



Oregon

Tina Kotek, Governor

Board of Dentistry
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MEETING NOTICE

DENTAL ASSISTANT WORKFORCE SHORTAGE ADVISORY COMMITTEE MEETING (DAWSAC)

Oregon Board of Dentistry

ZOOM MEETING INFORMATION (not an in person meeting)

<https://us02web.zoom.us/j/82151840011?pwd=XNlid4XgyZaK9Bsibn9iYuS2lglzyx.1>

Dial-In Phone #: 1-253-215-8782 • Meeting ID: 829 0812 3440 • Passcode: 509175

February 14, 2025

12 pm – 1:30 pm

Committee Members:

Co-Chair, Terrence Clark, DMD
Co-Chair, Ginny Jorgensen
Amberena Fairlee, DMD - ODA Rep.
Laura Vanderwerf, RDH - ODHA Rep.
Kari Hiatt - ODAA Rep.
Kari Ann Kuntzelman, DT – DT Rep

Lynn Murray
Alexandria Case
Jessica Andrews
Alyssa Kobylinsky
Amanda Nash
Carmen Mons
Cassie Gilbert
Megan Barron

AGENDA

Call to Order: Dr. Terrence Clark, Chair

1. Review & Approve Minutes of November 13, 2024 DAWSAC Meeting
Meeting Minutes – **Attachment #1**

2. Review HB 3223 and information regarding formation of this Committee.
Information & HB 3223 – **Attachment #2**

The Statute has been updated incorporating HB 3223 into statute.

ORS 679.330 Advisory committee on dental assistant workforce shortage. (1) The Oregon Board of Dentistry shall convene an advisory committee of at least seven members to study the dental assistant workforce shortage and to review the requirements for dental assistant certification in other states. The committee shall provide advice to the board on a quarterly basis on how to address the dental assistant workforce shortage in this state.

3. Review and Discuss: ODA Letter to DAWSAC & Board - **Attachment #3**

4. Review and Discuss: DAWSAC Proposal 7.2.24 – **Attachment #4**

5. Review and Discuss: Points and Questions to OBD regarding HB 3223 – **Attachment #5**
6. Review and Discuss: Alex Case July 2024 Proposal - Enhancing Dental Care Through Mandatory Registration of Dental Assistants – **Attachment #6**
7. Review and Discuss: Points and Recommendations to OBD regarding DA Registration – **Attachment #7**
8. Review and Discuss: DANB Article regarding 2024 Trends – **Attachment #8**

Open Comment - may be limited by the Chair due to time constraints as this meeting ends at 1:30 pm.

The date for next DAWSAC Meeting will be scheduled in approximately 2 - 3 months.

Adjourn

DRAFT

**OREGON BOARD OF DENTISTRY
DENTAL ASSISTANT WORKFORCE SHORTAGE ADVISORY COMMITTEE MEETING MINUTES
(DAWSAC)
November 13, 2024**

MEMBERS PRESENT: Ginny Jorgensen, Co-Chair
Amberena Fairlee, DMD - ODA Rep.
Kari Hiatt - ODAA Rep.
Lynn Murray
Alexandria 'Alex' Case
Jessica 'Jessie' Andrews
Alyssa Kobylinsky joined the meeting at 6:20 pm
Amanda Nash

STAFF PRESENT: Dr. Angela Smorra, Dental Director/Chief Investigator
Kathleen McNeal, Licensing Manager

VISITORS PRESENT: Jen Hawley Price, DANB; Mary Harrison, ODAA; Joanna Tucker Davis,
IN PERSON & VIA Senior Assistant Attorney General
TELECONFERENCE*

Call to Order: The meeting was called to order by the Chair at 6:00 p.m. via Zoom.

Co-Chair Ginny Jorgensen welcomed everyone to the meeting and had the DAWSAC Members, OBD staff and Senior Assistant Attorney General introduce themselves.

Self-Introductions of Committee Members

Committee members introduced themselves and shared information about their current positions in the dental assisting field.

Approval of July 17, 2024 Minutes

Co-Chair Ginny Jorgensen moved, and Alexandria Case seconded that the Committee approve the minutes from the July 17, 2024 DAWSAC Committee Meeting as presented. The motion passed unanimously.

DAWSAC Packet Introduced

HB 3223 goals for the DAWSAC were reviewed.

DAWSAC Request to Change Effective Date of HB 3223

Ms. Jorgensen announced that OBD Executive Director, Stephen Prisby reported at the August 23, 2024 Board Meeting, about the DAWSAC request was for the OBD to ask the Governor if she would intercede and ask the Legislative body if the effective date of HB 3223 could be extended one year from July 1, 2025 to July 1, 2026. Director Prisby reported that he had discussed it with one of the Governor's Policy Advisors, but that no new information was available at that time. Ms. Jorgensen reminded the committee that it is not the Board's decision to meet this request, as any changes to the bill must go through the legislature.

New Dental Assistants Local Anesthesia Rule

Ms. Jorgensen reported that at the October 25, 2024 Board Meeting, the Board approved 19 proposed rule changes, which included adopting a new rule to issue Local Anesthesia Functions Certificates to EFDAs, Rule 818-042-0096. Ms. Jorgensen announced the effective date is January 1, 2025. Ms. Jorgensen added that there are several items about the bill which must be put into place, such as having Board approved courses and decisions on the fees, certificates and wording structure of the bill.

Dr. Smorra reported that new course requests must be submitted to OBD staff by December 1, 2024 to be added to the agenda for the December 13, 2024 Board Meeting.

Ms. Jorgensen stated that the rule as written was clear and concise but suggested changing the name of the certificate to *Local Anesthesia Functions Dental Assistant* (LAFDA) in keeping with the certificate names of other functions Oregon dental assistants are allowed to perform.

Ms. Jorgensen stated that the Board must also decide on a certification fee that DANB will charge. Ms. Jorgensen offered that \$50.00 is the fee for other DANB certificates. Ms. Jorgensen mentioned that on the LAFDA Certificate there will need to be an area for the applicant to indicate the approved OBD course name or number. Ms. Jorgensen added that a copy of a course completion certificate or an approved instructor's signature should be required.

CODA Talking Points on ADA Resolutions

A copy of the CODA Talking Points on Resolutions 401 and 411 were attached for informational purposes. The ODA will be addressing these in at the December 13 Board Meeting.

Amberena Fairlee, DMD reported as a delegate from the CODA meeting that Resolution 411 did not pass.

Local Anesthesia for Dental Assistant Course

Ms. Jorgensen provided for informational purposes an example of a 45-hour training program at the University of Minnesota School of Dentistry to train dental assistants to administer local anesthesia under the direct supervision of a dentist. Ms. Jorgensen stated that the Board must review and decide on courses that Oregon will approve.

Jen Hawley Price shared DANB updates. DANB is making progress on translating the dental assistant exams into Spanish and Vietnamese. DANB is introducing a Workforce Coalition in January 2025 and will publish a free, online resource toolkit in mid-January 2025.

Jessie Andrews presented an update about the services of the Willamette Career Academy's work with high school students. Ms. Andrews invited attendees to contact her for an opportunity to be a guest speaker at Willamette Career Academy. Dr. Smorra reported that the OBD staff provides lists of licensees upon request, in case that would be of help in her contacting dentists to help with the Willamette Career Academy's programs.

ADJOURNMENT

The meeting was adjourned at 6:47p.m. Chair Jorgensen stated that the next DAWSAC meeting via Zoom would be set in early 2025.

Enrolled
House Bill 3223

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

CHAPTER

AN ACT

Relating to dental assistants; and prescribing an effective date.

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

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

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

(a)(A) Administered by a dental education program in this state that is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization, and approved by the board by rule;

(B) Administered by a dental education program in this state that is approved by the Commission for Continuing Education Provider Recognition of the American Dental Association, or its successor organization, and approved by the board by rule; or

(C) An examination comparable to an examination described in subparagraph (A) or (B) of this paragraph that is administered by a testing agency approved by the board by rule; and

(b) Offered in plain language in English, Spanish and Vietnamese.

(2) The board may not require an applicant for certification as a dental assistant, including any type of expanded function dental assistant, to complete more than one written examination for certification as that type of dental assistant.

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

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

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

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

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

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

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

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

Passed by House March 16, 2023

Received by Governor:

Repassed by House June 24, 2023

.....M.,....., 2023

Approved:

.....
Timothy G. Sekerak, Chief Clerk of House

.....M.,....., 2023

.....
Dan Rayfield, Speaker of House

.....
Tina Kotek, Governor

Passed by Senate June 24, 2023

Filed in Office of Secretary of State:

.....M.,....., 2023

.....
Rob Wagner, President of Senate

.....
Secretary of State



February 4, 2025

Members of the Board of Dentistry,

Coming out of the pandemic and over the last few years, Oregon has faced significant dental workforce challenges that are negatively impacting access to dental care across the state.

These workforce challenges are impacting dental offices across the country. Data from the American Dental Association's (ADA) Health Policy Institute (HPI) indicates that in this most recent quarter, 40% of dentists surveyed reported that they were actively recruiting an assistant or had done so in the last three months. Thirty-four percent reported the same for a hygienist. Of those dentists actively recruiting, 95% reported they found those efforts to be either "very" or "extremely challenging." Eighty-seven percent reported the same for a dental assistant.¹

The Oregon Dental Association (ODA) is committed to exploring and analyzing all possible options to address the current workforce challenges, including working closely with the Oregon Dental Hygiene Association and the Oregon Dental Assistant Association to find local solutions to this shortage. At the same time, the ODA is also exploring ideas, tools and practices already being used in other states that provide new, innovative strategies to do more within the existing workforce.

This inability to recruit new members of the dental team means that a key priority must be ensuring that every member of the dental care team is utilizing their full scope of practice and skills.

One example of this is through the American Dental Association (ADA)-crafted Dental Access Model Act, which is a model bill that supports the expansion of access to dental care by more efficiently utilizing existing members of the dental team and establishing teledentistry standards. This model bill was adopted in December by the Health and Human Services Task Force of the American Legislative Exchange Council (ALEC) and could be introduced in state legislatures. The Dental Access Model Act² is model legislation that would only go into effect if Oregon legislators chose to introduce and pass it. ODA is not currently pursuing such legislation.

Patient safety is the ODA's number one priority, and we evaluate all proposals and ideas through that lens. We recognize the delicate balance between increasing the delivery of services and providing quality care, and respect for all members of the dental team. In the ODA's initial analysis of this new model, we have not yet identified patient safety issues, but we continue to gather information.

¹ ADA Health Policy Institute in collaboration with American Dental Assistants Association, American Dental Hygienists' Association, Dental Assisting National Board, and IgniteDA. Dental workforce shortages: Data to navigate today's labor market. October 2022. Available from: https://www.ada.org/-/media/project/ada%20organization/ada/ada-org/files/resources/research/hpi/dental_workforce_shortages_labor_market.pdf

² <https://alec.org/model-policy/dental-access-model-act/>



ODA is committed to addressing workforce challenges that affect dentists' ability to deliver critical oral health care to Oregonians and will continue to partner with other members of the dental team to collaboratively seek solutions.

Sincerely,

A handwritten signature in black ink, appearing to read 'C. Zeller', written in a cursive style.

Caroline Zeller, DDS

President, Oregon Dental Association

Reverse HB 3223: A Proposal Presented to the Oregon Board of Dentistry Dental Assistant Workforce Shortage Advisory Committee (DAWSAC)

Submitted by: Jill Lomax, EdM, CDA, EFDA-RF

Background: Dental assistants in Oregon are governed by rules and not statutes. HB 3223 is a statute that bypasses and removes the Oregon Board of Dentistry's authority and expertise over dental assistants in Oregon. Although HB 3223 was approved by lawmakers, many concerns have been brought forward regarding the logistics of HB 3223 by those in the dental profession. Per HB 3223 Section 4-2, "The Oregon Board of Dentistry may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the board to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the board by section 2 of this 2023 Act."

Proposal: I propose that the DAWSAC recommend to the Oregon Board of Dentistry (OBD) to reverse HB 3223

Points to consider:

- **Workforce Issue.** As the DAWSAC committee has discussed, the workforce is not an exam issue, it is a pipeline and retention issue. Lowering the exam standard will not fix the problem, thus, HB 3223 should be reversed.
- **Dental Assistants can currently assist without taking an exam.** Non-EFDA dental assistants in Oregon do not need to take an exam to assist a dentist, thus, changing the exam process will not increase the number of dental assistants or access-to-care. An exam is required to take radiographs and/or perform the nine (9) EFDA duties as outline in Division 42.
- **Oregon candidates' RHS exam pass rate is high.** Per DANB, Oregon candidates consistently pass the RHS exam at a higher rate than the national average. For the period from January 2019 through October 2022, the percentage of Oregon candidates who passed the exam on the first or second attempt was 82%.
- **Exams are accessible and available remotely.** Candidates may take DANB's exams at any one of more than 250 computerized testing sites nationwide (including six locations in Oregon) six days per week during regular business hours. As of January 2021, candidates may also take the exam at home or another remote location of their choice through online remote proctoring, with appointments available 24 hours a day, seven days a week.
- **Future Division 42 changes.** Any changes to the dental assisting rules should go through the Oregon Board of Dentistry, not legislation.

Additional Rationale:

Reason #1: HB 3223 lowers the exam standard for dental assistants by allowing exams to be created by entities who are ADA CERP recognized continuing education providers. ADA CERP recognition status does not validate an organization's expertise of creating psychometrically valid examinations.

Currently, 37 states and D.C. require or recognize DANB exams at some level to ensure that applicants meet a *minimum* national standard for knowledge-based competency critical to the health and safety of patients and dental healthcare personnel. All DANB questions are reviewed and updated regularly by a range of subject matter experts and are reviewed for validity and reliability. Lowering the standard has the potential to make the workforce crises worse, among other factors. The 13 states who do not require DANB exams still have a dental assisting workforce crisis.

Questions for the board to consider:

1. How will the OBD determine the validity of dental assisting exams and exam questions submitted for approval?
2. Will the OBD hire subject matter experts and a psychometrician to handle this analysis?

Reason #2: HB 3223 requires exams to be “offered in plain language in English, Spanish, and Vietnamese”. At the time HB 3223 was introduced, DANB was already progressively working on offering certification exams in Spanish. In comparison, dental hygiene and dental school exams are only available in English.

Questions for the board to consider:

1. How will the OBD verify the translation of exams in Spanish and Vietnamese?
2. Will there be a cost involved to OBD related to the translation of exams into Spanish or Vietnamese?
3. Will there be enough Vietnamese exam takers to ensure exam validity and reliability?
4. How is “plain” language being assessed?

Reason #3: HB 3223 allows an exam to be “Administered by a dental education program in this state that is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization”.

Questions for the board to consider:

1. Since this is not specific to dental assisting programs, does this mean a dental hygiene or dental school could administer ODB dental assisting exams?
2. What is the definition of “successor organization” and how would OBD ensure that the successor organization maintains CODA Accreditation?
3. How will the OBD prevent instructors from CODA Accredited programs from informing their students what is on the exam that they themselves created?
4. How will CODA Accredited programs inform the OBD that the applicant has passed the exam?
5. Will there be a cost to OBD to process applications from a non-DANB exam provider?

Reason #4: HB 3223 allows any dental education program that is an ADA CERP recognized continuing education provider to administer an exam. The CERP recognition process does not evaluate for expertise in exam creation, management, or psychometrics. According to the ADA, to be eligible for ADA CERP recognition, a provider must:

- Develop and present CE on a regular basis, and have planned, implemented and evaluated at least one CE activity in the last 12 months;
- Operate under the oversight of an independent CE advisory committee;
- Offer courses that are based in accepted science;
- Not be a commercial interest, as defined by ADA CERP.

This could potentially allow non-accredited dental assisting programs to test their own students. A dental educator in a non-accredited program is not required to have test creation or educational methodology.

Questions for the board to consider:

1. How will the OBD prevent instructors from ADA CERP recognized organizations from informing their students what is on the exam that they themselves created?
2. How will ADA CERP recognized providers inform the OBD that the applicant has passed the exam?
3. Will there be a cost to OBD to process applications from a non-DANB exam provider?

Reason #5: HB 3223 states that “The board may not require an applicant for certification as a dental assistant, including any type of expanded function dental assistant, to complete more than one written examination for certification as that type of dental assistant.”

Questions for the board to consider:

1. What does this mean for an applicant who wants to get certified in multiple disciplines? For an example, will the board need to approve of individual exams for each of the following?
 - a. If an applicant wants to become radiology and EFDA certified
 - b. If an applicant wants to become radiology and EFODA certified
 - c. If an applicant wants to become radiology, EFDA, and EFODA certified
 - d. And so on...

Thank you for your consideration,

Jill Lomax, EdM, CDA, EFDA-RF

Proposal to DAWSAC to consider sending to OBD:

Excerpts from 7/2/24 “**Reverse HB 3223: A Proposal Presented to the Oregon Board of Dentistry Dental Assistant Workforce Shortage Advisory Committee (DAWSAC)**”

Submitted by: Jill Lomax, EdM, CDA, EFDA-RF

Points for OBD to consider:

- The DAWSAC committee has discussed the workforce is not an exam issue. The issues and recommendations are included in: *Workforce Shortages; Data to Navigate Today's Labor Market*.
- HB 3223 lowers the exam standard for dental assistants by allowing exams to be created by entities who are ADA CERP recognized **continuing education** providers. ADA CERP recognition status does not validate an organization's expertise of creating psychometrically valid examinations.
- Currently, 37 states and D.C. require or recognize DANB exams at some level to ensure that applicants meet a *minimum* national standard for knowledge-based competency critical to the health and safety of patients and dental healthcare personnel. All DANB questions are reviewed and updated regularly by a range of subject matter experts and are reviewed for validity and reliability.

Questions for OBD to consider:

1. What methods for recruitment and retention can be implemented and supported by OBD?
2. Will lowering the exam standard fix the shortage problem? Is there data to suggest this is true?
3. How will the OBD determine the validity of dental assisting exams and exam questions submitted for approval?
4. Will the OBD hire subject matter experts and a psychometrician to handle this analysis?

Points for OBD to consider:

- HB 3223 allows an exam to be “Administered by a dental education program in this state that is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization”.

Questions for OBD to consider:

1. Since this is not specific to dental assisting programs, does this mean a dental hygiene or dental school could administer OBD dental assisting exams?
2. What is the definition of “successor organization” ?
3. How will the OBD prevent instructors from CODA Accredited programs from informing their students what is on the exam that they themselves created?
4. How will CODA Accredited programs inform the OBD that the applicant has passed the exam?
5. Who will record and keep track of this information? How will employers access this information?
6. Will there be a cost to OBD to process applications from a non-DANB exam provider?

Points for OBD to consider:

- HB 3223 requires exams to be “offered in plain language in English, Spanish, and Vietnamese”. At the time HB 3223 was introduced, DANB is already progressively working on offering certification exams in Spanish and now Vietnamese. In comparison, dental hygiene and dental school exams are only available in English.

Questions for OBD to consider:

1. Currently DANB is the only testing agency to have committed to providing the exams in all 3 languages. Does this mean DANB will be the only testing agency OBD approves? Or...
2. How will the OBD verify the translation of exams in Spanish and Vietnamese?
3. Will there be a cost involved to OBD related to the translation of exams into Spanish or Vietnamese?
4. Will there be enough Vietnamese exam takers to ensure exam validity and reliability?
5. How is "plain" language being assessed?

Points for OBD to consider:

HB 3223 allows any dental education program that is an ADA CERP recognized continuing education provider to administer an exam. The CERP recognition process does not evaluate for expertise in exam creation, management, or psychometrics. According to the ADA, to be eligible for ADA CERP recognition, a provider must:

- Develop and present CE on a regular basis, and have planned, implemented and evaluated at least one CE activity in the last 12 months;
- Operate under the oversight of an independent CE advisory committee;
- Offer courses that are based in accepted science;
- Not be a commercial interest, as defined by ADA CERP.

This could potentially allow non-accredited dental assisting programs to test their own students. A dental educator in a non-accredited program is not required to have test creation or educational methodology.

Questions for OBD to consider:

1. How will the OBD prevent instructors from ADA CERP recognized organizations from informing their students what is on the exam that they themselves created?
2. How will ADA CERP recognized providers inform the OBD that the applicant has passed the exam?
3. Will there be a cost to OBD to process applications from a non-DANB exam provider?

Points for OBD to consider:

- HB 3223 states that "The board may not require an applicant for certification as a dental assistant, including any type of expanded function dental assistant, to complete more than one written examination for certification as that type of dental assistant."

Questions for OBD to consider:

1. What does this mean for an applicant who wants to get certified in multiple disciplines? For an example, will the board need to approve of individual exams for each of the following?
 - a. If an applicant wants to become radiology and EFDA certified
 - b. If an applicant wants to become radiology and EFODA certified
 - c. If an applicant wants to become radiology, EFDA, and EFODA certified
 - d. Will OBD create an answer sheet to answer these questions?



ENHANCING DENTAL CARE THROUGH MANDATORY REGISTRATION OF DENTAL ASSISTANTS

A PROPOSAL PRESENTED TO THE OREGON BOARD OF DENTISTRY DAWSAC COMMITTEE

PRESENTED BY ALEXANDRIA CASE

JULY 2024

INTRODUCTION

Objective:

To improve retention rates for dental assistants and make it a more attractive career path by implementing mandatory state registration and continuing education.



FACTORS THAT INFLUENCE CAREER SPAN

Job satisfaction and work environment

- Higher pay and better working conditions lead to longer career spans.

Certification and Continuing Education

- Ongoing professional development leads to longer careers due to a higher level of responsibility and job satisfaction.

Physical Demands

- States with fewer regulations to protect and regulate DAs have been shown to have more health issues and burnout.



CURRENT LANDSCAPE



- Dental assistants in Oregon are **not required** to be registered with the state dental board or any other entity.
- Dental assistants who obtain their DANB RHS and EFDA have a one-time requirement to show the Oregon Board of Dentistry; no CE is needed to continue.
- If an assistant in Oregon has their CDA or higher through DANB, they must be registered with DANB and keep up with continuing education credits yearly.
- OTJ trained or those who graduated from a non-accredited program do not require an continuing education hours. It is only required if a DA has their CDA, which Oregon does not require. **This is 2/3 of the current Oregon's current DA workforce.**

BENEFITS OF STATE REGISTRATION



- **Improved Patient Safety:** States with registration requirements saw a 25% reduction in procedural errors and a 30% increase in adherence to safety protocols and infection control procedures. (ADA News)
- **Enhanced Professional Development:** Data from CODA shows that 85% of DAs in registered states pursued continuing education opportunities, compared to 60% without registration requirements. (CODA Survey)
- **Skill Advancement:** Registered DAs were more likely to advance their skills and take on expanded functions within dental practices, leading to a more skilled workforce. (CODA Survey)
- **Practice Efficiency:** Highlight Data from CODA showed a 20% improvement in appointment scheduling and time management, along with a 10% increase in practice revenue with registration requirements. (ADA News)
- **Quality of Care & Professional Standards:** Required registration for all DAs will help guarantee that DAs operate within their designated scope of practice, enhancing patient safety and the overall effectiveness of dental care services.
- **Reporting & Communication:** To accurately represent the current dental assistants (DAs) in the workforce and maintain effective communication, the board should ensure that all DAs are registered with the state. This will facilitate the board's ability to contact them for announcements, updates, questions, surveys, and any necessary remediation efforts.
- **Access to Care:** States with required registration saw a 15% increase in dental assistants working in underserved and rural areas. There was a 25% rise in community dental health programs involving registered DAs. (Report Pew Charitable Trusts)

CASE STUDIES



California

- Required mandatory DA certification and maintain CE

- Improved pt safety: 25% reduction in procedural errors
- Higher Quality of Care: 20% improvement in patient satisfaction scores

- (California Dental Association Journal, 2018)



Minnesota

- Mandated DA complete accredited program or pass state or national exam

- Safety standards: 40% higher compliance rate
- Improved pt outcomes: 20% improvement in patient satisfaction scores

- (Minnesota Dental Association Journal, 2019)



New York

- Required DA to be registered and maintain CE

- Enhanced Preventative care: 30% more preventative care services (fluoride, sealants)
- Decreased Radiographic Errors: 20% reduction in radiographic errors, resulting in more accurate diagnoses and tx.

- (New York State Dental Journal, 2020)



Oregon

- Required DA to pass DANB RHS to take radiographs.

- 30% decrease in infection rates in dental clinics
- 15% increase in clinical efficiency, allowing more pts to be seen without compromising the quality of care.

- (OHA, 2017, Oregon Dental Association Journal, 2017)

COMPARISON	Nail Techs	Dental Assistants
Public Health and Safety: Exposure Risks	Close proximity with clients skin and nails	Close proximity to pt oral cavities, handling instruments, direct contact with bodily fluids. High risk of transmitting infections if proper procedures aren't followed
Public Health and Safety: Standardize Sanitation Practices	Adhere to rigorous sanitation practices to prevent fungal and bacterial infections	Adhere to rigorous sanitation practices and regulations to prevent more serious infections like hepatitis or HIV
Professional Training and Competence: Structured training Programs	States require proof of professional training and passing a licensing exam. This ensures that only qualified individuals practice, which safeguards public welfare.	Currently, no state-required form or forms of training are required with the exception of the RHS exam
Professional Training and Competence: Continuous Education	Ongoing education is required to maintain registration	Currently, only if someone is certified through DANB as a CDA or higher are they required to maintain a specific number of hours per year of CE.
Consumer Confidence and Trust: Public Assurance	Current registration signals to the public that a professional meets certain standards. Showing the individuals are registered and compliant with state regulations	Currently, none in place for DA's unless they have their RHS DANB through via State of Oregon
Consumer Confidence and Trust: Transparency and Accountability	Registered professionals typically listed in a public database, allowing consumers to verify credentials and file complaints if standards are not met.	Currently, none in place
Regulatory Consistency:	Required to register in nearly every state to create a consistent standard	Currently, none in place
Legal and Ethical Implications: Professional Liability	State boards define what services can be legally provided, helping delineate clear scopes of practice, reducing the risk of malpractice.	Currently, OBD does delineate which DA functions are within the scope of practice, but no regulations on these in place or remediation.

RECOMMENDATIONS TO THE BOARD

- **All dental assistants in Oregon must be registered with the Oregon Board of Dentistry.**
 - **No matter if they learned “on the job” or through an accredited or unaccredited program. No matter what certifications they hold or if they are already registered with DANB or any other entity.**
- **Each renewal cycle is required to be every two years.**
 - **Charge \$20-\$40 per renewal cycle**
- **Require updated BLS card plus 20 CE hours every two years, with some of those credits being Infection Control, BLS/CPR, Cultural Competence**

IMPLEMENTATION STRATEGY

Implementation Planning

- Work with the Oregon Board of Dentistry to develop the regulations and administrative procedures
- Oregon Board of Dentistry to additional position to take on this role (paid for through yearly fees)

Education and Communication

- Collaborate with DA programs with new registration requirements
- Launch an information campaign to educate DA and their employers about the new requirements, deadlines, and processes
- Provide detailed guides and FAQs to assist in the transition

Evaluation and Adjustment

- After implementation, continuously monitor the outcomes to ensure objectives are being met
- Create mechanisms for ongoing feedback to address any issues or unintended consequences

Review and Continuous Improvement

- Regularly review the registration process and standards to ensure they remain relevant and effective
- Prepare to make adjustments in response to new developments in dental practices or in response to stakeholder feedback.



CONCLUSION

WHY SHOULD DENTAL ASSISTANTS BE ANY DIFFERENT?

Proposal to DAWSAC to consider sending to OBD:

Original Proposal from July 17, 2024 **Enhancing Dental Care Through Mandatory Registration of Dental Assistants, Alexandria Case (See attached PP Presentation)**

Points that negatively impact the Oregon Dental Assistant Profession:

- Oregon dental assistants are not required to be registered with the state or any other entity.
- Only one-time requirement to demonstrate knowledge through examination and skill demonstration to achieve certification for RHS, EFDA, etc..
- Physical Demands: States with fewer regulations to protect and regulate DA's have been shown to have more health issues and burnout.

Points for OBD to consider of the Benefits of State Registration to address workforce shortage:

- Job satisfaction and work environment: Higher pay and better working conditions lead to longer career spans.
- Certification and Continuing Education: Ongoing professional development leads to longer careers due to higher level of responsibility and job satisfaction. Enhances Professional Development.
- By implementing mandatory state registration and continuing education requirements, the dental assistant career path will become more attractive and improve retention.
- There are 665 CDA's in Oregon which requires 12 hours of CE per year to maintain certification. These CDA's tend to stay in the career longer than non CDA's.
- Improved Patient Safety from CE requirement especially in infection control and safety procedures.
- Reporting & communication to accurately represent current dental assistants in Oregon and facilitate OBD's ability to contact them for announcements, updates, questions, surveys and any necessary remediation efforts.
- Access to care has been shown to increase, especially in rural and underserved areas of states where registration was required.

Suggested Recommendations:

- All clinical dental assistants in Oregon must be registered with the OBD.
- Each renewal cycle to match dentist/dental hygienist; every two years, \$20 to \$40 per renewal
- Require CPR plus 20 hours of CE credit in Clinical Procedures, Infection Prevention & Control, Mental Health/Substance Abuse, Medical Emergencies.

Dental assisting trends and insights we saw in 2024

December 11, 2024



Dental assisting is an ever-changing field, and with another new year approaching, it's a good time to take stock of the profession. Some challenges have persisted over the last several years, including dental staffing shortages, prompting new research into the profession as well as opportunities for positive change. Here are some of the trends and insights we saw in 2024 to keep an eye on in the new year and beyond.

Pay is up, but gaps remain.

Because dental assistants perform numerous duties — more than 200, according to DANB's 2024 [Job Analysis Report](#) — many feel they should receive higher pay. Insufficient pay is the top reason dental assistants change jobs. Some practices have responded by offering raises to their dental assistants. DANB's 2024 [Dental Assistants Salary and Satisfaction Survey](#) showed that Certified Dental Assistants (CDAs) are earning \$26 per hour and non-certified assistants make \$22.50 an hour, with both figures up since the 2022 report. Additionally, 48% of dental assistants have received a raise within the last year, and nearly 80% have seen a pay increase within the last two years. The majority of raises (59%) were between 1-3%, though about one-quarter of dental assistants received a raise between 4-6%. Another 14% received a raise of 7% or higher.

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There is still room for improvement, however, as there are gaps in what dental assistants feel they should earn and their actual wages. The median wage for CDAs who are satisfied with their pay is \$29 per hour, while those who are dissatisfied earn \$25 per hour. The overall median wage for CDAs is \$26 per hour. Non-certified dental assistants who feel compensated fairly earn \$25 per hour, and those who don't get \$21 per hour. The overall median wage for non-certified dental assistants is \$22.50 per hour.

Dental assistant turnover is costly for practices.

High turnover remains a concern in the dental assisting profession. Per DANB's Salary and Satisfaction Survey, 14% of CDAs and 24% of non-CDAs changed jobs within the last year. As of September 2024, 40% of private dental practices were actively recruiting dental assistants and three-quarters described their hiring efforts as "very" or "moderately" challenging, according to the [American Dental Association's Health Policy Institute](#). And these struggles can be costly for practices.

DANB's [Financial Impact of Dental Assistants on the Dental Practice](#) report shows not only the monetary value dental assistants bring to their practices — but also the significant impact of turnover. The research found that the average at-risk revenue of an open dental assistant position is more than \$21,000 over the course of the role's vacancy. These are costs related to lost productivity, recruiting, hiring, and training. If the position stayed open for a full year, a practice could potentially lose out on nearly \$110,000 in revenue. The solution: offering raises to dental assistants. The report found that offering a 15% wage increase can help retain dental assistants and offset the costs of turnover.

National model gains support.

Each U.S. state has its own dental assisting regulations, which has led to inconsistent job requirements, a lack of public understanding about what dental assistants do, and limited career paths. This has contributed to difficulty attracting and retaining dental assistants. One potential solution is creating a professional model for dental assistants that provides a national agreement on the scope of their work and levels for advancement. DANB published the [Perspectives on Dental Assisting Professional Requirements](#) report in March 2024, which indicated that 83% of dentists and dental assistants support states adopting similar dental assisting laws, regulations, and scopes of practice to create more uniformity for the profession.

To move these efforts forward, DANB created the [Dental Assisting Professional Model Workgroup](#), which consists of professionals from more than 10 leading dental organizations across the country, such as the American Dental Assistants Association, American Dental Association, American Association of Dental Boards, and American Dental Hygienists' Association. The group has met every month since February to develop a recommended framework for dental assisting requirements that states can consider. The framework will contain definitions of dental assisting levels, scope of duties,

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pathways for education and training, sample legislation and regulations, and guidance and resources for implementation. The group will publish a draft of the framework in early 2025 and ask for feedback from the dental community.

Read the [latest updates](#) on the **Dental Assisting Professional Model Workgroup.**

Appreciation for dental assistants remains a top concern.

Dental assistants are invaluable to their practices and deserve to be valued and appreciated for it. However, that isn't always the case. In addition to insufficient pay, lack of appreciation is another top reason cited by dental assistants for changing jobs. Among dental assistants who changed jobs in the previous year, 40% cited feeling underappreciated as a motivating factor, according to the Dental Assistants Salary and Satisfaction Survey. The report also showed that less than half of dental assistants (49%) feel valued by their employers, down from 54% in the 2022 survey.

When dental assistants are recognized and rewarded for their hard work and dedication, it improves job satisfaction and morale, builds loyalty to their practices, and improves retention. This can, in turn, improve patient care and boost a practice's bottom line. The [Financial Impact of Dental Assistants on the Dental Practice](#) report showed that 94% of dental leaders believe dental assistants help improve patient retention, which directly impacts revenue.

Patients value educated and credentialed dental assistants.

Education never stops for dental assistants. They regularly seek out continuing education to improve their skills and knowledge, as well as keep up on the latest research, techniques, and technology in the field. As a result, they can provide safe, high-quality dental care — which is, of course, exactly what patients are seeking!

The [Perspectives on Dental Assisting Professional Requirements](#) report found that 70% of patients expect their dental assistant to hold a state license or registration, and 44% expect them to hold an industry [certification](#). Additionally, 73% of patients said it was very important to them that their dental assistant passed some type of exam to demonstrate their knowledge.

Read more dental assisting research and analysis here:

- [Top 5 dental assistant salary and satisfaction trends in 2024](#)
- [The cost of dental assistant turnover](#)
- [The comprehensive guide to growing your dental assistant salary](#)

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