <sup>2</sup>
Written List of Outreach Conducted Provided to Program Advisory Committee?	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>	No <sup>1</sup>
<b>Licensee Satisfaction Surveys</b>				
Reported Submitted on Time?	No <sup>2</sup>	Yes	No <sup>2</sup>	No <sup>2</sup>
Survey Conducted During Quarter?	No <sup>2</sup>	No <sup>2</sup>	No <sup>2</sup>	No <sup>2</sup>

Source: Auditor-generated based on review of reports submitted by IBH and Program Advisory Committee meeting minutes.

Notes: (1) IBH did not provide a list of outreach events; meeting minutes did not include a discussion of outreach conducted.

(2) IBH conducted licensee survey and reported licensee survey results bi-annually with other bi-annual survey results.

To determine IBH's compliance with the outreach presentation reporting requirement, we selected four (4) of the 12 quarters between July 1, 2017 through June 30, 2020 to assess compliance. IBH did not provide a written list of outreach presentations conducted with the required information for any of the quarters reviewed. To assess whether IBH verbally reported this information, we reviewed the Program Advisory Committee meeting minutes for the sampled quarters. For two (2) of the four (4) quarters sampled we saw evidence that information on outreach conducted was presented; however, we could not confirm whether all required information was presented based on the minutes provided. For the remaining two (2) quarters sampled, there was no indication in the meeting minutes that outreach conducted by IBH was discussed.

As noted previously, although the MSA also requires quarterly licensee satisfaction surveys, IBH indicated that these are conducted bi-annually and that the Boards agreed that sending the surveys quarterly was excessive and informally agreed to adjust the licensee satisfaction surveys to bi-annually; however, this informal agreement was not documented and the MSA was not amended. According to IBH, this



agreement was made prior to the execution of the current MSA; however, the requirement was not adjusted in the executed contract.

## Bi-Annual Reporting Requirements

IBH is required to conduct licensee exit surveys (MSA § 4.7 and 7.3) and stakeholder satisfaction surveys (MSA § 4.9 and 7.3). The stakeholder satisfaction surveys include surveys of professional health associations, other employers, independent third-party evaluators and treatment providers, and participating Boards. Our review of all six (6) bi-annual periods over the audit period, found that while IBH generally conducted all required surveys, the summary of survey finding results were not submitted to the Boards timely and, for two (2) periods, the exit-interview results were reported to the Boards annually instead of bi-annually, as required by the MSA. The results of this assessment are depicted in Exhibit 13.

**EXHIBIT 13. BI-ANNUAL REPORTING REQUIREMENTS COMPLIANCE**

Reporting Requirement	Fiscal Year 2017-2018		Fiscal Year 2018-2019		Fiscal Year 2019-2020	
	July-December	January-June	July-December	January-June	July-December	January-June
<b>Stakeholder Survey</b>						
Reported Submitted on Time?	No, submitted January 31, 2018	No, submitted July 31, 2018	No, submitted January 31, 2019	No, submitted July 31, 2019	No, submitted January 31, 2020	No, submitted July 31, 2020
Required Information Included?	Yes	Yes	Yes	Yes	yes	Yes
<b>Exit-Interview Survey</b>						
Reported Submitted on Time?	No, submitted January 31, 2018	No, submitted July 31, 2018	No, report submitted July 31, 2019	No, submitted July 31, 2019	No, report submitted July 31, 2020	No, submitted July 31, 2020
Required Information Included?	Yes	Yes	No, report submitted annually	Yes	No, report submitted annually	Yes

Source: Auditor-generated based on review of survey reports submitted by IBH during the audit period.

Specifically, MSA § 7.3 requires IBH submit the results of the two (2) surveys within 30 days preceding June 30 or December 31 of each year. Our review found that the survey results were submitted 30 days succeeding the dates specified in the MSA. According to IBH, IBH sends the surveys to participants and stakeholders at the end of December and June each year and reports survey results to the Boards at the end of January and July.

In addition, although IBH reported the results of the Licensee exit-interview bi-annually during Fiscal Year 2017-2018, in the two subsequent fiscal years IBH only submitted the survey results to the Boards annually. Licensees who successfully complete HPSP are required to be sent an exit-interview within three (3) months of their completion (MSA § 4.7). This requirement was evaluated as part of our review of the performance measurement and benchmarks. IBH met the timeliness requirement for sending exit-interviews each month sampled; however, IBH did not synthesize these results and report them to the

Boards as frequently as the MSA requires. According to IBH, in 2018 the Program Advisory Committee informally agreed that the exit survey results should be reviewed by the Program Advisory Committee each January and formally presented by IBH to the Boards and Program Advisory Committee each July. This informal agreement was referenced in an e-mail sent on January 31, 2019 from IBH to the Boards.

## Annual Reports

The MSA has one (1) annual reporting requirement for a financial report. Specifically, MSA § 7.4 requires IBH submit financial reports annually that include summaries of Program-related revenues, expenses, and profit percentages for each HPSP service during the year. According to IBH, this requirement was waived during the contract negotiation process; however, neither the Medical Board (the contract manager) nor IBH provided documentation demonstrating the provision was formally waived and the reporting provision was included in the executed MSA. In the monthly reports submitted by IBH, IBH noted that it interprets the “Annual Financial Report” requirement to mean annual utilization reports. Nevertheless, the contract was never amended to reflect this interpretation and the requirement to submit financial reports remained in the contract throughout the entire audit period.

In addition, although not required by the MSA, IBH submits an annual utilization report which provides a summary of aggregate data from HPSP for the year, including HPSP Agreement Monitor check-ins that took place in person, termination reasons, noncompliance instances and reasons, and non-negative toxicology tests. To assess the accuracy and reliability of information reported in the annual utilization report, we traced information reported in three (3) of the 15 figures back to underlying support for the 2019-2020 Annual Report. As shown in Exhibit 14, our review found that information reported by IBH in the three (3) figures reviewed agreed with underlying support.

**EXHIBIT 14. DATA VERIFICATION OF TABLES PROVIDED IN ANNUAL PERFORMANCE REPORT FOR 2019-2020**

Figure	Data Reported Tied to Underlying Data?
Figure 12: Drugs resulting in positive tests	Yes
Figure 13: Missed Test Details	Yes
Figure 15: Workplace Safe Practice Reports	Yes

Source: Auditor-generated based on review of annual report and underlying source data.

Based on our review of each of the reporting requirements set forth in the MSA, we found that, if utilized, the information contained in the reports would be sufficient to ensure appropriate oversight of IBH's performance and the quality of the services provided. However, as noted earlier, we found multiple instances where information required by the Board was either not provided at all or not within the timeframes specified in the contract. At the same time, we found that the same or similar information was reported quite frequently in various required reports, and thus could be considered redundant. This suggests that there may be opportunities to streamline and improve upon the existing reporting structure by reducing redundancies and removing elements that the Boards no longer find useful.

## Opportunities Exist to Better Clarify Contract Language and Expectations

In reviewing IBH's compliance with contract provisions and reporting requirements over the three-year audit period, we noted multiple instances where IBH indicated contract provisions were informally waived either before or after the MSA was executed. Yet, contract provisions and reporting requirements remained in the MSA and were never formally amended. In addition, we noted instances where contract provisions were either unclear or did not align with current practices. In both scenarios, IBH was not complying with all provisions and reporting requirements established in the contract and the Boards were not actively enforcing certain contract requirements. Below we provide a brief overview of several areas that are discussed throughout this report where the Boards should assess whether the current contract provisions and requirements accurately reflect the Boards' expectations of IBH, or whether provisions should be formally amended.

- ✓ Deadlines for Submitting Stakeholder Surveys and Summaries of Licensee Exit Interviews: MSA § 7.3 of the MSA required IBH to "prepare and submit written stakeholder survey and the summary of findings from the Licensee exit interviews within thirty (30) days preceding June 30 and December 31 of each year during the term of this Contract. Contractor shall submit stakeholder surveys in a format acceptable to Board." According to IBH, although this requirement states the survey and results be submitted 30 days *preceding* June 30 and December 31, in practice the summary of findings have been reported 30 days *succeeding* June 30 and December 31. As discussed in the previous section of this report, IBH consistently submitted the results of each survey after the deadlines established in the contract and the Boards did not enforce the deadlines outlined in the MSA. If the Boards agree with the current practice for submitting required surveys, the deadlines in the contract should be formally updated to align with current practice.
- ✓ Frequency of Required Surveys: As discussed earlier in this report, IBH shifted from conducting quarterly licensee satisfaction surveys to conducting these surveys bi-annually, although the contract requirements were never formally amended. According to IBH survey participation rates have been declining over the audit period. Exhibit 15 shows the participation rates for the Licensee and Stakeholder survey responses from Fiscal Years 2017-2018 through 2019-2020. The Licensee response rate declined nearly 8 percent, from 24.6 percent in Fiscal Year 2017-2018 to 16.8 percent in Fiscal Year 2019-2020. If the Boards agree with conducting surveys less frequently, the Boards should formally memorialize this expectation through a contract amendment.

EXHIBIT 15. SURVEY RESPONSE RATES BY GROUP FROM 2017-2018 THROUGH 2019-2020

Fiscal Year	Licensees Response Rate	Workplace Monitor Response Rate	Providers Response Rate <sup>1</sup>	Health Associations Response Rate
2017-2018	24.6%	14.3%	26.9%	12.5%
2018-2019	20.1%	12.4%	14.8%	20%
2019-2020	16.8%	18.1%	19.6%	0%

Source: Auditor-generated from Survey Response Reports provided by IBH.

Notes: (1) Includes GGMC, PMC, and third-party evaluators.

- ✓ Annual Financial Report Requirement: As discussed earlier in this report, the contract requires IBH to submit an annual financial report detailing program expenses, revenues, and profit margins; however, this requirement has never been enforced. Although IBH indicated that this requirement was removed during the contract negotiation process, the requirement remains in the executed agreement and the Boards are not actively enforcing this requirement. If the Boards do not expect IBH to submit an annual financial report, the MSA should be formally amended to eliminate this requirement. However, if this information is valuable to the Boards to assess the cost of the Program and expectations related to profit margins the Boards should enforce the contract provision and ensure IBH submits the annual financial report.
- ✓ Annual Utilization Report: Although not required by the MSA, IBH submits an annual utilization report to the Board's detailing HPSP program activities and outputs. The Boards should consider incorporating this report, the required statistics, and a deadline for submission into the MSA to better ensure IBH is providing the Boards with desired information and expectations are consistently met.
- ✓ Outreach and Education Requirements: As discussed earlier in this report, IBH could not demonstrate that it was meeting all of the outreach and education requirements established in the contract and, in many cases, indicated that the Boards informally waived certain requirements and provisions. If the Boards intended to waive these requirements, the MSA should be formally amended to reflect the agreed upon changes; however, if it is the intent that IBH provide these services and adhere to contract provisions, the Boards should work with IBH to ensure required outreach and training provisions are met.
- ✓ Monthly Invoice and Reporting Template: The monthly invoice and reporting template included in the individual WOCs does not include three (3) required enrollment statistics. If the Boards want IBH to include this information in its monthly invoices and reports, it should consider updating the template and ensure IBH provides all required information.
- ✓ Administrative Costs: Although not specifically required in the MSA, IBH indicated that during the contract negotiation process the Boards established a maximum percent of program costs that could be related to administrative overhead costs. As a result, IBH applies and reports a split of the monthly program fee between service delivery costs and administrative costs. If it was the Boards intent to cap the amount fees that could be charged for administrative overhead costs, the Boards should consider working with IBH to incorporate this requirement into the contract and require IBH to report actual service delivery costs and administrative cost instead of an arbitrary percent allocation.

## Recommendations

While this audit found IBH to be generally compliant with the MSA and subordinate WOCs, with few exceptions, this report does present several opportunities for improvement. In order to better ensure compliance with all contract requirements and to enhance overall service delivery, we recommend that the Boards:

- 1) Ensure accuracy in reporting performance statistics by requiring IBH to adopt consistent methodologies when calculating the success rates against performance benchmarks. This includes calculating the success rate of Licensee voice-to-voice contact with Agreement Monitors, ensuring that IBH only include true voice-to-voice communication, not e-mail or voicemail, when reporting performance results against benchmark requirements.
- 2) Provide all required educational materials and outreach efforts. In doing so, we recommend that this include creating a formal training manual for potential workplace monitors, with MSA sections covering responsibilities as a workplace monitor, signs and symptoms of relapse, and any provisions specific to each licensing board; and publish this training manual on IBH's HPSP website for reference by workplace monitors.
- 3) Ensure adequate FTE levels for each year's pricing tier; consideration should be given to the inclusion of FTE levels in the required benchmark reporting and penalty structure.
- 4) Review the MSA and WOCs provisions and requirements noted throughout this report where either current practice does not align with contract provisions or IBH indicated the Board informally waived or amended contract provision to assess whether the current contract accurately reflects the Board expectations and requirements for IBH. If the contract does not reflect current expectations and requirements, the Boards should work with IBH to formally amend the contract. However, if it's the Boards' intent that IBH follow the provisions outlined in the MSA, then the Boards should work with IBH to enforce contract provisions and requirements. Below are several of such MSA and WOC provisions:
  - a. Outreach Presentations:
    - i. Meeting minimum outreach requirements established in the MSA § 11.1.a.
    - ii. Providing lists of outreach presentations with the location, time, and number of participants to the Program Advisory Committee quarterly as required by MSA § 11.1.c.
    - iii. Submitting outreach presentation content to the Program Advisory Committee at least one (1) week prior to the presentation for pre-approval are required by MSA § 11.1.d.
    - iv. Retaining sign-in sheets for all outreach events as the primary method for substantiating outreach efforts and reach.
  - b. Training (MSA § 2.8):
    - i. Pre-approval of trainings by the Program Advisory Committee.
    - ii. Online training for workplace monitors of the Medical Board, Board of Pharmacy, and the Board of Dentistry, in addition to the Board of Nursing.
  - c. Monthly Reports, including the number and percentage of licensees in compliance with their monitoring agreement, the percentage of licensees with substantial noncompliance reports, and the geographic location of referred and enrolled licensees. If the Boards feel it

is inappropriate to report on the geographic location of referred and enrolled licensees, amend the contract accordingly.

- d. Deadline for submission of the bi-annual survey findings reports.
- e. The frequency and deadlines for conducting surveys and submitting surveys results to the Boards and Program Advisory Committee (MSA §4,8, 7.3, and 7.4).
- f. Submission of annual financial reports and use this information to evaluate the cost-effectiveness of the MSA and the existing compensation structure.
- g. Submission of the Annual Utilization Report, including the submission deadline and content of the report.
- h. Administrative overhead costs, including potential caps, reporting requirements, and the calculation of service delivery and overhead costs.

## Appendix A: Integrated Behavioral Health Solutions' Response

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Integrated Behavioral Health Solutions' January 12, 2021, response to the audit recommendations is presented on the following page.

**Response to Performance Audit of the HPSP  
as Completed by Sjoberg Evashenk Consulting, Inc.  
Completed December 2020**

IBH appreciates the opportunity to have an objective look at our delivery of services for the Health Professionals' Services Program (HPSP.) We are pleased to see in the audit a reflection of the strength and importance of the program we provide to the Oregon Health Boards and the licensees. We do take seriously the few deficiencies found in our performance and will work quickly to rectify these moving forward. We propose the following action plan:

1. **Calculation of success rate of licensee voice-to-voice contact:** IBH Monitoring will revise the search criteria used to calculate the success rate in order to ensure accurate and consistent reporting. This will be put into place for the December 2020 report (submitted in early January 2021.)
2. **Workplace Monitors:** IBH Monitoring will develop a formal document for potential (and current) workplace monitors that provides background information on HPSP, reviews the role of the Workplace Monitor and explores the signs/symptoms of relapse. This document would be provided to the Advisory Committee for feedback. Once finalized, it will be posted to our website, provided to all current Workplace Monitors and be provided as part of the onboarding process moving forward. Special consideration will be taken of the existing OSBN training during the development of this document.
3. **Staffing:** Ideally, IBH will retain all our existing staff members as they are of the highest quality and well-trained. Despite employing strong retention strategies, however change is inevitable. As such, IBH will partner with our HR department to develop options for more quickly filling any Agreement Monitor staffing gaps moving forward. We will look at borrowing appropriately credentialed staff from other departments, using staff from a temp agency to provide relief to our existing monitors and of course using the most effective hiring strategies.
4. **Outreach:** IBH will increase our efforts to provide outreach as required by the contract and will provide a list at each Program Advisory Committee meeting. We request that this be a standing agenda item for each meeting.
5. **Contract clarifications:** IBH looks forward to a conversation with the boards regarding amending the contract to address the discrepancies between the contract and the informal agreements that have governed practice for the last 3.5 years. Agenda items should include:
  - a. Outreach Presentations (Audit report page 28, #5a iii. And #5a iv) *Discussion points should include if the Program Advisory Committee wants sign-in sheets for all outreach events and wants to pre-approve each presentation. Further, we should document that there need to be 12 presentations per year, an **average**, of 1 per month and the previously agreed upon intended audiences (e.g. associations, societies) and modes of outreach that can be used for outreach (e.g. articles, papers)*
  - b. Content of monthly reports (Audit report 28, #5c)
  - c. Frequency of satisfaction surveys and timing of reports (Audit report page 29, #5d and 5e)
  - d. Annual reporting expectation (Audit report page 29, #5f and 5g)



## **CODA Publishes its 2020 Annual Report**

The Commission on Dental Accreditation has published the 2020 edition of the *CODA Annual Report*, written for the Commission's broad community of interest.

Click the button below to download and read the most recent PDF. You can also access the Report by visiting the Commission's website at [ada.org/en/coda](http://ada.org/en/coda) and clicking on Accreditation > About Us > Annual Report.

At its Annual Meeting in Honolulu in October 2018, the American Dental Association's (ADA) House of Delegates adopted Resolution 39H, a governance change related to the submission of an annual report for the Commission on Dental Accreditation (CODA). The ADA was also informed that there will be a new item, named "Annual Report," under Article VII - MISCELLANEOUS of the Commission's Rules. This Report is published in accordance with these changes.

**Included in the 2020 edition is a special article which highlights the ongoing response of the Commission and Commission staff to the Coronavirus Pandemic.**

Please feel free to contact [CODA Staff](#) for further information on of the topics in the report. We hope you find this issue of the *CODA Annual Report* to be informative and helpful!

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# Annual Report 2020

The report of the Commission on Dental Accreditation

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**CODA**★

*Commission on Dental Accreditation*

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This publication may be reprinted in its entirety, without additions, edits or deletions, for educational purposes only.

*The Commission's mission, vision and values were adopted August 5, 2016 in accordance with the development of the 2017-2021 Strategic Plan.*

# MISSION

The Commission on Dental Accreditation serves the public and profession by developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs.

# VISION

The Commission on Dental Accreditation is a globally recognized leader for accrediting educational programs in the dental professions.

# VALUES

The Commission is committed to:

***Integrity:*** The quality of being honest, accountable, and principled.

***Collegiality:*** Working respectfully and collaboratively toward a common purpose.

***Transparency:*** Being open about the process by which accreditation standards and policies are developed and implemented.

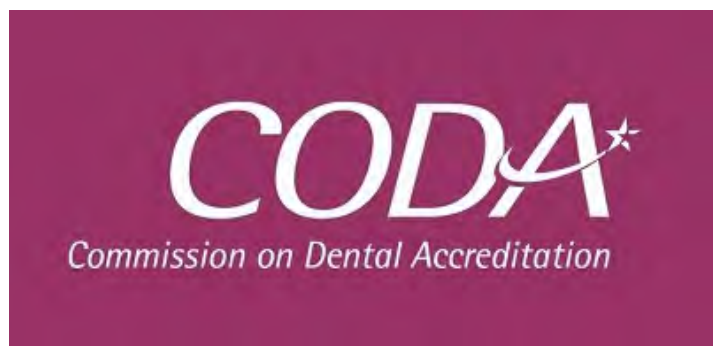
***Consistency:*** Fairness, objectivity, and the reliability of outcomes.

# Introduction

## Who We Are

From 1937 to 1974, prior to the formation of the Commission on Dental Accreditation (CODA), the American Dental Association's Council on Dental Education (now known as the Council on Dental Education and Licensure) served as the accrediting agency for dental and dental-related education programs. In 1973, the House of Delegates of the American Dental Association approved the establishment of a Commission on Accreditation of Dental and Dental Auxiliary Educational Programs. The Commission began operating in 1975, and in 1979 this body's name was officially changed to the Commission on Dental Accreditation.

Since 1952, the Commission on Dental Accreditation, and its predecessor, has been recognized by the Secretary of the [United States Department of Education \(USDE\)](#) as the sole agency to accredit dental and dental-related education programs conducted at the post-secondary level. CODA's mission is to serve the public and profession by developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs. The general public and communities of interest have direct access to many important resources through CODA's [website](#). The Commission also makes available to the public its [Meeting Agenda and Materials](#) in an effort to demonstrate transparency to its communities of interest. Additionally, updated information about CODA's activities is available by reviewing information in [Accreditation Updates](#).



The Commission on Dental Accreditation accredits dental education programs, advanced dental education programs and allied dental education programs in the United States. The Commission also accredits fully-operational international dental education programs. The Commission functions independently and autonomously in all matters of developing and approving accreditation standards, making accreditation decisions on educational programs and developing and approving procedures that are used in the accreditation process. It is structured to include an appropriate representation of the communities of interest.

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# Commission Structure

## Site Visit Teams

The foundation of the accreditation process is the site visit, and the primary role of the Site Visit Team is to gather and evaluate data and facts. Members on each team can include those with expertise in biomedical sciences, clinical sciences, curriculum, finance, or national licensure. To maintain accreditation, programs self-assess their compliance with CODA's accreditation standards and provide CODA with documented evidence through the Self-Study process. CODA's site visitors review such materials, visit programs to evaluate process, interview faculty and students/residents, tour facilities, and more in order to assess a program's compliance with CODA standards. The site visit team then clearly and comprehensively reports on its findings to the Review Committees and Commission.

## Review Committees

Review Committees meet twice per year, two to three weeks before each Commission Meeting, to review reports submitted by Site Visit teams as well as programmatic reports and requests, and to discuss policy and procedures related to the committee's discipline. As of this publication, there are fourteen (14) Review Committees, each focused on one or more disciplines within dental education. These committees review and discuss the reports submitted by site visit teams and educational programs, and make recommendations to the Commission. The Review Committees also consider policy, some new and some annual recurring policy, which is applicable to the discipline. Note that the Review Committees do **not** make final accreditation or policy decisions – they instead make recommendations to the Commission, which then considers these recommendations at its Winter and Summer Meetings. In this regard, Review Committees are advisory to the Commission.

## Commission on Dental Accreditation

The Commission on Dental Accreditation makes the final decision to grant, continue or withdraw an accreditation status to a dental education program. The Commission bases its decision on the program's compliance with the Accreditation Standards and Commission Policies. In this regard, the Commission continuously evaluates and monitors educational programs for compliance with the Accreditation Standards. The Commission also ensures Standards reflect the evolving practice of dentistry by formulating and adopting requirements and guidelines for the accreditation of dental, advanced dental, and allied dental education programs under its purview. The Commission seeks input from all of its

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## Composition of CODA Board of Commissioners

Organization	Appointments
American Dental Association (dental practitioners)	4
American Association of Dental Boards (licensure community)	4
American Dental Education Association (dental educators)	4
American Dental Education Association, Special Care Dentistry Association, American Society of Dentist Anesthesiologists, American Academy of Oral Medicine, American Academy of Orofacial Pain (joint appointment)	1
American Academy of Oral and Maxillofacial Pathology, American Academy of Oral and Maxillofacial Radiology, American Academy of Pediatric Dentistry, American Academy of Periodontology, American Association of Endodontists, American Association of Oral and Maxillofacial Surgeons, American Association of Orthodontists, American Association of Public Health Dentistry, American College of Prosthodontists (1 each)	9
American Dental Assistants Association (dental assistants)	1
American Dental Hygienists' Association (dental hygienists)	1
National Association of Dental Laboratories (dental laboratory technicians)	1
Public (consumers/public)	4
Student (American Dental Education Association, American Student Dental Association, joint appointment)	1
TOTAL	30

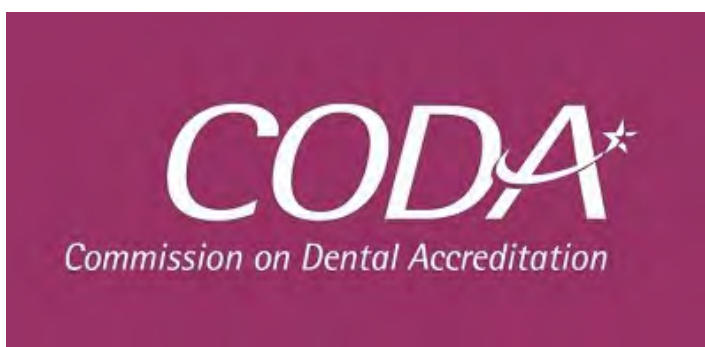
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broad communities of interest related to the development and periodic revision of Accreditation Standards, thus ensuring the Standards remain current and define the quality of dental education. CODA maintains continuous contact with those important communities through various mechanisms. The Commission also establishes policies and procedures to guide the evaluation and decision making process to ensure fairness, consistency, and appropriate levels of due process.

## **Appeal Board**

The principal function of the Appeal Board is to hear and make judgments on withdrawal of accreditation or denial of accreditation, at the request of an educational program or institution. The Appeal Board will determine whether the Commission on Dental Accreditation, in arriving at a decision regarding the withdrawal or denial of accreditation for a given program, has properly applied the facts presented to it. In addition, the Commission's Rules stipulate that the Appeal Board shall provide the educational program filing the appeal the opportunity to be represented by legal counsel and shall give the program the opportunity to offer evidence and argument in writing and/or orally to try to refute or overcome the findings and decision of the Commission. The Appeal Board is an autonomous body, separate from the Commission. Appeal Board members are selected in accordance with the Rules of the Commission on Dental Accreditation.



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# The Year in Numbers

## 2020 January: Number of CODA-Accredited Programs

Discipline	Number of Programs	Approval without Reporting	Approval with Reporting*	Initial Accreditation	Approval without Reporting (teach-out)	Approval with Reporting (teach-out)	Initial Accreditation (teach-out)
Predoctoral	67	60	5	2	0	0	0
Predoctoral International	1	1	0	0	0	0	0
Dental Assisting	241	220	20	1	0	0	0
Dental Hygiene	325	303	17	4	0	1	0
Dental Laboratory Technology	14	13	0	0	1	0	0
Dental Therapy	0	0	0	0	0	0	0
Advanced Education in General Dentistry	93	84	5	4	0	0	0
General Practice Residency	179	173	4	2	0	0	0
Orofacial Pain	12	11	0	1	0	0	0
Dental Anesthesiology	8	7	0	1	0	0	0
Oral Medicine	6	6	0	0	0	0	0
Oral and Maxillofacial Surgery (and clinical fellowships)	114	106	5	3	0	0	0
Orthodontics and Dentofacial Orthopedics (and clinical fellowships)	73	73	0	0	0	0	0
Endodontics	55	52	2	0	1	0	0
Periodontics	56	53	2	1	0	0	0
Pediatric Dentistry	81	79	0	2	0	0	0
Prosthodontics (all, including MxPros and combined programs)	55	54	0	1	0	0	0
Oral and Maxillofacial Radiology	9	9	0	0	0	0	0
Oral and Maxillofacial Pathology	15	14	0	1	0	0	0
Dental Public Health	14	14	0	0	0	0	0
Ortho/Periodontics	1	1	0	0	0	0	0
<b>TOTAL</b>	<b>1419</b>	<b>1333</b>	<b>60</b>	<b>23</b>	<b>2</b>	<b>1</b>	<b>0</b>

\*Includes programs on "Approval with Reporting Requirements," with "intent to withdraw" and "required period of non-enrollment" statuses.

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# The Year in Numbers

## 2020 August: Number of CODA-Accredited Programs

Discipline	Number of Programs	Approval without Reporting	Approval with Reporting*	Initial Accreditation	Approval without Reporting (teach-out)	Approval with Reporting (teach-out)	Initial Accreditation (teach-out)
Predoctoral	67	63	2	2	0	0	0
Predoctoral International	1	1	0	0	0	0	0
Dental Assisting	240	230	8	1	1	0	0
Dental Hygiene	325	312	7	5	1	0	0
Dental Laboratory Technology	14	11	2	0	1	0	0
Dental Therapy	1	0	1	0	0	0	0
Advanced Education in General Dentistry	93	88	1	4	0	0	0
General Practice Residency	179	175	2	2	0	0	0
Orofacial Pain	12	11	0	1	0	0	0
Dental Anesthesiology	8	7	0	1	0	0	0
Oral Medicine	6	6	0	0	0	0	0
Oral and Maxillofacial Surgery (and clinical fellowships)	112	108	1	3	0	0	0
Orthodontics and Dentofacial Orthopedics (and clinical fellowships)	73	73	0	0	0	0	0
Endodontics	55	53	1	1	0	0	0
Periodontics	56	54	1	1	0	0	0
Pediatric Dentistry	81	78	1	2	0	0	0
Prosthodontics (all, including MxPros and combined programs)	55	54	0	1	0	0	0
Oral and Maxillofacial Radiology	9	9	0	0	0	0	0
Oral and Maxillofacial Pathology	15	14	0	1	0	0	0
Dental Public Health	14	14	0	0	0	0	0
Ortho/Periodontics	1	1	0	0	0	0	0
<b>TOTAL</b>	<b>1417</b>	<b>1362</b>	<b>27</b>	<b>25</b>	<b>3</b>	<b>0</b>	<b>0</b>

\*Includes programs on "Approval with Reporting Requirements," with "intent to withdraw" and "required period of non-enrollment" statuses.

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# Total Enrollment in Dental Education Programs

Dental Education Area	2018-19 Total Enrollment	2019-20 Total Enrollment
Predoctoral	25,381	26,856*
Advanced Education	7,318	7,355
Dental Hygiene	16,134	16,178
Dental Assisting	6,222	5,912
Dental Laboratory Technology	465	463
<b>All Programs</b>	<b>55,520</b>	<b>56,764</b>

\*Includes 1,049 students at King Abdulaziz University in Saudi Arabia, surveyed for the first time this year.

You will find current Enrollment and other data on the [Program Surveys page](#) of the CODA website. Updates will be made to this page as available.

## Programs, Volunteers, and Staff

- **1,417** CODA-accredited education programs in approximately 800 institutions
- More than **600** Volunteer Commissioners, Site Visitors and Review Committee Members
- **Eight** Professional Staff
- **One** Coordinator of Operations
- **Two** Site Visit Coordinators
- **Four** Support Staff

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# The Coronavirus Pandemic

*“Welcome. The meeting host will let you in soon.”*

At the start of 2020, we could not have predicted we would begin all our business meetings by seeing that phrase on our computer screens.

When CODA staff provided Commission members with a brief demonstration of Zoom Meetings in January, the assumption was the tool would be used occasionally, when the opportunity arose to reduce travel time and expense.

The opportunity to save time and money, however, turned into a requirement to protect safety and well-being against the rapidly-spreading Coronavirus pandemic.



Through the year, we were advised to stay at home, wash our hands, and wear a mask. Case rates rose and fell repeatedly in every state. Dental education programs had to manage periods of interruption of education, while trying to balance and retain the quality of educational offerings.

Faced with such an ever-changing situation, Review Committees met virtually to process thousands of reports from CODA-accredited programs related to their response to the pandemic and their work to maintain the quality and efficacy of their educational programs. The Commission itself conducted official meetings virtually, taking many accreditation actions and making many policy decisions via videoconference, including but certainly not limited to:

- Directing that all 2020 site visits be canceled and moved forward by one year (regular visits);

- Delaying special focused and application visits;
- Issuing temporary flexibility for the Class of 2020, including temporary use of distance education;
- Directing the development of an electronic system to accept applications for accreditation and other types of program reports;
- Directing that Hearings on Standards be conducted virtually at CODA’s discretion;
- Issuing temporary flexibility for the Class of 2021;
- Directing that the Winter 2021 Commission meetings be virtual;
- Directing that CODA pursue alternative site visit methods, as needed to employ in 2021, and
- Directing the establishment of an Ad Hoc Committee to investigate and develop policies and procedures for alternative site visit methods, with a report for consideration by CODA in Winter 2021

Based on these virtual discussions, CODA published more than 15 Official Statements and CODA Alerts, and more than 40 Guidance Documents, Reports, Updates, Webinars and more during the pandemic, covering Temporary Flexibility in Accreditation Standards, Interruption of Education, Directives related to Site Visits, and more.

Additionally, this has been a learning opportunity for the Commission, which continues to embrace new and innovative methods of managing its operations during this pandemic. While site visits after mid-March 2020 were cancelled, the work of the Commission did not cease. Staff members began working remotely in the middle of March and, as of this publication, continue to do so. In support of its mission, the Commission has hosted multiple meetings and delivered many documents remotely:

- More than 50 virtual Review Committee meetings
- Five virtual Commission meetings
- Five virtual webinars (with a grand total of almost 1,500 attendees)
- Four virtual public Hearings on Standards (with a grand total of more than 1,200 attendees)

# The Coronavirus Pandemic

- Digital versions of all Coronavirus-related announcements and guidance document
- Two days of virtual site visitor training
- Countless presentations to various audiences to provide updates
- Virtual Commission, Appeal Board, and Review Committee Member Orientations

Through the work of the Commission, staff was directed to deliver more than 1,400 digital accreditation letters after the Commission's July 9 and October 13 special meetings.

The year ahead presents many unknowns. Will the Commission be able to conduct in-person site visits? Will circumstances surrounding COVID-19 add additional impact to education between now and next Spring?

Although it is challenging to predict what will happen in 2021, we do know that the Commission's 2021 Winter Meeting in February will be conducted virtually. Additionally, the Commission has directed that all programs submit a report on interruption of education for the Class of 2021 by March 19, 2021.

However, one thing is certain: Commission members and CODA staff are committed to the Commission's mission of developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs, no matter what may come.

*"Thank you for participating in this session."*



## *During 2020, Commission members and Staff completed:*

- ◇ *More than 50 virtual Review Committee meetings*
- ◇ *Five virtual Commission meetings*
- ◇ *Five virtual webinars (with a grand total of almost 1,500 attendees)*
- ◇ *Four virtual public Hearings on Standards (with a grand total of more than 1,200 attendees)*
- ◇ *Digital versions of all Coronavirus-related announcements and guidance document*
- ◇ *Two days of virtual site visitor training*
- ◇ *Countless presentations to various audiences to provide updates*
- ◇ *Virtual Commission, Appeal Board, and Review Committee Member Orientations*

# 2020 Highlights

## Finances

For 2021, the Commission:

- Adopted a 0% increase in annual accreditation fees for all domestic disciplines
- Maintained International fees
- Rescinded the Policy on CODA Research and Development Fund (R&D Fund) and the Policy on Operating Reserve Fund, adopting the proposed new Policy on CODA Administrative Fund
- Per the above policy, renamed the R&D Fee to “CODA Administrative Fund” and increased the per program fee from \$35 to \$100. At a subsequent meeting, the Commission directed that in 2021 the annual \$100 per program Administrative Fund fee be waived for all Commission-accredited dental and dental related education programs.

Find more details on the CODA website’s [Fees page](#).

## New Policy on Preparation and Submission of Documents to the Commission

CODA adopted a new Policy on Preparation and Submission of Documents, to be updated in the CODA [Evaluation and Operational Policies and Procedures Manual](#). The Commission also took action to rescind the Policy on Electronic Submission of Accreditation Materials, the Policy and Procedure Related to Compliance with the Health Insurance Portability and Accountability Act (HIPAA) and the Policy on Preparation and Submission of Reports to the Commission, removing these policies from the Commission’s EOPP and in all appropriate Commission documents, effective immediately, as they have been subsumed within the Commission’s new policy.

## CODA Begins Development of Web-Based Public Comment Submission Process for Proposed Accreditation Standards Revisions

The Commission has directed CODA staff to develop a web-based submission process to collect public comments on proposed revisions to Accreditation Standards. Electronic comment tools are becoming a common trend. Plus, the collection of comments via an online comment portal provides more consistency in the comment collection process versus collection by email or U.S. Mail. Through this online channel, housed within the CODA website, the Commission’s Communities of Interest will submit comments on proposed revisions to Accreditation Standards during a period of public comment. As noted in other Commission publications, CODA may also consider the methods by which Hearings on Standards are conducted, given the online comment opportunity and the changing methods by which meetings may occur in the future. Stay tuned to this and other CODA publications for updates.

# 2020 Highlights

## Submission of Petition for Re-recognition to the United States Department of Education

The Commission was informed by the United States Department of Education (USDE) that the re-recognition process will start in Fall 2020, beginning with the Commission's petition for re-recognition. Instead of a focused review, as was the case during the prior re-recognition, the USDE has asked all agencies undergoing review under the updated criteria for recognition to respond to all applicable criteria in their petitions. In mid-September 2020, Commission staff submitted CODA's petition to the USDE. As it reviews the Commission's petition, the USDE will send a representative to attend various Commission meetings and training sessions as an observer.

## Ad Hoc Committees and their Progress

In 2019 and 2020, the Commission established the three Ad Hoc Committees referenced below. CODA will review ongoing reports from all three of these committees at the 2021 Winter and Summer Commission meetings.

**Ad Hoc Committee on Review Committee and Commission Structure and Function:** At its Summer 2019 meeting, the Commission considered the report of the Standing Committee on Quality Assurance and Strategic Planning (QASP) related to a request that was received by the Commission to develop a separate Review Committee for dental anesthesiology. Recognizing that as dental education and practice continue to evolve, the Commission believed it should review its current Review Committee and Commission structure and composition, along with appropriate policies, including the potential development of new policies to assess the need for a change in CODA's structure and how a change in structure would be implemented.

Therefore, the Commission directed the formation of an ad hoc committee of Commission members to further study this matter. At its Summer 2020 Meeting, the Commission directed that a request from The American Academy of Oral Medicine that CODA establish an Oral Medicine Review Committee be reviewed by this ad hoc committee. The Ad Hoc Committee will continue its work, with a report to the Commission in Winter 2021.

**Ad Hoc Committee on Educational Activity Sites:** At its Summer 2019 meeting, the Commission directed the formal study of the use of sites where educational activity occurs (domestic and international) for all programs under its purview, with a report on progress in Winter 2020 and culmination of the study through a Commission-only Mega Issue Discussion in Summer 2020. The Mega Issue Discussion, however, was canceled as a result of the COVID-19 interruption. The Ad Hoc Committee will continue its work, with a report to the Commission in Winter 2021.

# 2020 Highlights

**Ad Hoc Committee on Alternative Site Visit Methods:** At its Summer 2020 Meeting, the Commission directed the appointment of an Ad Hoc Committee to study virtual site visits, including development of policies and procedures for the conduct of virtual visits, for consideration by the Commission in Winter 2021. The Ad Hoc Committee will submit a report to the Commission in Winter 2021.

## Revision of CODA Rules

At its Winter 2020 Meeting, the Commission made multiple changes to its Rules to better align with CODA's governance oversight, including revisions to its Composition, Powers, Duties, Vacancies, Officers, and other sections of its Rules. The revisions are provided on the Commission's website in the "[January 2020 Changes to Evaluation and Operational Policies and Procedures](#)."

## First CODA-Accredited Dental Therapy Program

At its August 6, 2020 Closed Session, the Commission on Dental Accreditation granted an accreditation status to a Dental Therapy education program.

The program, sponsored by Ilisagvik College, Utqiagvik (Barrow), Alaska, was granted the status of "[approval with reporting requirements](#)," the first time a Dental Therapy education program has received accreditation from the Commission. Students who are enrolled in the program at the time accreditation is granted (August 6, 2020), and who successfully complete the program, will be considered graduates of a CODA-accredited program. Students who graduated from the program prior to the granting of accreditation will not be considered graduates of a CODA-accredited program.

The Commission on Dental Accreditation's mission is to serve the public and profession by developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs. The scope of dental therapy practice and licensure authority resides within the jurisdiction of each state licensing agency.

## Validity and Reliability Studies

Validity and Reliability Studies to occur in 2021 include the Accreditation Standards for Dental Education Programs and the Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Pathology – both delayed from 2020 – as well as the Accreditation Standards for Advanced Dental Education Programs in Dental Anes-



# 2020 Highlights

thesiology. The Commission's Policy on Assessing the Validity and Reliability of the Accreditation Standards states that the Commission believes that a minimum time span should elapse between the adoption of new standards or implementation of standards that have undergone a comprehensive revision and the assessment of validity and reliability of these standards. When considering a comprehensive revision to standards, the validity and reliability of those standards will be assessed after they have been in effect for a period of time equal to the minimum academic length of the accredited program plus three years. For example, the minimum academic length of a predoctoral dental education program is four years; so, a validity and reliability study of the Accreditation Standards for Dental Education Programs would be initiated once the Standards had been in effect for seven years. When the Commission revises policies or standards, it provides programs and the public with advance notice and a schedule for implementation.

## Annual Call for Review Committee Nominations

The Commission on Dental Accreditation accepts nominations each year for volunteer Review Committee member and Site Visitor positions.

The mission of CODA is to serve the public and profession by developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs. Accreditation is a peer-reviewed process, and CODA volunteers are an integral part of that process. The Commission provides comprehensive training to all its volunteers, so each will be ready to serve when their term begins. In addition, CODA staff is available for support throughout the process.

The Commission takes into account a balance in geographic distribution as well as representation of the various types of educational settings and diversity, including underrepresented groups. Board certification and experience requirements may apply.

The typical work of a Review Committee member includes the following:

- Review and become familiar with the CODA accreditation process, and participate in training at CODA headquarters.
- Review policy matters, site visit reports, progress reports and other reports on accredited or developing educational programs, which are submitted to the Commission for final action.

# 2020 Highlights

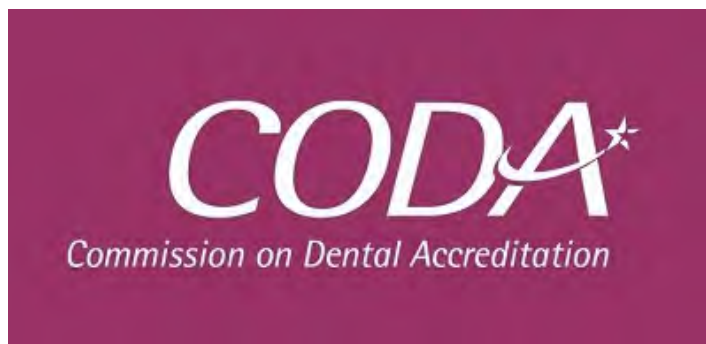
- Communicate by fax, electronic mail and the Commission's web-based communication tools.

Time commitment can vary depending on committee assignment; however, CODA asks that you are willing to commit ten (10) to twenty (20) days per year to Review Committee activities.

The typical work of a Site Visitor includes the following:

- Attend training, conduct comprehensive review of print and electronically delivered materials and travel to Commission headquarters to learn and understand the requirements and guidelines for the accreditation of dental, advanced dental or allied dental educational programs.
- Objectively review materials which programs submit as evidence of the program's compliance with accreditation requirements.
- Visit educational programs to evaluate process, interview faculty and students/residents, view facilities, and more in order to assess the program's compliance with CODA standards.
- Develop reports on findings through review of the program's materials and on-site.
- Time commitment can vary; however, site visits are typically 1-4 days in length and require approximately 10+ hours of preparation. You may be asked to serve on at least 1 or more visits per year.

Nominating yourself or a peer is very straightforward. For a list of upcoming vacancies, the nomination criteria and nomination forms, as well as deadlines for nominations in each category, visit [www.ada.org/en/coda/accreditation/accreditation-news/call-for-nominations](http://www.ada.org/en/coda/accreditation/accreditation-news/call-for-nominations), and then follow the instructions on that page.



# Accreditation Actions at the Winter and Summer 2020 Meetings

In 2020, the Commission reviewed accreditation reports and took **677 accreditation actions** on dental, advanced dental, and allied dental education programs and recorded **10 mail ballots** on dental assisting, dental hygiene, oral and maxillofacial surgery (residency), and general practice residency education programs. A total of **11 new programs** were granted accreditation:

Educational Program	Number
Craniofacial and Special Care Orthodontics	1
Dental Assisting	1
General Practice Residency	2
Oral and Maxillofacial Pathology	1
Oral and Maxillofacial Surgery Clinical Fellowship – Oncology	2
Predoctoral Dental Education	1
Advanced Dental Education in Endodontics	1
Dental Therapy Education	1
Dental Hygiene Education	1

The Commission affirmed the reported voluntary discontinuance effective date or planned closure date of the following education programs, at the request of their respective sponsoring institutions:

Educational Program	Number
Advanced Education in Dental Anesthesiology	1
Advanced Education in Dental Public Health	1
Dental Hygiene	3
Dental Assisting	4
Endodontics	2
Oral and Maxillofacial Surgery Clinical Fellowship – Oncology	1
Oral and Maxillofacial Surgery – Residency	1

# Standards Revisions at the Winter and Summer 2020 Meetings

The Commission adopted revisions to the following Accreditation Standards:

## January 2020

- Accreditation Standards for Advanced Dental Education Programs in Advanced Education in General Dentistry, General Practice Residency, Dental Anesthesiology, Dental Public Health, Oral and Maxillofacial Radiology, Oral Medicine, Orofacial Pain, and Prosthodontics, revision to the definition of “Should” within the Definition of Terms, with an immediate implementation.
- Accreditation Standards for Dental Assisting Education Programs, revision to the definition of “Should” and addition of the definition of “Dental Emergencies” within the Definition of Terms, and revision to Standards 2-11 and 3-7, with implementation date of July 1, 2020.
- Accreditation Standards for Advanced Dental Education Programs in Oral and Maxillofacial Surgery, revision to the definition of “Should” within the Definition of Terms, and revisions to Standard 4-3.2, with implementation date of July 1, 2020.
- Accreditation Standards for Advanced Dental Education Programs in Periodontics, revisions to Standard 4-12e, with implementation date of January 1, 2021.

## August 2020

- Accreditation Standards for Dental Education Programs, revision to Standard 2-24k, with an implementation date of July 1, 2022.
- Accreditation Standards for Advanced Dental Education Programs in Dental Public Health, revision to intent statement of Standard 4-1, with immediate implementation.
- Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry, with an implementation date of July 1, 2021.

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# Online Resources

The Commission's website, at [www.ada.org/en/coda](http://www.ada.org/en/coda), offers a wide variety of Commission reports, data, and valuable information:

- Accreditation Standards are available under the [Standards](#) tab
- Search for CODA-accredited programs on the [Find a Program](#) page
- Visit the [Call for Nominations](#) page to learn about and submit Review Committee Member and Site Visitor nominations
- To see schedules of Site Visits, go to the [Site Visit Process and Schedule](#) page
- Acquire a current copy of the [Policy & Procedure Manual](#) under the Policies/Guidelines tab

**For further information on topics in this Annual Report, please contact the Commission office.**



# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

I

## Appendix C to §1910.134 – OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

**To the employer:** Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

**To the employee:** Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

**Part A. Section 1. (Mandatory)** The following information must be provided by every employee who has been selected to use any type of respirator (please print).

1. Today's date: \_\_\_\_\_
2. Your name: \_\_\_\_\_
3. Your age (to nearest year): \_\_\_\_\_
4. Sex (circle one):    Male    /    Female
5. Your height: \_\_\_\_\_ ft. \_\_\_\_\_ in.
6. Your weight: \_\_\_\_\_ lbs.
7. Your job title: \_\_\_\_\_
8. A phone number where you can be reached by the health care professional who reviews this questionnaire (include the Area Code): (    ) \_\_\_\_\_
9. The best time to phone you at this number: \_\_\_\_\_
10. Has your employer told you how to contact the health care professional who will review this questionnaire (circle one): \_\_\_\_\_ Yes / No
11. Check the type of respirator you will use (you can check more than one category):
  - a. \_\_\_\_\_ N, R, or P disposable respirator (filter-mask, noncartridge type only).
  - b. \_\_\_\_\_ Other type (for example, half- or full-facepiece type, powered-air purifying, supplied-air, self-contained breathing apparatus).
12. Have you worn a respirator (circle one): \_\_\_\_\_ Yes / No  
If "yes," what type(s): \_\_\_\_\_  
\_\_\_\_\_

# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

Oregon Administrative Rules  
Oregon Occupational Safety  
and Health Division

**Part A. Section 2. (Mandatory)** Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you *currently* smoke tobacco, or have you smoked tobacco in the last month:  
Yes / No
2. Have you *ever had* any of the following conditions?
  - a. Seizures (fits): Yes / No
  - b. Diabetes (sugar disease): Yes / No
  - c. Allergic reactions that interfere with your breathing : Yes / No
  - d. Claustrophobia (fear of closed-in places): Yes / No
  - e. Trouble smelling odors : Yes / No
3. Have you *ever had* any of the following pulmonary or lung problems?
  - a. Asbestosis: Yes / No
  - b. Asthma: Yes / No
  - c. Chronic bronchitis: Yes / No
  - d. Emphysema: Yes / No
  - e. Pneumonia: Yes / No
  - f. Tuberculosis: Yes / No
  - g. Silicosis: Yes / No
  - h. Pneumothorax (collapsed lung): Yes / No
  - i. Lung cancer: Yes / No
  - j. Broken ribs: Yes / No
  - k. Any chest injuries or surgeries: Yes / No
  - l. Any other lung problem that you've been told about: Yes / No
4. Do you *currently* have any of the following symptoms of pulmonary or lung illness?
  - a. Shortness of breath: Yes / No
  - b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes / No
  - c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes / No
  - d. Have to stop for breath when walking at your own pace on level ground: Yes / No
  - e. Shortness of breath when washing or dressing yourself: Yes / No
  - f. Shortness of breath that interferes with your job: Yes / No
  - g. Coughing that produces phlegm (thick sputum): Yes / No
  - h. Coughing that wakes you early in the morning: Yes / No
  - i. Coughing that occurs mostly when you are lying down: Yes / No
  - j. Coughing up blood in the last month: Yes / No
  - k. Wheezing: Yes / No
  - l. Wheezing that interferes with your job: Yes / No
  - m. Chest pain when you breathe deeply: Yes / No
  - n. Any other symptoms that you think may be related to lung problems: Yes / No

# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

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5. Have you *ever had* any of the following cardiovascular or heart problems?
- |   |          |
|---|----------|
| a. Heart attack:  | Yes / No |
| b. Stroke:  | Yes / No |
| c. Angina:  | Yes / No |
| d. Heart failure:   | Yes / No |
| e. Swelling in your legs or feet (not caused by walking): | Yes / No |
| f. Heart arrhythmia (heart beating irregularly):          | Yes / No |
| g. High blood pressure:                                   | Yes / No |
| h. Any other heart problem that you've been told about:   | Yes / No |
6. Have you *ever had* any of the following cardiovascular or heart symptoms?
- |   |          |
|---|----------|
| a. Frequent pain or tightness in your chest:  | Yes / No |
| b. Pain or tightness in your chest during physical activity:                          | Yes / No |
| c. Pain or tightness in your chest that interferes with your job:                     | Yes / No |
| d. In the past 2 years, have you noticed your heart skipping or missing a beat:       | Yes / No |
| e. Heartburn or indigestion that is not related to eating:                            | Yes / No |
| f. Any other symptoms that you think may be related to heart or circulation problems: | Yes / No |
7. Do you *currently* take medication for any of the following problems?
- |                                |          |
|--------------------------------|----------|
| a. Breathing or lung problems: | Yes / No |
| b. Heart trouble:              | Yes / No |
| c. Blood pressure:             | Yes / No |
| d. Seizures (fits):            | Yes / No |
8. If you've used a respirator, have you *ever had* any of the following problems? (If you've never used a respirator, check the following space and go to question 9 \_\_\_\_:)
- |   |          |
|---|----------|
| a. Eye irritation:  | Yes / No |
| b. Skin allergies or rashes:  | Yes / No |
| c. Anxiety:   | Yes / No |
| d. General weakness or fatigue:                                     | Yes / No |
| e. Any other problem that interferes with your use of a respirator: | Yes / No |
9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes / No

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full-facepiece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you *ever lost* vision in either eye (temporarily or permanently): Yes / No



# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

Oregon Administrative Rules  
Oregon Occupational Safety  
and Health Division

11. Do you *currently* have any of the following vision problems?
- a. Wear contact lenses: Yes / No
  - b. Wear glasses: Yes / No
  - c. Color blind: Yes / No
  - d. Any other eye or vision problem: Yes / No
12. Have you *ever had* an injury to your ears, including a broken ear drum: Yes / No
13. Do you *currently* have any of the following hearing problems?
- a. Difficulty hearing: Yes / No
  - b. Wear a hearing aid: Yes / No
  - c. Any other hearing or ear problem: Yes / No
14. Have you *ever had* a back injury: Yes / No
15. Do you *currently* have any of the following musculoskeletal problems?
- a. Weakness in any of your arms, hands, legs, or feet: Yes / No
  - b. Back pain: Yes / No
  - c. Difficulty fully moving your arms and legs: Yes / No
  - d. Pain or stiffness when you lean forward or backward at the waist: Yes / No
  - e. Difficulty fully moving your head up or down: Yes / No
  - f. Difficulty fully moving your head side to side: Yes / No
  - g. Difficulty bending at your knees: Yes / No
  - h. Difficulty squatting to the ground: Yes / No
  - i. Climbing a flight of stairs or a ladder carrying more than 25 pounds: Yes / No
  - j. Any other muscle or skeletal problem that interferes with using a respirator: Yes / No

**Part B.** Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen: Yes / No
- If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes / No
2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals: Yes / No

If "yes," name the chemicals if you know them:

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# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

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3. Have you ever worked with any of the materials, or under any of the conditions, listed below:
- |   |          |
|---|----------|
| a. Asbestos:  | Yes / No |
| b. Silica (e.g., in sandblasting):                            | Yes / No |
| c. Tungsten/cobalt (e.g., grinding or welding this material): | Yes / No |
| d. Beryllium:   | Yes / No |
| e. Aluminum:  | Yes / No |
| f. Coal (for example, mining):                                | Yes / No |
| g. Iron:  | Yes / No |
| h. Tin:   | Yes / No |
| i. Dusty environments:  | Yes / No |
| j. Any other hazardous exposures:                             | Yes / No |

If "yes," describe these exposures:

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4. List any second jobs or side businesses you have:

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---

5. List your previous occupations:

---

---

6. List your current and previous hobbies:

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7. Have you been in the military services? Yes / No

If "yes," were you exposed to biological or chemical agents (either in training or combat): Yes / No

8. Have you ever worked on a HAZMAT team? Yes / No

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes / No

If "yes," name the medications if you know them:

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# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

Oregon Administrative Rules  
Oregon Occupational Safety  
and Health Division

10. Will you be using any of the following items with your respirator(s)?
- |  |          |
|--|----------|
| a. HEPA Filters:                       | Yes / No |
| b. Canisters (for example, gas masks): | Yes / No |
| c. Cartridges:                         | Yes / No |

11. How often are you expected to use the respirator(s) (circle "yes" or "no" for all answers that apply to you)?
- |  |          |
|--|----------|
| a. Escape only (no rescue):            | Yes / No |
| b. Emergency rescue only:              | Yes / No |
| c. Less than 5 hours <i>per week</i> : | Yes / No |
| d. Less than 2 hours <i>per day</i> :  | Yes / No |
| e. 2 to 4 hours <i>per day</i> :       | Yes / No |
| f. Over 4 hours <i>per day</i> :       | Yes / No |

12. During the period you are using the respirator(s), is your work effort:

- a. *Light* (less than 200 kcal per hour): Yes / No

If "yes," how long does this period last during the average shift:

\_\_\_\_\_ hrs. \_\_\_\_\_ mins.

Examples of a light work effort are *sitting* while writing, typing, drafting, or performing light assembly work; or *standing* while operating a drill press (1 to 3 pounds) or controlling machines.

- b. *Moderate* (200 to 350 kcal per hour): Yes / No

If "yes," how long does this period last during the average shift:

\_\_\_\_\_ hrs. \_\_\_\_\_ mins.

Examples of moderate work effort are *sitting* while nailing or filing; *driving* a truck or bus in urban traffic; *standing* while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 pounds) at trunk level; *walking* on a level surface about 2 mph or down a 5-degree grade about 3 mph; or *pushing* a wheelbarrow with a heavy load (about 100 pounds) on a level surface.

- c. *Heavy* (above 350 kcal per hour): Yes / No

If "yes," how long does this period last during the average shift:

\_\_\_\_\_ hrs. \_\_\_\_\_ mins.

Examples of heavy work are *lifting* a heavy load (about 50 pounds) from the floor to your waist or shoulder; *working* on a loading dock; *shoveling*; *standing* while bricklaying or chipping castings; *walking* up an 8-degree grade about 2 mph; *climbing* stairs with a heavy load (about 50 pounds).

# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

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13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: Yes / No

If "yes," describe this protective clothing and/or equipment:

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14. Will you be working under hot conditions (temperature exceeding 77 degrees F.): Yes / No

15. Will you be working under humid conditions: Yes / No

16. Describe the work you'll be doing while you're using your respirator(s):

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17. Describe any special or hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases):

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18. Provide the following information, if you know introductory text, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of the first toxic substance:

---

Estimated maximum exposure level per shift:

---

Duration of exposure per shift:

---

Name of the second toxic substance:

---

Estimated maximum exposure level per shift:

---

Duration of exposure per shift:

---

Name of the third toxic substance:

---

Estimated maximum exposure level per shift:

---

# OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE

Oregon Administrative Rules  
Oregon Occupational Safety  
and Health Division

Duration of exposure per shift:

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The name of any other toxic substances that you'll be exposed to while using your respirator:

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19. Describe any special responsibilities you'll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, security):
- 

**Stat. Auth.:** ORS 654.025(2) and 656.726(3).

**Stats. Implemented:** ORS 654.001 through 654.295.

**Hist:** OR-OSHA Admin. Order 3-1998, f. 7/7/98, ef. 7/7/98.

**From:** Kowalski Sarah E <[SARAH.E.KOWALSKI@dhsosha.state.or.us](mailto:SARAH.E.KOWALSKI@dhsosha.state.or.us)>  
**Sent:** Monday, February 8, 2021 12:08 PM  
**Subject:** Advisory Committee: Meeting Scheduled for June 14th, 2021

**Announcements:**

The next Advisory Committee meeting will occur virtually on June 14<sup>th</sup>, 2021 from 9am – 11:30am.

**Modification to Timeline:**

OHA has approved an extension to the timeline for Dental Pilot Project #100. The project is approved to operate under the Dental Pilot Project Program until May 31, 2022. OHA has instituted a process whereby Dental Pilot Projects may apply for an extension to their approved pilot project timeline, provided the project demonstrates sufficient need for additional time to evaluate the validity of the project. OHA will extend pilot projects in one-year increments.

**Quarterly Reports:**

The Q4 report has been attached as well as placed in the Dropbox.

Thank you,  
Sarah Kowalski

Sarah Kowalski, MS, RDH  
Operations & Policy Analyst 3  
Dental Pilot Project Program  
Oral Health Program  
The Oregon Health Authority  
800 NE Oregon Street  
Portland, Oregon 97232  
971-673-1563 (office)  
Website: [healthoregon.org/dpp](http://healthoregon.org/dpp)

## COVER SHEET

### DENTAL PILOT PROJECT PROGRAM

**QUARTERLY REPORTING PERIOD DUE DATE:** Quarterly reports are due one month following the closing of the quarter. E.g., Q4-2020 is due February 1, 2021.

Project Name & ID Number:	Oreogn Tribes Dental Health Aide Therapist Pilot Project, Dental Pilot Project #100
Indicate Date Span of Reporting Period and Quarter <ul style="list-style-type: none"><li>• January, February, and March (Q1)</li><li>• April, May, and June (Q2)</li><li>• July, August, and September (Q3)</li><li>• October, November, and December (Q4)</li></ul> (e.g., 10/1/2020-1/3/2021 (Q4))	October 1, 2020 - December 31, 2020  Quarter 4
Primary Contact Name and Title:	Christina Peters, Project Director
Telephone:	206-349-4364
Email Address:	<a href="mailto:Cpeters@npaihb.org">Cpeters@npaihb.org</a>
Individual Completing Form:	Pam Johnson
Submission Date:	2/1/2021

Send completed Quarterly Report and attachments in **one email**. Each page of an attachment must be labeled per the submission instructions, ie. LL1 in upper right hand corner. Attachments must be in PDF format unless indicated otherwise. Data must be submitted in OHA approved Excel document.

**Email to:** [sarah.e.kowalski@state.or.us](mailto:sarah.e.kowalski@state.or.us)

**DROPBOX:** Copies of all reports and data must also be placed into Dropbox by the required due date above.



## **Quarterly Progress Reporting Requirements: DPP #100**

All Dental Pilot Projects must submit **quarterly** progress reports throughout the duration of the project period. The report lengths and content vary depending on the pilot project. Such reports range from a brief summary to an exhaustive compilation of the project results.

The purpose of the quarterly progress reports is to update the OHA on the status of the Dental Pilot Project towards meeting the projects stated objectives as outlined in the approved Dental Pilot Project Application and the approved Evaluation & Monitoring Plan.

Initial progress reports will place emphasis on reporting activities. As the project progresses you will be reporting specific accomplishments. For example, describe major activities; significant results, major findings, developments, or conclusions (both positive and negative) and key outcomes or other achievements. Include a discussion of stated goals both met and not met. Provide information on specific program goals and their current status whether in-progress, completed etc. Address the progress made with reference to planned activities and milestones both achieved and delayed. Provide reasons and explanations for delays or changes and corrective action plans.

The Dental Pilot Project Program allows authorized organizations to test, demonstrate and evaluate new or expanded roles for oral healthcare professionals before changes in licensing laws are made by the Oregon State Legislature. The intent of the project is to prove quality of care provided, trainee competency and patient safety in addition to the larger goals of access to care, cost effectiveness and the efficacy of introducing a new workforce model.

**Instructions: The following information must be submitted as part of the Dental Pilot Project Program quarterly reporting requirements as outlined in OAR 333-010-0760. If a category is not applicable, indicate N/A in that section.**

This template may be updated by the Authority to include necessary elements of a project's approved Evaluation and Monitoring Plan.

1. Quarterly progress reports are public documents.
2. Patient confidentiality is a priority. Documents should not contain information that will identify any patient.
3. Quarterly Progress reports are **DUE** to the Oregon Health Authority 30 days following the end of the reporting quarter. (For example, Quarter 1 ends April 1<sup>st</sup>, Quarterly Progress reports are due to OHA by May 1<sup>st</sup>.)



**On a Quarterly basis, please update the Oregon Health Authority, Dental Pilot Project Program, on the following:**

1. Calendar Year 2020

Quarter Q4 (Oct-Dec)

**2. Accomplishments/Highlights.**

Provide a description of project activities and accomplishments in the reporting quarter. This includes any activity that has been successfully achieved or should be noted, regardless of whether it is large or small. Please attach any relevant documents in PDF form. Note all attachments are public record.

On 10/13/2020 OHA approved NPAIHB's modification request to add additional sites to the existing outreach modification. Attached as AH1

On 10/19/2020 NPAIHB hosted the quarterly Internal Advisory Committee Meeting for Pilot Project #100.

On 10/21/2020 the supervising dentist at the Confederated Tribes of Coos, Lower Umpqua and Siuslaw Tribe (CTCLUSI) dental clinic left the clinic. NPAIHB submitted a staffing update to OHA on 10/20/2020. Attached as AH2.

On 10/21/2020 OHA responded to NPAIHB's staffing update by determining the matter describe in our letter did not rise to the level that would require a modification. Attached as AH3.

On 10/27/2020 Dr. Yitta joined the CTCLUSI dental clinic as a supervising dentist for DHAT, Naomi Petrie.

On 11/16/2020 OHA hosted the quarterly Dental Pilot Project Program Advisory Committee for DPP #100. Vicki Faciane, MBA, M.Ed the Director of Health & Family Support & Behavioral Health Services presented on "Dental Therapy and the Economic Impact for the Confederated Tribes of Coos, Lower Umpqua and Siuslaw Tribe."

On 11/24/2020 Dr. Anderson joined the Oregon Pilot Project to act as a back up supervising dentist for DHAT, Kari Douglass, at Native American Rehabilitation Association of the Northwest, Inc. (NARA).

On 12/15/2020 NPAIHB submitted to OHA a modification request for a one-year extension. Attached as AH4.

**3. Challenges faced and continuous quality improvement activities.**

Provide a description of lessons learned and program challenges. This includes any activity that has been a challenge to the project and should be noted, regardless of whether it is large or small. Describe how you will use this information for project improvements, if applicable. Please attach any relevant documents in PDF form.

During this quarter the supervising dentist at CTCLUSI left the practice and majority of the quarter was spent recruiting to fill this vacancy. Historically, the communities our pilot sites serve have seen a high level of turn over with dental providers. We experienced this greatly this quarter. Fortunately, DHATs, Naomi Petrie and Marissa Gardner, were able to continue to administer dental treatment to patients in accordance with the approved Pilot Project #100 evaluation and monitoring plan.

The global pandemic continues to effect clinic protocols and scheduling for all pilot sites. This quarter the state of Oregon saw a large increase in new cases for COVID-19 and an increased rise in hospitalizations. All pilot sites continued modified operations to ensure the safety of staff and the communities they serve.

These two factors of staffing turn over and the global pandemic COVID-19 made this quarter for our project especially challenging.

#### 4. Updated project timeline.

Provide an update to the timeline since the last quarterly progress report.

Attach a Timeline Update in PDF format and provide a brief summary of changes below.

No changes to the timeline this quarter. However, our project submitted a modification request for a one-year extension this quarter.

#### 5. Data.

- a. A comprehensive breakdown of each of the data points the project is capturing in its approved evaluation and monitoring plan including anonymized client level data.

Summarized data may be made available to the OHA Advisory Committee for review. Patient confidentiality is a priority and is not to be disclosed. Documents should not contain information that will identify any patient.

Submit the Detailed Data Report attachment of clinical activity as Excel or CSV file. Please also attach any pertinent quarterly data summary updates or evaluation reports (such as from external clinical evaluators).

Summarize the following Evaluation and Monitoring Metrics for the reporting quarter by employment/utilization site:

E/U Site and Location	NARA	CTCLUSI
Number of Trainees at Site	1	2
Number of Patients Seen by Trainees at Site	N/A	N/A
Number of Procedures Completed by Trainees at Site	596	643
Number of New Patients Seen	367	224
Percent of procedures reviewed by dentist as acceptable	97.7%	97.7%

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\*These metrics may be updated by the Authority to include necessary elements of a project's approved Evaluation and Monitoring Plan.

b. Data generated by the clinical evaluator.

In the space below, please provide a description of the external evaluator's processes during the current reporting period. Examples include the number of abstraction records reviewed by the external clinical evaluator, a summary of data generated by the evaluation, the number of interviews conducted, etc.

Due to COVID-19 travel restrictions, Dr. Burnham conducted chart reviews for CTCLUSI remotely this quarter. Dr. Burnham's chart reviews can be found in CTCLUSI's DDR in the DDR folder labeled as CT DDR Q4 Full SUMv02.

Additionally, our project is submitting an addendum to the 2020 Quarter 1 DDR. This file is labeled as CT DDR Q1 2020 Re-Run.

c. Number and type of any adverse events or complications that occurred during the reporting period.

There were no adverse events during this quarter.

d. Underserved population report: Information identifying the percentage of patients served by each of the pilot project's trainees or employment/utilization sites that are within the underserved population identified in the application.

For each approved employment/utilization site, please indicate the percentage of patients identified as from underserved populations for the reporting quarter or indicate the reason for reporting exemption under OAR (333-010-0760).

Employment/ Utilization Site	Number Underserved Patients Seen by Trainees at Site	Total Patients seen by Trainees at Site	Percent of Patients Seen by Trainee that are from Underserved Population	Site Exemption: Check box if site is exempt from quarterly underserved population reporting	Reason for exemption: Choose one
NARA	N/A	N/A	N/A	<input checked="" type="checkbox"/>	I: Site is designated Exempt by OHA for other criteria

CTCLUSI	N/A	N/A	N/A	<input checked="" type="checkbox"/>	I: Site is designated Exempt by OHA for other criteria
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## 6. Financial Status Update

Provide a description of any substantial changes in financial status including receiving new grants or other changes in funding sources.

No new funding to report during this quarter.

## **DHAT Pilot Study Quarterly Report for NARA Dental Clinic**

### **Quarter 4-2020 (October 1 to December 31, 2020)**

#### **Introduction**

This is the report for the fourth quarter for the 2020 year that describe the impact of access to quality dental care provided by Dental Health Aid Therapists (DHAT) at the Native American Rehabilitation Association (NARA) Dental Clinic. Mekinak Consulting (MC) is conducting the evaluation for the Northwest Portland Area Indian Health Board (NPIHB) to comply with the requirements of Pilot Project #100, which is overseen by the Oregon Health Authority (OHA), and as an aid to participating clinics to intentionally assess and improve their programs. OHA has requested quarterly updates and established a reporting schedule in line with the quarters of a calendar year. To align with OHA reporting schedule, this report covers the period between the end of the prior report (March 31, 2020) and the end of the second quarter of 2020.

The pandemic altered dental work in the first quarter when the clinic severely limited its services on March 16, 2020 to treating emergencies. The clinic continued to limit services to emergency care throughout the second quarter of 2020. During the third and fourth quarters, the clinic increased services while meeting Oregon's COVID-19 requirements for dental clinics.

The dental director for the past three years left NARA on Thursday November 19, 2020. The director did clinical work as well as administering the practice. NARA began the process of filling this position during the quarter. A full-time dentist, the dentist hired to supervise the DHAT preceptorship and a newly hired dentist designated for outreach and to serve as a backup supervising dentist to the DHAT provided clinical work during the quarter. The dentist assigned to supervise the DHAT was hired during the third quarter (August 25<sup>th</sup>.)

#### **Data Collection**

Most of the information for the evaluation is generated through standard Dentrrix reports that summarize demographics of patients, provider production, and billing records. However, some information for the evaluation is not tracked in the Dentrrix system. For this data, it is necessary to review information in patient charts. Per the approved Evaluation and Monitoring plan, this data is collected using a sample. The size of the sample was calculated based on the number of patients seen in the baseline year. Using the RaoSoft sample calculator with a 90% confidence level and a 5% Margin of Error, the software generated the number of 42 patients needed for the quarter sample. The size will be larger as the clinic sees more patients. With reductions in services because of the pandemic, information from two sample weeks were collected during the quarter.

A random number generator was used to select the weeks in which the sample information would be collected. The sample weeks were October 12th to October 16th and November 30th to December 4<sup>th</sup> During these weeks, information on demographics, miles traveled to the clinic, zip

codes, and numbers and types of procedures in a treatment plan were recorded by clinic staff in an Excel spreadsheet for 92 patients.

Dentrix does not collect data on date of request for an appointment and date of the appointment. For this information, the clinic staff is keeping a log to record appointment information. It is recorded on one day for each week. However, owing to COVID related staffing limitations, this information was not collected for the third and fourth quarters.

## Demographics

According to the Racial Classification Dentrix report, 443 patients were seen in the quarter. Table 1 illustrates the ethnicity of the patients, compared to those in the sample group. There are patients in the Dentrix generated report for whom no race classification is specified (14%). For those of whom racial classifications were specified, 51% were American Indian or Alaskan Natives (AIAN) compared to 63% in the sample group. In the sample of 125 patients, some American Indians and Alaskan Natives (AIAN) report being a mixed race. However, these were classified as AIAN.

**Table 1. Racial Classifications for Qtr. 4-2020 Patients and Sample \***

Race	Qtr. 4-2020		Sample	
	Number	Percent	Number	Percent
American Indian/Alaskan Native (including self-identified)	226	51%	79	63%
Hispanic	27	6%	15	12%
Native Hawaiian or Pacific Islander	3	1%	0	0%
White (not Hispanic or Latino)	93	21%	18	15%
Black/African American	23	5%	4	3%
Asian	8	2%	5	4%
Unspecified	63	14%	4	3%
<b>Total</b>	<b>443</b>	<b>100%</b>	<b>125</b>	<b>100%</b>

\*Patient Status Report and Sample Spreadsheet

The Dentrix Age and Gender Report for the quarter recorded information on 446 patients. Table 2 describes the distribution by age and gender groupings for the patients seen during the quarter. More patients (37%) were between 25 and 44 years old. Forty-four percent (43%) were male and 57% were female (189 and 251 respectively). The two sample weeks totals are close to the age categories for the quarter population (within 7%). The gender of the sample is similar to the population (39% male, 61% female – data not shown)

**Table 2. Qtr. 4-2020 Age and Gender of Patients\***

Age Range	Quarter Population						Sample	
	Male (# and %)		Female (# and %)		Total (# and %)		#	Age %
≤ 14 years	39	9%	46	10%	85	19%	15	12%
15-24 years	19	4%	28	6%	47	11%	10	8%
25-44 years	72	16%	92	21%	164	37%	53	42%
45-64 years	47	11%	57	13%	104	24%	36	29%
≥ 65 years	12	3%	28	6%	40	9%	11	9%
Unknown or Other**	0	0%	0	0%	1	0%	0	0%
<b>Totals</b>	<b>189</b>	<b>43%</b>	<b>251</b>	<b>57%</b>	<b>441</b>	<b>100%</b>	<b>125</b>	<b>100%</b>

\*usd-age gender Dentrix report &amp; Sample Spreadsheet

\*\*One patient is non-binary

**Income Level**

Information on billings is used as a proxy measure of the income level of patients served by the clinic. Total billings reported for the quarter were \$282,647.03 (Table 3). The Oregon Health Plan (Medicaid) and a small billing to Washington State Medicaid covered costs for 76% of the patients. Another 19% of the patients were eligible for Health Services and Resources Administration (HRSA) support. Only 6% of patient costs are billed to private insurance.

**Table 3. Qtr. 4-2020 Amount and Percentages of Primary Production Billings\***

Primary Production Source	Primary Production Amount	% of Primary Production
Ore. Health Plan & Wash. Medicaid	\$213,989.08	76%
HRSA	\$52,427.09	19%
Private Insurance	\$16,230.86	6%
<b>Total billings</b>	<b>282,647.03</b>	<b>100%</b>

\*Dental Insurance Carrier Production Report

Those who qualify for HRSA support are very low income -- 61% of the billings to HRSA are for patients who fall between zero to hundred percent of the federal poverty level (Table 4).

**Table 4. HRSA Primary Production Billing\***

% of Federal Poverty Level	Primary Production Amount	% of HRSA Primary Production
HRSA 0-100 % FPL \$0	\$32,161.00	61%
HRSA 101-132% FPL \$30	\$4,333.00	8%
HRSA 133-149% FPL \$40	\$544.00	1%
HRSA 150-199% FPS\$50	\$5,600.09	11%

% of Federal Poverty Level	Primary Production Amount	% of HRSA Primary Production
HRSA Above 200% FPL pays 100%	\$9,662.00	18%
HRSA Homeless	\$127.00	0%
<b>Total HRSA</b>	<b>\$52,427.09</b>	100%

\*Dental Insurance Carrier Production Report

### *Distance from Home to the Clinic*

The clinic is in the far southeast section of Portland and is on a direct bus route from the downtown area. Table 5 describes the distance from the sample group's home address to the clinic for 125 of the patients in the sample group. Most of the quarter's patients (65%) live 10 or less miles from the clinic, 14% live between 11 and 20 miles, and 17% live between 21 and 30 miles from the clinic.

**Table 5. Qtr. 4-2020 Miles from Home to NARA Clinic (Sample Group)**

Miles to Clinic	Number of Patients	Percent
10 or less miles	81	65%
11 to 20	17	14%
21 to 30	21	17%
31 to 40	4	3%
Greater than 40	2	1%
<b>Total</b>	<b>125</b>	<b>100%</b>

### **Procedures Performed**

The Production Summary by Provider Dentrix reports had 4,001 coded procedures for the three dental providers and the DHAT who provided care during the quarter, Table 6 below describes the number of procedures and percentage of the total for each provider for 2,923 procedures. The procedures fall into IHS Levels 1-5 and Level 9. Administrative and screening codes in Level 9 have been removed from Table 6, so the table represents the procedure codes for dental care in patients' mouths. Table 12 in the appendix describes all procedures by provider, including those coded as administrative and screening. Most of the dentists' work was in Level 3 followed by Level 1. The DHAT did most of her work in Levels 2 and 3.

**Table 6. Qtr. 4-2020 Number of Procedures and Percentage by Level for each Provider\***

Levels	Total Dentist	% of Total	Total DHAT	% of Total	Total Hyg.	% of Total	Totals	% of Total
<b>1</b>	482	31%	39	7%	69	9%	590	20%
<b>2</b>	93	6%	324	54%	323	42%	740	25%
<b>3</b>	808	52%	233	39%	281	36%	1322	45%



Levels	Total Dentist	% of Total	Total DHAT	% of Total	Total Hyg.	% of Total	Totals	% of Total
4	15	1%	0	0%	0	0%	15	1%
5	122	8%	0	0%	2	0%	124	4%
9	35	2%	0	0%	97	13%	132	5%
<b>Totals</b>	<b>1555</b>	<b>100%</b>	<b>596</b>	<b>100%</b>	<b>772</b>	<b>100%</b>	<b>2923</b>	<b>100%</b>

\*production by provider

Table 7 illustrates the total number of procedures completed by Level of Care for the quarter population and the sample group. The sample overrepresents Levels 3 and underrepresents Levels 1 and 2.

**Table 7. Total Procedures & Percentages by Levels and Sample %\***

Level	Number of Procedures	% of Total Procedures	Number of Procedures in Sample	% of Total in Sample
1	590	20%	55	12%
2	740	25%	28	6%
3	1322	45%	329	71%
4	15	1%	23	5%
5	124	4%	26	6%
9	132	5%	0	0%
<b>Total</b>	<b>2923</b>	<b>100%</b>	<b>461</b>	<b>100%</b>

\*production by provider and sample Excel spreadsheet

Relative Value Units (RVU) are used by IHS as a measure of relative complexity of dental procedures. RVU ratings consider the time it takes to do a procedure, the skill required, risks and benefits to the patient, risk to the provider, severity of the problem, and need for outside resources. The RVU rating is updated every two years. Table 8 illustrates the RVUs for each provider by IHS Levels.

**Table 8. Qtr. 4-2020 RVU by Provider and Percentage by Provider\***

IHS Levels	Dr. Ahmed		Dr. Kok		Other Dentists		DHAT		Hyg.	
	RVU Values	%	RVU Values	%	RVU Values	%	RVU Values	%	RVU Values	%
1	38.23	20%	291.33	37%	42.27	44%	21.31	5%	31.05	4%
2	25.4	13%	14.22	2%	2.70	3%	290.27	74%	408.27	51%
3	86.61	45%	218.08	28%	40.95	43%	78.84	20%	363.52	45%
4	0	0%	77.73	10%	0.00	0%	0	0%	0	0%
5	0	0%	0	0%	0.00	0%	0	0%	1.36	0%
9	41.6	22%	188.28	24%	9.48	10%	0	0%	0	0%
<b>Total</b>	<b>191.84</b>	<b>100%</b>	<b>789.64</b>	<b>100%</b>	<b>95.40</b>	<b>100%</b>	<b>390.42</b>	<b>100%</b>	<b>804.2</b>	<b>100%</b>

\*Relative Value Units by Provider

### Treatment Plans

The total number of treatment plans completed by the providers was 89 (procedure code 9990).

The sample group is used to calculate the average number of procedures in a treatment plan, as this information is not tracked by Dentrix. Of the 125 charts reviewed during the sample weeks, 83 of the patients had dental work in their plan and 42 were on a regular maintenance program or had no plan. Table 9 categorizes the 461 procedures in the sample group's treatment plans. Two-thirds of the sample need between 1 to 6 procedures (68%). The mean number of procedures is 5.5 with a standard deviation of 4.5, the median is 4.0. The maximum number of procedures for patients in this sample is 19 and the minimum is 1.

**Table 9. Number and Percentage of Procedures in Sample Patient's Treatment Plans**

Number of Procedures	Frequency	Percent
1 to 3	34	41%
4 to 6	22	27%
7 to 9	10	12%
≥ 10	17	20%
<b>Total</b>	<b>83</b>	<b>100%</b>

### Wait Time for Appointment

The time between a request for an appointment and the scheduled appointment are not tracked in Dentrix reports. To see how the wait time changed with a DHAT provider added to the clinic's practice, a log is kept for one day a week, each week. The log records the date of request for an appointment and the first available opening for a 30 to 45-minute, 60-minute or new patient appointment. Given COVID-19 restrictions, fewer staff were in the clinic and the log was not kept during the fourth quarter. Table 10 is not included in this report.

### Referrals

Dentrix records (Referred to Doctor Report) indicated that 31 clinic patients were referred to outside providers or waiting for a referral during the quarter. Table 11 describes the referrals by the type of specialty. The largest number of referrals were to Care Oregon, Capitol Dental Care, and Advantage, clinics that serve patients on Medicaid.

**Table 11. Qtr. 4-2020 Referrals to Other Providers\***

Referrals	Number
Care Oregon, Capitol Dental, Advantage Providers (Low-income Providers)	26
Private Practice Patients' Choice	0
OHSU Oral & Maxillofacial Surgery	0
OHSU (Not Determined)	0
Capital Dental Care (Surgery Oral, Maxillofacial)	3
Endodontics Specialists	1
Grand Ronde/Siletz/Warm Springs Tribal Dental or Medical Clinics	1

Referrals	Number
Other Portland Dental Providers	0
Prosthodontics Specialty	0
Oral Surgery	0
Denturist Specialty	0
Pediatrics Dental Specialty	0
To Be Determined	0
<b>Total Referrals</b>	<b>31</b>

\*Dentrix Referred to Doctor Report

## **DHAT Pilot Study Quarterly Report for CTLUSI Dental Clinic Quarter 4-2020: October 1 to December 31, 2020**

### **Introduction**

The report describes the access to quality dental care provided by a Dental Health Aid Therapist (DHAT) at the Confederated Tribes of the Coos, Lower Umpqua, Siuslaw Indians (CTCLUSI) Dental Clinic. Mekinak Consulting (MC) is conducting the evaluation for the Northwest Portland Area Indian Health Board (NPAIHB) to comply with the requirements of Pilot Project #100, which is overseen by the Oregon Health Authority (OHA). The evaluation's purpose is to intentionally assess and improve the dental programs at the clinics in the pilot project. CTCLUSI has two DHATs, one who completed her preceptorship in 2018, and a second who completed a 400 hour preceptorship on February 11, 2020.

This is the fourth quarterly report for 2020. It covers the work done from October 1 to December 31. The full-time dentist left the practice on October 21st, and the search for a new full-time dentist was initiated during the quarter. Part-time dentists joined the clinic, one on November 16<sup>th</sup> and another on December 9<sup>th</sup> and will be available to assist the practice when needed after the permanent full-time dentist is hired. DHAT supervision was maintained through out the quarter. Dr. Gita Yitta joined the clinic on October 27<sup>th</sup> to supervise Ms. Petrie, and Dr. Miranda Davis supervised Ms. Gardener.

COVID-19 has influenced the clinic's production. The pandemic caused the clinic to close on March 16<sup>th</sup> and did not open during the second quarter (April 1 to June 30). Reopening the clinic in the third quarter was delayed due to difficulties obtaining the required Personal Protective Equipment (PPE) under the State of Oregon's dental clinic pandemic regulations. The DHATs began seeing patients in the final month of the third quarter, however the number that could be seen by all providers was reduced given COVID protective measures.

OHA has requested quarterly updates based on a calendar year. This differed from the original MC quarters which were based on the date the first DHAT at the clinic began her preceptorship. The first quarterly report was submitted in December, 2017 and covered the period from July 17, 2017, the date the first DHAT joined the clinic, to October 13, 2017. However, since that date, reports were adjusted to comply with OHA's request to align reports with calendar quarters.

### **Data Collection**

Most of the data in this report were gathered through standard reports generated by the Dentrix dental data management system. The reports provide aggregated data from the fields within the system for the quarterly period. Some data for the evaluation are not tracked by Dentrix. For this information, it is necessary to review patient charts. Per the Evaluation and Monitoring Plan, a sample is used to collect these data. A random number generator was used to select one week within each quarter from which data would be collected from the charts of patients that were seen that week.

Since the clinic was closed for the entire second quarter, during the third and fourth quarters two weeks were randomly selected to build a larger annual sample size. The sample weeks for this quarter were October 12 to October 16 and November 29 to December 4. During these weeks, data on demographics, distance from home to the clinic, zip codes, and numbers and types of procedures (using Indian Health Service (IHS) Levels of Care) in a treatment plan were recorded by clinic staff in an Excel spreadsheet. Dentrux does not collect data on date of request for an appointment and the next open date of the appointment. For this information, the clinic staff is responsible for keeping a log to record information. It is recorded for one day a week, every week. However, because of the pandemic and limitations to staff access to the clinic, the log was not kept during the third quarter.

## Demographics

The Patient Status Report noted that the clinic provided services to 252 patients during the quarter (Table 1) which is a reduction of 214 patients from quarter one. The clinic serves the tribal populations for the CTCLUSI and Coquille Indian Tribe (CIT) as well as members of other tribes that live in the greater Coos Bay area. During the quarter, 46% of the patients were members of other tribes, 26% were members of the CTCLUSI and 14% of the CIT. Non-Indians were 13% of the patients seen in the clinic. Non-Indian spouses of tribal members and employees of the CTCLUSI and CIT tribe can use the clinic.

**Table 1. Qtr. 4-2020 Ethnicity of Patients\***

Ethnicity	Number	Percent
CTCLUSI	65	26%
Coquille	36	14%
Other Tribe	117	46%
Non-Indian	34	13%
Total	252	100%

\*Patient Status Report

The Dentrux Ages and Gender report had data for 252 patients shown in Table 2. Table 2 also describes ages for the sample population.

**Table 2. Qtr. 4-2020 Age and Gender of Patients\***

Age Range	Male		Female		Total		Total Sample	Sample %
	# and %		# and %		# and %			
≤ 14 years	23	9%	32	13%	55	22%	9	15%
15-24 years	11	4%	20	8%	31	12%	7	12%
25-44 years	24	10%	32	13%	56	22%	12	20%
45-64 years	20	8%	27	11%	47	19%	11	19%
≥ 65 years	26	10%	37	15%	63	25%	20	34%
Totals	104	41%	148	59%	252	100%	59	100%

\*usd-age gender report

Sixty-two percent (59%) were female and 41% male (148 and 104 respectively). The sample group gender distribution of 59 patients was similar with 53% females and 47% males (data not shown). The age distribution of sample patients overrepresented the oldest group and underrepresented those in the youngest group category.

### *Income Level*

Billing records serve as a proxy for the income level of patients at the clinic. The distribution of production income is illustrated in Table 3. Medicaid is billed for patients eligible for this program. Several patients have private dental insurance, and the CTCLUSI and CIT tribes cover costs for non-Indian spouses of their respective tribal members. IHS funds are the last source of funding applied to costs for any enrolled member of CTCLUSI, CIT or an enrolled member of other tribes. IHS funds are used for expenses not paid for by private insurance or Medicaid, insurance deductibles, and costs incurred above the annual limits of private policies.

During the quarter, 36% of the patients qualified for Medicaid. Just over one in five patients (20%) had expenses were covered by a private insurance company. The clinic billings to IHS Contract Purchase of Care funds (41%) covered dental costs for CTCLUSI and CIT tribal members and members of other tribes. The CTCLUSI and CIT tribes were billed for the benefit offered to the spouses of tribal members. This cost accounted for 4% of the billings in the quarter.

**Table 3. Qtr. 4-2020 Amount and Percentages of Billings\***

Source of Payment	Primary Production Amount*	% Totals by Source of Payment	
Medicaid	\$34,948.00	36%	Medicaid
Other Tribe	\$23,387.00	24%	Indian Health Services Contract Purchase of Care
CTCLUSI Tribal Member Benefit	\$7,037.00	7%	
CIT Tribal Member Benefit	\$9,337.00	10%	
CTCLUSI Spouse	\$2,817.00	3%	Spousal costs for CTCLUSI or CIT members covered by tribal funds
CIT Spouse	\$1,170.00	1%	
Private Insurance	\$19,134.00	20%	Private Insurance
<b>Total Billings</b>	<b>\$97,830.00</b>	<b>100%</b>	<b>Total Billed</b>

\*Dental Insurance Carrier Production Report

### *Distance from Home to Clinic*

The distance from home to clinic information (Table 4) is gathered through the sample data. The home address is used to calculate the distance to the clinic. Most of clinic's patients 84%) live within 24 miles of the clinic (80%) with half of these living within 5 miles (46%). Those living between 25 and 74 miles were 14% of the sample. Those living more than 75 miles were 8% of the sample.

**Table 4. Qtr. 4-2020 Distance from Home to CTCLUSI Clinic\***

Distance to Clinic	Number of Patients	Percent
0-4	26	46 %
5-24	19	34%
25-49	4	7%
50-74	3	5%
75-99	1	2%
100-49	2	4%
150-199	1	2%
Total	56	100%

\*Sample spreadsheet

Most of the patients in the sample population lived in counties in the southwest corner of Oregon with 80% in Coos County and 12% in Lane and 3% in Curry and Douglas counties and 2% in Jackson.(Table 5).

**Table 5. Qtr. 4-2020 County of Residence in Sample\***

County	Number in Sample	% in Sample
Coos	48	80%
Lane	7	12%
Curry	2	3%
Douglas	2	3%
Jackson	1	2%
<b>Total</b>	<b>60</b>	<b>100%</b>

\*Sample spreadsheet

## Procedures Completed by Providers

The Dentrix production reports by provider list 1826 coded procedures over the quarter. However, 623 of these are administrative and screening codes and do not represent procedures involving the mouth. Table 6 describes the number of Dentrix-coded procedures performed by provider organized by the six IHS Levels of Care (Levels 1-5 and Level 9). The codes in Level 9 for administrative and screening functions are not included in Table 6. Once these are removed, the providers performed 1233 procedures related to working on a patient's teeth. A list of all procedure codes, their descriptions, the Level of Care including administrative and screening codes and the number of times a provider completed the service can be found in Table 12 in the appendix to this report. The DHATs were responsible for 643 procedures. Their work accounted for 52% of the total "in mouth" production for the quarter. Most of their work fell within Level 3. The part-time dentists did emergency procedures that are coded as Level 1.

**Table 6. Qtr. 4-2020 Number of Procedures and Percentage by Level for Each Provider\***

Levels	Rodgers	%	Pt. Time Dentists	%	DHAT Petrie	%	DHAT Gardner	%	Hyg.	%	Totals	%
1	44	30%	79	55%	44	11%	25	11%	3	1%	195	16%
2	16	11%	4	3%	159	38%	73	32%	232	78%	484	39%
3	73	49%	50	35%	189	46%	118	51%	50	17%	480	39%
4	1	1%	0	0%	0	0%	0	0%	1	0%	2	0%
5	5	3%	1	1%	10	2%	14	6%	3	1%	33	3%
9	10	7%	10	7%	11	3%	0	0%	8	3%	39	3%
<b>Totals</b>	<b>149</b>	<b>100%</b>	<b>144</b>	<b>100%</b>	<b>413</b>	<b>100%</b>	<b>230</b>	<b>100%</b>	<b>297</b>	<b>100%</b>	<b>1233</b>	<b>100%</b>

\*production summary by provider

Table 7 compares the total number of procedures completed by IHS Level in the quarter with those in the sample group. The sample group of 60 patients underrepresented the number of procedures in Levels 1 and 2 and 4 and overrepresents the number of procedures in Level 3. And 4.

**Table 7. Qtr. 4-2020 Total Procedures and Percentages by Levels and Sample %\***

Level	Number of Procedures	% of Total Procedures	# in Sample	% of Total in Sample
Level 1	195	16%	40	10%
Level 2	484	39%	104	26%
Level 3	480	39%	179	44%
Level 4	2	0%	62	16%
Level 5	33	3%	11	3%
Level 9	39	3%	2	1%
<b>Total</b>	<b>1233</b>	<b>100%</b>	<b>398</b>	<b>100%</b>

\*production by provider and sample spreadsheet

### ***Patient Treatment Plans***

The number of procedures in a patient's treatment plan is collected for the sample group since this is not information generated by Dentrax. The number of procedures in the sample of 60 patients was 398. Of the 60 patients, 46 had active treatment plans and 14 were on maintenance plans for checkup and hygiene services every six months. Of the 46 patients with plans, the mean number of procedures in a plan was 8.7, however, there was a large variation with a standard deviation of 7.83. The median was 7 procedures. Table 8 describes the distribution of procedures in the 46 plans. Half of the patients (52%) needed 7 or more procedures to complete their treatment plan. One patient had 41 procedures in their plan.



**Table 8. Qtr. 4-2020 Number and Percentage of Procedures in Sample of Patients Plans\***

Procedures	Number	Percent
1-3	9	26%
4-6	10	22%
7-9	10	24%
≥10	13	28%
<b>Totals</b>	<b>42</b>	<b>100</b>

\*sample spreadsheet

During the quarter, 9 patients' treatment plans were completed (Coded as 9990 in Dentrix, see Table 12).

### *Relative Value Units*

Relative Value Units (RVU) are used by IHS as a measure of relative complexity of dental procedures. RVU ratings consider the time it takes to complete a procedure, the skill required, risks and benefits to the patient, risk to the provider, severity of the problem and need for outside resources. The RVU rating is updated every two years. Table 9 describes RVUs by provider for the different Levels of Care. The DHATs' RVUs are concentrated in Level 2 and 3.

**Table 9. Qtr. 4-2020 Relative Value Units and Percentages by Provider\***

Level	Dentist		Pt-Time Dentist		DHAT N.P		DHAT M.G.		Hygienist	
	RVUs	%	RVUs	%	RVUs	%	RVUs	%	RVUs	%
1	40.82	18%	64.81	50%	27.15	9%	12.60	7%	1.35	0%
2	19.9	9%	3.20	2%	151.61	51%	69.34	40%	390.84	81%
3	71.09	32%	40.13	31%	112.07	38%	83.44	48%	83.23	17%
4	13.36	6%	3.50	3%	0.00	0%	0.00	0%	1.00	0%
5	72.05	32%	10.00	8%	6.80	2%	9.52	5%	4.68	1%
9	5.58	3%	9.00	7%	0.00	0%	0.00	0%	0.00	0%
<b>Total</b>	<b>222.8</b>	<b>100%</b>	<b>130.64</b>	<b>100%</b>	<b>297.63</b>	<b>100%</b>	<b>174.90</b>	<b>100%</b>	<b>481.10</b>	<b>100%</b>

\*relative value units by provider

### *Wait Time for Appointment*

The time between a request for an appointment and the scheduled appointment are not tracked in Dentrix reports. To see how the wait time changed with a DHAT provider added to the clinic's practice, a log is kept for one day a week, each week. The log records the date of request for an appointment and the first available opening for a 60 minute, 90 minute or new patient appointment. However, staffing issues and changes in scheduling related to the pandemic prevented the maintenance of the log over the quarter so Table 10 is not included in this report.

### ***Referrals***

The Dentrix Referred to Doctor report describes 7 referrals for the quarter. Table 11 describes the number of referrals by specialty from the Dentrix Referred to Doctor report.

**Table 11. Qtr. 4-2020 Referrals to Specialty Care**

<b>Dental Specialty</b>	<b>Number of Referrals</b>
Periodontics	1
Orthodontics	2
General Practise Denistry	1
Endodontics	5
Prosthodontics	0
Surgery, Oral, Maxillofacial	3
Pediatrics Dentistry	1
Ear, Nose, Throat	0
<b>Total</b>	<b>13</b>

\*referred to doctor report



CENTER FOR PREVENTION AND HEALTH PROMOTION  
Oral Health Program

Kate Brown, Governor



800 NE Oregon St, Ste 825  
Portland, Oregon 97232-2186  
Office: 971-673-1563  
Cell: 509-413-9318  
Fax: 971-673-0231  
[www.healthoregon.org/dpp](http://www.healthoregon.org/dpp)

October 13, 2020

Laura Platero, JD  
Executive Director  
Northwest Portland Area Indian Health Board  
2121 SW Broadway, Suite 300  
Portland, Oregon 97201

Dear Ms. Platero,

On September 18, 2020, the Oregon Health Authority's (OHA) Dental Pilot Project Program received a modification request from Dental Pilot Project #100 (DPP #100) "Oregon Tribes Dental Health Aide Therapist Pilot" project sponsor the Northwest Portland Area Indian Health Board (NPAIHB). The modification request allows trainees to provide services under a dental oral health outreach model to the following locations described in the request:

- Daycare facilities including in-home and worksite daycare
- Local/Tribal preschool and head start programs
- Local/Tribal after school programs
- Wellness fairs
- Tribal events

The outreach model described will provide oral healthcare to patients who are eligible for treatment at the Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians (CTCLUSI) Dental Clinic. Please see Appendix A for a copy of the modification request.

Under Oregon Administrative Rules (OAR) 333-010-0800, approved dental pilot projects may submit a request to modify the scope of practice for trainees as part of an approved dental pilot project. All modifications require OHA approval.

333-010-0800

Dental Pilot Projects: Project Modifications

1) Any modifications to an approved project shall be submitted writing to program staff, except as specified in section (4) this rule. All modifications require Authority approval.

Modifications include, but are not limited to the following:

a) Changes in selection criteria for trainees, supervisors, or employment/utilization sites;

(b) Addition of employment/utilization sites; and

(c) Changes in the scope of practice for trainees.

(2) Upon receipt of a request for a modification approval, the Authority will inform the project sponsor in writing on the timeline for review of the request and decision response deadline.

(3) If the Authority has convened an advisory committee for an approved project, the Authority may confer with the advisory committee regarding the proposed modification.

(4) Changes in project staff or instructors are not considered a modification and do not require prior approval by program staff, but shall be reported to the program staff within two weeks after the change occurs along with the curriculum vitae for the new project staff and instructors.

(5) The Authority may approve or deny a request for modification. A modification may be denied if:

(a) It does not demonstrate that the project can meet the minimum standards or other provisions in these rules; or

(b) The modification would result in a substantial change to underlying purpose and scope of the pilot project as originally approved.

(6) Projects are not permitted to implement the proposed modification until approval has been rendered by the Authority.

OHA consulted the Advisory Committee for DPP #100 in addition to reviewing best practices and evidence-based approaches to oral health outreach programs. The committee was asked to review the modification request and associated materials and provide feedback to OHA by October 9, 2020. Please see Appendix B for materials consulted. After reviewing all recommendations and feedback, OHA has approved the request for modification to allow trainees to provide services under the outreach model described in the modification request.

The project is authorized to complete all aspects of the project as described in the approved application and addendum's. The project must continue to maintain compliance with OAR 333-010-0700 through 333-010-0820 and with the Amended Stipulated Agreement signed on April 27, 2020.

The modification request is effective as of October 15, 2020.

Sincerely,

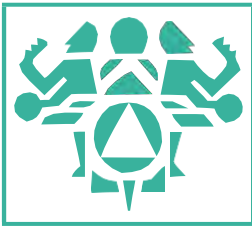


Cate Wilcox, MPH  
MCH Section Manager



Sarah Kowalski, RDH, MS  
Dental Pilot Project Program

cc: Dental Pilot Project #100 Advisory Committee  
Oregon Board of Dentistry



## **NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD**

Burns-Paiute Tribe  
Chehalis Tribe  
Coeur d' Alene Tribe  
Colville Tribe  
Coos, Suislaw &  
Lower Umpqua Tribe  
Coquille Tribe  
Cow Creek Tribe  
Cowlitz Tribe  
Grand Ronde Tribe  
Hoh Tribe  
Jamestown S'Klallam Tribe  
Kalispel Tribe  
Klamath Tribe  
Kootenai Tribe  
Lower Elwha Tribe  
Lummi Tribe  
Makah Tribe  
Muckleshoot Tribe  
Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NWBand of Shoshone Tribe  
Port Gamble S'Klallam Tribe  
Puyallup Tribe  
Quileute Tribe  
Quinault Tribe  
Samish Indian Nation  
Sauk-Suiattle Tribe  
Shoalwater Bay Tribe  
Shoshone-Bannock Tribe  
Siletz Tribe  
Skokomish Tribe  
Snoqualmie Tribe  
Spokane Tribe  
Squaxin Island Tribe  
Stillaguamish Tribe  
Suquamish Tribe  
Swinomish Tribe  
Tulalip Tribe  
Umatilla Tribe  
Upper Skagit Tribe  
Warm Springs Tribe  
Yakama Nation

Date: October 20, 2020

Sarah Kowalski, RDH, MS  
Dental Pilot Project Program  
Oregon Health Authority

RE: Oregon Pilot Project #100

Dear Ms. Kowalski:

This letter is to inform you that as of October 21, 2020, Dr. Sarah Rodgers will no longer be a Supervising Dentist at the CTCLUSI Dental Clinic. Both Dental Health Aide Therapists, Marissa Gardner and Naomi Petrie, will continue to administer dental treatment to patients in accordance with the approved Pilot Project #100 Evaluation and Monitoring Plan. Dr. Miranda Davis will remain as a Supervising Dentist to allow for both DHATs to work under general supervision. The clinic also plans to hire an additional supervising dentist to be able to provide treatment in the clinic as soon as possible.

For all procedures outside of the DHAT scope of practice, a referral system to local dentists and specialists in the community has already been implemented and used during times when Dr. Rodgers has been unavailable to provide care or when a referral is indicated. Continuing this practice, the DHATs will document when required treatment is outside of their scope and the patient will then be given a formal referral to a general dentist or specialist as appropriate. The clinic also has a formal contingency plan in the event of a medical emergency that the DHATs will continue to adhere to as they practice under general supervision. These protocols were in place prior to Dr. Rodgers' departure.

A core competency of DHAT education and employment is the ability to understand when a patient's needs are outside the DHAT's scope of practice, and to then refer the patient to a dentist. For reference, please see Alaska CHAP Standards and Procedures, which are referenced in our project's application. This is specified in Sec. 2.30.110.(b)(2)(D): identification of potential dental problems and appropriate referrals. Note that this is a core competency required of a Primary Dental Health Aide I. This section is again referenced in 2.30.610(b)(3)(A): noting that DHATs must demonstrate satisfactory performance under general supervision of a dentist all of the skills identified in sections 2.30.110 [PDHA I supervision & competencies].

Additionally, the DHAT practice agreement states: "ALWAYS report to your referral doctor (or dentist) any variation from the typical presentation. If you are unsure of your assessment, report prior to providing treatment. ALWAYS refer any conditions outside the scope of your training or practice agreement."

Ms. Sarah Kowalski  
October 20, 2020  
Page 2

The ultimate purpose of the Pilot Project is to expand the workforce to allow Dental Therapists to provide care in areas that experience dental staffing shortages. Our practice plan remains in compliance with the approved rules and reduces interruptions in much needed care to underserved communities.

Please contact me if you have any further questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Miranda Davis". The signature is fluid and cursive, with a large, stylized "M" and "D".

Miranda Davis, DDS  
NPAIHB, Native Dental Therapy Initiative Project Director

2121 SW Broadway, Suite 300 • Portland, OR 97201  
19201 L Street NW, Suite 420 • Washington, DC 20036  
Main Office: (503) 228-4185 • Fax: (228) 228-8182 • [www.npaihb.org](http://www.npaihb.org)



CENTER FOR PREVENTION AND HEALTH PROMOTION  
Oral Health Program

Kate Brown, Governor



800 NE Oregon St, Ste 825  
Portland, Oregon 97232-2186  
Office: 971-673-1563  
Cell: 509-413-9318  
Fax: 971-673-0231  
[www.healthoregon.org/dpp](http://www.healthoregon.org/dpp)

October 21, 2020

Miranda Davis, DMD, MPH  
NW Portland Area Indian Health Board  
2121 SW Broadway STE 300  
Portland, Oregon 97201

Dear Dr. Davis,

Thank you for the submission of your letter dated October 20, 2020 regarding the staffing changes and updates to Dental Pilot Project #100 "Oregon Tribes Dental Health Aide Therapist Pilot Project." Please see Appendix A for a copy of the letter.

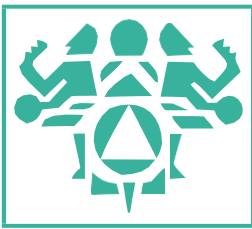
The Oregon Health Authority (OHA) has determined the issues described in your letter do not rise to the level that would require a modification to the approved dental pilot project according to Oregon Administrative Rule (OAR) 333-010-0800. Please see Appendix B for a copy of the OARs. Therefore, the project may continue to operate according to the already approved application, addendum, evaluation & monitoring plans, and amended stipulated agreement.

Thank you for your continued communication. We ask that you update OHA on the replacement supervising dentist hired to provide services at the Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians (CTCLUSI) dental clinic (required under OAR 333-010-0800).

Sincerely,

Cate Wilcox  
Maternal & Child Health Section Manager

Sarah Kowalski  
Dental Pilot Project Program



## NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

Burns-Paiute Tribe  
Chehalis Tribe  
Coeur d'Alene Tribe  
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Lower Umpqua Tribe  
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Kootenai Tribe  
Lower Elwha Tribe  
Lummi Tribe  
Makah Tribe  
Muckleshoot Tribe  
Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NW Band of Shoshone Tribe  
Port Gamble S'Klallam Tribe  
Puyallup Tribe  
Quileute Tribe  
Quinalt Tribe  
Samish Indian Nation  
Sauk-Suiattle Tribe  
Shoalwater Bay Tribe  
Shoshone-Bannock Tribe  
Siletz Tribe  
Skokomish Tribe  
Snoqualmie Tribe  
Spokane Tribe  
Squaxin Island Tribe  
Stillaguamish Tribe  
Suquamish Tribe  
Swinomish Tribe  
Tulalip Tribe  
Umatilla Tribe  
Upper Skagit Tribe  
Warm Springs Tribe  
Yakama Nation

Date: December 15, 2020

To: Oregon Health Authority  
From: The Northwest Portland Area Indian Health Board  
RE: Oregon Pilot Project #100

Dear Sarah Kowalski, RDH, MS, Dental Pilot Project Program

As described previously in the 2020 quarterly (1, 2 and 3) report narratives, this year has been most unusual. Due to the COVID-19 pandemic implications, our project was stopped or modified greatly on a short notice in February 2020 for all three pilot sites: The Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians, Coquille Indian Tribe and Native American Rehabilitation Association of the Northwest.

At the same time, the national shortage of personal protective equipment (PPE) also played a role in preventing services and reopening for the pilot sites.

The project was scheduled to finish on May 31<sup>st</sup>, 2021. However, due to the delays and in order to have sufficient time to restart, follow up and evaluate, **Pilot Project #100 requests an extension of the project until May 31<sup>st</sup>, 2022.**

Thank you for considering this modification request. Please contact me or Christina Peters if you have any questions. We look forward to your response.

Sincerely,

Laura Platero, JD  
NPAIHB, Executive Director





CENTER FOR PREVENTION AND HEALTH PROMOTION  
Oral Health Program

Kate Brown, Governor



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January 14, 2021

Laura Platero, JD  
2121 SW Broadway Street, Suite 300  
Portland, Oregon 97201

Dear Ms. Platero,

The Oregon Health Authority (OHA) Dental Pilot Project Program has reviewed the modification request submitted on December 15, 2020 to extend the timeline operation of Dental Pilot Project #100 (DPP#100) "Oregon Tribes Dental Health Aide Therapist Pilot Project" (Appendix A).

Due to factors beyond the project sponsor's control, there have been several quarters where trainees were unable to provide services due to the COVID-19 pandemic. DPP#100 has not been allowed enough time to implement the pilot project as intended in both the original application and subsequent modification requests approved by OHA.

OHA has evaluated the modification request and the request has been approved. The timeline has been amended and the project is approved to operate under the Dental Pilot Project Program until **May 31, 2022**.

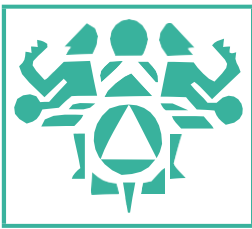
OHA has instituted a process whereby Dental Pilot Projects may apply for an extension to their approved pilot project timeline, provided the project demonstrates sufficient need for additional time to evaluate the validity of the project. OHA will extend pilot projects in one-year increments.

We thank you for your continued patience as we work together through the challenges of the COVID-19 pandemic and its effects on the public health of Oregonians and programs that have been immensely affected by this unprecedented situation.

Sincerely,

Cate Wilcox, MPH

Sarah Kowalski, RDH, MS



## NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

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Chehalis Tribe  
Coeur d'Alene Tribe  
Colville Tribe  
Coos, Siuslaw &  
Lower Umpqua Tribe  
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Cow Creek Tribe  
Cowlitz Tribe  
Grand Ronde Tribe  
Hoh Tribe  
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Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NW Band of Shoshone Tribe  
Port Gamble S'Klallam Tribe  
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Thank you for considering this modification request. Please contact me or Christina Peters if you have any questions. We look forward to your response.

Sincerely,

Laura Platero, JD  
NPAIHB, Executive Director

NEWSLETTERS  
&  
ARTICLES OF  
INTEREST

January 2021

# HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



## February Testing Holiday

Monday, February 15, 2021, Presidents' Day, is a test exemption day. As a reminder you do NOT need to check in to see if a test is required on this day.

## Inclement Weather

As we continue through the colder months of the season, please remember that if a collection site is closed due to inclement weather, you must inform HPSP of the closure. This will be verified by your agreement monitor. If the site is confirmed to be closed and the licensee has been in compliance with all requirements for nine consecutive months (or has been compliant thus far if enrolled less than nine months), then the licensee may use one of the 21 toxicology exemptions allotted to each licensee per year.

## HPSP Outreach

The HPSP Team is scheduling informational sessions on HPSP. If the administrators of your health care workplace are interested in learning more about HPSP, please ask them to contact Scott McBeth, Ph.D. (503-802-9865; [scott.mcbeth@ibhsolutions.com](mailto:scott.mcbeth@ibhsolutions.com)) for more information or to schedule a meeting.

## Satisfaction Survey

Thank you for participating in the January 2021 HPSP Satisfaction Survey. Your feedback is very important to us. All input is reviewed by the HPSP Policy Advisory Committee (PAC) and, where possible, the program is adjusted. Changes made from Satisfaction Survey input in the past include in-person meetings with agreement monitors, Saturday phone support, and lower-cost toxicology panels for unemployed HPSP participants. Results and answers to your questions will be shared in an upcoming newsletter. Input will also be reviewed by the HPSP Advisory Committee. Your next opportunity to participate is July 2021.

"Take the first step in faith. You don't have to see the whole staircase, just take the first step." – Dr. Martin Luther King Jr

## Mindfulness

COVID-19 has only added to the regular stresses you experience as a health professional. If 2020 has taught us anything, it is that no one is immune to stress and anxiety. We hope HPSP's newsletter, HealthProChoices, has been a resource where you can learn techniques to deal with stress and anxiety from your personal life, the workplace, and the broader world. This month, we offer an article developed by IBH's EAP side of the business about using mindfulness to cope with stress.

### Mindfulness Helps Boost Mental Health

No one can avoid stress and a certain amount is actually good for you. But it's best to keep unhealthy levels in check. One way for children and adults to develop self-awareness and the ability to cope with and navigate feelings of stress is through the practice of mindfulness. Mindfulness is a process of active, open, nonjudgmental awareness. It is paying attention in the present moment with openness, curiosity and flexibility. It reduces stress, depression, and anxiety and can help increase your sense of wellbeing and happiness.

### The 5 R's of Mindfulness

1. **Recognize.** Be aware of yourself. Recognize your thoughts and your own internal dialogue and when you're caught up in negative, fear-based thinking. Practice noticing your mental state.
2. **Relax.** Explore ways to slow down, connect with your breath and relax your mind and body.
3. **Review.** Gently review your options and ways that you might respond to a difficult situation. Ask yourself, "What can I control? What can I change (and not change)? Do I have a choice?"
4. **Respond.** Practice responding from your deepest, wisest self while letting go of fear and worry about the past or future outcomes.
5. **Return.** Check in with yourself and bring yourself back to mindfulness and an awareness of the present moment with openness and curiosity.

Source: Karen Pace, Michigan State University Extension



### Resource Center: Mindfulness

Insight Timer - Free App for Sleep Anxiety and Stress: <https://insighttimer.com>

Calm - App for Sleep, Meditation and Relaxation: <https://www.calm.com>

### Continuing Education: Caron

"Hope for Families: Supporting Children Impacted by a Loved One's Substance Use Disorder"

Wednesday, February 10th, 2021 11:am – 12:30pm

Meeting Registration - Zoom

### News

Good News Network - Positive news stories from around the globe: [www.goodnewsnetwork.org](http://www.goodnewsnetwork.org)

**From:** Oral HEALTH <[Oral.HEALTH@dhsoha.state.or.us](mailto:Oral.HEALTH@dhsoha.state.or.us)>

**Subject:** Dental Director Recruitment

*Sent to the OHA Dental Pilot Project Program Listserv*

The Oregon Health Authority has a fantastic opportunity for a Dental Director with previous Public Health and Medicaid experience. The Dental Director will lead, direct and determine oral health delivery systems, activities and services for the Oregon Health Authority (OHA) in compliance with federal and state laws, the principles of health equity, and standards for developing priorities and programs to meet the needs of Oregonians. The Dental Director will act as a liaison between OHA and Oregon's dental community, identify oral health trends nationally and statewide to determine and implement oral health care policies, and provide the best benefits and access to populations facing the greatest health disparities. Please see the [recruitment announcement](#) for more details regarding job qualifications, duties and application instructions.

Direct link to recruitment: [https://oregon.wd5.myworkdayjobs.com/en-US/SOR\\_External\\_Career\\_Site/job/Portland--OHA--Oak-Street/Dental-Director\\_REQ-54456](https://oregon.wd5.myworkdayjobs.com/en-US/SOR_External_Career_Site/job/Portland--OHA--Oak-Street/Dental-Director_REQ-54456)

# LICENSE RATIFICATION

## **16. RATIFICATION OF LICENSES**

As authorized by the Board, licenses to practice dentistry and dental hygiene were issued to applicants who fulfilled all routine licensure requirements. It is recommended the Board ratify issuance of the following licenses. Complete application files will be available for review during the Board meeting.

### **DENTAL HYGIENISTS**

H8168	STEPHANIE LAYNE JONES, R.D.H.	12/14/2020
H8169	CHRISTA M WINGO, R.D.H.	12/14/2020
H8170	KARIN D LAYTON, R.D.H.	12/16/2020
H8171	SARAH JESSICA BOSTARD, R.D.H.	12/18/2020
H8172	KAYLA LEE BROWN, R.D.H.	12/18/2020
H8173	MICHELE CHRISTY AVREA, R.D.H.	1/13/2021
H8174	SUNHAE SHIN, R.D.H.	1/13/2021
H8175	MARIKA TRAPANS LOCKHART, R.D.H.	1/21/2021
H8176	CORY BARRETT, R.D.H.	1/28/2021
H8177	MARIA DEL ROSARIO CAMPOS SANCHEZ, R.D.H.	1/28/2021
H8178	HANEEN GHASSAN MOHAMMED, R.D.H.	1/28/2021

### **DENTISTS**

D11381	RAMON EMILIO JOHNSON, D.D.S.	12/14/2020
D11382	NORA KAHENASA, D.M.D.	12/14/2020
D11383	FATEMEH AHMADIAN, D.M.D.	12/14/2020
D11384	NELLAB HASHIMI, D.D.S.	12/14/2020
D11385	JAKE ALLEN PETERSON, D.D.S.	12/15/2020
D11386	NAIROUZ ABDELSALAM,	12/16/2020
D11387	JEFFERY M RAWLEY, D.M.D.	12/16/2020
D11388	PRIYA SURESH THAKKER, D.M.D.	12/18/2020
D11389	CHLOEY L JONES, D.M.D.	1/13/2021
D11390	DEVON ROMNEY CALL, D.D.S.	1/13/2021
D11391	WILLIAM ROBERT WALTON, D.D.S.	1/13/2021
D11392	ZACHARY DAVID LANDGRAF, D.D.S.	1/13/2021
D11393	VICTORIA TON, D.D.S.	1/21/2021
D11394	DANIEL BRIAN GABRIEL, D.D.S.	1/28/2021
D11395	HUNG PHAM, D.D.S.	1/28/2021
D11396	BENJAMIN REZA FARHAM, D.M.D.	1/28/2021
D11397	LORENA LAVARNE, D.M.D.	1/28/2021
D11398	SINA MOUSAVI, D.D.S.	1/28/2021
D11399	VYACHESLAV ANDRIANOVICH DMYTRUK, D.M.D.	1/28/2021
D11400	SOHAYLA R HORANI, D.M.D.	1/28/2021



# **LICENSE & EXAM ISSUES**

## **Request for Approval of Soft Reline Course – Alyssa Kobylinsky**

The Board has received a request for approval of a Soft Reline Course. This course would be provided so the EFDA Dental Assistants could qualify to apply soft relines in accordance with OAR 818-042-0090 – Additional Functions of EFDAs.

### **Relevant Rules:**

#### **OAR 818-042-0090 – Additional Functions of EFDAs**

“Upon successful completion of a course of instruction in a program accredited by the Commission on Dental Accreditation of the American Dental Association, or other course of instruction approved by the Board, a certified Expanded Function Dental Assistant may perform the following functions under the indirect supervision of a dentist or dental hygienist providing that the procedure is checked by the dentist or dental hygienist prior to the patient being dismissed:

- (1) Apply pit and fissure sealants provided the patient is examined before the sealants are placed. The sealants must be placed within 45 days of the procedure being authorized by a dentist or dental hygienist.
- (2) Apply temporary soft relines to complete dentures for the purpose of tissue conditioning.
- (3) Place cord subgingivally.”

Alyssa Kobylinsky  
3915 SW Eleven Mile Ave  
Gresham OR 97080

January 4<sup>th</sup>, 2021

Oregon Board of Dentistry  
1500 SW 1st Avenue  
Suite 770  
Portland, OR 97201

Dear Members of the Oregon Board of Dentistry,

Please find enclosed my proposal for a Temporary Soft Reline course, as well as copies of my Oregon credentials.

I am currently the Dental Assistant Development Specialist for Willamette Dental Group. A large portion of this position involves training and credentialing Dental Assistants within our Company. I am asking the Board to approve the enclosed curriculum so that I may provide the necessary training and credentialing to our employees.

Thank you for considering this course for Board approval.

Best regards,

Alyssa Kobylinsky, EFDA, sealant, soft reline

OREGON BOARD OF DENTISTRY

Dental Assistant



Expanded Functions Dental Assistant  
Issued: December 23, 2014

119532

CERTIFICATE NUMBER

Alyssa V Kobylinsky

Radiological Proficiency  
Issued: April 22, 2010

THIS CERTIFICATE MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN SIGHT OF PATIENTS

# Willamette Dental Group

AGD ID #302477

6950 NE Campus Way  
Hillsboro, OR 97124



## ATTENDANCE VERIFICATION

---

**Participant's Name:** Alyssa Kobylinsky

**Course Verification Code:** Seal061515

**AGD ID#:** N/A

**State and License #:** N/A

**Course Title:** The Application of Pit and Fissure Sealants

**Instructor:** Helen Massar, RDH (License # I1101)

**Educational Method:** Lecture and Participation

**Course Date:** June 15, 2015

**Location:** Willamette Dental Group: Weidler Office – 220 NE Weidler, Portland, OR 97232

**CDE Hours:** 2.0 (AGD Subject Code: 149 Multi-Specialty Topics)

**Authorized Signature:**

  
INSTRUCTIONAL DEVELOPER, WILLAMETTE DENTAL GROUP



**Keep this form for your records.**

**AGD Members:** Willamette Dental will submit attendance verification to the AGD on your behalf. Please allow at least 30 days for documentation of participation to be added to your transcript.

Approved PACE Program Provider FAGD/MAGD Credit  
Approval does not imply acceptance by a state or  
provincial board of dentistry or AGD endorsement.  
(12/1/2014) to (11/30/2017)  
Provider ID# 302477

# Willamette Dental Group

AGD ID #302477

6950 NE Campus Way  
Hillsboro, OR 97124



## ATTENDANCE VERIFICATION

---

**Participant's Name:** Alyssa Kobylinsky

**Course Verification Code:** SR061515

**AGD ID#:** N/A

**State and License #:** N/A

**Course Title:** Temporary Soft Relines for Full Dentures

**Instructor:** Helen Massar, RDH (License # I3014)

**Educational Method:** Lecture and Participation

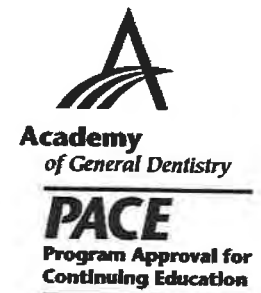
**Course Date:** June 15, 2015

**Location:** Willamette Dental Group: Weidler Office - 220 NE Weidler, Portland, OR 97232

**CDE Hours:** 2.0 (AGD Subject Code: 149 Multi-Specialty Topics)

**Authorized Signature:**

  
LEARNING & DEVELOPMENT MANAGER, WILLAMETTE DENTAL GROUP



**Keep this form for your records.**

**AGD Members:** Willamette Dental will submit attendance verification to the AGD on your behalf. Please allow at least 30 days for documentation of participation to be added to your transcript.

Approved PACE Program Provider FAGD/MAGD Credit  
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provincial board of dentistry or AGD endorsement.  
(12/1/2014) to (11/30/2017)  
Provider ID# 302477

## Course Attendance Verification

*Attendance for this course is confirmed for*

*Alyssa Kobylinsky*

### Retraction Cord Packing

5.00 CDE Hours

*Natalie Koury*

Natalie Koury  
Learning & Development Manager

Completed on  
**12.05.2019**

Educational Method  
In-Person

AGD Subject Code  
250

AGD #

State and Dental License #

Verification Code  
CordPacking

Instructors  
Desire Mezzanatto & Helen Massar

**Keep this form for your records.**

**AGD Members:** Willamette Dental Group will submit attendance verification to the AGD on your behalf.  
Please allow at least 30 days for documentation of participation to be added to your transcript.



Willamette Dental Group  
Nationally Approved PACE Program  
Provider for FAGD/MAGD credit.  
Approval does not imply acceptance by  
any regulatory authority or AGD endorsement.  
12/1/2018 to 11/20/2020  
Provider ID# 302477

## **TEMPORARY SOFT RELINES FOR FULL DENTURES**

**INSTRUCTOR(S):** Alyssa Kobylinsky, EFDA

**COURSE DESCRIPTION:** This class will provide Expanded Functions Dental Assistants (EFDA) with the education and certificate required in order to apply soft relines for patients with full dentures.

**COURSE OBJECTIVES:** Upon successful completion of this course, as approved by the Oregon Board of Dentistry, the Expanded Functions Dental Assistant will be able to apply temporary soft reline material to a full denture under the indirect supervision of a dentist or dental hygienist, providing that the denture is checked by the dentist or dental hygienist prior to patient dismissal.

**DELIVERY METHOD:** Lecture, Power Point presentation including handouts, instructor demonstration, group discussion, and laboratory practice.

**EVALUATION:** Class grade and certification will be determined by a written exam, and laboratory and clinical performance evaluations. A score of 80% or higher must be achieved for successful completion.

**REQUIREMENTS:** Students must be currently certified as Expanded Function Dental Assistants (EFDA) in the State of Oregon, and must be in good standing. Students are required to submit proof of certification to the instructor at the time of class registration. Students will not be allowed to participate in class without the proper documentation of certification.



**LEARNING OBJECTIVES:**

Upon successful completion of this course, the student should be able to:

1. Explain the legal requirements to place soft relines.
2. Distinguish between the different types of relines.
3. Explain the difference between relining and tissue conditioning.
4. Understand the purpose of soft relines.
5. Evaluate the patient's medical and dental history.
6. Understand the physiological aspects of dentures.
7. Understand the psychological aspects of dentures.
8. Understand the use of the powder and liquid.
9. Understand the polymerization process in the reline material.
10. Understand the health hazard and first aid of the reline material.
11. List and describe purpose of armamentarium.
12. Describe the steps for applying a soft reline.
13. Provide proper home care instructions for denture(s).
14. Make accurate and appropriate chart entry in patient's chart.
15. Demonstrate in lab setting the ability to properly mix, apply, and trim material.

**MATERIALS:**

The following materials are presumed to be present in our instructional location.

- Basic set-up (mirror, explorer, and forceps)
- Denture brush/Toothbrush
- Soft Reline Material (Coe-Soft)
- Suction tips
- Slow speed handpiece and lab bur
- Patient bib and bib clip
- Cotton supplies: cotton rolls, 2x2s
- Air/water syringe tips
- Vaseline
- Patient safety glasses

**Students must wear scrubs to the clinical and laboratory portion of the course.**

**PPE: Please bring your own protective eyewear. Gloves, masks, over-gowns will be provided.**

### **Activity One – Lab Check-off Objectives**

Successful completion of activity will include:

- Provide pre-op and post-op instructions/address questions to lab partner.
- Utilize knowledge learned in Lecture portion to apply soft relines to practice dentures.
- Must pass with 100% proficiency before graduating to Clinical Check-off.

### **Activity Two – Clinical Check-off Objectives**

Successful completion of activity will include:

- Obtaining 100% proficiency during Lab Activity.
- Utilizing a live patient, student will apply a temporary soft reline to a full denture(s)
- Student must follow proper infection control protocols.

### **COURSE CONTENT:**

1. Review Dental Practice Act Divisions 35 and 42

2. Introduction
3. Differences in Relines
4. Ingredients
5. Hazards and First Aid
6. PPE
7. Medical and Dental History
8. Indications
9. Contraindications
10. Procedure
11. Patient Instructions
12. OTC reline material
13. Proper chart documentation

**REFERENCES:**

1. Phinney and Halstead, Dental Assisting: A Comprehensive Approach, 3rd Edition, 2008.
2. Torres & Ehrlich, Modern Dental Assisting, 10th Edition, 2012.
3. Finkbeiner & Halstead, Comprehensive Dental Assisting, A Clinical Approach.
4. Product manufacturer information.
5. Product Material Safety Data Sheets.
6. Dental Practice Act 2011 Division 35 and Division 42.



# Willamette Dental Group

First In Proactive Dental Care

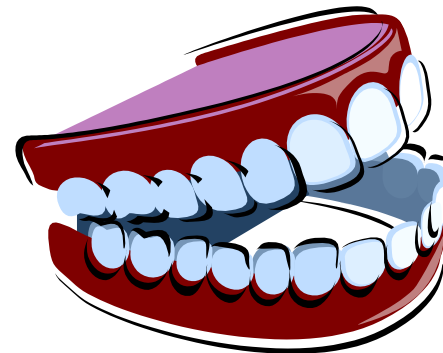
## Soft Reline Course

Alyssa Kobylinsky, EFDA,  
Certified Instructor



# Oregon Law OAR 818-042-0090 OAR 818-035-0030

- In order to apply a soft reline, you must be an Expanded Functions Dental Assistant or a Hygienist (this task is included as “additional functions of a Dental Hygienist.”)
- The soft reline must be prescribed by a Dentist, and denture must be checked prior to placing soft reline.
- You can apply a soft reline under Indirect Supervision of a Dentist or Dental Hygienist, as long as denture is checked by the Dentist or Dental Hygienist prior to patient dismissal.





# Types of Relines

- Rebase
  - Entire denture base is replaced.
  - Original denture acts as impression tray.
  - New denture processed around existing denture teeth.
  - \*\*Patient will be without denture while process is completed.

- Hard Reline
  - Existing denture is used as impression tray.
  - New resin is applied to existing resin, then cured.
  - Resurfaces the denture, filling in the gaps between tissue and denture base.
  - \*\*Patient will be without denture. Process can usually be completed within 24 hours.



# Types of Relines

- Soft Reline aka “Chairside Reline”
  - Chemically activated, self-curing.
  - Quick and simple to apply.
  - Temporary solution.
  - Elastically deforms with low applied stress, but recovers shape when stress is removed.
  - \*\*Patient is not without denture.



- Tissue Conditioner
  - Used when tissues are inflamed or irritated.
    - Could be from ill-fitting denture, or recent procedure.
  - Tissues must be healed before applying reline.
  - Allows healing and cushioning by adapting to shape of underlying tissues as they recover to a healthy state.
  - \*\*Patient is not without denture.





Reline Materials

# What's in the box?

- Ingredients (Check instructions for product you're using)
  - Powder
  - Liquid
- Mixing cups
- Measuring cups
- Spatula
- Lubricant



# What's In the Box?

- Soft reline material is *self-curing*
  - A chemical reaction occurs when you mix the powder and liquid.
  - The material will harden on its own over the course of a few minutes.
  - No additional curing lights or products are necessary.

- Always review the instructions prior to use.
- Tell someone *right away* if there is a splash or spill. This person will help you seek the proper treatment.
- Is there a spill? Splash to the eye? You can access the MSDS for both the powder and liquid:
  - At [msdsonline.com](http://msdsonline.com)
  - Call MSDS Online at 1-888-362-7416

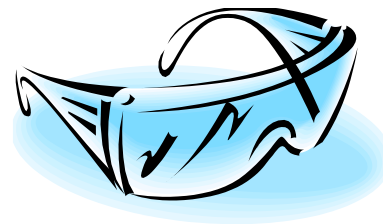
- Powder, sometimes called Polymer
  - Inhalation
  - Eyes
  - Skin
  - Ingestion
  - Spill

- Liquid, sometimes called Monomer
  - Inhalation
  - Eyes
  - Skin
  - Ingestion
  - Spill



# Personal Protective Equipment

- PPE!!!!
  - Glasses
  - Gloves
  - Mask
  - Gown





# Patient Considerations

# Medical History

- Overall Health
- Medications
- Conditions
  - Malnutrition
  - Stroke
  - Cancer



# Dental History

- Exam, cancer screen
- Age of present denture
- Progression of bone loss
- Occlusion/Bite Relationship
- Present comfort



# Indications for Soft Reline

- Loss of suction
- Uncomfortable, ill-fitting
- Loss of chewing capability
- Angular Cheilitis
- Oral habits – grinding, clenching, mouth breather
- Anatomic features – palatal tori
- Patient's age and/or health



# Contraindications for Soft Reline

- Patient is allergic to reline material
- Only a temporary measure
- Material could discolor over time
- Softness is short-lived
- Could support growth of yeasts
- Material could become detached from denture base
- Patient not interested in soft reline





Procedure

- Basic setup
- Slow-speed handpiece with acrylic bur
- Reline material, including lubricant provided with product (Vaseline can be used, also.)
- Paper cup or mixing cup provided with product
- Tongue blade, spatula, or brush for mixing
- Scissors and/or bard parker with #15 blade for trimming



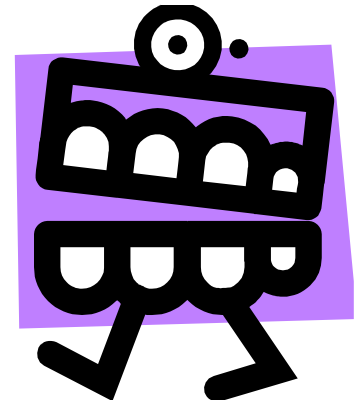
- Review product instructions prior to seating patient.
- Medical history has been updated.
- Doctor prescribes the soft reline.
- Plan the procedure in axiUm and check estimator. Inform patient of any fees.
- Explain the procedure to the patient, ask if they have any questions before you begin.
- Have the patient remove denture and rinse with mouth rinse to reduce the bacteria load. Ask them to apply chapstick, vaseline, or moisten lips to avoid cracking or adhesion of material to soft tissues.

- Examine the patient's mouth for any anatomical features that may make this process difficult or uncomfortable for the patient.
  - Cracking at the corners of the mouth
  - Tori
- Examine the denture.
- Clean the denture utilizing a denture brush and cool water.
- Dentist may remove any existing reline material and/or roughen the tissue surface.
  - In Oregon, the Assistant may remove existing reline material, and/or roughen the tissue surface, and/or adjust the denture outside the patient's mouth if directed to do so by the Dentist.
- Have the dentist check the denture before you begin.

- Lubricate the labial and buccal surfaces, avoiding within 3 mm of the peripheral border. If the denture has plastic teeth, coat the teeth as well.
- Measure, mix, and spatulate material for 30 seconds (do not whip or over-spatulate), and load into denture. Spread on the surfaces to be relined.
- Insert denture and have patient close to centric occlusion. Have patient remain closed for approximately 3 minutes.
- After approximately 3 minutes, have the patient remain closed but ask them move their lips and cheeks (mimic chewing) so muscle periphery is obtained.

# Procedure

- At this point, remove the denture and rinse under cold water.
- Trim away excess material.
- Reinsert denture and have patient hold firmly in centric occlusion for another 5 minutes.
- Remove denture one last time and rinse with cold water.
- Have the doctor evaluate denture before patient is dismissed.
- Denture is now ready for use!



- Denture(s) should remain moist.
- Never use hot water!
- No abrasives or brushes, as these can quickly wear away reline.
- Cleaning best achieved by gently holding denture under cold water and wiping lightly with wet cotton.
- Commercial cleaners (like Efferdent) should not affect reline material.

# Over the Counter Products

- There *are* OTC temporary products that patients can purchase at their local pharmacy; however, in general:
  - The patient can accidentally misuse the product
    - Incorrect fit
    - Burnt tissues
    - Improper mix, so improper setting
- It is best to visit the dentist!



axiUm Documentation

- Once treatment is completed, complete the code, and complete the Removable Prosthetic template note.
- Documentation should include:
  - Who performed the reline
  - What material was used
  - Did you provide home care instructions?
  - Any future treatment that might be necessary





Lab Practice/Written Exam

# Soft Reline Clinic Check-Off Sheet

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Patient Name \_\_\_\_\_

Examining Dentist \_\_\_\_\_

Before participating in the clinical aspect of this course, the following are required:

- Student has passed the written examination with 85% or better.
- Student has obtained 100% proficiency in laboratory session.
- Doctor has prescribed the soft reline and is documented in chart accordingly.

Task: Soft Reline for Full Denture			Satisfactory Yes or No	
Max	Mand	Both		
Dentist has prescribed the soft reline(s).			Yes	No
Health History has been reviewed by examining dentist.			Yes	No
1. Student has set up operatory with all necessary materials/instruments present.			Yes	No
2. Student reviews Health History and discusses any concerns with examining dentist			Yes	No
3. Patient is escorted into the operatory. The student briefly explains the procedure to the patient, showing them the materials to be used, and answers any questions the patient has.			Yes	No
4. Patient bib is placed and safety glasses are given to the patient.			Yes	No
5. Patient is asked to rinse with mouth rinse to reduce bacteria. Ask patient to apply chap stick or Vaseline, or to moisten lips to avoid cracking or adhesion of material to soft tissues.			Yes	No
6. Student washes hands and dons PPE: gloves, glasses, mask, and gown.			Yes	No
7. Properly cleans the denture utilizing denture brush.			Yes	No
8. Removes, or has dentist remove, any existing reline material using slow speed handpiece and lab bur.			Yes	No
9. Roughens, or has dentist roughen, tissue surface for better adhesion.			Yes	No
10. Has dentist check denture before you begin.			Yes	No
11. Applies Vaseline or lubricant provided with material to labial and buccal surfaces, avoiding 3 mm from peripheral border.				
12. Measures, mixes, and spatulates material for approximately 30 seconds, and load into denture, being careful not to over-fill. (This could cause patient to gag.)			Yes	No
13. Inserts denture into patient's mouth and has them close in Centric (Normal) occlusion.			Yes	No
14. After approximately 3 minutes, with the patient remaining closed, has the patient start to move their lips and cheeks to obtain good muscle periphery. Mimic chewing.			Yes	No

15. Student removes denture and rinses it under cold water.	Yes	No
16. Excess material is trimmed away.	Yes	No
17. Student re-inserts denture and has the patient close in Centric (Normal) Occlusion. Has patient remain closed for 5 minutes.	Yes	No
18. Student removes denture one last time and rinses it thoroughly with cold water.	Yes	No
19. Student makes any final adjustments.	Yes	No
20. Has dentist evaluate denture prior to patient dismissal.	Yes	No
21. Provides patient with home care instructions about caring for soft reline(s).	Yes	No
<p>This portion to be completed by <b>examining dentist</b>:</p> <p>Maxillary Soft Reline _____</p> <p>Mandibular Soft Reline _____</p> <p>Max and Mand Soft Reline _____</p> <p>Student correctly applied soft reline material:           PASS</p> <p>Student did not correctly apply soft reline material:    FAIL</p>	<p>Assistant must pass this check off with 100% proficiency.</p>	

## Soft Reline Test

Please record answers on attached answer sheet. *Please do not write on this test.*

1. Anyone can prescribe a soft reline.
  - a. True
  - b. False
2. Assistants can apply soft relines under:
  - a. Direct Supervision
  - b. Indirect Supervision
  - c. General Supervision
  - d. No supervision. As long as the doctor has prescribed it, go ahead and apply the material.
3. A denture rebase:
  - a. Replaces the existing denture base
  - b. Is a temporary fix
  - c. Can be done chairside
4. A hard reline:
  - a. Requires the manufacture of a brand new denture.
  - b. Resurfaces the denture, filling in the gaps between denture base and tissue.
  - c. Is a temporary fix
5. A soft reline:
  - a. Is sometimes referred to as a "Chairside Reline."
  - b. Is quick and simple to apply.
  - c. Is a temporary solution.
  - d. Patient is never without their denture.
  - e. All of the above
6. Tissue Conditioners:
  - a. Are used when tissues are healthy
  - b. Are applied chairside
  - c. Can be applied after the soft reline
  - d. Allow for healing after irritation or inflammation
  - e. B & D
  - f. A & B

7. Soft reline materials are packaged:
  - a. As a powder and liquid
  - b. As a 2 paste system
  - c. Include lubricants and measuring materials
  - d. A & C
  - e. B & C
8. Soft reline material requires the use of a curing light.
  - a. True
  - b. False
9. It is not necessary to review product instructions and MSDS sheets prior to use.
  - a. True
  - b. False
10. If you get powder in your eye, you should:
  - a. Rinse your eye under the eye wash for 30 minutes
  - b. Ask for help, and then quickly review the MSDS.
  - c. Do nothing. It's only powder.
  - d. Rinse your eye with milk.
11. Proper PPEs for applying soft relines include:
  - a. Chairback covers, light covers, and air/water tips
  - b. Gloves only
  - c. Gloves, glasses, mask, and gown
  - d. No PPE is required
12. Medical history should be reviewed:
  - a. To assess current medications
  - b. To assess patient's overall health
  - c. To invade patient's privacy
  - d. A & B
  - e. None of the above
13. During a dental exam:
  - a. A cancer screen should be performed
  - b. The progression of bone loss is assessed
  - c. There is no reason to do an exam. Patient has a denture.
  - d. A & B
  - e. None of the above

14. Indications for applying a soft reline include:

- a. Ill-fitting denture
- b. Loss of chewing capability
- c. Loss of suction
- d. Angular Cheilitis
- e. All the above

15. Contraindications can include:

- a. Material stays the same color over time
- b. It's only a temporary solution
- c. Softness is short lived
- d. B & C
- e. All the above

16. The Armamentarium for soft relines can include:

- a. Reline Material
- b. Scissors or Bard Parker
- c. Lubricant
- d. Paper cup
- e. All the above

17. It is only necessary to clean the denture when there is visible food debris.

- a. True
- b. False

18. A dental assistant can apply a soft reline whenever he/she feels it's appropriate.

It is not necessary to have a doctor prescribe a soft reline.

- a. Both statements are false
- b. Both statements are true
- c. The 1<sup>st</sup> statement is true, 2<sup>nd</sup> statement false
- d. The 2<sup>nd</sup> statement is true, 1<sup>st</sup> is false.

19. It is not necessary to measure the powder and liquid. The higher the viscosity the better.

- a. True
- b. False

20. After you load the denture with reline material and insert the denture in the patient's mouth, you should have them close in \_\_\_\_\_ Occlusion.
- Lateral
  - Posterior
  - Centric
  - Protrusive
21. When applying lubricant to the denture, you should:
- Coat the entire denture
  - Coat the posterior teeth only
  - Coat the labial and buccal surfaces, avoiding within 3 mm of the peripheral border
  - Coat only canine to canine
22. After approximately 3 minutes, you should remove the denture and give it back to the patient. The procedure is complete.
- True
  - False
23. After the reline is set and the patient is ready to leave, it is necessary to have \_\_\_\_\_ evaluate the denture before the patient is dismissed.
- The Dentist or Hygienist
  - The Office Manager
  - The Lead Assistant
  - The Lab
24. Home care instructions for the patient may include:
- Use only warm to hot water to clean the denture
  - Use a hard tooth brush to brush the denture.
  - It's ok to leave them out overnight without soaking them in water.
  - None of these are appropriate.
25. When documenting the soft reline, it is important to include:
- The name of the soft reline material
  - Who performed the reline
  - Home care instructions were provided
  - All the above.

## NYE Ingrid \* OBD

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**From:** Alyssa Kobylinsky <akobylinsky@willamettedental.com>  
**Sent:** Thursday, February 4, 2021 3:29 PM  
**To:** NYE Ingrid \* OBD  
**Cc:** Helen Massar, RDH  
**Subject:** RE: soft reline instructor application  
**Attachments:** Cover Letter.docx; Soft Reline Test.docx; Soft Reline Syllabus.docx; Soft Reline Clinic Check Off Sheet.docx; Soft Reline Course.pptx; credentials- Alyssa Kobylinsky.pdf

Hi Ingrid,

Thank you so much for reaching out to me again! I did not know of the dates so I am sincerely sorry for cutting so close to the deadline!

Here is the requested paperwork in the attachments.

Please let me know if you have any questions and again, thank you!

Warmest Regards,

*Alyssa Kobylinsky, EFDA*  
Dental Assistant Development Specialist

Willamette Dental Group  
6950 NE Campus Way  
Hillsboro, OR 97124  
Toll free: 1.855.4DENTAL x820103  
E-mail: [akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)  
[www.willamettedental.com](http://www.willamettedental.com)

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**From:** NYE Ingrid \* OBD <ingrid.nye@oregondentistry.org>  
**Sent:** Thursday, February 4, 2021 10:46 AM  
**To:** Alyssa Kobylinsky <akobylinsky@willamettedental.com>  
**Cc:** Helen Massar, RDH <hmassar@willamettedental.com>  
**Subject:** RE: soft reline instructor application

Hi Alyssa,

I just want to make sure I'm not overlooking an email with the soft reline course information . . . ? The deadline to make the agenda for the February Board Meeting is already passed, but if I received the information by the end of the day I could likely squeeze it in. Otherwise, I will reserve a place on the April Board Meeting agenda. To make the April Board Meeting, I will need all of the information no later than the last day of March.

Thank you,

*Ingrid Nye*

Examination & Licensing Manager  
Pronouns: she, her, hers

OREGON BOARD OF DENTISTRY



1500 S.W. 1<sup>ST</sup> AVENUE, SUITE #770  
PORTLAND, OR 97201  
PHONE: 971-673-3200  
FAX: 971-673-3202  
[www.Oregon.gov/Dentistry](http://www.Oregon.gov/Dentistry)

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**From:** NYE Ingrid \* OBD

**Sent:** Thursday, December 24, 2020 9:06 AM

**To:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>

**Subject:** RE: soft reline instructor application

Email is acceptable for the course outlines!

Thank you,

*Ingrid Nye*

Examination & Licensing Manager

Pronouns: she, her, hers

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**From:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>

**Sent:** Friday, December 18, 2020 3:08 PM

**To:** NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)>

**Cc:** Helen Massar, RDH <[hmassar@willamettedental.com](mailto:hmassar@willamettedental.com)>

**Subject:** RE: soft reline instructor application

Thank you Ingrid.

Which format works best for the board? Would you like it to be printed and mail a paper copy like other instructor applications or will it be more convenient to submit via email?

I appreciate your help,

*Alyssa Kobylinsky, EFDA*  
Dental Assistant Development Specialist

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E-mail: [akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)  
[www.willamettedental.com](http://www.willamettedental.com)

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**From:** NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)>

**Sent:** Friday, December 18, 2020 2:39 PM

**To:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>

**Subject:** RE: soft reline instructor application

Hi Alyssa,

Yes, each request needs to arrive complete, meaning the course materials will need to be resubmitted for each candidate who wishes to obtain the Soft Relines Instructor Permit. Multiple applicants could be submitted at the same time, however, if that is something that Willamette wishes to do. In that case, I would just make copies of a single course outline for each of the candidates.

Let me know if you have any other questions!

Thank you,

*Ingrid Nye*

Examination & Licensing Manager

Pronouns: she, her, hers

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**From:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>

**Sent:** Thursday, December 17, 2020 12:00 PM

**To:** NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)>

**Cc:** Helen Massar, RDH <[hmassar@willamettedental.com](mailto:hmassar@willamettedental.com)>

**Subject:** RE: soft reline instructor application

Hello Ingrid,

Thank you for reaching out! We are wishing Teresa all the best in her retirement and look forward to working with you as our point of contact.

Willamette Dental Group has a Board approved course as well as a few certified instructors that have been through the process. Do you keep the course on record for review? If not, we can resubmit again with a letter.

Thank you for your help with this,

*Alyssa Kobylinsky, EFDA*

Dental Assistant Development Specialist

Willamette Dental Group  
6950 NE Campus Way  
Hillsboro, OR 97124

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**From:** NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)>  
**Sent:** Tuesday, December 15, 2020 10:57 AM  
**To:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>  
**Cc:** ROBINSON Haley \* OBD <[Haley.Robinson@oregondentistry.org](mailto:Haley.Robinson@oregondentistry.org)>  
**Subject:** RE: soft relines instructor application

The e-mail below is from an external source. Please do not open attachments or click links from an unknown or suspicious origin.

Hello Helen,

Teresa is retired; in the future, please feel free to send inquiries of this nature directly to me!

Oregon licensed dentists, hygienists, and dental assistants who have met specific requirements are able to obtain instructor permits for teaching soft relines to dental assistants, similar to how the same individuals can obtain permits for teaching radiologic proficiency for dental assistants, placing material subgingivally for dental assistants, and pit and fissure sealants for dental assistants. However, the process is somewhat different when it comes to soft relines, as the Board does not have a pre-approved curriculum for a soft relines course, and each applicant must develop and submit their own curriculum for review and approval by the Board.

The applicant should develop the course materials for a comprehensive training course in soft relines for dental assistants, including a thorough course outline, syllabus, exam, etc. You should then send those completed materials to the Board along with a letter officially requesting approval of your course in soft relines. Assuming all materials are submitted on time, the Board will consider the request at a future Board Meeting.

Assuming the Board approved your course, we would then send you a prepayment form for the \$40.00 instructor permit fee. Once that payment had been received, your instructor permit in soft relines would be issued and mailed to you.

Please let me know if you have any questions!

*Ingrid Nye*

Examination & Licensing Manager  
Pronouns: she, her, hers

OREGON BOARD OF DENTISTRY  
1500 S.W. 1<sup>ST</sup> AVENUE, SUITE #770  
PORTLAND, OR 97201  
PHONE: 971-673-3200  
FAX: 971-673-3202  
[www.Oregon.gov/Dentistry](http://www.Oregon.gov/Dentistry)

**IMPORTANT NOTICE ABOUT COVID-19/NOVEL CORONAVIRUS:** At this time, the Oregon Board of Dentistry (OBD) intends to remain fully operational, with OBD staff reporting to work. However, the OBD anticipates the possibility that individual staff members may abruptly be absent from work and unable to respond to email, possibly for long periods of time, due to a quarantine after exposure to COVID-19, an illness, or a need to care for a family member. **Please allow 1-2 business days for a response to your email.** If you have not received a response, please email [information@oregondentistry.org](mailto:information@oregondentistry.org) or call 971-673-3200 and any available OBD staff member will respond. Thank you for your patience.

**THE OBD OFFICE IS CURRENTLY CLOSED TO THE PUBLIC.**

EXAMINATION & LICENSING MANAGER CURRENT OFFICE HOURS: **MONDAY – THURSDAY, 6:00AM – 4:30PM.**  
OBD TELEPHONE HOURS: **MONDAY – FRIDAY, 7:30AM – 4:00PM.**

Your opinion matters! Please complete our brief Satisfaction Survey at: <https://www.surveymonkey.com/r/OBDSurveyLink>

**DATA CLASSIFICATION LEVEL 2 - LIMITED**

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**From:** ROBINSON Haley \* OBD <[Haley.Robinson@oregondentistry.org](mailto:Haley.Robinson@oregondentistry.org)>

**Sent:** Tuesday, December 15, 2020 8:44 AM

**To:** NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)>

**Subject:** FW: soft reline instructor application

*Haley Robinson*

Office Manager

Oregon Board of Dentistry

1500 SW 1<sup>st</sup> Avenue, Suite 770

Portland, OR 97201

Telephone: 971-673-3200

FAX: 971-673-3202

[www.oregon.gov/dentistry](http://www.oregon.gov/dentistry)

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Please consider the environment before printing this e-mail

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**From:** Alyssa Kobylinsky <[akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)>

**Sent:** Monday, December 14, 2020 3:15 PM

**To:** ROBINSON Haley \* OBD <[Haley.Robinson@oregondentistry.org](mailto:Haley.Robinson@oregondentistry.org)>

**Cc:** Helen Massar, RDH <[hmassar@willamettedental.com](mailto:hmassar@willamettedental.com)>

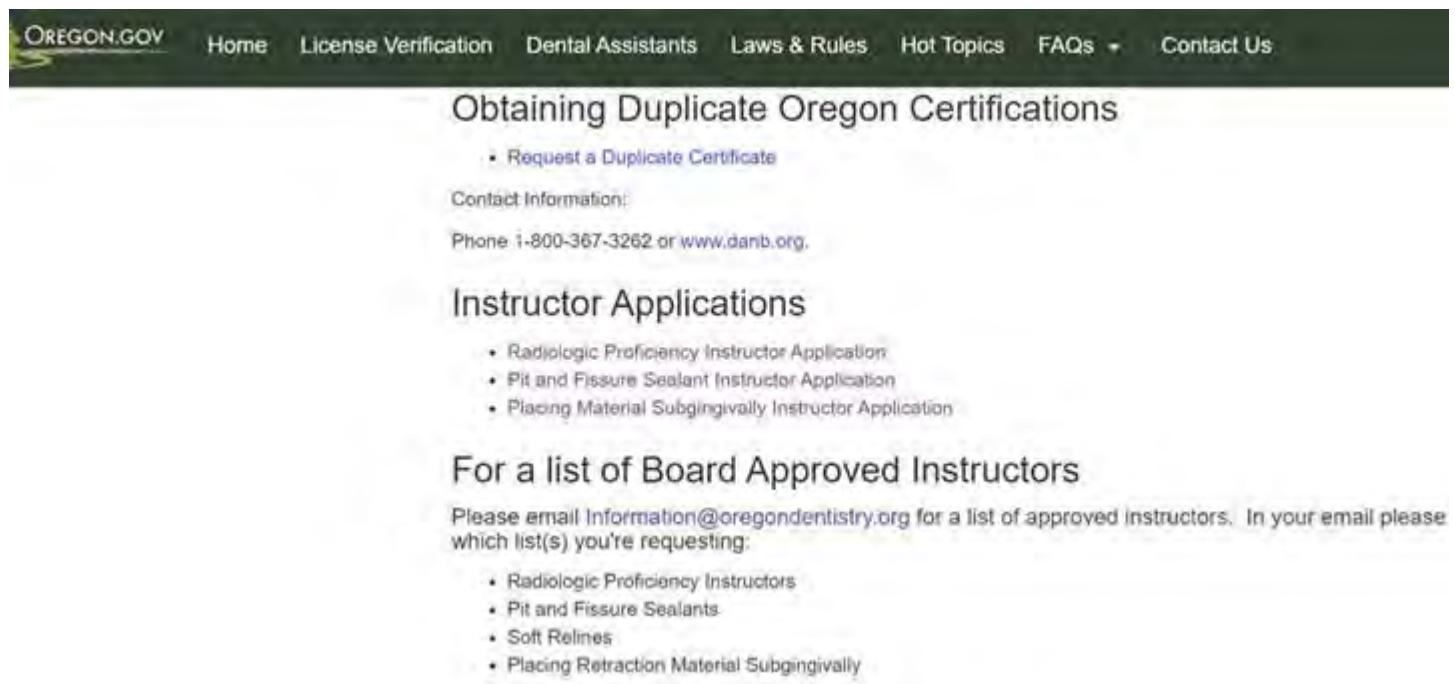
**Subject:** soft reline instructor application

Hi Haley,

I am looking for a Soft Reline Instructor Application but unable to locate on DANB or OBD websites. I inserted a screenshot of the website for reference.

Does the soft reline tie in with one of the other applications? If not, can you direct me to the appropriate page/application?

I appreciate your help,  
Alyssa



The screenshot shows the Oregon Dental Board website. The top navigation bar includes links for Oregon.gov, Home, License Verification, Dental Assistants, Laws & Rules, Hot Topics, FAQs, and Contact Us. The main content area features three sections: 'Obtaining Duplicate Oregon Certifications' with a link to 'Request a Duplicate Certificate'; 'Contact Information' with phone and website details; 'Instructor Applications' with links for Radiologic Proficiency, Pit and Fissure Sealant, and Placing Material Subgingivally; and 'For a list of Board Approved Instructors' with an email request link and a list of instructor types including Radiologic Proficiency, Pit and Fissure Sealants, Soft Relines, and Placing Retraction Material Subgingivally.

*Alyssa Kobylinsky, EFDA*  
Dental Assistant Development Specialist

Willamette Dental Group  
6950 NE Campus Way  
Hillsboro, OR 97124  
Toll free: 1.855.4DENTAL x820103  
E-mail: [akobylinsky@willamettedental.com](mailto:akobylinsky@willamettedental.com)  
[www.willamettedental.com](http://www.willamettedental.com)

**Request for Approval of a Local Anesthesia Course – University of New Mexico.**

Rebecca Diemer, PhD of the University of New Mexico is requesting that the Board approve the University of New Mexico continuing education program for local anesthesia.

**Relevant Rules:**

**OAR 818-035-0040 – Expanded Functions of Dental Hygienists**

(1) Upon completion of a course of instruction in a program accredited by the Commission on Dental Accreditation of the American Dental Association or other course of instruction approved by the Board, a dental hygienist who completes a Board approved application shall be issued an endorsement to administer local anesthetic agents under the general supervision of a licensed dentist.

## NYE Ingrid \* OBD

---

**From:** Rebecca M Diemer <RDiemer@salud.unm.edu>  
**Sent:** Monday, December 7, 2020 1:58 PM  
**To:** 'Ingrid.nye@state.or.us'  
**Subject:** RE: Application for DEHY Local Anesthesia Endorsement- Andres Garcia- UNM Anesthesia Curriculum  
**Attachments:** A 2020UNM LA CE Schedule (1).doc; Garcia- Anesthesia Certification.pdf

Dear Ingrid,

I am writing on behalf of Andres Garcia (License number: H7133) who received notice that his request for his Local Anesthesia Endorsement has not been approved by the OBD. I am attaching, as requested proof of completion of our Local Anesthesia for the Dental Hygienist course, along with the course curriculum for your review. If I can provide anything else in support of his application, please let me know. The University of New Mexico is a CODA accredited Dental Hygiene program, and our local anesthesia course is taught by Demetra Logothetis, RDH, MS.

Best,  
Rebecca

Rebecca Diemer, PhD  
Senior Academic Advisor  
Division of Dental Hygiene, Department of Dental Medicine  
University of New Mexico  
MSC09 5020, Albuquerque, NM 87131

[rdiemer@salud.unm.edu](mailto:rdiemer@salud.unm.edu)  
505-272-8205

*Preferred pronouns: (ella, ella y suya/ she, her and hers)*







**SCHOOL OF MEDICINE**  
DEPARTMENT OF DENTAL MEDICINE

8/25/2020

RE: Andres Garcia, Local Anesthesia Course

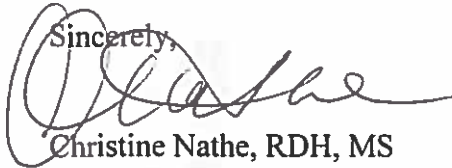
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To Whom It May Concern,

Andres Garcia completed the Local Anesthesia for the Practicing Dental Hygienist Course at the University of New Mexico February 19-February 22, 2020. The course was taught by Demetra Logothetis, RDH, MS for 40 CEU's, 24 didactic hours and 16 clinical hours.

If I can provide additional verification, please do not hesitate to contact me.

Sincerely,



Christine Nathe, RDH, MS  
Professor and Director  
University of New Mexico Division of Dental Hygiene

[cnathe@salud.unm.edu](mailto:cnathe@salud.unm.edu)

**Local Anesthesia for the Practicing Dental Hygienist**  
**Course Schedule**  
**University of New Mexico**

**Textbook: Logothetis D.D., Local Anesthesia for the Dental Hygienist, Edition 2, Elsevier, St. Louis, 2017**

**February 19, 2020 – Didactic Course Work**

<b>Time</b>	<b>Subject</b>	<b>Reading Assignment</b>
9:00 – 9:15	Course Orientation	
9:15 – 9:50	Neurophysiology	Logothetis Chapter 2
9:50 – 10:00	Break	
10:00 – 10:45	Pharmacology of Local Anesthetic Agents	Logothetis Chapter 3
10:45 – 11:15	Pharmacology of Vasoconstrictors	Logothetis Chapter 4
11:15 – 11:30	Break	
11:30 – 12:00	Local Anesthetic Agents	Logothetis Chapter 5
12:00 – 1:00	Lunch	
1:00 – 2:00	Preanesthetic Assessment	Logothetis Chapter 7
2:00 – 2:15	Break	
2:15 – 2:45	Anatomical Considerations	Logothetis Chapter 10
2:45 – 3:00	Break	
3:00 – 4:30	Determining Drug Doses	Logothetis Chapter 8

**February 20, 2020 – Didactic Course Work**

<b>Time</b>	<b>Subject</b>	<b>Reading Assignment</b>
9:00 – 9:45	Armamentarium	Logothetis Chapter 9
9:45 – 10:30	Basic Injection Technique	Logothetis Chapter 11
10:30 – 10:45	Break	
10:45 – 12:00	Maxillary Nerve Anesthesia	Logothetis Chapter 12
12:00 – 1:00	Lunch	
1:00 – 2:15	Mandibular Nerve Anesthesia	Logothetis Chapters 13, 14
2:15 – 2:30	Local Anesthetic Complications	Logothetis Chapter 15
2:30 – 2:45	Break	
2:45 – 3:30	Cases	
3:30 – 4:30	Questions or Catch up	

### **February 21, 2020 – Clinical and Didactic Course Work**

<b>Time</b>	<b>Injections</b>	<b>Assignment</b>
8:30 – 9:00	Demonstrations	
9:00 – 11:00	Maxillary Injections Mandibular Injections	Logothetis Chapters 12, 13
11:00 – 11:30	Review	
11:30 – 12:45	Lunch	
12:45 – 2:45	Practice Injections	Logothetis Chapters 12, 13

### **February 22, 2020 – Clinical and Didactic Course Work**

<b>Time</b>	<b>Injections</b>	<b>Assignment</b>
8:00 – 9:00	Mock Board Exam	
9:00 – 11:00	Practice Injections	Logothetis Chapter 12, 13
11:30 – 12:00	Break	
12:00 – 1:30	Competency evaluations Mock Board Exam	Logothetis Chapter 12, 13

### **Request for Board Recognition as Dental Study Group – Dental Hero**

The Board has received a request from Clark Fairbanks Brinton, D.M.D., a Board Member of Hero Dental Education, for the Board to recognize Hero Dental Education as a dental study group, per ORS 679.050. If the Board votes to recognize Hero Dental Education as a dental study group, an authorized officer for Hero Dental Education will be able to request temporary non-resident permits for reputable nonresident dentists (duly licensed in another state or country) to travel to Oregon and practice dentistry strictly within the context of CE courses provided by Hero Dental Education.

### **Relevant Rules:**

#### **ORS 679.050 Nonresident dentists giving or receiving instruction; hospital permits.**

- (1) If a reputable and duly licensed practitioner in dentistry of another state or country is asked to appear and demonstrate, receive or give instruction in the practice of dentistry before any qualified dental college or dental organization or **dental study group recognized by the Oregon Board of Dentistry**, the secretary of the board shall issue on written request of an authorized officer of such college or dental organization or dental study group, without fee, a permit for such purpose. A permit shall be issued upon such terms as the board shall prescribe.

1/18/2021  
Hero Dental Education  
16205 NW Bethany Ct STE #112  
Beaverton OR 97229

Members of the Oregon Board of Dentistry,

We would like to request formal recognition of Hero Dental Education as a dental study group. We have been established for just over three years as a group offering continuing dental education with the following organizational goals:

- Provide excellent, scientifically sound CE to general dentists
- Create a culture of excellence to improve outcomes for dentist and their patients
- Increase CE offerings from well-vetted and diverse providers
- Offer hands-on clinical learning opportunities to dentists
- Be responsive to the needs of dentists to audit and adapt our course offerings annually

As the first step to formalize our dental study group, we applied for and received accreditation from the Academy of General Dentistry as a nationally approved PACE program last fall. We believe that properly and thoroughly trained dentists will practice dentistry to a higher standard of care and protect the interests of their patients.

We look forward to formal recognition by the Board. Please feel free to contact me with any questions you may have.

Thank you,

Clark Brinton D.M.D.  
clark@arvory.com  
cell (505) 273-4994

## **Hero Dental Education Planning Meeting Minutes**

### ***Planning Meeting Minutes***

***7/25/2020***

***Hero Dental Education Facility***

***Beaverton, OR***

#### ***Attendance:***

***Clark Brinton, Board Member***

***Seth Huish, Board Member***

***Mackenzie Taylor, Administrative Manager***

#### **Meeting Minutes:**

**7/25/2020 - 5:30 PM**

**Hero Dental Education Facility**

Reviewed most recent course, Dental Implants and Grafting to determine what went well and areas for improvement:

Socially distant format went well, attendees seated 6 feet apart and wore masks throughout. Course material well presented, but need a bigger whiteboard for future events. CB to purchase one on rolling wheels.

Hands on portion went smoothly, need to designate staff member to sterilize all equipment before shipping it back. Determined that for now all materials will be packaged in hard shell containers and processed in the Powell dental office, then returned to the CE facility for shipping. Sent with Dr. M.

Reviewed upcoming course, Accelerated Full Arch Implant Course, scheduled for Aug 21-22:

Reviewed course flier to ensure had all pertinent info.

Assigned attendee registration duties to MT.

Discussed needed materials to improve next course based on past one.

Reviewed program objectives for upcoming course:

Course objectives included within the flier for the upcoming course, reviewed and approved by board members

Review of program goals:

Discussed desire to get testimonials from course attendees. Consent for photos/videos should be signed by attendees prior to making testimonial video. Use iPhone for now, will add a videocamera and lapel mic.

Program goals to add practice management course in addition to heavy dental implant focus. Will work toward getting state board approval for live CE courses.

Additional board meeting scheduled in two weeks August 8th to review preparations for upcoming course.

Next meeting may be partially via phone due to two board members being out of town.



560 W. Lake St.  
Sixth Floor  
Chicago, IL USA  
60661-6600

312.440.4300  
Fax: 312.440.0559  
Toll-free: 888.243.3368  
agd.org

November 20, 2020

Provider ID# 400829  
Hero Dental Education  
Clark Brinton, DMD  
16205 NW Bethany Ct #112  
Beaverton, OR 97006

Via email: [clark@arvory.com](mailto:clark@arvory.com)

Dear Dr. Brinton:

Congratulations! On behalf of the Academy of General Dentistry (AGD), I am pleased to inform you that **Hero Dental Education**, provider ID # **400829**, has received approval from the AGD Program Approval for Continuing Education (PACE) Council. Please use your provider ID number on all correspondence. The approval period extends from **12/1/2020 to 11/30/2022**. Check your listing on the *Find a PACE Approved Provider* page of the AGD Website. E-mail [PACE@agd.org](mailto:PACE@agd.org) if there are any corrections or updates to your information. The PACE Council noted the following concerns with your application. The council will expect to see improvements in each of the areas listed below if you reapply for approval in the future:

**Administration:** The information you provided in your application indicated that your organization has not fully identified administrative responsibility for continuing education activities. Please consider either identifying responsibilities more clearly or dividing tasks among additional staff or planning committee members. Please review Standard I, Criteria A through P when preparing job descriptions to better ensure your organization meets the expectations of the AGD PACE Program.

**Needs Assessment:** The council expects organizations to gather needs assessment data from multiple sources, including surveying or interviewing members of the intended audience. This data should be used by your planning committee to objectively determine the upcoming professional needs and interests of your audience and these conversations should be documented in your planning committee minutes. The content of your programs should address these needs. The council recommends you consider expanding the number of sources you use to gather needs assessment information. If you reapply for approval in the future the council will expect you to explain how your needs assessment activities are used for future planning.

**Publicity:** Programs providers are required to develop all publicity according PACE Standard IX to ensure it is informative and not misleading. Please work to make sure all future publicity produced by your organization includes the elements listed in Standard IX.

**Evaluation:** PACE Standard X requires program providers to develop and utilize an activity evaluation mechanisms that measures achievement of course objectives, effectiveness of the teaching method and materials, effectiveness of your administration processes and how engaging and prepared instructors were. The council expressed concern with the sample you submitted did not adequately measure these areas. The council recommends you consider revising this form to better assess your audiences satisfaction with the educational content of your program. Samples of completed course evaluations must be included with your next application.

**Commercialism/Promotional Conflict of Interest:** Approved providers and their instructors must disclose to participants any monetary or other support the program provider may have received from a commercial entity. Disclosure must be made in publicity materials and at the beginning of the presentation itself. Based on the information presented in your application the council was not sure that all financial support has been fully disclosed to participants. Future applications should clearly document how all outside support has been disclosed in advance to participants.

Please review the current PACE Program Guidelines available on the AGD Website. PACE Standard XI requires all PACE providers to submit CE credits for **AGD member** attendees to the AGD within 30 days of course completion. **Effective Jan. 1 2017 all approved providers must submit CE through the AGD Website.** To read more about this please log on to [www.agd.org](http://www.agd.org). Enter **400829** as your username/member as your username/member ID and use the password you were assigned when you completed your application. Next, using the blue pullout menu on the right, click on the plus sign (+) next to *Continuing Education & Events* and then the plus sign (+) next to the work PACE. Then click on *PACE Provider Resources*. You can review the three options for submitting CE to the AGD on the *PACE Provider Resources* page. If you have questions about online rosters, CSV file uploads or API submissions, please email the AGD at [PACE@agd.org](mailto:PACE@agd.org)

The AGD requires that you use the AGD PACE Logo and the following approval statement on all publicity:



Hero Dental Education  
Nationally Approved PACE Program Provider for FAGD/MAGD credit.  
Approval does not imply acceptance by  
any regulatory authority or AGD endorsement.  
12/1/2020 to 11/30/2022.  
Provider ID# 400829

You can receive an electronic copy of the AGD PACE logo by e-mailing a request to [PACE@agd.org](mailto:PACE@agd.org). The terms "accreditation," "accredited" or "certified" must not be used in conjunction with PACE approval.

Approved providers have the obligation, if requested, to allow one monitor at least one time per year to monitor one of their programs. Details on the AGD monitoring program can be found in the PACE Program Guidelines.

The AGD e-mails approval renewal notices to providers approximately eleven months and six months before their expiration date. All nationally approved PACE Providers are required to pay an annual non-refundable maintenance fee in addition to the non-refundable application fee. Providers will receive an e-mail invoice for this fee approximately 90 days prior to each due date. To learn more about PACE visit the PACE section of AGD Website often. This section is designed to help you manage your program.

Thank you again for your commitment to providing quality continuing dental education.

Sincerely,

Ashley W. Lamay, DDS  
Chair, Program Approval for Continuing Education (PACE) Council





February 5–6th

Hero Dental Education

## Full Arch Accelerated Course

Clark Brinton DMD

Time: 8:00am–5:00pm(Registration @ 7:30am)

Location: Hero Dental Education

16205 NW Bethany Ct. Ste 112, Beaverton, OR 97006

CE Credits: 16

Tuition: \$2999

✓ **Part I** Planning and Pre–Surgery

✓ **Part II** Surgery and Conversion

✓ **Part III** Prosthetics and Complications

## Full–Arch: Part I – Planning and Pre–Surgery

### » Presentation

- Overview of Full–Arch implant therapy options
- Overview of All–On–X treatment
- Hands–on familiarization with full–arch implant components and prosthetics
- Case selection for full arch therapy including local and systemic factors
- Case presentation and consent considerations
- Pre–surgical planning on CT–software
- Simulated case planning module
- Discuss Provisional Restoration Design
- Review prosthetic limitations of materials and how to plan accordingly
- Discuss common errors in full arch treatment planning and how to avoid them

### » Learning Objectives

- ✓ Understand different full arch implant therapy modalities
- ✓ Identify the indications, benefits and limitations of each therapy
- ✓ Understand the technical premise of immediate full–arch implant loading
- ✓ Gain ability to select appropriate candidates for All–on–X therapy
- ✓ Understand the effects of systemic conditions on treatment success
- ✓ Know the steps required to prepare a case for treatment
- ✓ Be able to effectively plan for full arch surgery
- ✓ Read cone beam radiographs and digitally plan full arch implants
- ✓ Understand the prosthetic space requirements of common prosthetic choices
- ✓ Recognize and avoid common errors in planning

# Full-Arch: Part II – Surgery and Conversion

## » Presentation

- Review Full-ArchTreatment Options and Planning
- Discuss patient management during surgery and sedation options
- Review guided and non-guidedsurgical strategies
- Discuss flap design and soft tissue management
- Simulated hands-on double arch surgery on models with reduction, implant placement, prosthetics, and immediate conversion
- Strategies to gain sufficient stability for immediate loading
- Using prosthetics and implant timing to parallel multi-units
- Closingsoft tissue for successful healing
- Considerationsfor successful immediate design and conversion
- Step by step lab process for a strong temporary
- Managing provisional complications during healing

## » Learning Objectives

- ✓ Understand how to manage a patient during full arch surgery
- ✓ Know how to perform a guided or non-guidedfull arch surgery
- ✓ Understand successful soft tissue management during surgery
- ✓ Know how to sequence surgery for a successful outcome
- ✓ Identify and correct surgical complications
- ✓ Recognize and use appropriate prosthetics for immediate conversion
- ✓ Understand lab processes to fabricate and immediate full-arch provisional
- ✓ Identify and address complications during healing phase

# Full-Arch: Part III – Final Prosthetics and Complications

## » Presentation

- Review Full-ArchPlanning and Surgery
- Discuss various options for final full-archprosthetics
- Streamlined protocol for verified splinted passive impression and models
- Review Current dental lab processes for final fabrication
- Recommended maintenance protocols
- Protocols for prosthetic complications –esthetic, masticatory, speech related
- Discussion of surgical complications and remedies
- Discuss long term maintenance of prosthetics

## » Learning Objectives

- ✓ Identify and address complications with final –esthetic, masticatory, speech related
- ✓ Understand full arch prosthetic options and indications
- ✓ Know how to take verified records efficiently
- ✓ Avoid surgical and prosthetic complications by planning ahead
- ✓ Understand lab processes for fabrication of final prosthetics
- ✓ Identify and mitigate surgical complications
- ✓ Understand ongoing maintenance protocols

## Clark Brinton DMD

### » BIO



Clark Brinton graduated OHSU School of Dentistry as 2013 class valedictorian after training under Dr. Stanley Malamed in IV sedation during 3rd and 4th year. He served four years in the National Health Service Corps across rural New Mexico where he honed oral surgery skills and moonlighted providing IV sedation, 3rd molar and dental implant services. Clark practices in Portland, Oregon where he co-founded the Arvory Group which owns and manages 10 dental offices and a dental marketing group. Clark co-owns Hero Dental Lab to meet the growing and complex implant restorative needs inside and outside his practices. He continues as an unrecovered CE addict, constantly attending and teaching implant courses.



**August 21<sup>st</sup> - 22<sup>nd</sup>**

**Hero Dental Education**

## Full Arch Accelerated Course

Clark Brinton DMD

**Time:** 8:00am-5:00pm (Registration @ 7:30am)

**Location:** Hero Dental Education

16205 NW Bethany Ct. Ste 112, Beaverton, OR 97006

**CE Credits:** 16

**Tuition:** \$2999

✓ **Part I** Planning and Pre-Surgery

✓ **Part II** Surgery and Conversion

✓ **Part III** Prosthetics and Complications

## Full-Arch: Part I - Planning and Pre-Surgery

### » Presentation

- Overview of Full-Arch implant therapy options
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# Full-Arch: Part II - Surgery and Conversion

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## » Presentation

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- ✓ Identify and correct surgical complications
- ✓ Recognize and use appropriate prosthetics for immediate conversion
- ✓ Understand lab processes to fabricate and immediate full-arch provisional
- ✓ Identify and address complications during healing phase

# Full-Arch: Part III - Final Prosthetics and Complications

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## » Presentation

- Review Full-Arch Planning and Surgery
- Discuss various options for final full-arch prosthetics
- Streamlined protocol for verified splinted passive impression and models
- Review Current dental lab processes for final fabrication
- Recommended maintenance protocols
- Protocols for prosthetic complications - esthetic, masticatory, speech related
- Discussion of surgical complications and remedies
- Discuss long term maintenance of prosthetics

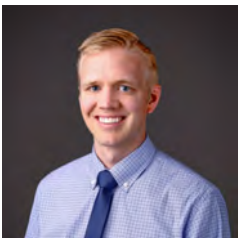
## » Learning Objectives

- ✓ Identify and address complications with final -esthetic, masticatory, speech related
- ✓ Understand full arch prosthetic options and indications
- ✓ Know how to take verified records efficiently
- ✓ Avoid surgical and prosthetic complications by planning ahead
- ✓ Understand lab processes for fabrication of final prosthetics
- ✓ Identify and mitigate surgical complications
- ✓ Understand ongoing maintenance protocols

## Clark Brinton DMD

---

### » BIO



Clark Brinton graduated OHSU School of Dentistry as 2013 class valedictorian after training under Dr. Stanley Malamed in IV sedation during 3rd and 4th year. He served four years in the National Health Service Corps across rural New Mexico where he honed oral surgery skills and moonlighted providing IV sedation, 3rd molar and dental implant services. Clark practices in Portland, Oregon where he co-founded the Arvory Group which owns and manages 10 dental offices and a dental marketing group. Clark co-owns Hero Dental Lab to meet the growing and complex implant restorative needs inside and outside his practices. He continues as an unrecovered CE addict, constantly attending and teaching implant courses.

# Hands-on Implants and Grafting

Clark Brinton DMD

## » Presentation

- Review bone physiology, the osteotomy-implant interface, primary and secondary stability and loading protocols.
- Review patient management, anesthetic considerations, sedation options and pharmaceutical protocols.
- Review implant characteristics, including surface texture, thread design, and connection types.
- Discuss surgical technique and recommended armamentarium
- Discuss correct implant placement for predictable restoration and esthetics with the biological background of blood flow and biological width
- Tissue management and flap use and design
- Reviewing a cone beam –CT image prior to treatment
- Review socket grafting technique
- Discuss a predictable guided bone regeneration technique
- Discuss a predictable crestal sinus lift protocol

## » Hands On

- Implant placement
- Socket grafting
- Guided bone regeneration
- Tissue release and suturing techniques
- Crestal sinus lift

## » Learning Objectives

- Identify the biological properties of bone as a living organ
- Understand the osteotomy-implant interface in vivo
- Learn a predictable implant placement protocol
- Familiarization with the implant motor, surgical and prosthetic kits
- Learn a simplified approach to socket grafting
- Learn the components of a predictable GBR technique
- Learn appropriate tissue release and suture techniques
- Learn a predictable crestal sinus lift technique

**Date:** February 12<sup>th</sup>, 2021

**Time:** 8:00 am –5:00pm (Registration @ 7:30)

**Location:** Hero Dental Education  
16205 NW Bethany Ct Ste 112,  
Beaverton OR

**CE Credits:** 8 Credits

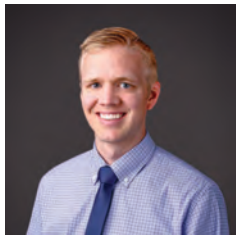
**Tuition:** \$1149

**Contact:** Mackenzie Taylor –971-303-1834

# Clark Brinton DMD

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## » BIO



Clark Brinton graduated OHSU School of Dentistry as 2013 class valedictorian after training under Dr. Stanley Malamed in IV sedation during 3rd and 4th year. He served four years in the National Health Service Corps across rural New Mexico where he honed oral surgery skills and moonlighted providing IV sedation, 3rd molar and dental implant services. Clark practices in Portland, Oregon where he co-founded the Arvory Group which owns and manages 10 dental offices and a dental marketing group. Clark co-owns Hero Dental Lab to meet the growing and complex implant restorative needs inside and outside his practices. He continues as an unrecovered CE addict, constantly attending and teaching implant courses.



## NYE Ingrid \* OBD

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**From:** Dental Implant Hero <clark@arvory.com>  
**Sent:** Tuesday, January 19, 2021 10:45 PM  
**To:** NYE Ingrid \* OBD  
**Subject:** Re: Live Patient Course  
**Attachments:** 400829A.PDF; Hero Dental Education (1).pdf; Meeting Minutes Hero Dental Education.pdf; AcceleratedFACFeb56.pdf; hands-on-dental-implants-and-graftingfeb.pdf; Accelerated-Full-Arch-Course.pdf

Hi Ingrid,

COVID slowed us down a little, but we have been hard at work to formalize Hero Dental Education as a recognized dental study group. Based on your recommendations, I've attached the following:

- 1) A letter requesting formal recognition of Hero Dental Education as a dental study group by the Board
- 2) Documentation of our approval by the Academy of General Dentistry as a nationally approved PACE provider
- 3) Minutes from a planning meeting and recent and upcoming course fliers
- 4) Our planned training schedule for 2021

If there's anything else I can provide, please let me know. As you are the expert and I know very little about this approval process, if there's more documentation you think would be good, please let me know and I'm happy to provide it. Feel free to email me or reach me directly on my cell 505-273-4994.

Thank you!  
Clark Brinton

On Wed, Aug 5, 2020 at 4:09 PM NYE Ingrid \* OBD <[ingrid.nye@oregondentistry.org](mailto:ingrid.nye@oregondentistry.org)> wrote:

Hi Clark,

A dental study group meeting the definition found in OAR 818-001-0002 "*a group of licensees who come together for clinical and non-clinical educational study for the purpose of maintaining or increasing their competence*" could submit a request to be recognized by the Board, as the statutes allows Board-recognized dental study groups to request temporary non-resident permits for reputable and duly-licensed dentists who practice elsewhere. If you wanted to do that, you should submit:

1. A letter formally requesting that the Board recognize "Hero Dental Education" as a dental study group.
2. Articles of incorporation, mission statement, other documentation demonstrating that your group is a formalized dental study group.
3. Agenda/minutes from a recent meeting.
4. Training/education schedule or plan.

Please feel free to contact me with any questions!

*Ingrid Nye*

Examination & Licensing Manager  
Pronouns: she, her, hers

OREGON BOARD OF DENTISTRY  
1500 S.W. 1<sup>ST</sup> AVENUE, SUITE #770

PORTLAND, OR 97201  
PHONE: 971-673-3200  
FAX: 971-673-3202  
[www.Oregon.gov/Dentistry](http://www.Oregon.gov/Dentistry)

**IMPORTANT NOTICE ABOUT COVID-19/NOVEL CORONAVIRUS:** At this time, the Oregon Board of Dentistry (OBD) intends to remain fully operational, with OBD staff reporting to work. However, the OBD anticipates the possibility that individual staff members may abruptly be absent from work and unable to respond to email, possibly for long periods of time, due to a quarantine after exposure to COVID-19, an illness, or a need to care for a family member. **Please allow 1-2 business days for a response to your email.** If you have not received a response, please email [information@oregondentistry.org](mailto:information@oregondentistry.org) or call 971-673-3200 and any available OBD staff member will respond. Thank you for your patience.

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OBD TELEPHONE HOURS: **MONDAY – FRIDAY, 7:30AM – 4:00PM.**

Your opinion matters! Please complete our brief Satisfaction Survey at: <https://www.surveymonkey.com/r/OBDSurveyLink>

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**From:** Dental Implant Hero <[clark@arvory.com](mailto:clark@arvory.com)>

**Sent:** Tuesday, August 4, 2020 3:46 PM

**To:** NYE Ingrid <[Ingrid.Nye@state.or.us](mailto:Ingrid.Nye@state.or.us)>

**Subject:** Re: Live Patient Course

Hi Ingrid,

I had reached out to you a couple of months ago about getting board approval for a live patient course under the CE certification of Straumann. After talking with their educational department we determined that they don't qualify under Oregon statutes since they are a dental implant manufacturer. As such, I am proceeding with getting PACE certification for my own dental organization. We have had an informal study group for the last few years which we are formalizing as Hero Dental Education. We are submitting with the AGD for PACE CE certification, and I wanted to check with you if this process needs to be completed before seeking approval with the Oregon Board, or if I should do both concurrently. If you could let me know the best way to proceed I would appreciate it!

Thank you,  
Clark Brinton

On Fri, May 8, 2020 at 3:14 PM Ingrid Nye <[Ingrid.Nye@state.or.us](mailto:Ingrid.Nye@state.or.us)> wrote:

Hi Jessica,



Thank you so much for getting in touch. ORS 679.050 allows us to issue temporary non-resident permits to allow reputable and duly licensed (in another state) practitioners of dentistry to receive or give instruction in the practice of dentistry. In order to receive such these permits, they would have to be requested by an “authorized officer” of “any qualified dental college or dental organization or dental study group recognized by the Oregon Board of Dentistry”. So our first step will be to determine whether your organization meets the requirements, and then if so, we will request that you be recognized by the Board. Would your organization fall into one of those three categories: “qualified dental college or dental organization or dental study group”, and if so, which one?

Thank you,

*Ingrid Nye*

Examination & Licensing Manager

Oregon Board of Dentistry

1500 S.W. 1<sup>ST</sup> AVENUE, SUITE #770

PORTLAND, OR 97201

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**From:** Jessica Russell <[jessica.russell@neodent.com](mailto:jessica.russell@neodent.com)>

**Sent:** Wednesday, May 6, 2020 8:15 PM

**To:** Dental Implant Hero <[clark@arvory.com](mailto:clark@arvory.com)>; Ingrid Nye <[Ingrid.Nye@state.or.us](mailto:Ingrid.Nye@state.or.us)>

**Subject:** Re: Live Patient Course

Hi Ingrid!

Thank you Dr. Clark for the introduction. I am excited and looking forward the opportunity to offer live patient surgery courses here. It is a unique and very sought after model!

I'll be here for whatever you both may need!

Best regards,

Jessica

Jessica Russell

Oregon Territory Manager

Neodent • Medentika • ZirkonZahn • 3shape

Phone (800) 448 8168

Mobile (360) 605 3451

[Jessica.Russell@neodent.com](mailto:Jessica.Russell@neodent.com)

[www.neodent.us](http://www.neodent.us)

[www.medentika.us](http://www.medentika.us)

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**From:** Dental Implant Hero <[clark@arvory.com](mailto:clark@arvory.com)>  
**Sent:** Wednesday, May 6, 2020 5:35:44 PM  
**To:** [ingrid.nye@state.or.us](mailto:ingrid.nye@state.or.us) <[ingrid.nye@state.or.us](mailto:ingrid.nye@state.or.us)>  
**Cc:** Jessica Russell <[jessica.russell@neodent.com](mailto:jessica.russell@neodent.com)>  
**Subject:** Live Patient Course

**Warning:** This email originated from outside of Straumann's trusted e-mail environment. Do not click any links or open attachments unless you recognize the sender and have confidence the content is safe.

Hi Ingrid,

Thanks for the helpful information today concerning temporary approval for out of state dentists to participate in a live patient CE course. I've CC'd Jessica Russell, the local rep for Straumann/Neodent dental implant companies. She's run the CE courses for years and should be able to provide you with all the information needed to begin the approval process with the Board.

Thank you and stay well!

Clark Brinton