



**Quarterly Dental Pilot Project Program
Advisory Committee Meeting: DPP 300
Meeting Minutes**

Date: Monday, January 31, 2022
Time: 9:00 AM – 11:00 AM
Location: Virtual - OHA Public Health Division

Committee Members Present: Josette Beach, Rebecca Gerber, Sharon Hagan, Paula Hendrix, Kristin Hockema, Kelli Swanson Jaecks, Felix Lee, Sharity Ludwig, Laura McKeane, Katie Nichols, Paula Russell, Barry Taylor, Caroline Zeller

OHA Staff & Consultants to OHA Present:
Stephanie Glickman, Kelly Hansen, Fred King, Sarah Kowalski, John Putz, Kaz Rafia, Katie Reilly, Charles Rim, Cate Wilcox, Amy Umphlett

Project Attendees and Invited Presenters: Gail Aamodt, Amy Copen, Shannon English, Natalie Horn, Aaron Truong, Elisa Turpen

Invited Guests Present: Ron Sakaguchi

***Signed in Public Attendees Present:** Greg Ball, Miranda Davis, Stephen Davis, Joe Dunn, Katherine Duarte, Jen Lewis-Goff, Oregon Dental Association, Stephen Prisby, Sabrina Riggs, Angela.Smorra, Mark Schoenbaum, Mary Williard

*This list is not exhaustive, as it was not possible to verify all participants at the meeting.

Total Attendees: 52

Summary of Meeting

Agenda Item: Review of Meeting Agenda and Introductions

Summary of Discussion: Meetings are recorded for note taking purposes. Reviewed agenda.

Decision: No decisions made. Move to next agenda item.

Action: Meeting started.

Agenda Item: Overview Dental Pilot Project Program, Authority Responsibilities, Site Visits presented by Sarah Kowalski, RDH, MS, Dental Pilot Project Program, Oral Health Program, Oregon Health Authority.

Summary of Discussion: Review of legislation that authorized the Dental Pilot Project Program, 2011, Senate Bill 738. Outline of project length, extension request process. Overview of sunset date of the program. Synopsis of California Health Workforce Pilot Project Program. Summary of DPP#200: Training Dental Hygienists to Place Interim Therapeutic Restorations (ITR). Legislation under House Bill 2627 established ITR as an authorized scope of practice. The Oregon Board of Dentistry established administrative rules and those were officially effective on January 1, 2022. Summary of DPP #100: the Oregon Tribes Dental Health Aide Therapist Pilot Project. Review of DPP#300: Dental Therapist Project: Dental Hygiene Model. Outline of House Bill 2528, (2021) was passed which authorized dental therapy in the state of Oregon. Clarification on pilot project continuation after legislative authorization. Discussed the role of the Oregon Health Authority and requirements at the state level. Reviewed timeline of DPP#300 application process, review and recommendations by the Technical Review Board, project approval process, evaluation and monitoring plan approval. Provided outline of the Adverse Event reporting requirements. Site Visits are required by Oregon Administrative Rule. Overview of chart review workgroup. Summary of the OHA Advisory Committee.

Decision: No decisions made.

Action: Move on to next agenda item.

Agenda Item: Overview of Health Equity, OHA's Role and Goals for Eliminating Health Inequities, presented by Stephanie Glickman, Public Health Educator, Oral Health Program, Oregon Health Authority and Sarah Kowalski, RDH, MS.

Summary of Discussion: Review role of Public Health Program. Summary of the goals of the state health improvement plan (SHIP). OHA has set a strategic goal of eliminating health inequalities by 2030. The SHIP is titled Healthier Together Oregon. Review health equity. Differences between equality and equity. Racism is a core social determinant of health. Links of racism to health disparities, smile survey data illustrates this point. Overview of how Oral Health Program is addressing health equity and disparities in Oregon. Summary of the role of Public Health and specifically the Dental Pilot Projects in the implementation of Dental Therapy in Oregon. Under the legislation passed, OHA does not have a formal assignment to implement legislation. Under PHD, broad mission to protect and improve the population's health. PHD is in a position to consider and play a coordinating role in dental therapy implementation since legislation has now been authorized in Oregon. Dental therapy and the expansion of scope of practice of dental auxiliaries (dental assistants and dental hygienists) are seen as opportunities to improve access to oral health care for underserved populations in

Oregon. Emerging and expanding workforce models aim to improve health equity and hopefully aid in achieving the SHIP goal by 2030 in eliminating health inequities in Oregon.

Decision: No decisions made.

Action: Move on to next agenda item.

Agenda Item: Presentation and Updates, Dental Pilot Project #300. Presented by Amy Coplen RDH, MS, Pacific University and Shannon English, DDS, Willamette Dental.

Summary of Discussion: Pilot project requires entrance to the program, must be Oregon dental hygienists with their restorative credential. Trainees continue to work full-time or minimum of 30 hours per week. Overview of education and didactic portions of the training program which include didactic lectures, online platforms and assigned readings. Review of laboratory components and practicum. Hygienists are taught a total of 13 new skills that are not currently in their scope of practice. Discussion of various supervision levels. Summary of data collection process. Review of Cohort 1 and Cohort 2.

Decision: No decisions made.

Action: Move on to next agenda item.

Agenda Item: Overview of Dental Therapy in Oregon, Statute vs Dental Pilots #100 & #300, OBD Process, Timeline of Events, presented by Kelly Hansen, Research Analyst, Oral Health Program, Oregon Health Authority and Sarah Kowalski, RDH, MS.

Summary of Discussion: Synopsis of which states are allowing dental therapy, specific requirements of dental therapists etc. HB2528 is now in effect. Dental Therapy is authorized in Oregon. Review of the statute and scope of practice authorized. Outlined the Oregon Board of Dentistry, Dental Therapy Rules Advisory Committee process. Review of language in the statute around licensure requirements. Overview of dental therapy education programs that are CODA accredited or in the process of applying for accreditation. Statute requirements to served underserved populations. OHA is defining underserved for purposes of meeting the requirements. Compare scope of practice in DPP#300 to HB2528. Review role of the Advisory Committee. OHA role in evaluating the projects. Monitoring for patient safety, outline of the chart review workgroup which is a part of the committee. Outlined the role of PHD in oral health workforce development. Overview of establishment of workgroups in making recommendations for dental therapy implementation. Workgroups are not part of the Advisory Committee. Voluntary process. OHA will follow up with committee members to gain interest in participation on a workgroup with a focus on education and a toolkit.

Decision: No decisions made.

Action: Move on to next agenda item.

Agenda Item: Follow Up Items, Future Meeting Dates

Summary of Discussion: OHA will send a survey out to committee members for review. Determination of committee members availability to attend future meetings and survey of topics of interest in future meetings.

Decision: No decisions made.

Action: Move on to next agenda item.

Public Comment Period: There were no public comments.

- **Next Meeting: May 9, 2022**

Post-Meeting Actions: See Addendum to Meeting Materials

- Final meeting schedule



AGENDA

Dental Pilot Project #300 “Dental Therapist Project: Dental Hygiene Model”

Advisory Committee Meeting DPP #300

January 31, 2022

9:00am – 11:00am

Location: Remote meeting via Zoom.		
Link: https://www.zoomgov.com/j/1602121942?pwd=cG9lWU5abU1sK3lMRkI3V2pMdVNtdz09		
Call in option: 669-254-5252 Meeting ID: 160 212 1942 Passcode: 917391		
9:00-9:10	Agenda Review, Meeting Review	Sarah Kowalski, MS, RDH Dental Pilot Project Program Coordinator
9:10-9:20	Official Introductions	Sarah Kowalski, MS, RDH
9:20-9:40	Overview Dental Pilot Project Program, Authority Responsibilities, Site Visits	Sarah Kowalski, MS, RDH
9:40-10:00	Overview of Health Equity, OHA’s Role and Goals for Eliminating Health Inequities	Stephanie Glickman, Public Health Educator
10:00-10:20	Presentation and Updates, Dental Pilot Project #300	Dental Pilot Project #300
10:20-10:25	Break	
10:25-10:35	Overview of Dental Therapy in Oregon Statute vs Dental Pilots #100 & #300, OBD Process, Timeline of Events	Sarah Kowalski, MS, RDH
10:35-10:45	Goals of Advisory Committee, Review goals, structure, workgroups	Kelly Hansen, Research Analyst Sarah Kowalski, MS, RDH
10:45-10:50	Q&A, Discussion	Advisory Committee, Invited Guests Oregon Health Authority
10:50-10:55	Follow Up Items, Future Meeting Dates	Sarah Kowalski, MS, RDH
10:55-11:00	Public Comment Period	Public comments are limited to 2 minutes per individual; Public comments are accepted via in-person oral testimony or submission of written comments via email to oral.health@state.or.us or US Mail.

Next Meeting: May 9, 2022

Meeting Dates 2022-2023

- Meetings will be held on Mondays beginning at 9am and ending by 11am.
- All meetings will be held via Zoom.

January 31, 2022

May 9, 2022

August 1, 2022

October 31, 2022

January 30, 2023

May 8, 2023

August 7, 2023

November 6, 2023

Dental Pilot Projects Program

DPP #300 - Advisory Committee Meeting

January 31, 2022



Oral Health Program
Public Health Division

- Agenda Review & Meeting Guidance
- Please turn on your video camera.
- Please use chat function to ask question.



- MUTE yourself.



- Only Committee Members and Invited Guests will actively participate in the meeting.
- Public Meeting: Public Comment Period at End of Meeting
- Meetings are recorded for notetaking only



Dental Pilot Projects Program



Dental Pilot Projects Program

Hello
my name is



- Name & Organization
- What is your interest in participation on the Advisory Committee?

Dental Pilot Projects Program



CENTER FOR PREVENTION AND HEALTH PROMOTION
Oral Health Program
Kate Brown, Governor



806 N.E. Oregon St., Ste. 625
Portland, Oregon 97232-2186
Office: 971-673-1563
Call 504-13-9388
Fax: 503-473-9201
www.healthoregon.org/dpp

AGENDA

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Advisory Committee Meeting DPP #300
January 31, 2022
9:00am – 11:00am

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Call in option: 669-254-5252 **Meeting ID:** 160 7480 0622 **Passcode:** 917391

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Next Meeting: May 9, 2022

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the Advisory

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Dental Pilot Projects Program

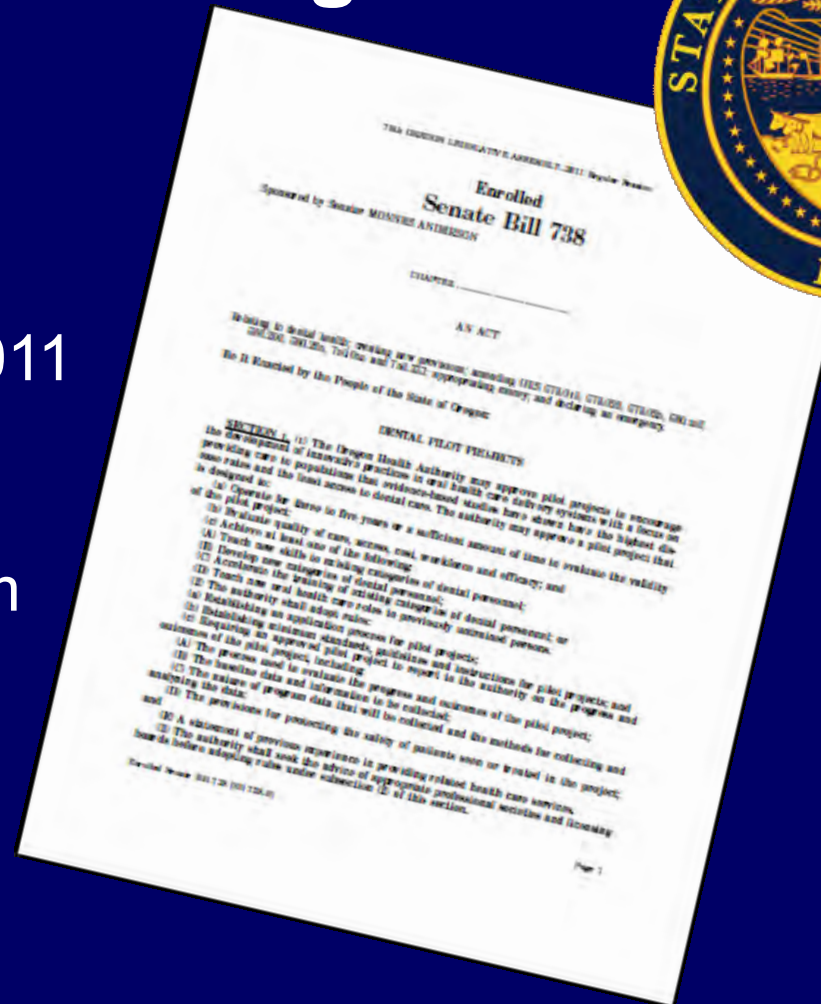


Dental Pilot Projects Program



History of the Program

- SB 738 passed in 2011
- Established Dental Pilot Project Program
- Funded in 2014
- Started accepting applications 2015



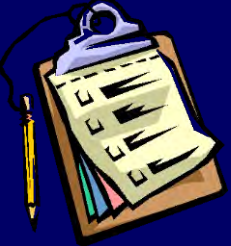
Dental Pilot Projects Program



Purpose of SB 738

- Encourage the development of innovative practices in oral health care delivery systems
- Focus on providing care to populations that have the highest disease rates and the least access to dental care

Dental Pilot Projects Program

-  Offers opportunity to safely demonstrate and evaluate new approaches to care delivery before changing laws and regulations
- SB 738 Allows an unlicensed person to practice dentistry or dental hygiene in approved pilot project

Dental Pilot Projects Program



- Pilot Projects are designed to run 3-5 Years
- Pilot Projects can apply for a **modification** to extend the project timeline or other aspects of their projects, addition of sites, trainees, etc.

Dental Pilot Projects Program



- OHA Program Modeled after California Program
- California Health Workforce Pilot Project Program (HWPP)
- California HWPP began 1972

Dental Pilot Projects Program



- California Program Spans all Health Professions
- Oregon Program is Limited to Dental

Dental Pilot Projects Program



Dental Pilot Project Program sunsets in 2025

CALIFORNIA PROGRAM STATISTICS

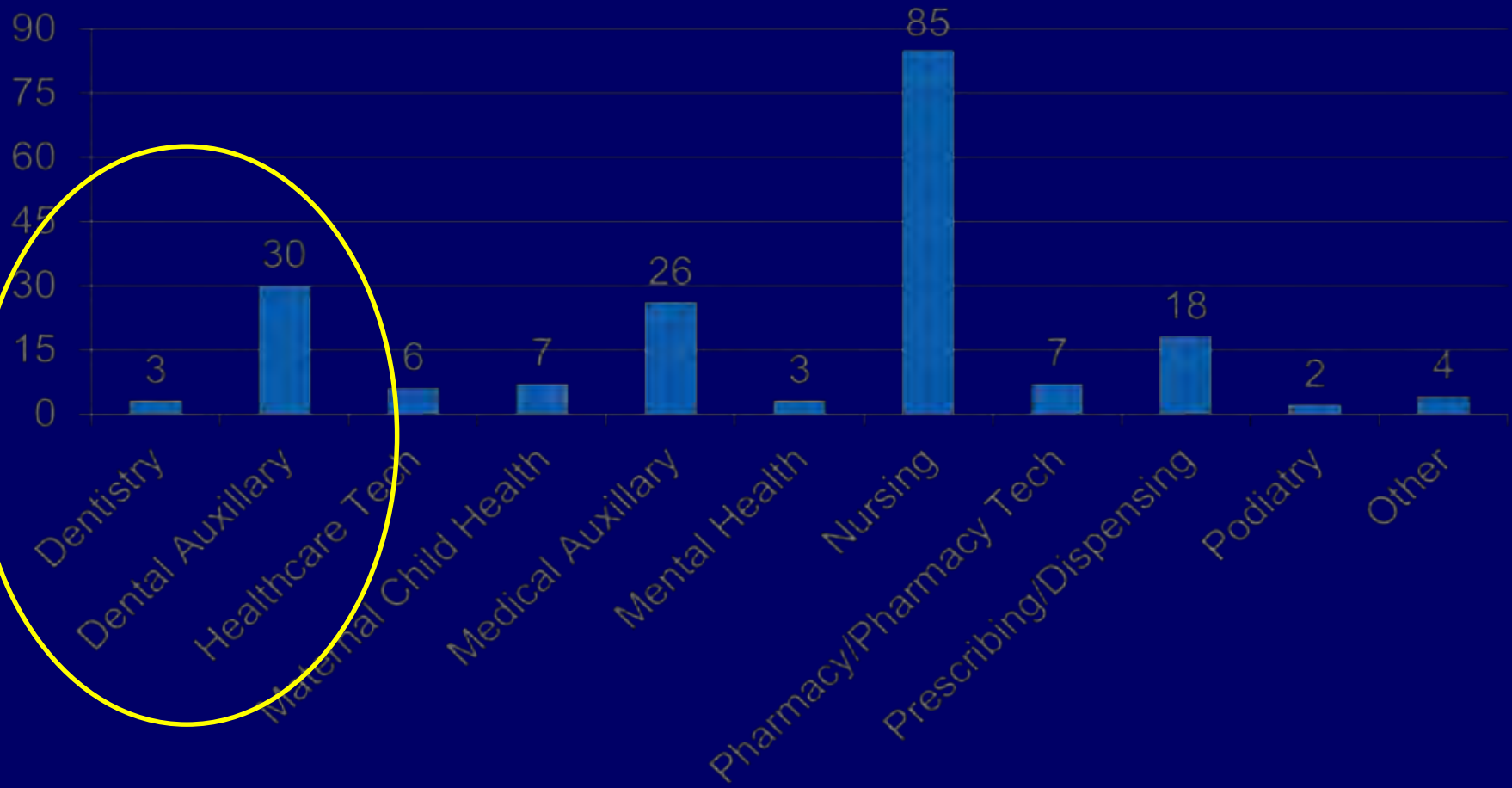
173 sponsors
have submitted
applications
since 1972

123 HWPP
applications
have been
approved

117 HWPP
applications
have been
administered

77 Pilot Projects
have resulted in
legislative
and/or
regulatory
change

California Health Workforce Pilot Projects (HWPP)



18% California HWPP have Dental Focus

Dental Pilot Projects Program

- **DPP #100:** Oregon Tribes Dental Health Aide Therapist Pilot Project (DHAT)
- **DPP #200:** Training Dental Hygienists to Place Interim Therapeutic Restorations (ITR)
- **DPP #300:** Dental Therapist Project: Dental Hygiene Model

Dental Pilot Projects Program

DPP #200: Training Dental Hygienists to Place Interim Therapeutic Restorations (ITR)

- Expand Scope of Practice Dental Hygienist
- EPDHs can place “Interim Therapeutic Restorations” (ITRs)
- Sponsored by OHSU School of Dentistry
- Capitol Dental, Virginia Garcia, Advantage Dental Care
- 8 trainees
- Approved 2016
- **Concludes July 31, 2022**

**Enrolled
House Bill 2627**

Sponsored by Representatives HAYDEN, SCHOUTEN; Representatives DEXTER, GRAYBER, PRUSAK, Senator MANNING JR (Pre-session filed.)

CHAPTER

AN ACT

Relating to interim therapeutic restorations; creating new provisions; amending ORS 680.205; and prescribing an effective date.

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

SECTION 1. ORS 680.205 is amended to read:

680.205. (1) An expanded practice dental hygienist may render all services within the scope of practice of dental hygiene, as defined in ORS 679.010, without the supervision of a dentist and as authorized by the expanded practice dental hygienist permit to:

(a) Patients or residents of the following facilities or programs who, due to age, infirmity or disability, are unable to receive regular dental hygiene treatment:

(A) Nursing homes as defined in ORS 678.710;

(B) Adult foster homes as defined in ORS 443.705;

(C) Residential care facilities as defined in ORS 443.400;

(D) Adult congregate living facilities as defined in ORS 441.525;

(E) Mental health residential programs administered by the Oregon Health Authority;

(F) Facilities for persons with mental illness, as those terms are defined in ORS 426.005;

(G) Facilities for persons with developmental disabilities, as those terms are defined in ORS 427.005;

(H) Local correctional facilities and juvenile detention facilities as those terms are defined in ORS 169.005, regional correctional facilities as defined in ORS 169.620, youth correction facilities as defined in ORS 420.005, youth care centers as defined in ORS 420.855, and Department of Corrections institutions as defined in ORS 421.005; or

(I) Public and nonprofit community health clinics.

(b) Adults who are homebound.

(c) Students or enrollees of nursery schools and day care programs and their siblings under 18 years of age, Job Corps and similar employment training facilities, primary and secondary schools, including private schools and public charter schools, and persons entitled to benefits under the Women, Infants and Children Program.

(d) Patients in hospitals, medical clinics, medical offices or offices operated or staffed by

Dental Hygienists
authorized to place
Interim Therapeutic
Restorations (ITR)

- Administrative Rules effective on **January 1, 2022**

Dental Pilot Projects Program

collaborative agreement with _____, a dental hygienist with an expanded practice permit, License No. _____. The collaborative agreement sets forth the agreed-upon scope of the dental hygienist's practice with regard to the following:

Check all that apply:

- Administer local anesthesia.
- Administer temporary restorations with or without excavation.
- Prescribing prophylactic antibiotics and non-steroidal anti-inflammatory drugs:
 - * On your Collaborative Agreement you must specify either ALL prophylactic antibiotics or non-steroidal anti-inflammatory drugs, or if limiting prescribing abilities, list specific drugs allowed.
- Perform Interim Therapeutic Restorations after diagnosis by a dentist.
- Referral Parameters.

I understand that this agreement will remain in effect with the Oregon Board of Dentistry (OBD) until I submit a written change. If any changes are made to this agreement, a new verification and copy of the agreement must be submitted to the OBD immediately.

https://www.oregon.gov/dentistry/Documents/Form_Dental_Hygiene_Verification_Collaborative_Agreement.pdf#:~:text=The%20collaborative%20agreement%20sets%20forth%20the%20agreed-upon%20scope,excavation.%20Prescribing%20prophylactic%20antibiotics%20and%20non-steroidal%20anti-inflammatory%20drugs%3A

Dental Pilot Projects Program

DPP #100: Oregon Tribes Dental Health Aide Therapist Pilot Project (DHAT)

- Dental Therapist workforce model
- Sponsored by the Northwest Portland Area Indian Health Board
- 3 Sites in Oregon
- 5 trainees
- Approved 2016
- **Concludes May 31, 2022**

Dental Pilot Projects Program

DPP #300: Dental Therapist Project: Dental Hygiene Model

Concludes January 1, 2025



Dental Pilot Projects Program

An official website of the State of Oregon [Here's how you know »](#)

[OREGON.GOV](#) [About OHA](#) [Programs and Services](#) [Oregon Health Plan](#) [Health System Reform](#) [Licenses and Certificates](#) [Public Health](#)

OHA COVID-19 Updates and Resources: Visit our COVID-19 site for the latest updates, testing sites and vaccine information, or find information for healthcare partners.

Dental Pilot Projects

Oral Health

Dental Pilot Projects

Frequently Asked Questions

Project Application and Forms

Dental Pilot Project #100

Dental Pilot Project #200

Dental Pilot Project #300

Contact Us

The goal of the Oregon Health Authority (OHA) Dental Pilot Project Program is to encourage the development of innovative practices in oral health care delivery systems with a focus on providing care to populations that evidence-based studies have shown have the highest disease rates and the least access to dental care.

- [Frequently asked questions](#)
- [Current projects](#)
- Application forms are currently being updated. Please contact the Dental Pilot Project Program at sarah.e.kowalski@dhsosha.state.or.us if you are interested in the application process.

News and Announcements

- [Advisory Committee Members for Project #100](#)
- [Advisory Committee Members for Project #200](#)
- [Applications for the Advisory Committee for Project #300 are due November 22, 2021](#)

[Healthoregon.org/dpp](https://healthoregon.org/dpp)

Dental Therapists authorized in Oregon

81st OREGON LEGISLATIVE ASSEMBLY--2021 Regular Session

Enrolled House Bill 2528

Sponsored by Representatives SANCHEZ, BYNUM; Representatives ALONSO LEON, CAMPOS, DEXTER, MEEK, PRUSAK, SOLLMAN, WILLIAMS, WITT, Senator DEMBROW (Presession filed.)

CHAPTER

AN ACT

Relating to dental therapy; creating new provisions; amending ORS 679.010, 679.140, 679.170 and 679.250 and section 1, chapter 716, Oregon Laws 2011; and prescribing an effective date.

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

SECTION 1. Sections 2 to 12 of this 2021 Act are added to and made a part of ORS chapter 679.

SECTION 2. As used in sections 2 to 12 of this 2021 Act:

(1) "Collaborative agreement" means a written and signed agreement entered into between a dentist and a dental therapist under section 8 of this 2021 Act.

(2) "Dental pilot project" means an Oregon Health Authority dental pilot project developed and operated by the authority.

(3) "Dentist" means a person licensed to practice dentistry under this chapter.

SECTION 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

(a) Is at least 18 years of age;

(b) Submits to the board a completed application form;

(c) Demonstrates the completion of a dental therapy education program;

(d) Passes an examination described in section 4 of this 2021 Act; and

(e) Pays the application and licensure fees established by the board.

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

- Administrative Rules currently being written by Oregon Board of Dentistry
- Oregon Board of Dentistry developing application for licensure, anticipated early mid-2022

Dental Pilot Projects Program



**THE MILLION
DOLLAR
QUESTION**

Why do we still have a
Dental Therapy Pilot
Project if we have Dental
Therapy legislation now in
Oregon?

Dental Pilot Projects Program

OUR
ROLE?



Dental Pilot Projects Program



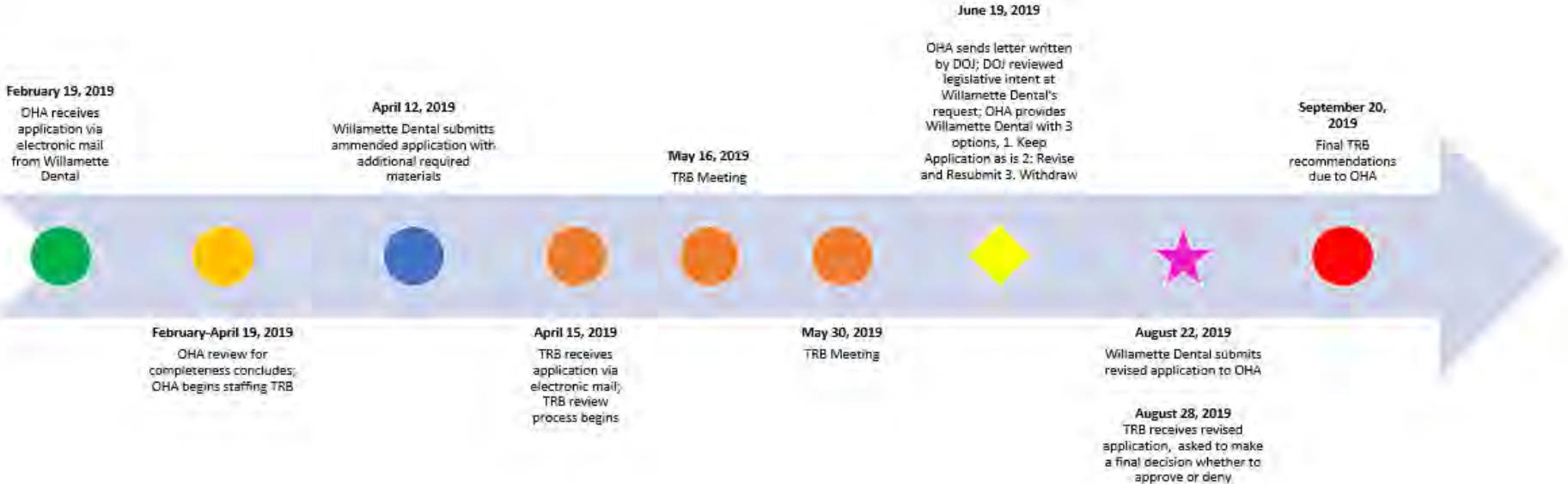
Oregon Health Authority Role

1. **Program responsibilities**
2. Support the state in reaching the goals outlined in the State Health Improvement Plan (SHIP)
3. Role of public health in implementation of legislation

Technical Review Board Members

Sharon Hagan, RDH, MS	Lane Community College
Cara Kao-Young, RDH, BS	Portland Community College

**2019 Timeline: Dental Pilot Project Applicant
"Willamette Dental"**
(Application, Technical Review Board Meetings, Withdrawal)



Research Analyst, OHA	Research Analyst, OHA
Karen Phillips, RDH, MPH	Oral Health Program, OHA

Dental Pilot Projects Program



Oregon Health Authority Role

- OHA does not Develop Projects
- OHA does not Promote One Type of Model
- OHA does not Fund Projects



Dental Pilot Projects Program



- Monitors for patient safety
- Responsible for ascertaining the progress of the project in meeting its stated objectives and in complying with program statutes and regulations

Dental Pilot Projects Program



"Adverse event" means unnecessary harm due to dental treatment

Dental Pilot Projects Program

The image shows a YouTube video player interface. At the top left is the YouTube logo. To its right is a search bar with the word "Search" inside. The main content area displays a white slide with blue and black text. The slide title is "Dental Pilot Projects Program: Technical Assistance in Adverse Event Reporting Requirements". Below the title is the date "March 9th, 2020" and the word "Webinar". Further down, the presenters are listed: "Sarah Kowalski, RDH, MS, OHA Oral Health Program" and "Rose McPharlin, DDS, OHSU School of Dentistry". At the bottom of the slide is the Oregon Health Authority logo, which features the word "Oregon" in orange, "Health" in large blue letters, and "Authority" in smaller orange letters below it.

<https://www.youtube.com/watch?v=6ANPrKowGc8>

Dental Pilot Projects Program





Dental Pilot Projects Program

Site Visits

- Required by Oregon Administrative Rules
- 333-010-0790 Authority Responsibilities

(b) Periodic, but at least annual, site visits to project offices, locations, or both, where trainees are being prepared or utilized



Dental Pilot Projects Program

- 333-010-0790 Authority Responsibilities

(3) Site visits.

(a) Site visits shall include, but are not limited to:

(A) Determination that adequate patient safeguards are being utilized;

(B) Validation that the project is complying with the approved or amended application;

(C) Interviews with project participants and recipients of care; and

(D) Reviews of patient records to monitor for patient safety and the applicable standard of care.

(b) If the Authority has convened an advisory committee, representatives of the committee may be invited by the Authority to participate in the site visit though the Authority may, at its discretion, limit the number of members who can participate;

Dental Pilot Projects Program

- 333-010-0750 Authority Responsibilities
 - (b) The purpose of the advisory committee is to gather its members' collective knowledge, experience, expertise, and insight to assist the Authority in meeting its responsibilities.



Dental Pilot Projects Program



Program Goals

- Goal is to ultimately make recommendations for best practice approaches
- Report back to legislature at their request



Dental Pilot Projects Program



Oregon Health Authority Role

1. Program responsibilities
2. Support the state in reaching the goals outlined in the State Health Improvement Plan (SHIP)
3. Role of public health in implementation of legislation

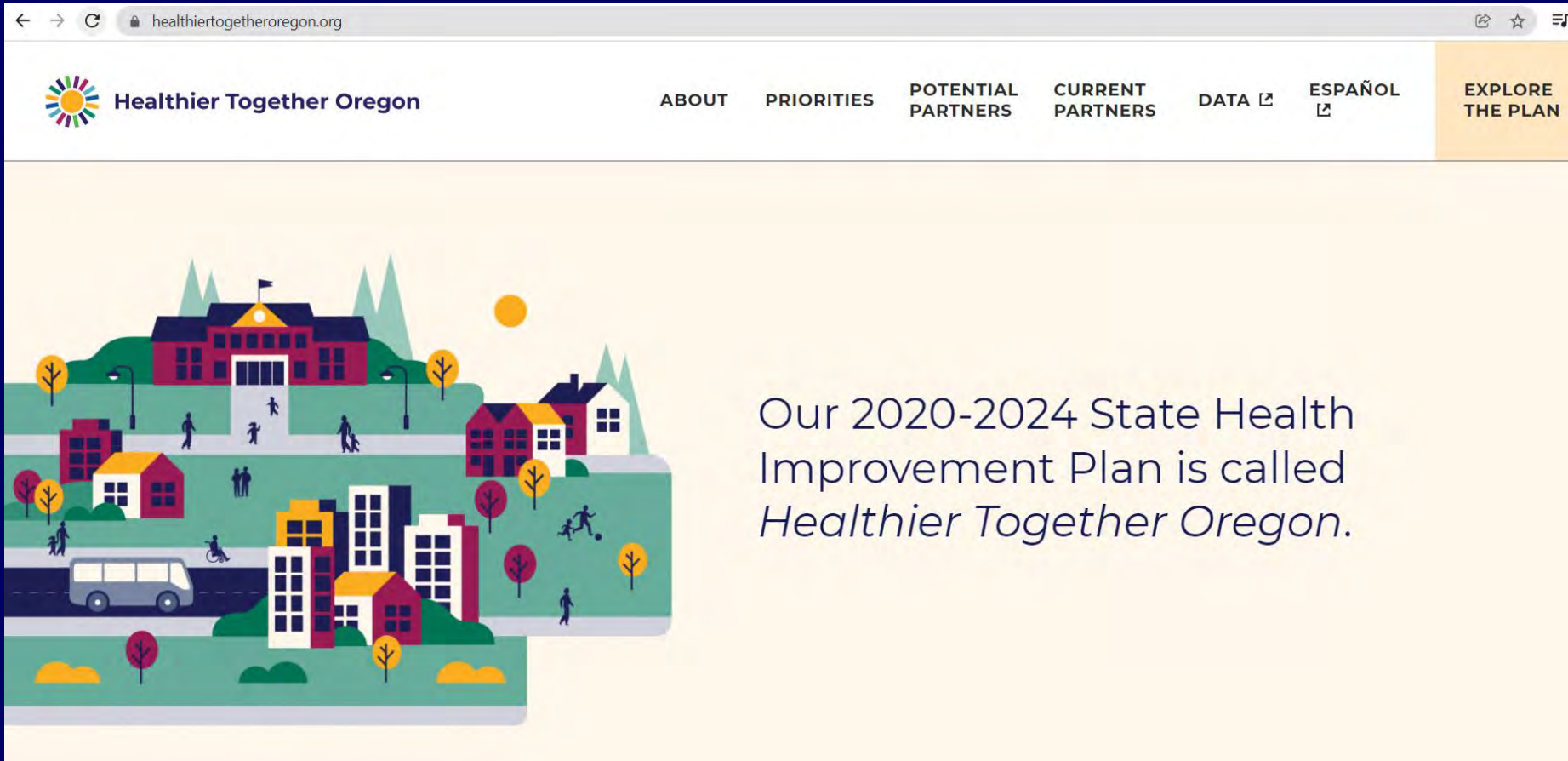
Dental Pilot Projects Program



State Health
Improvement
Plan (SHIP)
Goals

The Oregon Health Authority (OHA) has set a strategic goal of **eliminating health inequities by 2030**. Achieving this goal will require an immediate and significant shift in the programs and services supporting those experiencing health inequities

Dental Pilot Projects Program



<https://healthiertogetheroregon.org/>

Dental Pilot Projects Program

The screenshot shows a web browser displaying the Oregon Health Authority website. The address bar shows the URL: [oregon.gov/oha/PH/ABOUT/Pages/HealthImprovement.aspx](https://www.oregon.gov/oha/PH/ABOUT/Pages/HealthImprovement.aspx). A banner at the top of the page states: "740,016 more people need to get a COVID-19 booster for Oregon to reach its goal to boost an additional 1 million people by Jan. 31, 2022 and fight the Omicron variant in our state. [Find a booster](#) Updated 1/7/2022". Below the banner is a navigation menu with the following items: "About OHA", "Programs and Services", "Oregon Health Plan", "Health System Reform", "Licenses and Certificates", and "Public Health". The main content area is titled "Healthier Together Oregon: 2020-2024 State Health Improvement Plan". On the left side, there is a sidebar menu with the following items: "About the Public Health Division", "Leadership Team", "Public Health Advisory Board (PHAB)", "Public Health Modernization", "Public Health Modernization Community Engagement", "Public Health Accountability Metrics", "2020-2024 State Health Improvement Plan", "State Health Assessment and Indicators", "Strategic Plan", and "COVID-19 CBO Funding". The main content area features a central graphic with a colorful sun icon and the text: "The purpose of Healthier Together Oregon is to advance health equity." Below this is a paragraph: "Healthier Together Oregon (HTO) identifies population-wide priorities and strategies for improving the health of people in Oregon. HTO serves as the basis for taking collective action on key health issues in Oregon." There are two buttons: "Download the Full Plan" and "Learn more at HealthierTogetherOregon.org". Below this is another graphic with the same sun icon and the text: "El propósito de Healthier Together Oregon es promover la equidad en la salud." On the right side, there is a "Resources and Contacts" section with three sub-sections: "Stay Connected" (with a "Subscribe for updates" button), "Contact Us" (with contact information: "Policy and Partnerships Staff", "publichealth.policy@state.or.us", "971-673-1300"), and "HTO in Action" (with the text: "A series of online events that provide"). The browser's taskbar at the bottom shows two open PDF files: "About Health Equi...pdf" and "REQUEST FOR ED...pdf".

<https://www.oregon.gov/oha/PH/ABOUT/Pages/HealthImprovement.aspx>

Dental Pilot Projects Program

Access to equitable preventive health care



A higher number of people now have health insurance. Still, it is hard for many to get to a health care provider or see a dentist. One reason is because they do not feel comfortable with their provider due to language barriers or cultural difference.

Other reasons include:

-
- Provider shortages
 - Health care costs
 - Transportation barriers

Dental Pilot Projects Program

Goals



- ✓ Increase equitable access to and uptake of community-based preventive services.
- ✓ Increase equitable access to and uptake of clinical preventive services.
- ✓ Implement systemic and cross-collaborative changes to clinical and community-based health related service delivery to improve quality, equity, efficiency and effectiveness of services and intervention.

Dental Pilot Projects Program



OHA Health Equity Definition:

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, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstance

Dental Pilot Projects Program

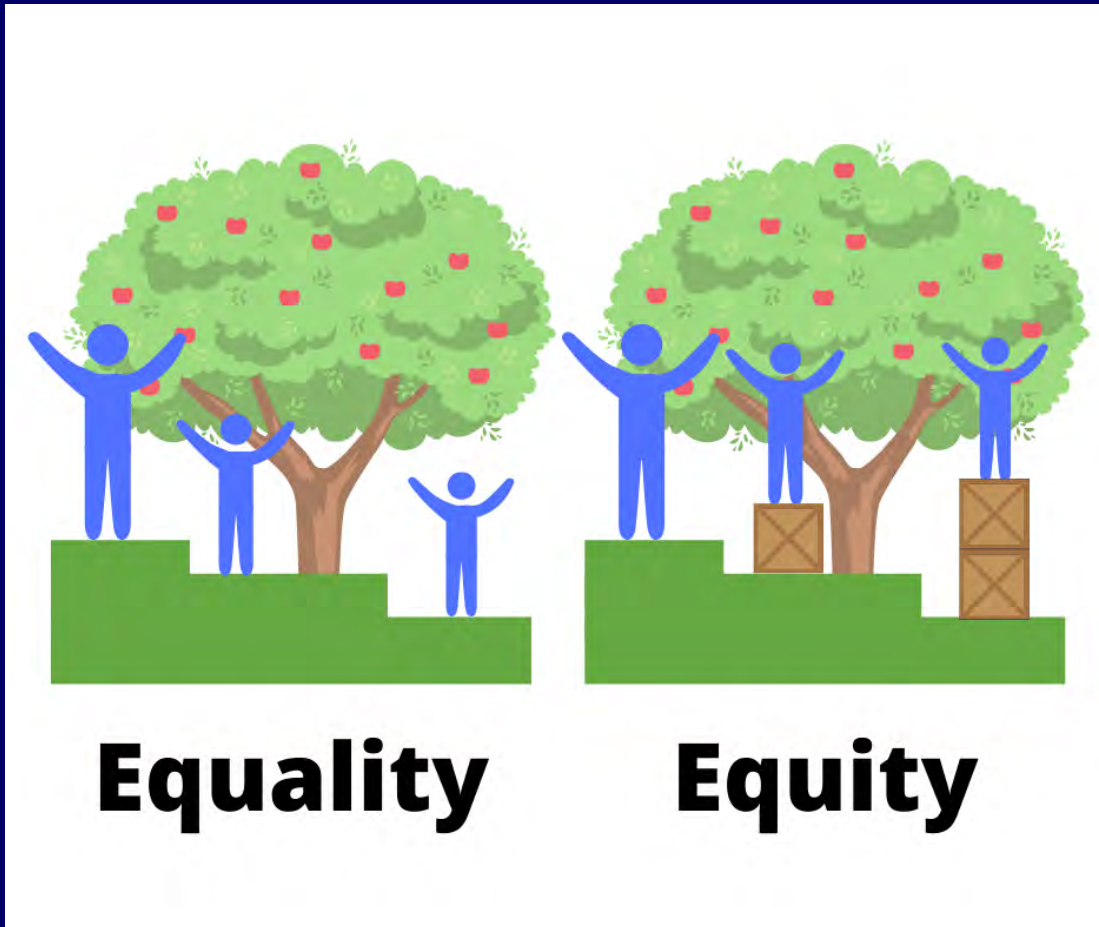
OHA Health Equity Definition (continued):

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



Dental Pilot Projects Program



Dental Pilot Projects are part of the bigger health equity story in Oregon

Dental Pilot Projects Program



Justice/Liberation

We all win when
our systems and
foundation are
stronger

Dental Pilot Projects Program

Everyone at the Oregon Oral Health Program is committed to health equity and we can offer support to help local programs as they work to implement health equity activities



Dental Pilot Projects Program

Racism is a Core Social Determinant of Health



- Racism has been linked to birth disparities and mental health problems in children
- Racism contributes to chronic/toxic stress, which leads to inflammation and chronic disease
- Racism plays a significant role in health care delivery and educational opportunities

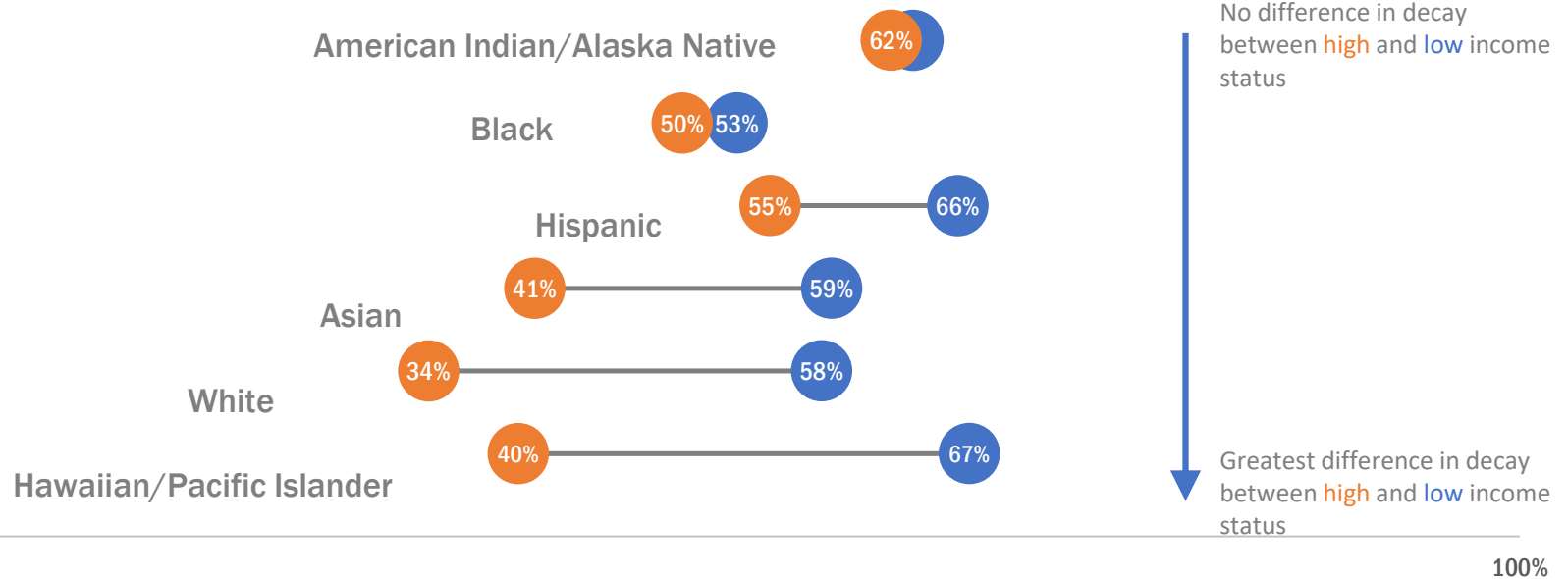
Source: <https://pediatrics.aappublications.org/content/144/2/e20191765>

Dental Pilot Projects Program

2017 Oregon Smile Survey Data

Percent of children with cavities remains high regardless of **high** or **low** income status.

Children may be represented by one or more racial/ethnic identity



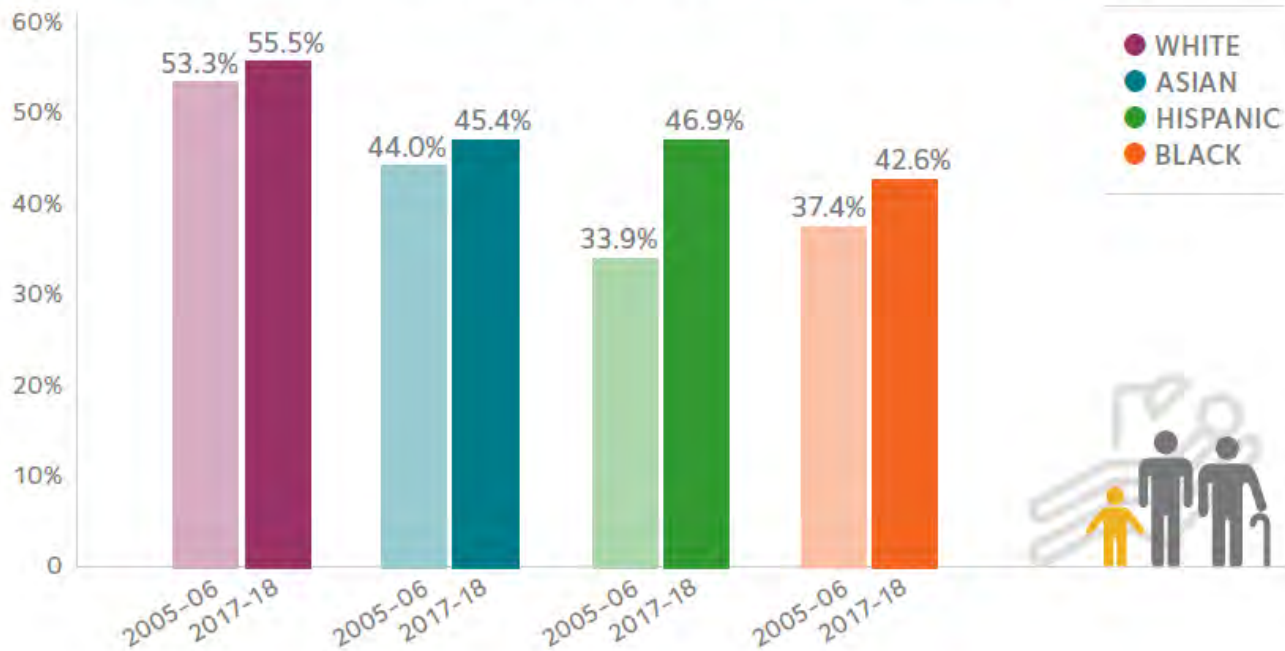
Dental Pilot Projects Program

National trends in Oral Health Access

HPI Health Policy Institute
ADA American Dental Association*

Dental Care Utilization Among the U.S. Population, by Race and Ethnicity

PERCENTAGE WITH A DENTAL VISIT IN THE PAST YEAR – CHILDREN



Dental Pilot Projects Program

Addressing Oral Health Equity in Oregon

- **Dental Pilot Projects** (access to care)
- School Dental Sealant Programs (access to care)
- Oregon Oral Health Surveillance System - e.g. Smile Survey, Student Health Survey, Behavioral Risk Factor Surveillance System (BRFSS), etc. (understanding health disparities)
- OHA staff receiving health equity training (support systems, policies, programs in having a health equity framework)
- Community Engagement (key stakeholders who represent the community involved in decision making)
- Many, many other initiatives in place to increase access to care!

Dental Pilot Projects Program



Oregon Health Authority Role

1. Program responsibilities
2. Support the state in reaching the goals outlined in the State Health Improvement Plan (SHIP)
3. Role of public health in implementation of legislation

Dental Pilot Projects Program

Public Health



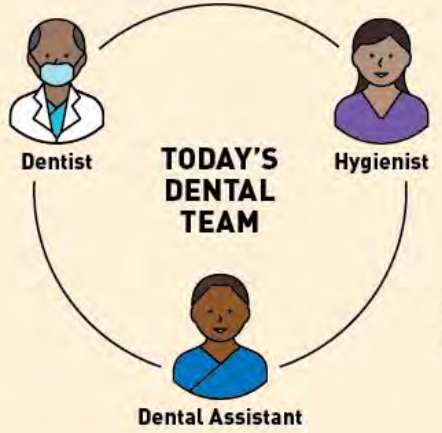
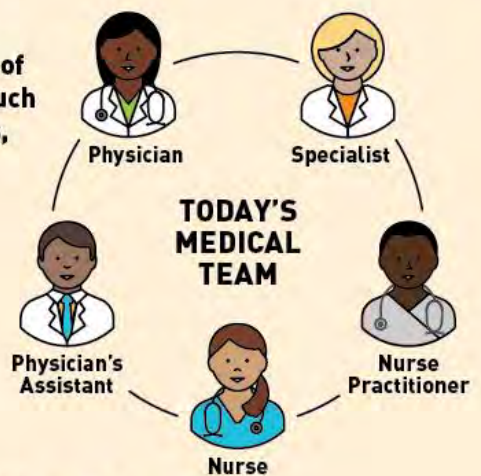
Dental Pilot Projects Program

1. What is a Dental Therapist?
2. What is a Dental Therapist in Oregon?
3. Why do we still have a Dental Therapy Pilot Project if we have Dental Therapy legislation now in Oregon?
4. Role of the Advisory Committee

DENTAL THERAPISTS

Expanding the Dental Workforce

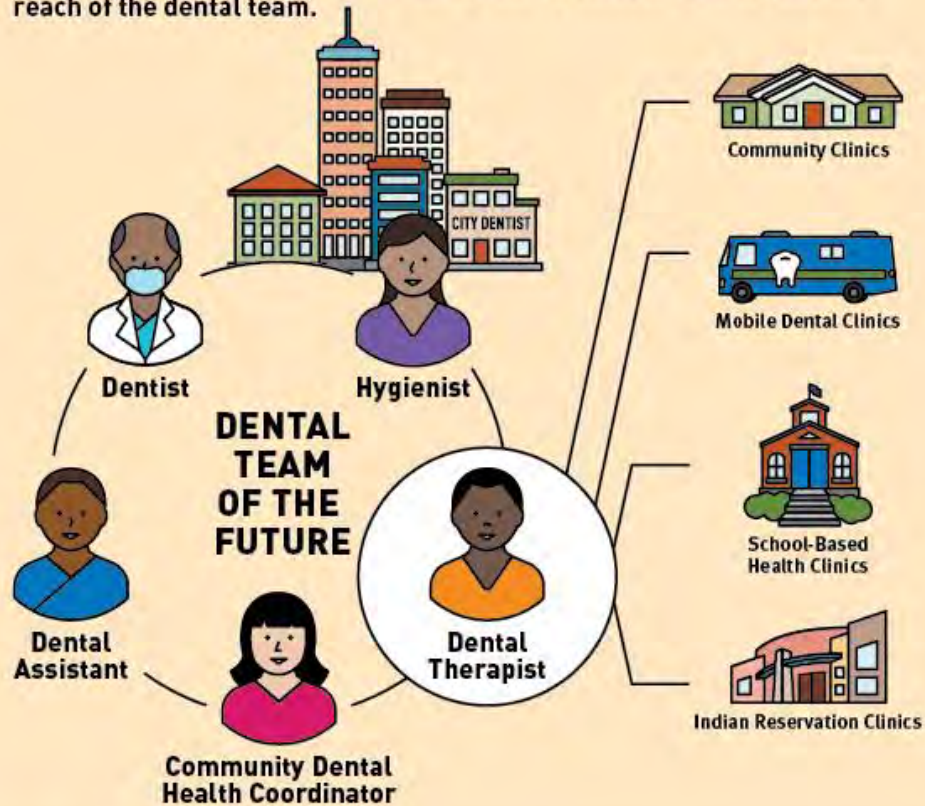
Today's medical care team makes good use of mid-level providers such as nurse practitioners, physician assistants and community health workers.



Our dental care system can too.

Dental therapists bring oral health education, prevention and treatment to communities, often where they live.

More than 158 million people in the U.S. don't have access to affordable dental care where they live; mid-level dental providers can expand the reach of the dental team.



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www.wkkf.org

Oregon
Health
Authority

Dental Pilot Projects Program



Pilot Project 300 Overview & Update


January 31, 2022



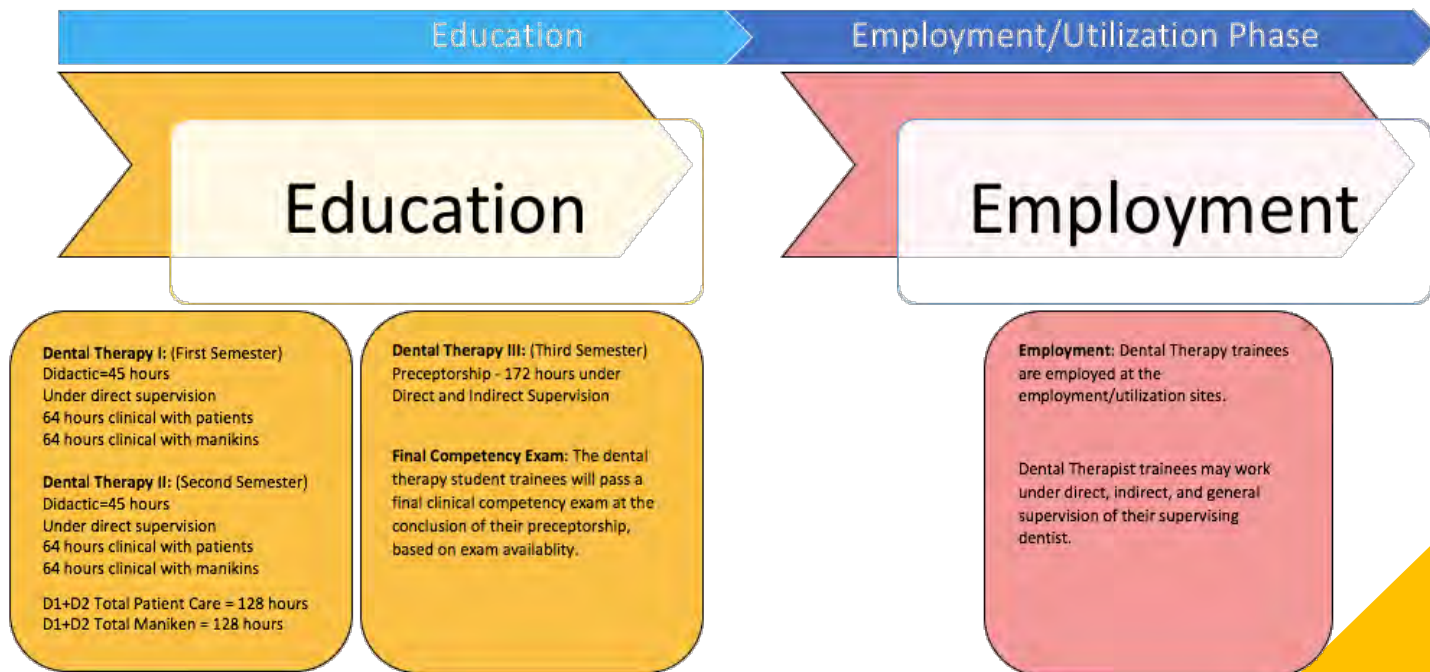
Pilot Project Team

- Project Director – Kristen Simmons
- Dental Director – Shannon English
- Didactic and Lab Instructor – Molly Saunders
- Data Specialist – Aaron Truong
- Administrative Support
 - Elisa Turpen
 - Natalie Horn
- Pacific Partner
 - Gail Aamodt
 - Amy Coplen

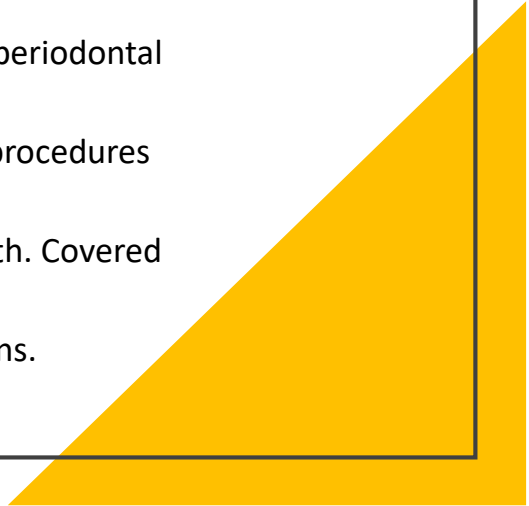
Dental Therapy Pilot Model

- Oregon hygienists w/ Restorative credential
 - Working FT (minimum of 30 hours a week)
 - CE Credit-Online learning through Power Points, Assigned Reading, Videos, Activities (20 weeks per semester)
 - Hands on learning for 8 Saturdays at Pacific University for 8 hours for both semesters (DT1 and DT2)
 - Additional on-site hands-on learning for 64 hours + 64 hours with supervising dentist during DT1 and DT2 (Direct Supervision)
 - 3rd semester of practicum for 172 hours (Indirect and General Supervision)
- 
- A large yellow triangle is positioned in the bottom right corner of the slide, pointing towards the top right.

Curriculum Review



13 New Skills

1. **Understanding the scope of practice of a dental therapist:** Identify oral and systemic conditions requiring evaluation and/or treatment by dentists, physicians or other healthcare providers and manage referrals.
 2. **Pharmacology:** Dispensing and administering via oral and/or topical route non-narcotic analgesics, anti-inflammatory and antibiotic medications as prescribed by a licensed healthcare provider.
 3. **Extractions:** Simple extraction of erupted primary teeth and teeth with severe periodontal disease (Class III mobility).
 4. **Emergency Care:** Emergency palliative treatment of dental pain limited to the procedures within the scope of practice of a dental therapist.
 5. **Restorative:** Preparation and direct restorations in primary and permanent teeth. Covered under hygienists Restorative Credential.
 6. **Temporary Crowns:** Fabrication and placement of single tooth temporary crowns.
- 
- A large yellow triangle is positioned in the bottom right corner of the slide, pointing towards the top right.

13 New Skills Continued


7. **Stainless Steel Crowns:** Fabrication and placement of preformed crowns on primary teeth.
8. **Pulp Capping – primary and permanent teeth:** Indirect and direct pulp capping on permanent teeth & indirect pulp capping on primary teeth.
9. **Pulpotomy/Pulpal Debridement – primary teeth:** For the relief of acute pain
10. **Prosthetics:** Minor adjustments and repairs on removable prostheses.
11. **Space Retainer Removal:** Removal of space maintainers.
12. **Diagnosis of Decay Including Pulp Vitality Testing**
13. **Placement of sutures:** Removal of sutures is already a covered procedure in dental hygiene programs.

* There are some procedures that trainees can perform under the pilot project that are not included in the legislation that was passed in 2021.

Supervision Levels

Phase of Pilot Project	Level of Supervision	Supervision by
DT I course	Direct	Course Instructor Dentist Supervising Dentist
DT II course	Direct	Course Instructor Dentist Supervising Dentist
DT III - Preceptorship	Direct and Indirect	Supervising Dentist
Utilization	Indirect and general	Supervising Dentist – collaborative agreement

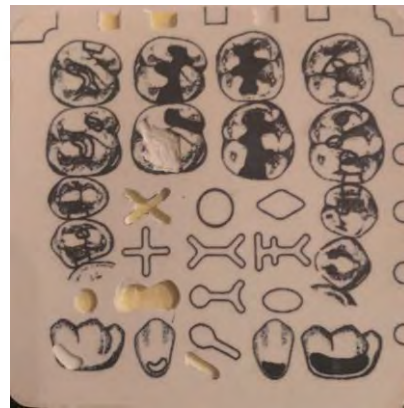
Saturday Lab

- Quiz – (10 pts) based on instruments, burs and preparations
 - Learn new preparations, starting with learn a prep on the tabletop, then typodonts on a tabletop and finally working on a manikin
 - Review a preparation learned in a previous lab
 - Self-Critique and Peer-Critique
 - Roundtable – Treatment planning cases, paper presentations
- 
- A large yellow right-angled triangle is positioned in the bottom right corner of the slide, extending from the right edge towards the center and from the bottom edge towards the center.

Sample Lab Schedule

LAB B	LAB TOPICS	LAB WORK: AM	LAB WORK: PM	LAB HOMEWORK
Feb 15	<p>REVIEW:</p> <ul style="list-style-type: none"> Class I Amalgam Preparations Class I Amalgam Preparation Variations <p>NEW:</p> <ul style="list-style-type: none"> Class II Amalgam Preparations Competency Testing (Class I amalgam) Roundtable Class I 	<ul style="list-style-type: none"> QUIZ 2 (10 pts/15mins to take/ 15 mins to review). Topics: Class II Amalgam Preparation, Anesthesia for Class I/II restorations, Instrument and bur identification Class I Amalgam Preparations on Rod OL/OB Class I Amalgam (12, 21, 29 occl) on Rod Peer evaluation of restored Class I amalgam restorations and homework preparations Self/Peer Evaluation of class I preps done today Learn-A-Prep Class II Amalgam Preparations-use edge to prep boxes 	<ul style="list-style-type: none"> Class II Amalgam Preparations- Table top #3 MO; #19 DO Class II Amalgam Preparations-Rod Roundtable Class I Self/Peer Critique of Class II Amalgam Preparations 	<ul style="list-style-type: none"> Restore all Class I preps in amalgam with typodont in rod Restore all amalgam Class II preps from Lab B. Bring to Lab C PREP: Self-critique Preps and Restorations

Learn-A-Prep



Tabletop Preps



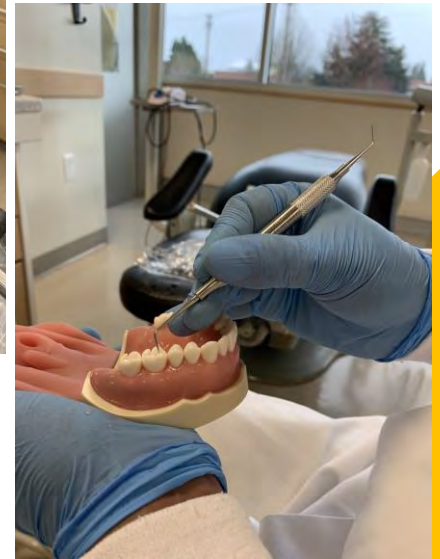
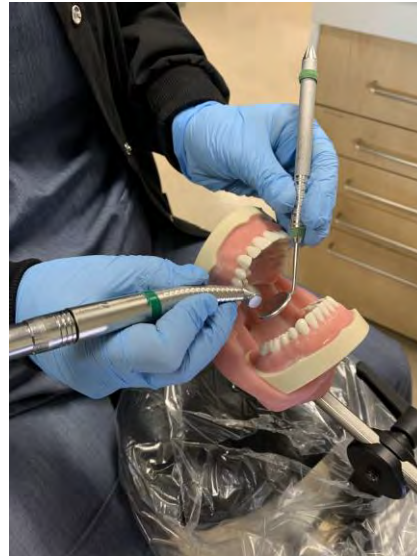
8 Hours of Fun



On the Manikin

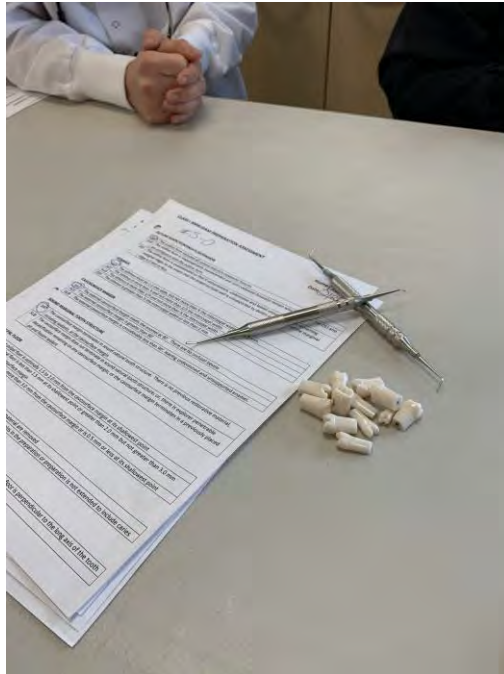


Perfecting Skills

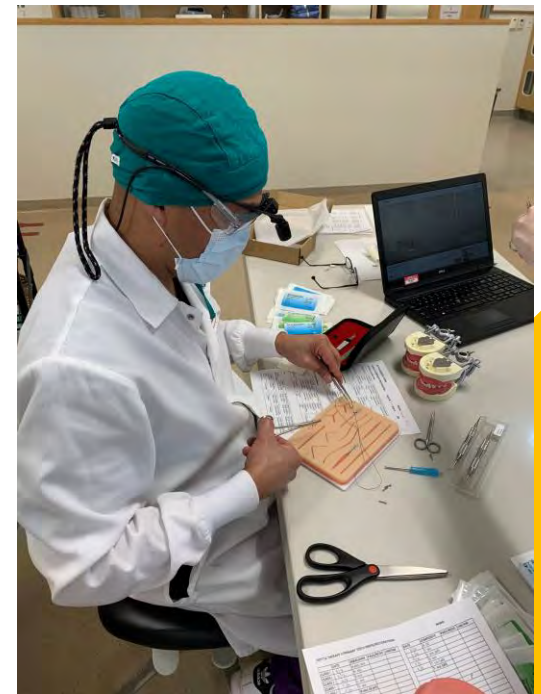


Professional Feedback

(pre-COVID photos)



Sutures & Extractions



Some of our work so far

9-year-old patient seen 3 days prior for overdue Continuing Care experiencing nocturnal pain

Appt Type: Extraction. Medical History has been updated today. Patient's temperature today was below 100.4 F (COVID-19). Patient rinsed with 1 part hydrogen peroxide to 2 parts water for 30 seconds, pre-operatively. Patient wore a mask while in the building and not being directly treated (COVID-19). Patient's mom said that he took 1 dose of Clindamycin and vomited it and has not taken anymore. Told patient's mom that he does not need to take the antibiotics after today. Patient's mom signed DT consent, extraction consent and nitrous oxide consent. Patient's mom was in the operatory during procedure.

Reviewed PARQ: Yes

Signed consent form: Yes

Current pre-op x-rays: Yes. Pre-op photo(s): Yes

Topical: 5% Lidocaine. Anesthetic: 1.75 Carpules, 2% Lidocaine + 1:100K epi. Infiltration: *, *, *. Infiltration/PDL #A and #J administered. No adverse reaction to local anesthetic. Patient needed positive reinforcement and voice control for injections.

Tooth/Teeth Completely Removed: Yes, #A and #J

Curette Socket: Yes, *

Irrigation: Chlorhexidine

Packing Material: No, *

Sutures: N/A, *

Gauze/Pressure for Hemostasis: Yes

Post-Op Instructions Reviewed: Yes. Went over post-op instructions with patient's mom. Patient does not need to take any more antibiotics. Patient is biting on gauze when he is leaving today. Take out gauze when you get home and put new gauze in if it is still bleeding, then wait for 20 minutes and take out gauze. Monitor patient and tell patient not to play with tongue, cheek or lip while it is numb. Careful eating and drinking while numb, avoid hard crunchy foods while numb. Soft food diet for a few days. Avoid drinking through a straw, avoid vigorous rinsing and vigorous activity for the next few days. Children's ibuprofen or tylenol as needed for the next day or two, not exceeding recommended dosage per age/weight. Patient weighs 100 lbs and patient's mom says that he takes adult dosage of tylenol and ibuprofen.

2 intraoral mounts of images taken to prevent loss of images from technical glitches. Patient wore safety glasses during procedure. Used tell-show-do, bite block, C-sponge, positive reinforcement, negative reinforcement and voice control. Patient needed a lot of encouragement but overall did well and was very brave. Patient earned 4 tokens. Patient dismissed alert and stable. Operative treatment complete.

Post-op photo(s): Yes

NV: 6 Month Caries Risk Assessment with Doctor of Record, Dr. Tolmach, due 4/22. Mia Bond, R.D.H. PARQ





Appt Type: Restorative, Medical History has been updated today , all covid qs neg, preop rinse completed. . Reviewed PARQ: Yes
Signed consent fom: Yes
Current pre-op x-rays: Yes . Pre-op photo(s): Yes
Topical: 5% Lidocaine , Anesthetic: 1 Carpule , 3% Mepivacaine Plain , Block ; 1 Carpule , 2% Lidocaine + 1:100K epi , Block , *
Caries Removal: Complete , Sharon Reich DT trainee prepped #19 MO and 20 DO with bite block, prewedge and cotton isolation under indirect supervision of Beth Gorman DMD.
Operative photos: Yes
Base/Liner: **
Protective Restoration Details: **, **, **
Definitive Restoration Details: N/A , Alloy #19 MO tie in. ; Acid Etch / LC Adhesive , Composite Resin #20 DO venus pearl shade A2 ; * , **
Diagnoses: D3 caries seen radiographically and visually #19 MO and 20 DO
Checked Occlusion/Contact: Yes
Post-Op Instructions to Patient: Yes , No hot foods/liquids and no chewing while numb. no chewing on left side until tomorrow.

Pt tolerated procedure well with no complications.

Post-Op photo(s): Yes

NV: CRA. THSMHG/ARZAR



Data Collection

- The clinical site is responsible for data collection and reposit to master data file as required by OHA.
- Reporting requirements include: collecting patient satisfaction surveys & consent forms, number and codes of procedures provided, patient demographic information
- The trainee cannot be responsible for the date reporting.

Where are we now?

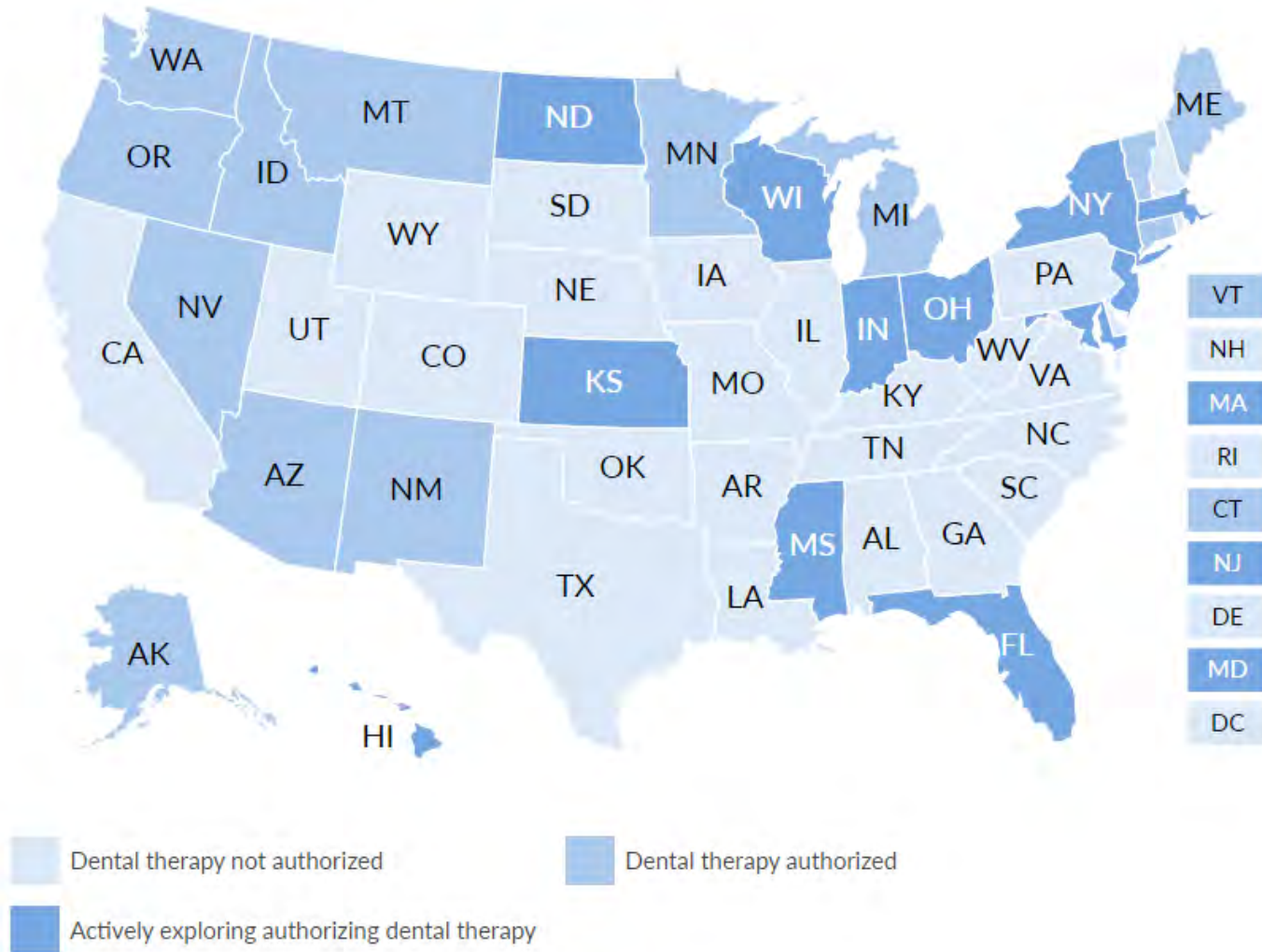
Cohort 1

- 7 out of 10 student trainees completed the didactic and lab portions of DT I and DT II
- 4 trainees have entered utilization
- 2 trainees are completing preceptorship
- 1 trainee is close to entering preceptorship
- All trainees successfully passed the CRDTS board exam in May of 2021

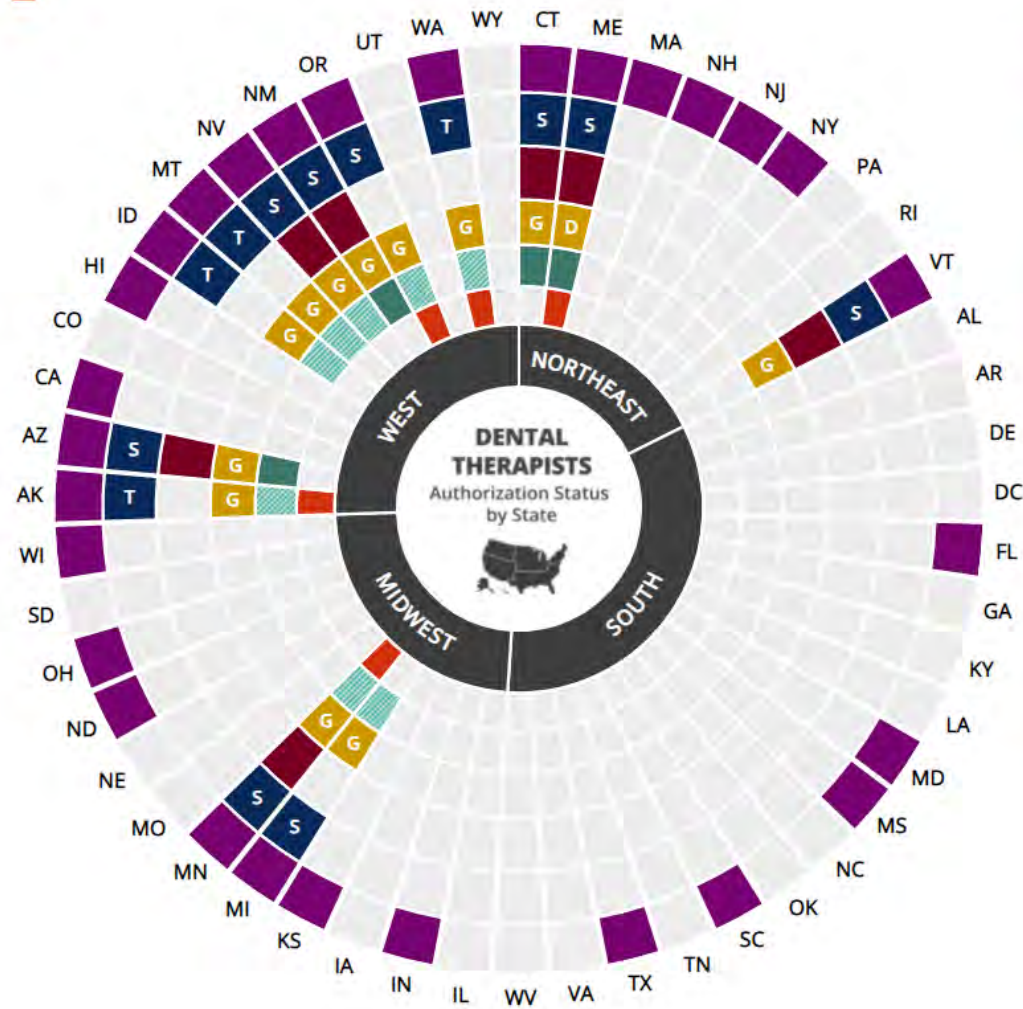
Cohort 2

- 11 student trainees began in August 2021
- All trainees successfully completed DT I didactic and lab portion
- DT II began December 15th
- CRDTS Board exam for Cohort 2 is scheduled for May 2022

Dental therapy policies by state



<https://www.pewtrusts.org/en/research-and-analysis/articles/2016/09/28/states-expand-the-use-of-dental-therapy>



Campaign for Dental Therapy in the State (Active or Prior)

Authorization of Dental Therapy

T Tribal Dental Therapy S Statewide

[Learn More >](#)

Mandated Dual Dental Hygiene and/or Degree Requirement in State Statute

Dental Therapist Supervision Level by Dentist

D Direct I Indirect G General

Population/Setting Restrictions on DT Practice

● Setting Only ● Population Only ● Both

Dental Therapists Practicing in the State

<https://oralhealthworkforce.org/authorization-status-of-dental-therapists-by-state/>



Dental Pilot Projects Program

**THE MILLION
DOLLAR
QUESTION**

Why do we still have a
Dental Therapy Pilot
Project if we have Dental
Therapy legislation now in
Oregon?

**Enrolled
House Bill 2528**

Sponsored by Representatives SANCHEZ, BYNUM; Representatives ALONSO LEON, CAMPOS, DEXTER, MEEK, PRUSAK, SOLLMAN, WILLIAMS, WITT, Senator DEMBROW (Presession filed.)

CHAPTER

AN ACT

Relating to dental therapy; creating new provisions; amending ORS 679.010, 679.140, 679.170 and 679.250 and section 1, chapter 716, Oregon Laws 2011; and prescribing an effective date.

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

SECTION 1. Sections 2 to 12 of this 2021 Act are added to and made a part of ORS chapter 679.

SECTION 2. As used in sections 2 to 12 of this 2021 Act:

(1) "Collaborative agreement" means a written and signed agreement entered into between a dentist and a dental therapist under section 8 of this 2021 Act.

(2) "Dental pilot project" means an Oregon Health Authority dental pilot project developed and operated by the authority.

(3) "Dentist" means a person licensed to practice dentistry under this chapter.

SECTION 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

(a) Is at least 18 years of age;

(b) Submits to the board a completed application form;

(c) Demonstrates the completion of a dental therapy education program;

(d) Passes an examination described in section 4 of this 2021 Act; and

(e) Pays the application and licensure fees established by the board.

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

Dental Therapists authorized in Oregon

- Administrative Rules currently being written by Oregon Board of Dentistry
- Oregon Board of Dentistry developing application for licensure, anticipated early mid-2022

Dental Pilot Projects Program

Dental Therapy Scope of Practice



Dental Pilot Projects Program

General Supervision

“General supervision” means supervision requiring that a dentist authorize the procedures by standing orders, practice agreements or collaboration agreements, but not requiring that a dentist be present when the authorized procedures are performed.

The authorized procedures may also be performed at a place other than the usual place of practice of the dentist.

ORS 679.010

Dental Pilot Projects Program

General Supervision

- Comprehensive, Limited & Periodic Exams & Diagnosis
- Simple extractions of erupted anterior primary teeth & coronal remnants
- Restoration of primary and permanent teeth
- Placement of temporary crowns
- Preparation and placement of preformed crowns
- Indirect pulp capping on primary and permanent teeth

Dental Pilot Projects Program

Indirect Supervision

“Indirect supervision” means supervision requiring that a dentist authorize the procedures and that a dentist be on the premises while the procedures are performed.

ORS 679.010

Dental Pilot Projects Program

Indirect Supervision

- Simple extractions of erupted posterior primary teeth
- Extractions of permanent teeth with 2mm of vertical movement & at least 50% bone loss
- Direct pulp capping on permanent teeth
- Tooth reimplantation and stabilization
- Pulpotomies on primary teeth

Dental Pilot Projects Program

Nitrous Oxide Administration



Dental Pilot Projects Program

Collaborative Agreement

(1) “Collaborative agreement” means a written and signed agreement entered into between a dentist and a dental therapist under section 8 of this 2021 Act.

SECTION 8. (1) A dental therapist may practice dental therapy only under the supervision of a dentist and pursuant to a collaborative agreement with the dentist that outlines the supervision logistics and requirements for the dental therapist’s practice. The collaborative agreement must include at least the following information:

- (a) The level of supervision required for each procedure performed by the dental therapist;**
- (b) Circumstances under which the prior knowledge and consent of the dentist is required to allow the dental therapist to provide a certain service or perform a certain procedure;**
- (c) The practice settings in which the dental therapist may provide care;**
- (d) Any limitation on the care the dental therapist may provide;**
- (e) Patient age-specific and procedure-specific practice protocols, including case selection criteria, assessment guidelines and imaging frequency;**
- (f) Procedures for creating and maintaining dental records for patients treated by the dental therapist;**
- (g) Guidelines for the management of medical emergencies in each of the practice settings in which the dental therapist provides care;**
- (h) A quality assurance plan for monitoring care provided by the dental therapist, including chart review, patient care review and referral follow-up;**
- (i) Protocols for the dispensation and administration of drugs, as described in section 9 of this 2021 Act, by the dental therapist, including circumstances under which the dental therapist may dispense and administer drugs;**
- (j) Criteria for the provision of care to patients with specific medical conditions or complex medical histories, including any requirements for consultation with the dentist prior to the provision of care; and**

Dental Pilot Projects Program

SECTION 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

- (a) Is at least 18 years of age;**
- (b) Submits to the board a completed application form;**
- (c) Demonstrates the completion of a dental therapy education program;**
- (d) Passes an examination described in section 4 of this 2021 Act; and**
- (e) Pays the application and licensure fees established by the board.**

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

(b) The board shall determine whether the training and education of an applicant described in this subsection is sufficient to meet the requirements of subsection (1) of this section.

(3) If an applicant holds a current or expired authorization to practice dental therapy issued by another state, the federal government or a tribal authority, the applicant shall include with the application a copy of the authorization and an affidavit from the dental regulatory body of the other jurisdiction that demonstrates the applicant was authorized to practice dental therapy in that jurisdiction.

Section 3 in effect until January 1, 2025



Commission on Dental Accreditation

ACCREDITATION

SITE VISITS

STANDARDS

FIND A PROGRAM

POLICIES/GUIDELINES

CONTACT

The Commission on Dental Accreditation

The Commission on Dental Accreditation (CODA) works to maintain the highest professional and ethical standards in the nation's dental schools and programs. [Learn more.](#)



CODA Mission

The Commission on Dental Accreditation serves the oral health care needs of the public through the

For Students



FAQ



Dental Pilot Projects Program

Dental Therapy Education Program

- In-state only Pacific University under Dental Pilot Project



Commission on Dental Accreditation (CODA)

- CODA – Ilisagvik College in Utqiaġvik (Barrow) Alaska
<https://www.ilisagvik.edu/>
- CODA Site Visit Scheduled for Skagit Valley College in Mount Vernon, Washington in February 2022 <https://www.skagit.edu/>



Dental Pilot Projects Program



- In process of applying to CODA
- No site visits scheduled yet by CODA

Dental Pilot Projects Program

SECTION 3a. Section 3 of this 2021 Act is amended to read:

Sec. 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

- (a) Is at least 18 years of age;
- (b) Submits to the board a completed application form;
- (c) Demonstrates:

(A) The completion of a dental therapy education program 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; or

(B) That the applicant is or was a participant in a dental pilot project;

- (d) Passes an examination described in section 4 of this 2021 Act; and
- (e) Pays the application and licensure fees established by the board.

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

(b) The board shall determine whether the training and education of an applicant described in this subsection is sufficient to meet the requirements of subsection (1) of this section.

(3) If an applicant holds a current or expired authorization to practice dental therapy issued by another state, the federal government or a tribal authority, the applicant shall include with the application a copy of the authorization and an affidavit from the dental regulatory body of the other jurisdiction that demonstrates the applicant was authorized to practice dental therapy in that jurisdiction.

Section 3a in effect starting January 1, 2025

Dental Pilot Projects Program

SECTION 4. (1)(a) The Oregon Board of Dentistry may require an applicant for a license to practice dental therapy to pass written, laboratory or clinical examinations to test the professional knowledge and skills of the applicant.

(b) The examinations may not be affiliated with or administered by a dental pilot project or a dental therapy education program described in section 3 of this 2021 Act.

(c) The examinations must:

(A) Be elementary and sufficiently thorough to test the fitness of the applicant to practice dental therapy.

(B) Be written in English.

(C) Include questions on dental therapy.

(2) If a test or examination is administered after the date of application and the applicant received a passing grade on, as established by the board by rule, the board:

(a) To satisfy the written examination authorized under this section, may accept the results of national standardized examinations.

(b) To satisfy the laboratory or clinical examination authorized under this section:

(A) Shall accept the results of regional and national testing agencies or clinical board examinations administered by other states; and

(B) May accept the results of board-recognized testing agencies.

(3) The board shall accept the results of regional and national testing agencies or of clinical board examinations administered by other states, and may accept results of board-recognized testing agencies, in satisfaction of the examinations authorized under this section for applicants who have engaged in the active practice of dental therapy in Oregon, another state, the Armed Forces of the United States, the United States Public Health Service or the

Exam

Dental Pilot Projects Program

The screenshot shows the JCNDE website with a navigation menu and a main content area. The navigation menu includes 'EXAMINATIONS', 'INBDE', 'NEWS/RESOURCES', 'ABOUT US', and 'CONTACT'. The 'EXAMINATIONS' menu is expanded, showing a list of links: 'My Account', 'DENTPIN', 'National Board Guides', 'NBDE Part I Application', 'NBDE Part II Application', 'NBDHE Application', 'NBDE Part I and Part II General Information', 'NBDHE General Information', 'NBDE Part I and Part II Results Request', and 'NBDHE Results Request'. The main content area displays the 'National Board Dental Examinations' page, which includes a breadcrumb trail 'Home > National Board Dental Examinations', a share button, and three paragraphs of text. The first paragraph states that National Board results are available in My Account. The second paragraph describes the JCNDE's role in administering standardized tests. The third paragraph explains the purpose of the National Board Examinations. The fourth paragraph lists the basic licensure requirements for dentistry and dental hygiene.

ADA WEBSITES

Search this Site

JCNDE JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS

EXAMINATIONS INBDE NEWS/RESOURCES ABOUT US CONTACT

Home > National Board Dental Examinations

National Board Dental Examinations

National Board results are now available in My Account. Follow these [instructions](#) on how to access your results.

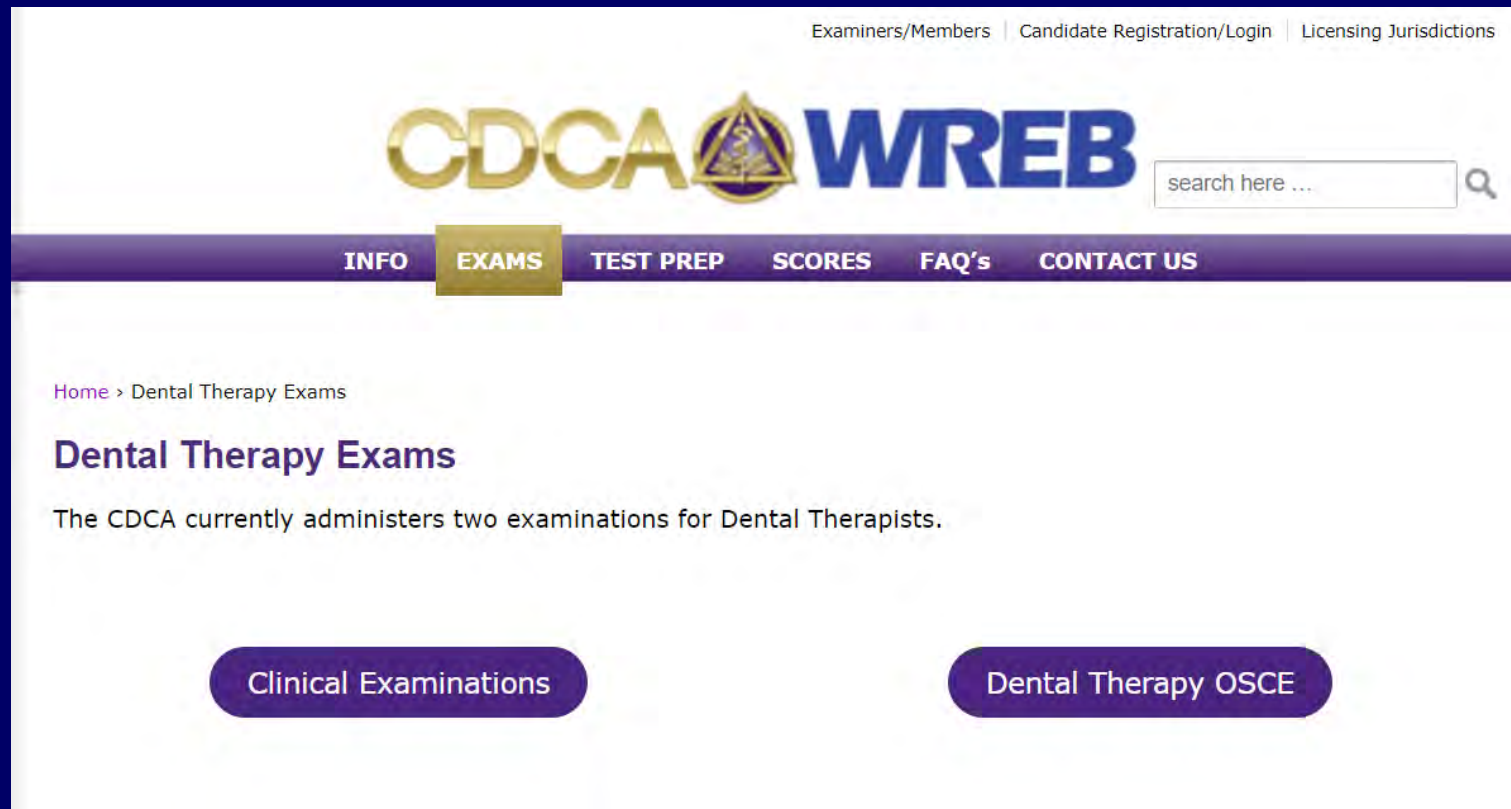
The [Joint Commission on National Dental Examinations \(JCNDE\)](#) administers several standardized tests to evaluate the preparedness of individuals for the study and practice of dentistry and dental hygiene. They include the National Board Dental Examination (NBDE) Part I and Part II, the National Board Dental Hygiene Examination (NBDHE), and the Integrated National Board Dental Examination (INBDE), which is currently in development.

The purpose of the National Board Examinations is to assist state boards in determining qualifications of dentists and dental hygienists who seek licensure to practice dentistry or dental hygiene. These examinations assess candidates' ability to understand important information from basic biomedical and dental sciences and also the ability to apply such information in a problem-solving context.

Specific dental and dental hygiene licensure requirements vary among jurisdictions, but all jurisdictions have three basic requirements: an educational requirement, a written examination requirement and a clinical examination requirement. You must complete all three for basic [licensure requirements](#).

Dental Pilot Projects Program

CDCA-WREB (Western Regional Examining Board)



The screenshot shows the CDCA-WREB website. At the top right, there are links for "Examiners/Members", "Candidate Registration/Login", and "Licensing Jurisdictions". The main header features the CDCA-WREB logo, which includes a stylized dental symbol. To the right of the logo is a search bar with the text "search here ..." and a magnifying glass icon. Below the header is a navigation menu with the following items: "INFO", "EXAMS" (highlighted in a gold box), "TEST PREP", "SCORES", "FAQ's", and "CONTACT US". The main content area has a breadcrumb trail: "Home > Dental Therapy Exams". The title "Dental Therapy Exams" is displayed in a large, bold, purple font. Below the title, a paragraph states: "The CDCA currently administers two examinations for Dental Therapists." At the bottom of the page, there are two purple buttons with white text: "Clinical Examinations" and "Dental Therapy OSCE".

Dental Pilot Projects Program

CRDTS (Central Regional Dental Testing Service)

The screenshot shows the homepage of the Central Regional Dental Testing Services, Inc. (CRDTS) website. At the top left is the logo with the text "CENTRAL REGIONAL DENTAL TESTING SERVICES, INC." and a stylized triangle containing "crdts". To the right is a "Coronavirus Update" banner and a "Welcome" message with a "Login" link. Below the logo is a navigation menu with tabs for "About Us", "Dental", "Hygiene", "Auxiliary" (highlighted in green), "FAQ", and "Contacts". The main content area is titled "Choose an exam:" and features a dropdown menu currently set to "Dental Therapist Exam". Under this dropdown are five main categories, each with an icon, a title, a brief description, and a link to a detailed page:

- Restorative Auxiliary Exam**
- Dental Therapist Exam** (expanded):
 - Application & Eligibility Requirements**: What is required for application. [Examination Requirements](#)
 - Exam Calendar**: Exam Dates. [Examination Calendar](#)
 - Exam Content & Scoring**: What is on the Exam. How it is scored. [Exams for Portability](#)
 - Forms & Manuals**: Application forms and manuals available for download. [Forms and Manuals](#)
 - Online Application**: Once you find your exam site, apply online! [Online Application](#)
- Local Anesthesia Exam**

At the bottom of the page is a footer with the text: "Copyright Central Regional Dental Testing Services 2022 | [Privacy Notice](#) | [Site Map](#)"

Dental Pilot Projects Program

CRDTS (Central Regional Dental Testing Service)

The screenshot displays the website for Central Regional Dental Testing Services, Inc. (CRDTS). The header includes the company name and logo, a coronavirus update notification, and user options like 'Welcome' and 'Login'. A navigation menu contains links for 'About Us', 'Dental', 'Hygiene', 'Auxiliary', 'FAQ', and 'Contacts'. The main content area shows a breadcrumb trail for 'Dental Therapist Exam > Exam Calendar' and a list of exam dates, including 'May 15, 2022' at 'Pacific University' in 'Hillsboro OR' and 'April 8, 2022'.

Dental Pilot Projects Program

(3) A dental therapist shall dedicate at least 51 percent of the dental therapist's practice to patients who represent underserved populations, as defined by the Oregon Health Authority by rule, or patients located in dental care health professional shortage areas, as determined by the authority.

- Dedicate at least 51% to underserved populations
- “Underserved” being defined by OHA

OR

- Dental Health Professional Shortage Areas (DHPSA)

Dental Pilot Projects Program

DPP #300

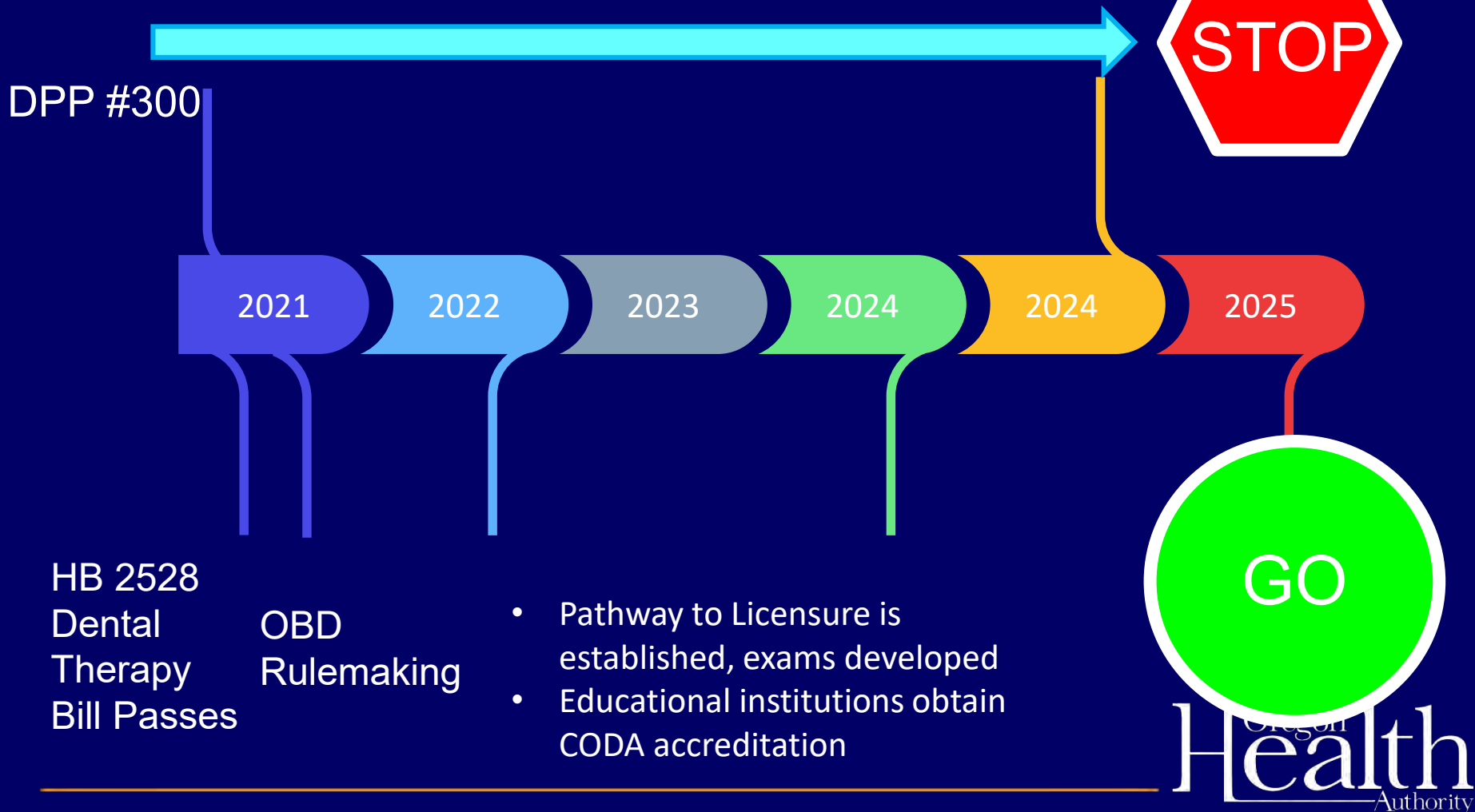
- Education Programs— do not have CODA for Dental Therapy
- General Supervision for entire Scope of Practice
- Must follow Dental Pilot Program administrative & evaluation requirements
- No licensure by Oregon Board of Dentistry

HB 2528

- Education Programs— must have CODA for Dental Therapy
- General Supervision for some procedures under Scope of Practice, Indirect for others
- Must be licensed by Oregon Board of Dentistry
 - Written & Clinical Exams

Timeline of Activities

Pilot Project Operates:
Site Visits, Quarterly Reports,
Monitoring, Evaluation Activities



29 more people need to get a COVID-19 booster for Oregon to reach its goal to boost an additional 1 million people by Jan. 31, 2022 and fight the Omicron variant in
1/10/2022

cial website of the State of Oregon [Here's how you know »](#)

- ON.GOV
- Home
- License Verification
- Credential Verifications for Licensure
- New Licensing System
- Laws & Rules
- COVID-19-Resources
- Dental Ass
- FAQs ▾
- Contact Us

Anesthesia Permits

August 19, 2022
October 21, 2022
December 16, 2022

LICENSEES ^

[2021-2022 Committee and Liaison Assignments](#)

Continuing Education Requirements

Renewal

Dental Assistants

Name Change/Request Additional License(s)

2022

[January 19, 2022 - Agenda - Dental Therapy Rules Oversight Committee Meeting](#)
[January 19, 2022 - Public Packet - Dental Therapy Rules Oversight Committee Meeting](#)

Scope of Practice

Substance Abuse

2021

FAQs - Licensees

[December 17, 2021 - Agenda](#)
[December 17, 2021 - Public Packet - Board Meeting](#)
[December 8, 2021 - Agenda - Dental Therapy Rules Oversight Committee Meeting](#)
[December 8, 2021 - Public Packet - Dental Therapy Rules Oversight Committee Meeting](#)
[November 10, 2021 - Agenda - Dental Therapy Rules Oversight Committee Meeting](#)
[November 10, 2021 - Public Packet - Dental Therapy Rules Oversight Committee Meeting](#)
[November 5, 2021 - Agenda - Special Teleconference Board Meeting](#)
[October 23, 2021 - Agenda - Strategic Planning Session](#)
[October 22, 2021 - Agenda](#)

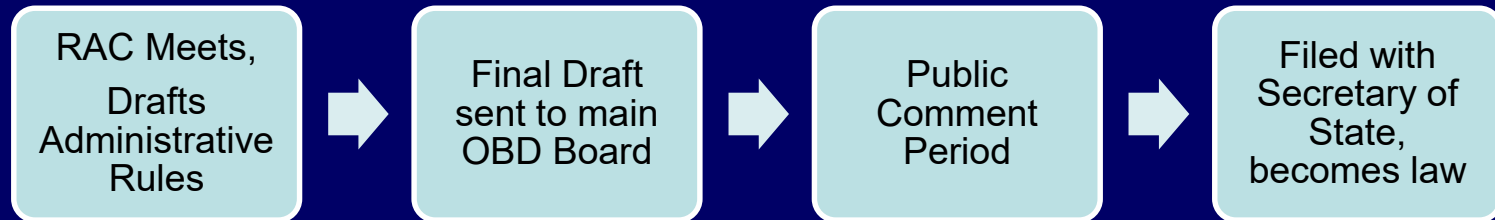
CONSUMER RESOURCES ^

File Complaint/Complaint process

Public Records Request

FAQs - Consumers

Dental Pilot Projects Program

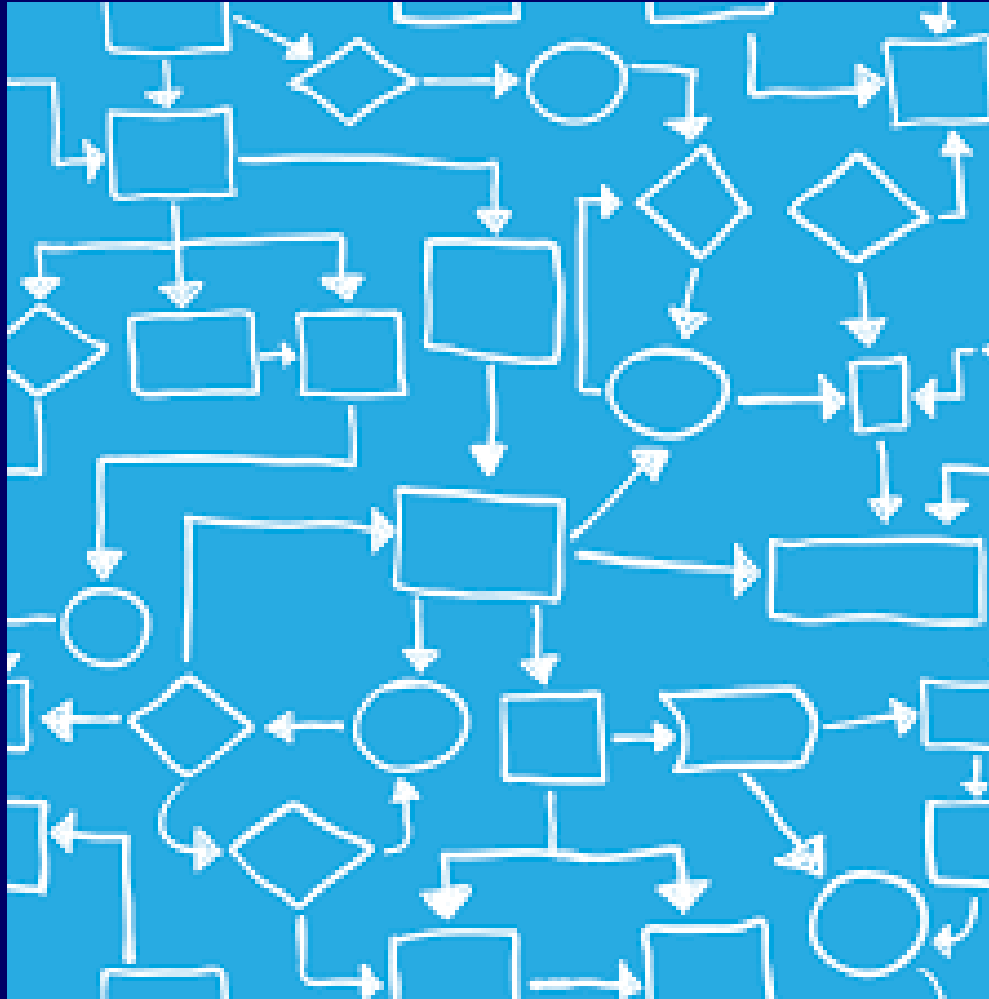


January 19, 2022
5:00 p.m. – 7:00 p.m.

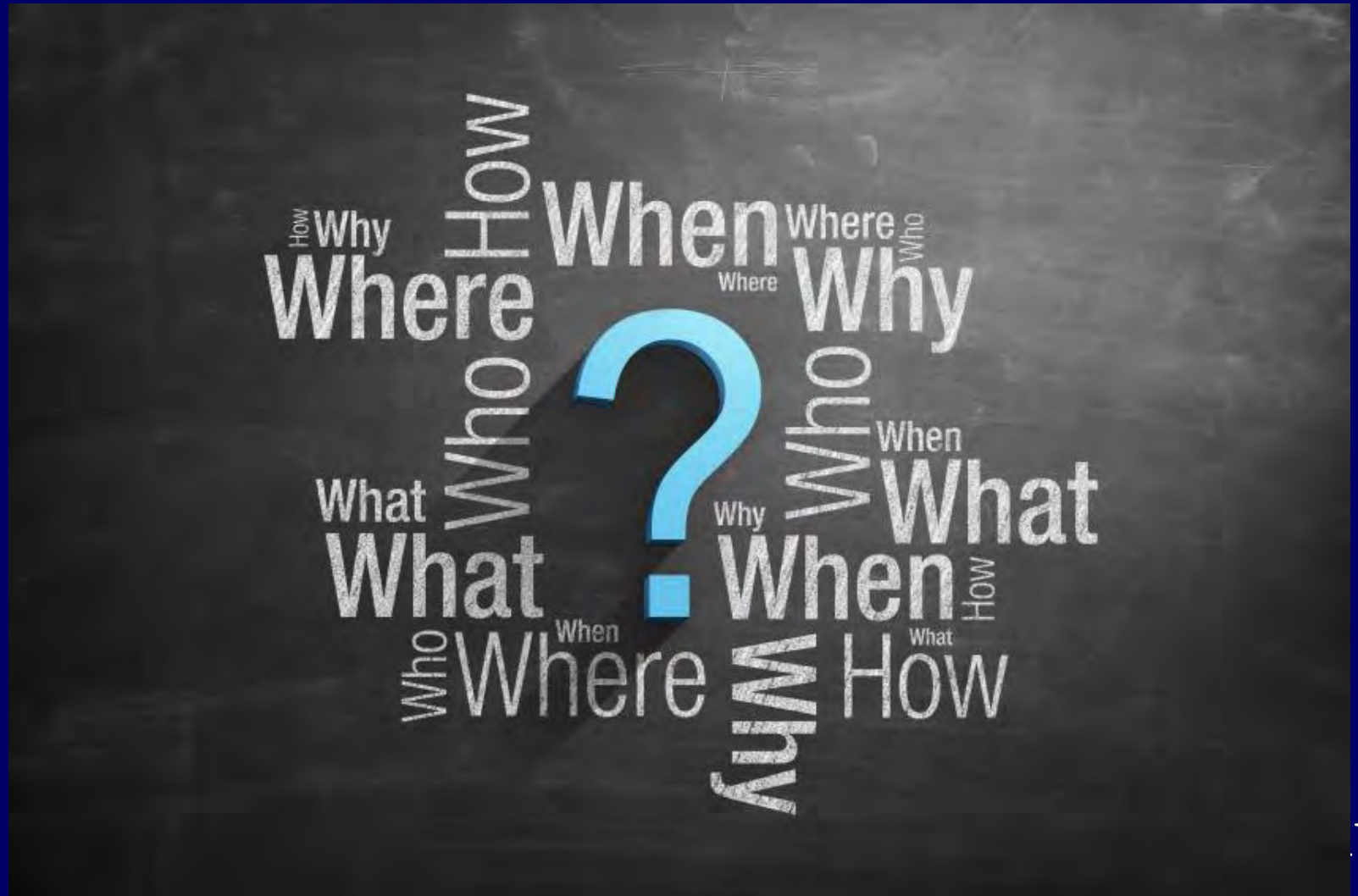
Committee Members:

Yadira Martinez, R.D.H., Chair – OBD Rep.
Sheena Kansal, D.D.S. – OBD Rep.
Jennifer Brixey– OBD Rep.
Kaz Rafia, D.D.S. – OHA Rep.
Brandon Schwindt, D.M.D. - ODA Rep.
Amy Coplen, R.D.H. - ODHA Rep.
Ginny Jorgensen, CDA- ODAA Rep.
Miranda Davis, D.D.S. – Dental Therapy Rep.
Kari Kuntzelman – Dental Therapy Rep.
Jason Mecum – Dental Therapy Rep.

Dental Pilot Projects Program



Dental Pilot Projects Program



Dental Pilot Projects Program

ROLE of the Advisory Committee



Dental Pilot Projects Program

- Attendance in Dental Pilot Project Committee Meetings
- Advisement on the efficacies of training, competencies and the collection of data
- Review and advisement of project protocols related to the ongoing assurance of patient safety
- Participation and attendance in Site Visits. Members are requested to attend at least one Site Visit during each year of the pilot project.
- Advisement on the evaluation of project progress reports as needed
- Advisement on project issues, should they arise

Dental Pilot Projects Program



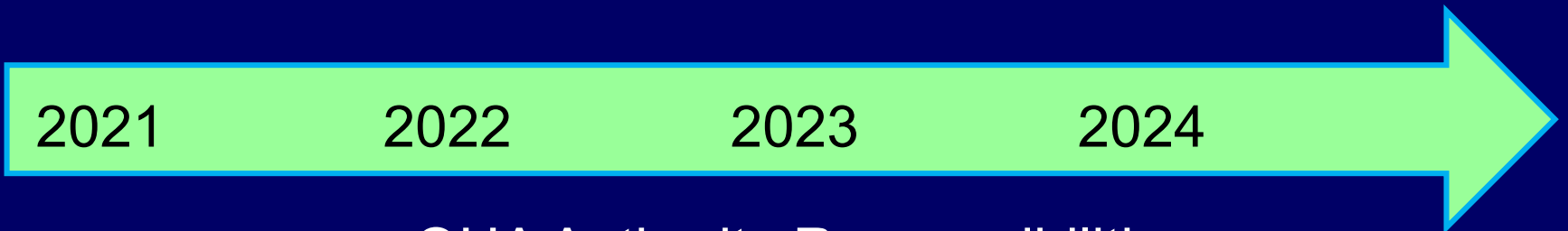
2021

2022

2023

2024

OHA Authority Responsibilities
Dental Pilot Project



2021

2022

2023

2024

OHA Authority Responsibilities
Role in Implementation

Dental Pilot Projects Program



Dental Pilot Projects Program

Advisory Committee

Chart Review
Subcommittee

Education
Workgroup

Dental
Therapy
Toolkit
Workgroup

Dental Pilot Projects Program

Chart Review Subcommittee

- Reviews conducted on an annual basis
- Stratified random sample of irreversible procedures
- Review tools include:
 - Chart Notes
 - Before and after intraoral photos
 - Radiographs as appropriate
 - Chart Review Form

Chart Review Example from DPP #100

OHA Clinical Chart Review Form & Guidelines : DPP #100

Sources: IHS Oral Health Program Guide, OHA DPP#100 Advisory Committee input, Western Regional Examining Board, Kalendarian E. Classifying Adverse Events in the Dental Office. Journal of Patient Safety. 2017

Reminders:

- N/A (Not Applicable) and Unable to Determine are always additional answer options
- Please provide additional comments whenever possible. Comments are required when rating below the minimum standard of care.
- Please note in comment sections whenever images are not sufficient for dependable evaluation.

Chart Number:

Tooth Number:

CRITERIA	Description	Assessment	Comments
Diagnosis			
1. Diagnosis Description Appropriate	Yes: Falls within minimum standard of care.	No: Must indicate deficiency in comments.	
2. Planned treatment based upon the given diagnosis is appropriate.	Yes: Falls within minimum standard of care.	No: Must indicate deficiency in comments.	
Images			
1. Radiographs available and sufficient for diagnosis	1: Radiographs are present and adequate for evaluation	2: Radiographs are present, but not adequate for evaluation. Please describe why.	3: Radiographs are not present for this procedure
2. Intra-Oral Images are sufficient for evaluation.	1: Intra-oral images are present and adequate for evaluation	2: Intra-oral images are present, but not adequate for evaluation. Please describe why.	3: Intra-oral images are not present for this procedure
Administration of Drugs			
1. Anesthetic used appropriate for procedure	Yes: Appropriate anesthetic, location, and dosage	No: Inappropriate anesthetic, location, or dosage	
2. Within recommended Limits	Yes: Drug dosages are within limits recommended by the Physician's Desk Reference or American Hospital Formulary Service. Dosage notation includes quantity, type, concentration and strength	No: Drug dosages are outside recommended limits.	Unable to Determine

Version 9.202007

1

Dental Pilot Projects Program

Evaluation Efforts

- Approve and ensure that project Program Evaluation efforts comply with applicable OARs
 - DPP #300 has an approved Evaluation and Monitoring plan
- Monitor and evaluate for patient health and safety
 - Chart review subcommittee

Dental Pilot Projects Program

Monitor and evaluate for patient health and safety

- Reviews of patient records to monitor for patient safety, quality of care, minimum standard of care and compliance with the approved or amended application
- Purpose:
 - Opportunity to review trainee performance and quality in regard to patient safety
 - Lead to a greater understanding of the proposed workforce model
 - Use an *iterative* process to lead to quality improvement
 - Determine that a minimum standard of care is met
- Not the purpose:
 - To “root out bad quality”
 - Judge things you can’t see
 - Prove or disprove the educational competency of the model

Dental Pilot Projects Program

Dental Therapy Toolkit Workgroup

Education Workgroup

Optional workgroups

- Interested Advisory Committee members
- Invited subject-matter-experts

Dental Pilot Projects Program

Education Workgroup: Subject matter experts in dental education to review and make recommendations regarding future establishment of Dental Therapy education programs in Oregon.

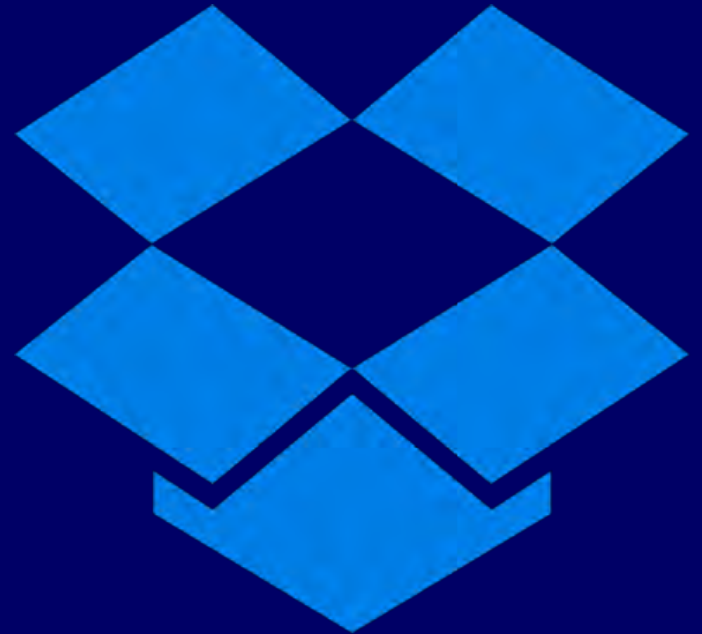
- OHSU-School of Dentistry (1)
- Dental Hygiene Programs (6)
 - Lane Community College
 - Mount Hood Community College
 - Oregon Institute of Technology - Klamath Falls
 - Oregon Institute of Technology - Salem
 - Pacific University
 - Portland Community College
- DHAT (DPP #100) – Training Programs (0)

Dental Pilot Projects Program

Dental Therapy Toolkit Workgroup: Subject matter experts to explore development of a toolkit to be used by future employers and providers as a guide to help hire and implement a dental therapist into the dental clinic/team, etc.

Dental Pilot Projects Program

- Email intensive committee
 - Dropbox
- Reduce the number of in person meetings
- Quarterly Meetings
- Meetings will be Virtual



Dropbox

Dental Pilot Projects Program

Proposed Meeting Dates 2022-2023

- **Meetings will be held on Mondays.**

January 31, 2022

May 9, 2022

August 1, 2022

November 1, 2022

January 30, 2023

May 8, 2023

August 7, 2023

November 6, 2023

- A poll will be sent to committee members following the first meeting to determine if these dates are agreeable to most individuals.

Dental Pilot Projects



PUBLIC COMMENT

- If you want to provide public comment, please:
 - Unmute yourself and let us know you would like to speak
 - Click on the “raise hand” icon under the reactions tab
 - Write in the chat box that you would like to provide public comment
- Each individual is limited to 1.5 - 2 minutes, depending on how many people sign-up

Enrolled House Bill 2528

Sponsored by Representatives SANCHEZ, BYNUM; Representatives ALONSO LEON, CAMPOS, DEXTER, MEEK, PRUSAK, SOLLMAN, WILLIAMS, WITT, Senator DEMBROW (Pre-session filed.)

CHAPTER

AN ACT

Relating to dental therapy; creating new provisions; amending ORS 679.010, 679.140, 679.170 and 679.250 and section 1, chapter 716, Oregon Laws 2011; and prescribing an effective date.

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

SECTION 1. Sections 2 to 12 of this 2021 Act are added to and made a part of ORS chapter 679.

SECTION 2. As used in sections 2 to 12 of this 2021 Act:

- (1) "Collaborative agreement" means a written and signed agreement entered into between a dentist and a dental therapist under section 8 of this 2021 Act.
- (2) "Dental pilot project" means an Oregon Health Authority dental pilot project developed and operated by the authority.
- (3) "Dentist" means a person licensed to practice dentistry under this chapter.

SECTION 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

- (a) Is at least 18 years of age;
- (b) Submits to the board a completed application form;
- (c) Demonstrates the completion of a dental therapy education program;
- (d) Passes an examination described in section 4 of this 2021 Act; and
- (e) Pays the application and licensure fees established by the board.

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

(b) The board shall determine whether the training and education of an applicant described in this subsection is sufficient to meet the requirements of subsection (1) of this section.

(3) If an applicant holds a current or expired authorization to practice dental therapy issued by another state, the federal government or a tribal authority, the applicant shall include with the application a copy of the authorization and an affidavit from the dental regulatory body of the other jurisdiction that demonstrates the applicant was authorized to practice dental therapy in that jurisdiction.

SECTION 3a. Section 3 of this 2021 Act is amended to read:

Sec. 3. (1) The Oregon Board of Dentistry shall issue a license to practice dental therapy to an applicant who:

- (a) Is at least 18 years of age;
- (b) Submits to the board a completed application form;
- (c) Demonstrates:

(A) The completion of a dental therapy education program 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; or

(B) That the applicant is or was a participant in a dental pilot project;

- (d) Passes an examination described in section 4 of this 2021 Act; and
- (e) Pays the application and licensure fees established by the board.

(2)(a) An individual who completed a dental therapy education program in another state or jurisdiction may apply for licensure under this section if the dental therapy education program is accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor organization.

(b) The board shall determine whether the training and education of an applicant described in this subsection is sufficient to meet the requirements of subsection (1) of this section.

(3) If an applicant holds a current or expired authorization to practice dental therapy issued by another state, the federal government or a tribal authority, the applicant shall include with the application a copy of the authorization and an affidavit from the dental regulatory body of the other jurisdiction that demonstrates the applicant was authorized to practice dental therapy in that jurisdiction.

SECTION 4. (1)(a) **The Oregon Board of Dentistry may require an applicant for a license to practice dental therapy to pass written, laboratory or clinical examinations to test the professional knowledge and skills of the applicant.**

(b) The examinations may not be affiliated with or administered by a dental pilot project or a dental therapy education program described in section 3 of this 2021 Act.

(c) The examinations must:

(A) Be elementary and practical in character, and sufficiently thorough to test the fitness of the applicant to practice dental therapy;

(B) Be written in English; and

(C) Include questions on subjects pertaining to dental therapy.

(2) **If a test or examination was taken within five years of the date of application and the applicant received a passing score on the test or examination, as established by the board by rule, the board:**

(a) To satisfy the written examination authorized under this section, may accept the results of national standardized examinations.

(b) To satisfy the laboratory or clinical examination authorized under this section:

(A) Shall accept the results of regional and national testing agencies or clinical board examinations administered by other states; and

(B) May accept the results of board-recognized testing agencies.

(3) The board shall accept the results of regional and national testing agencies or of clinical board examinations administered by other states, and may accept results of board-recognized testing agencies, in satisfaction of the examinations authorized under this section for applicants who have engaged in the active practice of dental therapy in Oregon, another state, the Armed Forces of the United States, the United States Public Health Service or the United States Department of Veterans Affairs for a period of at least 3,500 hours in the five years immediately preceding application and who meet all other requirements for licensure.

(4) The board shall establish rules related to reexamination for an applicant who fails an examination.

SECTION 5. **The Oregon Board of Dentistry may refuse to issue or renew a license to practice dental therapy if the applicant or licensee:**

(1) Subject to ORS 670.280, has been convicted of a violation of the law. A certified copy of the record of conviction is conclusive evidence of conviction.

(2) Has been disciplined by a state licensing or regulatory agency of this state or another state regarding a health care profession if, in the judgment of the board, the acts or conduct resulting in the disciplinary action bears a demonstrable relationship to the ability of the applicant or licensee to practice dental therapy in accordance with sections 2 to 12 of this 2021 Act. A certified copy of the disciplinary action is conclusive evidence of the disciplinary action.

(3) Has falsified an application for issuance or renewal of licensure.

(4) Has violated any provision of sections 2 to 12 of this 2021 Act or a rule adopted under sections 2 to 12 of this 2021 Act.

SECTION 6. (1) A person may not practice dental therapy or assume or use any title, words or abbreviations, including the title or designation “dental therapist,” that indicate that the person is authorized to practice dental therapy unless the person is licensed under section 3 of this 2021 Act.

(2) Subsection (1) of this section does not prohibit:

(a) The practice of dental therapy by a health care provider performing services within the health care provider’s authorized scope of practice.

(b) The practice of dental therapy in the discharge of official duties on behalf of the United States government, including but not limited to the Armed Forces of the United States, the United States Coast Guard, the United States Public Health Service, the United States Bureau of Indian Affairs or the United States Department of Veterans Affairs.

(c) The practice of dental therapy pursuant to an educational program described in section 3 of this 2021 Act.

(d) A dental therapist authorized to practice in another state or jurisdiction from making a clinical presentation sponsored by a bona fide dental or dental therapy association or society or an accredited dental or dental therapy education program approved by the Oregon Board of Dentistry.

(e) Bona fide students of dental therapy from engaging in clinical studies during the period of their enrollment and as a part of the course of study in a dental therapy education program described in section 3 (1) of this 2021 Act. The clinical studies may be conducted on the premises of the program or in a clinical setting located off the premises. The facility, instructional staff and course of study at an off-premises location must meet minimum requirements established by the board by rule. The clinical studies at the off-premises location must be performed under the indirect supervision of a member of the program faculty.

(f) Bona fide full-time students of dental therapy, during the period of their enrollment and as a part of the course of study in a dental therapy education program located outside of Oregon that is accredited by the Commission on Dental Accreditation of the American Dental Association or its successor agency, from engaging in community-based or clinical studies as an elective or required rotation in a clinical setting located in Oregon, if the community-based or clinical studies meet minimum requirements established by the board by rule and are performed under the indirect supervision of a member of the faculty of the Oregon Health and Science University School of Dentistry.

(g) The performance of duties by a federally certified dental health aide therapist or tribally authorized dental therapist in a clinic operated by the Indian Health Service, including, as described in 25 U.S.C. 1603, an Indian Health Service Direct Service Tribe clinic, a clinic operated under an Indian Self-Determination and Education Assistance Act of 1975 (P.L. 93-638) contract or a clinic operated under an urban Indian organization.

SECTION 7. (1) The Oregon Board of Dentistry may impose nonrefundable fees for the following:

(a) Application for licensure;

(b) Examinations;

- (c) Biennial dental therapy licenses, both active and inactive;
- (d) Licensure renewal fees;
- (e) Permits; and
- (f) Delinquency.

(2) Subject to prior approval of the Oregon Department of Administrative Services and a report to the Emergency Board prior to adopting fees and charges, the fees and charges established under sections 2 to 12 of this 2021 Act may not exceed the cost of administering sections 2 to 12 of this 2021 Act as authorized by the Legislative Assembly within the Oregon Board of Dentistry budget and as modified by the Emergency Board.

(3)(a) The Oregon Board of Dentistry may waive a license fee for a licensee who provides to the board satisfactory evidence that the licensee has discontinued the practice of dental therapy because of retirement.

(b) A licensee described in this subsection may apply to the board for reinstatement of the license pursuant to rules adopted by the board. An application under this paragraph must include a fee. If the licensee has been retired or inactive for more than one year from the date of application, the licensee shall include with the application satisfactory evidence of clinical competence, as determined by the board.

(4)(a) A license to practice dental therapy is valid for two years and may be renewed. A licensee shall submit to the board an application for renewal and payment of the fee.

(b) A dental therapist issued a license in an even-numbered year must apply for renewal by September 30 of each even-numbered year thereafter. A dental therapist issued a license in an odd-numbered year must apply for renewal by September 30 of each odd-numbered year thereafter.

(c) The board may charge a reasonable fee if the application for renewal or the fee is submitted more than 10 days delinquent.

(5) A dental therapist shall inform the board of a change of the dental therapist's address within 30 days of the change.

SECTION 8. (1) A dental therapist may practice dental therapy only under the supervision of a dentist and pursuant to a collaborative agreement with the dentist that outlines the supervision logistics and requirements for the dental therapist's practice. The collaborative agreement must include at least the following information:

(a) The level of supervision required for each procedure performed by the dental therapist;

(b) Circumstances under which the prior knowledge and consent of the dentist is required to allow the dental therapist to provide a certain service or perform a certain procedure;

(c) The practice settings in which the dental therapist may provide care;

(d) Any limitation on the care the dental therapist may provide;

(e) Patient age-specific and procedure-specific practice protocols, including case selection criteria, assessment guidelines and imaging frequency;

(f) Procedures for creating and maintaining dental records for patients treated by the dental therapist;

(g) Guidelines for the management of medical emergencies in each of the practice settings in which the dental therapist provides care;

(h) A quality assurance plan for monitoring care provided by the dental therapist, including chart review, patient care review and referral follow-up;

(i) Protocols for the dispensation and administration of drugs, as described in section 9 of this 2021 Act, by the dental therapist, including circumstances under which the dental therapist may dispense and administer drugs;

(j) Criteria for the provision of care to patients with specific medical conditions or complex medical histories, including any requirements for consultation with the dentist prior to the provision of care; and

(k) Protocols for when a patient requires treatment outside the dental therapist's scope of practice, including for referral of the patient for evaluation and treatment by the dentist, a physician licensed under ORS chapter 677, a nurse practitioner licensed under ORS 678.375 to 678.390 or other licensed health care provider.

(2) In addition to the information described in subsection (1) of this section, a collaborative agreement must include a provision that requires the dental therapist to consult with a dentist if the dental therapist intends to perform an irreversible surgical procedure under general supervision on a patient who has a severe systemic disease.

(3) A dentist who enters into a collaborative agreement with a dental therapist shall:

(a) Directly provide care to a patient that is outside the scope of practice of the dental therapist or arrange for the provision of care by another dentist; and

(b) Ensure that the dentist, or another dentist, is available to the dental therapist for timely communication during the dental therapist's provision of care to a patient.

(4) A dental therapist may perform and provide only those procedures and services authorized by the dentist and set out in the collaborative agreement, and shall maintain with the dentist an appropriate level of contact, as determined by the dentist.

(5) A dental therapist and a dentist who enter into a collaborative agreement together shall each maintain a physical copy of the collaborative agreement.

(6)(a) A dental therapist may enter into collaborative agreements with more than one dentist if each collaborative agreement includes the same supervision requirements and scope of practice.

(b) A dentist may supervise and enter into collaborative agreements with up to three dental therapists at any one time.

(7)(a) A collaborative agreement must be signed by the dentist and dental therapist.

(b) A dental therapist shall annually submit a signed copy of the collaborative agreement to the Oregon Board of Dentistry. If the collaborative agreement is revised in between annual submissions, a signed copy of the revised collaborative agreement must be submitted to the board as soon as practicable after the revision is made.

SECTION 9. (1) A dental therapist may perform, pursuant to the dental therapist's collaborative agreement, the following procedures under the general supervision of the dentist:

(a) Identification of conditions requiring evaluation, diagnosis or treatment by a dentist, a physician licensed under ORS chapter 677, a nurse practitioner licensed under ORS 678.375 to 678.390 or other licensed health care provider;

(b) Comprehensive charting of the oral cavity;

(c) Oral health instruction and disease prevention education, including nutritional counseling and dietary analysis;

(d) Exposing and evaluation of radiographic images;

(e) Dental prophylaxis, including subgingival scaling and polishing procedures;

(f) Application of topical preventive or prophylactic agents, including fluoride varnishes and pit and fissure sealants;

(g) Administering local anesthetic;

(h) Pulp vitality testing;

(i) Application of desensitizing medication or resin;

(j) Fabrication of athletic mouth guards;

(k) Changing of periodontal dressings;

(L) Simple extractions of erupted primary anterior teeth and coronal remnants of any primary teeth;

(m) Emergency palliative treatment of dental pain;

(n) Preparation and placement of direct restoration in primary and permanent teeth;

(o) Fabrication and placement of single-tooth temporary crowns;

(p) Preparation and placement of preformed crowns on primary teeth;

- (q) Indirect pulp capping on permanent teeth;
 - (r) Indirect pulp capping on primary teeth;
 - (s) Suture removal;
 - (t) Minor adjustments and repairs of removable prosthetic devices;
 - (u) Atraumatic restorative therapy and interim restorative therapy;
 - (v) Oral examination, evaluation and diagnosis of conditions within the supervising dentist's authorization;
 - (w) Removal of space maintainers;
 - (x) The dispensation and oral or topical administration of:
 - (A) Nonnarcotic analgesics;
 - (B) Anti-inflammatories; and
 - (C) Antibiotics; and
 - (y) Other services as specified by the Oregon Board of Dentistry by rule.
- (2) A dental therapist may perform, pursuant to the dental therapist's collaborative agreement, the following procedures under the indirect supervision of the dentist:
- (a) Placement of temporary restorations;
 - (b) Fabrication of soft occlusal guards;
 - (c) Tissue reconditioning and soft reline;
 - (d) Tooth reimplantation and stabilization;
 - (e) Recementing of permanent crowns;
 - (f) Pulpotomies on primary teeth;
 - (g) Simple extractions of:
 - (A) Erupted posterior primary teeth; and
 - (B) Permanent teeth that have horizontal movement of greater than two millimeters or vertical movement and that have at least 50 percent periodontal bone loss;
 - (h) Brush biopsies; and
 - (i) Direct pulp capping on permanent teeth.

(3) The dentist described in subsection (2) of this section shall review a procedure described in subsection (2) of this section that is performed by the dental therapist and the patient chart that contains information regarding the procedure.

(4)(a) A dental therapist may supervise a dental assistant and an expanded function dental assistant, as defined by the board by rule, if the dental therapist is authorized to perform the services provided by the dental assistant or expanded function dental assistant.

(b) A dental therapist may supervise up to two individuals under this subsection.

SECTION 10. (1) A dental therapist may perform the procedures listed in section 9 of this 2021 Act so long as the procedures are included in an education program described in section 3 (1) of this 2021 Act or the dental therapist has received additional training in the procedure approved by the Oregon Board of Dentistry.

(2) A dental therapist shall purchase and maintain liability insurance as determined sufficient by the board.

(3) A dental therapist shall dedicate at least 51 percent of the dental therapist's practice to patients who represent underserved populations, as defined by the Oregon Health Authority by rule, or patients located in dental care health professional shortage areas, as determined by the authority.

SECTION 11. A person licensed under section 3 of this 2021 Act is subject to the provisions of ORS 679.140.

SECTION 12. The Oregon Board of Dentistry shall adopt rules necessary to administer sections 2 to 12 of this 2021 Act. In adopting rules under this section, the board shall consult with dental therapists and organizations that represent dental therapists in this state.

SECTION 13. ORS 679.010 is amended to read:

679.010. As used in this chapter and ORS 680.010 to 680.205, unless the context requires otherwise:

(1) “Dental assistant” means a person who, under the supervision of a dentist **or dental therapist**, renders assistance to a dentist, **dental therapist**, dental hygienist, dental technician or another dental assistant or who, under the supervision of a dental hygienist, renders assistance to a dental hygienist providing dental hygiene.

(2) “Dental hygiene” is that portion of dentistry that includes, but is not limited to:

(a) The rendering of educational, preventive and therapeutic dental services and diagnosis and treatment planning for such services;

(b) Prediagnostic risk assessment, scaling, root planing, curettage, the application of sealants and fluoride and any related intraoral or extraoral procedure required in the performance of such services; and

(c) Prescribing, dispensing and administering prescription drugs for the services described in paragraphs (a) and (b) of this subsection.

(3) “Dental hygienist” means a person who, under the supervision of a dentist, practices dental hygiene.

(4) “Dental technician” means a person who, at the authorization of a dentist, makes, provides, repairs or alters oral prosthetic appliances and other artificial materials and devices that are returned to a dentist and inserted into the human oral cavity or that come in contact with its adjacent structures and tissues.

(5) “Dental therapist” means a person licensed to practice dental therapy under section 3 of this 2021 Act.

(6) “Dental therapy” means the provision of preventive dental care, restorative dental treatment and other educational, clinical and therapeutic patient services as part of a dental care team, including the services described under section 9 of this 2021 Act.

~~[(5)]~~ (7) “Dentist” means a person who may perform any intraoral or extraoral procedure required in the practice of dentistry.

~~[(6)]~~ (8) “Dentist of record” means a dentist that either authorizes treatment for, supervises treatment of or provides treatment for a patient in a dental office or clinic owned or operated by an institution as described in ORS 679.020 (3).

~~[(7)(a)]~~ (9)(a) “Dentistry” means the healing art concerned with:

(A) The examination, diagnosis, treatment planning, treatment, care and prevention of conditions within the human oral cavity and maxillofacial region, and of conditions of adjacent or related tissues and structures; and

(B) The prescribing, dispensing and administering of prescription drugs for purposes related to the activities described in subparagraph (A) of this paragraph.

(b) “Dentistry” includes, but is not limited to:

(A) The cutting, altering, repairing, removing, replacing or repositioning of hard or soft tissues and other acts or procedures as determined by the Oregon Board of Dentistry and included in the curricula of:

(i) Dental schools accredited by the Commission on Dental Accreditation of the American Dental Association;

(ii) Post-graduate training programs; or

(iii) Continuing education courses.

(B) The prescription and administration of vaccines.

~~[(8)]~~ (10) “Direct supervision” means supervision requiring that a dentist diagnose the condition to be treated, that a dentist authorize the procedure to be performed, and that a dentist remain in the dental treatment room while the procedures are performed.

~~[(9)]~~ (11) “Expanded practice dental hygienist” means a dental hygienist who performs dental hygiene services in accordance with ORS 680.205 as authorized by an expanded practice dental hygienist permit issued by the board under ORS 680.200.

~~[(10)]~~ (12) “General supervision” means supervision requiring that a dentist authorize the procedures by standing orders, practice agreements or collaboration agreements, but not requiring that

a dentist be present when the authorized procedures are performed. The authorized procedures may also be performed at a place other than the usual place of practice of the dentist.

[(11)] (13) "Indirect supervision" means supervision requiring that a dentist authorize the procedures and that a dentist be on the premises while the procedures are performed.

SECTION 14. ORS 679.140 is amended to read:

679.140. (1) The Oregon Board of Dentistry may discipline as provided in this section any person licensed to practice dentistry in this state for any of the following causes:

(a) Conviction of any violation of the law for which the court could impose a punishment if the board makes the finding required by ORS 670.280. The record of conviction or a certified copy thereof, certified by the clerk of the court or by the judge in whose court the conviction is entered, is conclusive evidence of the conviction.

(b) Renting or lending a license or diploma of the dentist to be used as the license or diploma of another person.

(c) Unprofessional conduct.

(d) Any violation of this chapter or ORS 680.010 to 680.205, of rules adopted pursuant to this chapter or ORS 680.010 to 680.205 or of an order issued by the board.

(e) Engaging in or permitting the performance of unacceptable patient care by the dentist or by any person working under the supervision of the dentist due to a deliberate or negligent act or failure to act by the dentist, regardless of whether actual injury to the patient is established.

(f) Incapacity to practice safely.

(2) "Unprofessional conduct" as used in this chapter includes but is not limited to the following:

(a) Obtaining any fee by fraud or misrepresentation.

(b) Willfully betraying confidences involved in the patient-dentist relationship.

(c) Employing, aiding, abetting or permitting any unlicensed personnel to practice dentistry [or], dental hygiene **or dental therapy**.

(d) Making use of any advertising statements of a character tending to deceive or mislead the public or that are untruthful.

(e) Impairment as defined in ORS 676.303.

(f) Obtaining or attempting to obtain a controlled substance in any manner proscribed by the rules of the board.

(g) Prescribing or dispensing drugs outside the scope of the practice of dentistry or in a manner that impairs the health and safety of an individual.

(h) Disciplinary action by a state licensing or regulatory agency of this or another state regarding a license to practice dentistry, dental hygiene, **dental therapy** or any other health care profession when, in the judgment of the board, the act or conduct resulting in the disciplinary action bears a demonstrable relationship to the ability of the licensee or applicant to practice dentistry [or], dental hygiene **or dental therapy** in accordance with the provisions of this chapter. A certified copy of the record of the disciplinary action is conclusive evidence of the disciplinary action.

(3) The proceedings under this section may be taken by the board from the matters within its knowledge or may be taken upon the information of another, but if the informant is a member of the board, the other members of the board shall constitute the board for the purpose of finding judgment of the accused.

(4) In determining what constitutes unacceptable patient care, the board may take into account all relevant factors and practices, including but not limited to the practices generally and currently followed and accepted by persons licensed to practice dentistry in this state, the current teachings at accredited dental schools, relevant technical reports published in recognized dental journals and the desirability of reasonable experimentation in the furtherance of the dental arts.

(5) In disciplining a person as authorized by subsection (1) of this section, the board may use any or all of the following methods:

(a) Suspend judgment.

(b) Place a licensee on probation.

(c) Suspend a license to practice dentistry in this state.

- (d) Revoke a license to practice dentistry in this state.
- (e) Place limitations on a license to practice dentistry in this state.
- (f) Refuse to renew a license to practice dentistry in this state.
- (g) Accept the resignation of a licensee to practice dentistry in this state.
- (h) Assess a civil penalty.
- (i) Reprimand a licensee.
- (j) Impose any other disciplinary action the board in its discretion finds proper, including assessment of the costs of the disciplinary proceedings as a civil penalty.

(6) If the board places any person upon probation as set forth in subsection (5)(b) of this section, the board may determine and may at any time modify the conditions of the probation and may include among them any reasonable condition for the purpose of protection of the public and for the purpose of the rehabilitation of the probationer or both. Upon expiration of the term of probation, further proceedings shall be abated by the board if the person holding the license furnishes the board with evidence that the person is competent to practice dentistry and has complied with the terms of probation. If the evidence fails to establish competence to the satisfaction of the board or if the evidence shows failure to comply with the terms of the probation, the board may revoke or suspend the license.

(7) If a license to practice dentistry in this state is suspended, the person holding the license may not practice during the term of suspension. Upon the expiration of the term of suspension, the license shall be reinstated by the board if the board finds, based upon evidence furnished by the person, that the person is competent to practice dentistry and has not practiced dentistry in this state during the term of suspension. If the evidence fails to establish to the satisfaction of the board that the person is competent or if any evidence shows the person has practiced dentistry in this state during the term of suspension, the board may revoke the license after notice and hearing.

(8) Upon receipt of a complaint under this chapter or ORS 680.010 to 680.205, the board shall conduct an investigation as described under ORS 676.165.

(9) Information that the board obtains as part of an investigation into licensee or applicant conduct or as part of a contested case proceeding, consent order or stipulated agreement involving licensee or applicant conduct is confidential as provided under ORS 676.175. Notwithstanding ORS 676.165 to 676.180, the board may disclose confidential information regarding a licensee or an applicant to persons who may evaluate or treat the licensee or applicant for drug abuse, alcohol abuse or any other health related conditions.

(10) The board may impose against any person who violates the provisions of this chapter or ORS 680.010 to 680.205 or rules of the board a civil penalty of up to \$5,000 for each violation. Any civil penalty imposed under this section shall be imposed in the manner provided in ORS 183.745.

(11) Notwithstanding the expiration, suspension, revocation or surrender of the license, or the resignation or retirement of the licensee, the board may:

(a) Proceed with any investigation of, or any action or disciplinary proceedings against, the dentist [*or*], dental hygienist **or dental therapist**; or

(b) Revise or render void an order suspending or revoking the license.

(12)(a) The board may continue with any proceeding or investigation for a period not to exceed four years from the date of the expiration, suspension, revocation or surrender of the license, or the resignation or retirement of the licensee; or

(b) If the board receives a complaint or initiates an investigation within that four-year period, the board's jurisdiction continues until the matter is concluded by a final order of the board following any appeal.

(13) Withdrawing the application for license does not close any investigation, action or proceeding against an applicant.

SECTION 15. ORS 679.170 is amended to read:
679.170. [*No person shall*] **A person may not:**

(1) Sell or barter, or offer to sell or barter, any diploma or document conferring or purporting to confer any dental degree, or any certificate or transcript made or purporting to be made, pursuant to the laws regulating the license and registration of dentists.

(2) Purchase or procure by barter, any [such] diploma, certificate or transcript **described in subsection (1) of this section**, with intent that it be used as evidence of the holder's qualification to practice dentistry, or in fraud of the laws regulating [such] **the practice of dentistry**.

(3) With fraudulent intent, alter in a material regard any [such] diploma, certificate or transcript **described in subsection (1) of this section**.

(4) Use or attempt to use any [such] diploma, certificate or transcript **described in subsection (1) of this section**, which has been purchased, fraudulently issued, counterfeited or materially altered, either as a license or color of license to practice dentistry, or in order to procure registration as a dentist.

(5) Willfully make a false written or recorded oral statement to the Oregon Board of Dentistry in a material regard.

(6) Within 10 days after demand made by the board, fail to respond to the board's written request for information or fail to furnish to the board the name and address of all persons practicing or assisting in the practice of dentistry in the office of such person at any time within 60 days prior to the notice, together with a sworn statement showing under and by what license or authority such person and employee are and have been practicing dentistry.

(7) Employ or use the services of any unlicensed person, to practice dentistry [or], dental hygiene **or dental therapy**, except as permitted by ORS 679.025, 679.176 and 680.010 to 680.205.

SECTION 16. ORS 679.250 is amended to read:

679.250. The powers and duties of the Oregon Board of Dentistry are as follows:

(1) To, during the month of April of each year, organize and elect from its membership a president who shall hold office for one year, or until the election and qualification of a successor.

(2) To authorize all necessary disbursements to carry out the provisions of this chapter, including but not limited to, payment for necessary supplies, office equipment, books and expenses for the conduct of examinations, payment for legal and investigative services rendered to the board, and such other expenditures as are provided for in this chapter.

(3) To employ such inspectors, examiners, special agents, investigators, clerical assistants, assistants and accountants as are necessary for the investigation and prosecution of alleged violations and the enforcement of this chapter and for such other purposes as the board may require. Nothing in this chapter shall be construed to prevent assistance being rendered by an employee of the board in any hearing called by it. However, all obligations for salaries and expenses incurred under this chapter shall be paid from the fees accruing to the board under this chapter and not otherwise.

(4)(a) To conduct examinations of applicants for license to practice dentistry [and], dental hygiene **and dental therapy** at least twice in each year.

(b) In conducting examinations for licensure, the board may enter into a compact with other states for conducting regional examinations with other board of dental examiners concerned, or by a testing service recognized by such boards.

(5) To meet for the transaction of other business at the call of the president. A majority of board members shall constitute a quorum. A majority vote of those present shall be a decision of the entire board. The board's proceedings shall be open to public inspection in all matters affecting public interest.

(6) To keep an accurate record of all proceedings of the board and of all its meetings, of all receipts and disbursements, of all prosecutions for violation of this chapter, of all examinations for license to practice dentistry, with the names and qualifications for examination of any person examined, together with the addresses of those licensed and the results of such examinations, a record of the names of all persons licensed to practice dentistry in Oregon together with the addresses of all such persons having paid the license fee prescribed in ORS 679.120 and the names of all persons whose license to practice has been revoked or suspended.

(7) To make and enforce rules necessary for the procedure of the board, for the conduct of examinations, for regulating the practice of dentistry, and for regulating the services of dental hygienists and dental auxiliary personnel not inconsistent with the provisions of this chapter. As part of such rules, the board may require the procurement of a permit or other certificate. Any permit issued may be subject to periodic renewal. In adopting rules, the board shall take into account all relevant factors germane to an orderly and fair administration of this chapter and of ORS 680.010 to 680.205, the practices and materials generally and currently used and accepted by persons licensed to practice dentistry in this state, dental techniques commonly in use, relevant technical reports published in recognized dental journals, the curriculum at accredited dental schools, the desirability of reasonable experimentation in the furtherance of the dental arts, and the desirability of providing the highest standard of dental care to the public consistent with the lowest economic cost.

(8) Upon its own motion or upon any complaint, to initiate and conduct investigations of and hearings on all matters relating to the practice of dentistry, the discipline of licensees, or pertaining to the enforcement of any provision of this chapter. In the conduct of investigations or upon the hearing of any matter of which the board may have jurisdiction, the board may take evidence, administer oaths, take the depositions of witnesses, including the person charged, in the manner provided by law in civil cases, and compel their appearance before it in person the same as in civil cases, by subpoena issued over the signature of an employee of the board and in the name of the people of the State of Oregon, require answers to interrogatories, and compel the production of books, papers, accounts, documents and testimony pertaining to the matter under investigation or to the hearing. In all investigations and hearings, the board and any person affected thereby may have the benefit of counsel, and all hearings shall be held in compliance with ORS chapter 183. Notwithstanding ORS 676.165, 676.175 and 679.320, if a licensee who is the subject of an investigation or complaint is to appear before members of the board investigating the complaint, the board shall provide the licensee with a current summary of the complaint or the matter being investigated not less than five days prior to the date that the licensee is to appear. At the time the summary of the complaint or the matter being investigated is provided, the board shall provide to the licensee a current summary of documents or alleged facts that the board has acquired as a result of the investigation. The name of the complainant or other information that reasonably may be used to identify the complainant may be withheld from the licensee.

(9) To require evidence as determined by rule of continuing education or to require satisfactory evidence of operative competency before reissuing or renewing licenses for the practice of dentistry [or], dental hygiene **or dental therapy**.

(10) To adopt and enforce rules regulating administration of general anesthesia and conscious sedation by a dentist or under the supervision of a dentist in the office of the dentist. As part of such rules, the board may require the procurement of a permit which must be periodically renewed.

(11) To order an applicant or licensee to submit to a physical examination, mental examination or a competency examination when the board has evidence indicating the incapacity of the applicant or licensee to practice safely.

SECTION 17. Section 1, chapter 716, Oregon Laws 2011, is amended to read:

Sec. 1. (1) The Oregon Health Authority may approve pilot projects to encourage the development of innovative practices in oral health care delivery systems with a focus on providing care to populations that evidence-based studies have shown have the highest disease rates and the least access to dental care. The authority may approve a pilot project that is designed to:

(a) Operate for three to five years or a sufficient amount of time to evaluate the validity of the pilot project;

(b) Evaluate quality of care, access, cost, workforce and efficacy; and

(c) Achieve at least one of the following:

(A) Teach new skills to existing categories of dental personnel;

(B) Develop new categories of dental personnel;

(C) Accelerate the training of existing categories of dental personnel; or

- (D) Teach new oral health care roles to previously untrained persons.
- (2) The authority shall adopt rules:
 - (a) Establishing an application process for pilot projects;
 - (b) Establishing minimum standards, guidelines and instructions for pilot projects; and
 - (c) Requiring an approved pilot project to report to the authority on the progress and outcomes of the pilot project, including:
 - (A) The process used to evaluate the progress and outcomes of the pilot project;
 - (B) The baseline data and information to be collected;
 - (C) The nature of program data that will be collected and the methods for collecting and analyzing the data;
 - (D) The provisions for protecting the safety of patients seen or treated in the project; and
 - (E) A statement of previous experience in providing related health care services.
- (3) The authority shall seek the advice of appropriate professional societies and licensing boards before adopting rules under subsection (2) of this section.
- (4)(a) Notwithstanding ORS 679.020 and 680.020, a person may practice dentistry *[or]*, dental hygiene **or dental therapy** without a license as part of a pilot project approved under this section under the general supervision of a dentist licensed under ORS chapter 679 and in accordance with rules adopted by the authority.
- (b) A person practicing dentistry *[or]*, dental hygiene **or dental therapy** without a license under this section is subject to the same standard of care and is entitled to the same immunities as a person performing the services with a license.
- (5) The authority may accept gifts, grants or contributions from any public or private source for the purpose of carrying out this section. Funds received under this subsection shall be deposited in the Dental Pilot Projects Fund established under section 17 *[of this 2011 Act]*, **chapter 716, Oregon Laws 2011**.

SECTION 18. (1) Sections 2, 3 and 4 to 12 of this 2021 Act and the amendments to ORS 679.010, 679.140, 679.170 and 679.250 and section 1, chapter 716, Oregon Laws 2011, by sections 13 to 17 of this 2021 Act become operative on January 1, 2022.

(2) The amendments to section 3 of this 2021 Act by section 3a of this 2021 Act become operative on January 1, 2025.

(3) The Oregon Board of Dentistry may take any action before the operative dates specified in subsections (1) and (2) of this section that is necessary to enable the board to exercise, on and after the operative dates specified in subsections (1) and (2) of this section, all of the duties, functions and powers conferred on the board by sections 2, 3 and 4 to 12 of this 2021 Act and the amendments to ORS 679.010, 679.140, 679.170 and 679.250 and section 1, chapter 716, Oregon Laws 2011, and section 3 of this 2021 Act by sections 3a and 13 to 17 of this 2021 Act.

SECTION 19. This 2021 Act takes effect on the 91st day after the date on which the 2021 regular session of the Eighty-first Legislative Assembly adjourns sine die.

Passed by House April 27, 2021

Repassed by House June 23, 2021

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

.....
Tina Kotek, Speaker of House

Passed by Senate June 22, 2021

.....
Peter Courtney, President of Senate

Received by Governor:

.....M.,....., 2021

Approved:

.....M.,....., 2021

.....
Kate Brown, Governor

Filed in Office of Secretary of State:

.....M.,....., 2021

.....
Shemia Fagan, Secretary of State