DENTAL BOARD
OF CALIFORNIA

TELECONFERENCE
Wednesday, April 9, 2014

STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.
DENTAL BOARD OF CALIFORNIA
2005 Evergreen Street, Suite 1550, Sacramento, CA 95815
P (916) 263-2300 F (916) 263-2140 | www.dbc.ca.gov

AMENDED NOTICE (see location deletions)

TELECONFERENCE – BOARD MEETING AGENDA
WEDNESDAY, APRIL 9, 2014
(916) 263-2300 (Board Office)

Members of the Board

Fran Burton, MSW, Public Member, President
Bruce Whitcher, DDS, Vice President
Judith Forsythe, RDA, Secretary

Steven Afriat, Public Member
Stephen Casagrande, DDS
Yvette Chappell-Ingram, Public Member
Katie Dawson, RDH
Luis Dominicis, DDS
Kathleen King, Public Member
Ross Lai, DDS
Huong Le, DDS, MA
Meredith McKenzie, Public Member
Steven Morrow, DDS, MS
Thomas Stewart, DDS
Debra Woo, DDS

One or more Board Member(s) will participate in this meeting at the teleconference sites listed below. Each teleconference location is accessible to the public and the public will be given an opportunity to address the Dental Board of California at each teleconference location. The public teleconference sites for this meeting are as follows:

TELECONFERENCE MEETING LOCATIONS:

Dental Board of California Offices:

Fran Burton, Public Member
Stephen Casagrande, DDS
2005 Evergreen Street, Ste. 1550
Dental Board Conference Room
Sacramento, CA 95815
(916) 263-2300

Huong Le, DDS, MA
200 South Wells Rd., Ste. 200
Ventura, CA 93004
(916) 263-2300

Other Teleconference Locations:

Bruce Whitcher, DDS
1428 Oak Street
Paso Robles, CA 93446
(916) 263-2300

Ross Lai, DDS
456 Montgomery St., Ste. GC-3
San Francisco, CA 94104
(916) 263-2300

Steven Afriat, Public Member
4107 Magnolia Blvd.
Burbank, CA 91505
(916) 263-2300

Thomas Stewart, DDS
3809 San Dimas, Ste. B
Bakersfield, CA 93301
(916) 263-2300

Luis Dominicis, DDS
8202 Florence Avenue, Suite 101
Downey, CA 90240
(916) 263-2300

Kathleen King, Public Member
4030 Moorpark Avenue, Ste. 107
San Jose, CA 95070
(916) 263-2300

Meredith McKenzie, Public Member
1133 Innovation Way
Sunnyvale, CA 94089
(916) 263-2300

Debra Woo, DDS
12880 Hwy 9
Boulder Creek, CA 95006
(916) 263-2300

The following locations are no longer available:

333 S. Anita Drive, Ste., 930
Conference Room
Orange, CA 92780
(714) 923-9725

1000 North Alameda St., Ste. 240
Los Angeles, CA 90012
(916) 263-2300

Public comments will be taken on agenda items at the time the specific item is raised. The Board may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. Time limitations for discussion and comment will be determined by the President. For verification of the meeting, call (916) 263-2300 or access the Board's website at www.dbc.ca.gov. This Board meeting is open to the public and is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Karen M. Fischer, Executive Officer, at 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five business days before the meeting will help to ensure availability of the requested accommodation.

12:00 NOON OPEN SESSION – FULL BOARD – TELECONFERENCE

1. Call to Order/Roll Call/Establishment of Quorum

2. Discussion and Possible Action Regarding:

   A. The Dental Hygiene Committee of California's (DHCC) Regulatory Proposal to Adopt California Code of Regulations, Title 16, §§ 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4, and 1106 Relative to Educational Program Requirements; and

   B. Providing Formal Comments Regarding Scope of Practice Concerns During the 45-Day Public Comment Period for the DHCC's Regulatory Proposal to Adopt California Code of Regulations, Title 16, §§ 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4, and 1106 Relative to Educational Program Requirements

3. Public Comment of Items Not on the Agenda
   The Board may not discuss or take action on any matter raised during the Public Comment section that is not included on this agenda, except whether to decide to place the matter on the agenda of a future meeting (Government Code §§ 11125 and 11125.7(a)).

   CLOSED SESSION – FULL BOARD
   Discussion Regarding Possible Litigation
   The Board will meet in closed session as authorized by Government Code §11126(e).

4. Adjournment

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MEMORANDUM

DATE	April 3, 2014
TO	Dental Board Members
FROM	Sarah Wallace, Legislative & Regulatory Analyst
SUBJECT	**Agenda Item 2(A):** Discussion and Possible Action Regarding the Dental Hygiene Committee of California's (DHCC) Regulatory Proposal to Adopt California Code of Regulations, Title 16, §§ 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4, and 1106 Relative to Educational Program Requirements

Background:

The Dental Hygiene Committee of California (DHCC) has proposed a rulemaking to adopt Sections 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4, and 1106 of Division 11 of Title 16 of the California Code of Regulations relative to educational requirements for dental hygiene programs. This proposal was published on Friday, March 14th in the California Regulatory Notice Register. The 45-day public comment period began on Friday, March 14th and will end on Monday, April 28, 2014. The DHCC has also scheduled a regulatory hearing to take place in Sacramento on April 28, 2014 at 9 a.m.

According to the Initial Statement of Reasons, the purpose of this proposal is to provide the DHCC with specific criteria and standards for approval of registered dental hygienist (RDH) educational programs pursuant to Business and Professions Code (Code) Section 1905(a)(1). The meeting materials include copies of the DHCC's Notice of Proposed Changes, Proposed Language, and Initial Statement of Reasons relating to the DHCC's regulatory proposal for the Board's reference. The Initial Statement of Reasons provides a detailed explanation of why the DHCC justifies the necessity of their proposal.

Pursuant to Code Section 1905, the DHCC is responsible for: the evaluation and approval of dental hygiene educational programs; the examination and licensure of qualified candidates; determining fee amounts to assess its licensees; determining and enforcing licensure renewal and continuing education requirements; taking disciplinary action against licensees who are found in violation of Article 9 of Chapter 4 of Division 2 of the Code; making recommendations to the Dental Board of California (Board) regarding dental hygiene scope of practice issues; and, the promulgation of rules and regulations to implement provisions of Article 9 of Chapter 4 of Division 2 of the Code,

including the amount of required supervision by a RDH, a RDHAP, or a RDHEF. The DHCC employs their own personnel to carry out its functions and responsibilities.

Pursuant to Code Section 1905.2, recommendations by the DHCC regarding scope of practice issues are required to be approved, modified, or rejected by the Board within 90 days of submission of the recommendation to the Board. If the Board rejects or significantly modifies the intent or scope of the recommendation, the DHCC may request that the Board provide its reasons in writing for rejecting or significantly modifying the recommendation. The Board is required to provide these reasons within 30 days of the request.

Board President, Fran Burton, appointed a subcommittee, consisting of Dr. Le and Dr. Whitcher, to review the DHCC's regulatory proposal and determine if there were any scope of practice concerns that should be discussed by the Board. The DHCC has not requested that the Board review this regulatory proposal; rather, the subcommittee, Board Legal Counsel, and Board staff have determined that there are some scope of practice concerns within the DHCC's regulatory proposal that warrant Board discussion and possible formal comment.

DHCC Educational Program Requirements: Scope of Practice Concerns
The following concerns have been identified for the Board's discussion:

Section 1103. Definitions:
As proposed in Section 1103(j), "dental hygiene process of care" has been defined as "…the application of scientific, evidence-based knowledge in the identification and treatment of actual or potential patient health problems. The dental hygiene process of care includes assessment, dental hygiene diagnosis, planning and outcome identification, implementation, evaluation and documentation, and will serve as the accepted professional standard for decision making."

According to the proposal's Initial Statement of Reasons, this definition is applicable to the educational programs that are approved or apply for approval to teach dental hygiene. Accordingly, the definition is intended to inform students, instructors, and educational programs of the elements of the dental hygiene process of care that must be contained in all approved RDH programs. The DHCC provides that this definition is necessary because educational programs need to know that these elements are required of all DHCC-approved RDH educational programs and students need to know the elements that an approved educational program must contain in order to learn to perform all of the functions of current dental hygiene practice.

Pursuant to Code Section 1908, the practice of dental hygiene includes dental hygiene assessment and development, planning, and implementation of a dental hygiene care plan. It also includes oral health education, counseling, and health screenings. The practice of dental hygiene **does not** include any of the following procedures:

- Diagnosis and comprehensive treatment planning;
- Placing, condensing, carving, or removal of permanent restorations;
- Surgery or cutting on hard and soft tissue including, but not limited to, the removal of teeth and the cutting and suturing of soft tissue;

- Prescribing medication;
- Administering local or general anesthesia or oral or parenteral conscious sedation, except for the administration of nitrous oxide and oxygen, whether administered alone or in combination with each other, or local anesthesia pursuant to Code Section 1909.

Staff Recommendation:
Since Code Section 1908 specifically states that diagnosis and comprehensive treatment planning are not included procedures in the practice of dental hygiene, staff recommends the Board discuss whether it is within the authority of the DHCC to include "diagnosis" within the definition for "dental hygiene process of care". Staff recommends that the Board consider directing staff to submit a letter to the DHCC before the end of the 45-day public comment period requesting that the DHCC delete references to "diagnosis" and replace with "assessment" or "evaluation" so as not to exceed the authority vested in Code Section 1908.

Additionally, the phrase: "identification and treatment of actual or potential patient health problems" seems vague and could potentially be perceived to expand the dental hygiene scope of practice. Staff recommends the Board consider directing staff to submit a letter to the DHCC before the end of the 45-day public comment period requesting that the DHCC revise the language to maintain consistency with Code Sections 1907, 1908, and 1914.

Section 1105. Requirements for RDH Educational Programs:
As proposed in Section 1105(b)(5), RDH educational program instruction involving procedures that require supervision by a dentist are required to be supervised by a faculty dentist who possesses an active California license or special permit with no disciplinary action.

Staff Recommendation:
Staff assumes that an educational program would be required to follow the same supervision requirements provided in Code Sections 1909, 1910, and 1912. However, since the proposed language does not specify whether the supervision is "general" or "direct", staff recommends that the Board consider directing staff to submit a letter to the DHCC before the end of the 45-day public comment period requested that the DHCC amend section 1105(b)(5) to clarify whether the requirements contained in Code Sections 1909, 1910, and 1912 must also be followed in an educational setting.

Section 1106. Radiation Safety Certificate:
As proposed in Section 1106(b), a dental hygiene student or graduate who has received certification from an educational program approved the DHCC would be authorized to operate dental radiographic equipment, including the determination of radiographs, for the purpose of oral radiography.

Staff Recommendation:
Code Section 1684.5 specifies that it is unprofessional conduct for any dentist to perform or allow to be performed any treatment on a patient who is not a patient of record of that dentist. A dentist may, however, after conducting a preliminary oral examination, require or permit any dental auxiliary to perform procedures necessary

for diagnostic purposes, provided that the procedures are permitted under the auxiliary's authorized scope of practice. Additionally, a dentist may require or permit a dental auxiliary to perform all of the following duties prior to any examination of the patient by the dentist, provided that the duties are authorized for the particular classification of dental auxiliary:

(1) Expose emergency radiographs upon direction of the dentist.

(2) Perform extra-oral duties or functions specified by the dentist.

(3) Perform mouth-mirror inspections of the oral cavity, to include charting of obvious lesions, malocclusions, existing restorations, and missing teeth.

Staff believes that the phrase "determination of radiographs", as it is used within the proposed section 1106(b), is vague and could be perceived to expand the dental hygiene scope of practice. Staff recommends the Board consider directing staff to submit a letter to the DHCC before the end of the 45-day public comment period requesting that the DHCC revise the language to maintain consistency with Code Section 1684.5.

Board Action Requested:

Staff requests that the Board discuss the concerns relating to the DHCC's regulatory proposal and provide staff with direction as to whether the Board would like to formally comment on the proposal during the 45-day public comment period.

NOTICE OF PROPOSED CHANGES

TITLE 16. DENTAL HYGIENE COMMITTEE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

NOTICE IS HEREBY GIVEN that the Dental Hygiene Committee of California ("Committee") is proposing to take the action described in the Informative Digest. Any person interested may present statements or arguments orally or in writing relevant to the action proposed at a hearing to be held at the:

Department of Consumer Affairs
1st Floor Hearing Room
2005 Evergreen Street
Sacramento, California on

April 28, 2014

9:00 a.m.

Written comments, including those sent by mail, facsimile, or e-mail to the addresses listed under Contact Person in this Notice, must be received by the Committee at its office not later than 5:00 p.m. on April 28, 2014, or must be received by the Committee at the hearing. The Committee, upon its own motion or at the instance of any interested party, may thereafter adopt the proposals substantially as described below or may modify such proposals if such modifications are sufficiently related to the original text. With the exception of technical or grammatical changes, the full text of any modified proposal will be available for 15 days prior to its adoption from the person designated in this Notice as contact person, and will be mailed to those persons who submit written or oral testimony related to this proposal or who have requested notification of any changes to the proposal.

Authority and Reference: Pursuant to the authority vested by Sections 1905, 1905(m) and 1909 of the Business and Professions Code and Section 106975 of the Health and Safety Code, and to implement, interpret or make specific Sections 1905, 1917 and 1941 of the Business and Professions Code, the Committee is considering changes to Division 11 of Title 16 of the California Code of Regulations as follows:

INFORMATIVE DIGEST

A. Informative Digest

Business and Professions Code Section 1906 authorizes the Committee to adopt, amend and repeal such rules and regulations as may be reasonably necessary to enable the Committee to effect the provisions of Business and Professions Code sections 1900-1966.6. This proposal would specify requirements for Committee approval of dental hygiene educational programs. The regulations in this area are outdated, and exist in the Dental Practice Act, in the California Code of Regulations (CCR) Title 16, Division 10, Sections 1070.1, 1072 and 1072.1. These regulations have not been updated since 1985, when there were approximately ten dental hygiene educational programs approved to operate within California. Currently, thirty dental hygiene

educational programs are approved in California due to the Committee's acceptance of accreditation by the Commission on Dental Accreditation (CODA). SB 1202, effective January 1, 2013, gave the Committee permissive authority to approve any dental hygiene program accredited by CODA, rather than requiring the Committee to approve any dental hygiene program accredited by CODA, as previous statutory language mandated. This statutory change also authorized the Committee to withdraw or revoke programs' approval if the CODA has withdrawn or intends to withdraw approval. The Committee needs current regulations within Division 11 that specify the requirements for new and previously approved dental hygiene educational programs, and the Committee is proposing the following:

- Adopt Section 1103 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section defines dental hygiene terms that are used within statute and regulation so that applicants, licensees, staff and the public have clear and consistent definitions for terms currently used in dental hygiene education.

- Adopt Section 1105 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section would update the requirements for approval of dental hygiene educational programs contained in Division 10, Section.1072.1, by specifying current requirements for administration, student admissions, prerequisites, instruction, standards of competency, facilities and equipment, health and safety, curriculum and learning resources. The proposed regulations provide for course review and withdrawal of approval, and ensure that all approved course providers continue to meet the requirements contained in the regulations, provisions that are not in Section 1072.1. These proposed regulations would require the Committee to provide denied course provider applicants with the specific reasons for denial within 90 days.

- Adopt Section 1105.1 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section would update and specify the current requirements for approval of dental hygiene educational programs contained in Division 10, Section.1072.1 relative to requirements for program director and faculty.

- Adopt Section 1105.2 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section would update and specify the current requirements for approval of dental hygiene educational programs contained in Division 10, Section.1072.1 relative to required curriculum content and organization.

- Adopt Section 1105.3 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section would specify the requirements and timeframe for changes to an approved dental hygienist educational program. There are currently no regulations that require an educational program to notify the Committee if it changes its location or ownership, if its fiscal condition changes, or if there is a substantial change in the program's organizational structure.

- Adopt Section 1105.4 of Division 11, Title 16 of the California Code of Regulations
  This proposed new section would specify the appeals process for educational programs whose approval is denied or withdrawn by the Committee. There are currently no regulations that allow an educational program to appeal the Committee's decision.

- Adopt Section 1106 of Division 11, Title 16 of the California Code of Regulations

This proposed new section would authorize approved dental hygienist educational programs to issue the radiation safety certificate required to take radiographs. There are currently no regulations that allow an educational program to issue a radiation safety certificate to a student who has completed required coursework, or to a graduate.

B. Policy Statement Overview/Anticipated Benefits of Proposal

The Committee's policy is to promulgate regulations for the protection of California consumers. When there is no impact on consumers, the Committee endeavors to pursue regulations that are not burdensome to licensees. Dental hygienist programs require clinical practice of dental hygiene procedures by students in clinics and offices. This proposal protects California consumers by ensuring that dental hygienist educational programs meet criteria and standards necessary for students to learn to perform procedures safely, and to protect Californians while students learn and practice these procedures.

Protection of the public is the Committee's primary mission. These regulations benefit the public by specifying the content and administration of a dental hygienist educational program, so that dental hygiene patients are protected from harm during the clinical practice of procedures by dental hygiene students.

These regulations benefit dental hygienist students by specifying curriculum, faculty, facility instructional, and health and safety requirements, so that students receive a complete and quality educational program. Students need instruction in California's stringent infection control, hazardous waste management and bloodborne and infectious disease control protocols. These regulations ensure that students who take a Committee-approved educational program will receive instruction from qualified licensed faculty in an educationally optimal environment to learn protocols and procedures to safely perform dental hygiene duties.

The proposal benefits educational programs by specifying the requirements, so programs know exactly what is needed to gain and maintain Committee approval.

C. Consistency and Compatibility with Existing State Regulations

During the process of developing these regulations and amendments, the Committee has conducted a search of any similar regulations on this topic and has concluded that these regulations are neither inconsistent nor incompatible with existing state regulations.

FISCAL IMPACT ESTIMATES

Fiscal Impact on Public Agencies Including Costs or Savings to State Agencies or Costs/Savings in Federal Funding to the State: None

Nondiscretionary Costs/Savings to Local Agencies: None

Local Mandate: None

Cost to Any Local Agency or School District for Which Government Code Sections 17500 - 17630 Requires Reimbursement: None

Business Impact: The Committee has made an initial determination that the proposed regulatory action would have no significant statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states.

Cost Impact on Representative Private Person or Business:
The Committee is not aware of any cost impacts that a representative private person or business would necessarily incur in reasonable compliance with the proposed action.

Effect on Housing Costs: None

EFFECT ON SMALL BUSINESS

The Committee has determined that the proposed regulations would not have a significant economic impact on small businesses since a small business would not have the resources to open or maintain a dental hygiene educational program.

RESULTS OF ECONOMIC IMPACT ASSESSMENT/ANALYSIS

Impact on Jobs/Businesses:
The Committee has determined that this regulatory proposal will not have a significant impact on the creation of jobs or new businesses or the elimination of jobs or existing businesses or the expansion of businesses in the State of California.

Benefits of Regulation:
The Committee has determined that this regulatory proposal will have the following benefits to health and welfare of California residents, worker safety and state's environment:

This regulation will benefit the state's environment and the health of California residents and workers by ensuring that all registered dental hygienist students receive education and training in the safe provision of dental hygiene procedures.

CONSIDERATION OF ALTERNATIVES

The Committee must determine that no reasonable alternative it considered to the regulation or that has otherwise been identified and brought to its attention would be more effective in carrying out the purpose for which the action is proposed, would be as effective and less burdensome to affected private persons than the proposal described in this Notice, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Any interested person may present statements or arguments orally or in writing relevant to the above determinations at the above-mentioned hearing.

INITIAL STATEMENT OF REASONS AND INFORMATION

The Committee has prepared an initial statement of the reasons for the proposed action and has available all the information upon which the proposal is based.

TEXT OF PROPOSAL

Copies of the exact language of the proposed regulations and of the initial statement of reasons, and all of the information upon which the proposal is based, may be obtained at the hearing or prior to the hearing upon request from the Dental Hygiene Committee of California at 2005 Evergreen Street, Suite 1050, Sacramento, California 95815.

AVAILABILITY AND LOCATION OF THE FINAL STATEMENT OF REASONS AND RULEMAKING FILE

All the information upon which the proposed regulations are based is contained in the rulemaking file which is available for public inspection by contacting the person named below.

You may obtain a copy of the final statement of reasons once it has been prepared, by making a written request to the contact person named below or by accessing the website listed below.

CONTACT PERSON

Inquiries or comments concerning the proposed rulemaking action may be addressed to:

Name:	Lori Hubble, Executive Officer
Address:	2005 Evergreen Street, Suite 1050 Sacramento, CA 95815
Telephone No.:	(916) 263-1978
Fax No.:	(916) 263-2688
E-Mail Address:	Lori.Hubble@dca.ca.gov

The backup contact person is:

Name:	Donna Kantner
Address:	2005 Evergreen Street, Suite 1050 Sacramento, CA 95815
Telephone No.:	(916) 576-5003
Fax No.:	(916) 263-2688
E-Mail Address:	Donna.Kantner@dca.ca.gov

Website Access: Materials regarding this proposal can be found at the Committee's website: www.dhcc.ca.gov.

PROPOSED LANGUAGE

[All new text]

TITLE 16
California Code of Regulations
Professional and Vocational Regulations
Division 11
Dental Hygiene Committee of California

ARTICLE 3. EDUCATIONAL PROGRAMS

§ 1103. Definitions.
For purposes of this division, the term:

(a) "Academic year" means a period of education consisting of a minimum of forty-five (45) quarter units, thirty (30) semester units, or a duration deemed equivalent thereto by the Committee.

(b) "Analgesia" means a state of decreased sensibility to pain, such as that produced by using nitrous oxide and oxygen with or without local anesthesia.

(c) "Clinical instruction" means instruction in which students receive supervised patient care experiences in performing procedures in a clinical setting to achieve safe and effective clinical outcomes. The instructor to student ratio shall meet approved accreditation standards.

(d) "Clinical practice" means the planned learning experiences designed for students to apply dental hygiene knowledge and skills to meet course objectives in a variety of Committee-approved clinical settings. Clinical practice may include learning experiences provided in various settings, including, but not limited to, dental hygiene skills labs, simulation labs, and computer labs, as well as health care agencies.

(e) "Clinical setting" means a setting that accommodates patient care.

(f) "Clinical outcome" is the result derived from a specific intervention or treatment.

(g) "Competencies" means statements describing the abilities needed to practice dental hygiene, including skills, understanding, and professional values, that are performed independently in realistic settings.

(h) “Competent” means possessing the knowledge, skills and values required in the dental hygiene process of care to practice dental hygiene or provide instruction within a dental hygiene educational program.

(i) "Curriculum" means an organized set of courses of learning which are prerequisite to the award of a degree or diploma.

(j) "Dental hygiene process of care" means the application of scientific, evidence-based knowledge in the identification and treatment of actual or potential patient health problems. The dental hygiene

process of care includes assessment, dental hygiene diagnosis, planning and outcome identification, implementation, evaluation and documentation, and will serve as the accepted professional standard for decision making.

(k) “Didactic instruction” means instruction through lectures, seminars or demonstrations, as distinguished from clinical or laboratory instruction.

(l) “Distance education” means education to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and instructor, either synchronously or asynchronously using one or more of the following technologies:

(1) the internet;
(2) one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite or wireless communication devices;
(3) audio conferencing;
(4) video cassettes, DVDs, and CD-ROMS, if the cassettes, DVDs or CD-ROMS are used in a course in conjunction with any of the technologies listed in (l)(1-3).

(m) "Educational program" means a progressive or planned system of training, instruction or study.

(n) "Goal" means an intention or expectation that requires several tasks to produce the desired result.

(o) “Graduate” means a dental hygiene student who has completed all required studies within a dental hygiene educational program and has obtained a degree.

(p) ”Homebound” means a person who is unable to receive care in a dental office or clinic due to a disabling physical or mental condition.

(q) “Laboratory instruction” means instruction designed to perform procedures using instructional materials in which students receive supervised experience performing procedures. The instructor to student ratio shall meet approved accreditation standards.

(r) "Learning experience" means those activities planned for students by the faculty that are designed to meet the objectives of the required course of instruction, including the basic standards of competent performance.

(s)"Learning outcomes" are statements that clearly state the expected knowledge, skills, values and competencies that students are expected to acquire in both didactic and clinical coursework.

(t) “Local anesthesia” is the temporary loss of sensation, such as pain, in the oral cavity, produced by an injected anesthetic agent without inducing loss of consciousness.

(u) "Mission" means an institution's stated educational reasons to exist. The mission shall have all of the following characteristics:

(1) It shall include the institution's goals concerning the education which students will receive, including the acquisition of the body of knowledge presented in the educational program, the development of intellectual, analytical, and critical abilities, and the fostering of values such as a commitment to pursue lifelong learning;
(2) It shall relate to the educational expectations of the institution's students and faculty and the community which the institution serves.

(v)”Nitrous Oxide-Oxygen” is an inhalation agent used to achieve analgesia.

(w) "Outcomes assessment" means an ongoing process aimed at improving student learning that includes a profile of measures evaluating the effectiveness of the program in meeting its goals and learning outcomes.

(x) “Preclinical instruction” means instruction in which students receive supervised experience using instructional materials to prepare them for clinical experiences to achieve safe and effective clinical outcomes. The instructor to student ratio shall meet approved accreditation standards.

(y) "Quarter" means at least ten (10) weeks of instruction.

(z) "Quarter unit" means at least ten (10) hours of college or university level instruction during a quarter plus a reasonable period of time outside of instruction which an institution requires a student to devote to preparation for planned learning experiences, such as preparation for instruction, study of course material, or completion of educational projects.

(aa) “Remedial education” means education designed to achieve competency required for initial, continuation, or reinstatement of licensure, and may be required for purposes of discipline. Remedial Education is the act or process of correcting a deficiency and its intent is to restore skills to competency.

(ab) "Semester" means at least fifteen (15) weeks of instruction.

(ac) "Semester unit" means at least fifteen (15) hours of college or university level instruction during a semester plus a reasonable period of time outside of instruction which an institution requires a student to devote to preparation for planned learning experiences, such as preparation for instruction, study of course material, or completion of educational projects.

(ad) ”Service learning” is a teaching and learning experience that combines community service with academic preparation. Students engaged in service learning learn about their roles as dental professionals through provision of patient care and related services in response to community-based problems.

(ae) “Sponsoring institution” means an institution of higher education approved or who has applied for approval for a dental hygiene educational program. If the sponsoring institution has more than one campus, the campus where the physical location of the educational program exists shall be deemed the sponsoring institution.

(af) "Staff" means professional, technical, and clerical employees of the institution to support its educational program.

(ag) "Technology" means equipment, tools, and devices that are used to facilitate and support teaching and learning.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Sections 1905 and 1917, Business and Professions Code.

§1105. Requirements for RDH Educational Programs.

As of January 1, 2016, educational programs for registered dental hygienists shall comply with the requirements set forth below in order to secure and maintain approval by the Committee.

(a) Administration and Organization. There shall be a written mission statement that serves as a basis for curriculum structure. Such statement shall take into consideration the individual difference of students, including their cultural and ethnic background, learning styles, and support systems. It shall also take into consideration the concepts of dental hygiene, which must include the dental hygiene process of care, environment, health-illness continuum, and relevant knowledge from related disciplines.

(b) Instruction.

(1) Instruction upon all levels shall be conducted upon the premise that dental hygiene education must meet the test of a true university discipline and shall include lectures, laboratory experiments and exercises and clinical practice under supervision.

(2) For purposes of this section the term "university discipline" is a level of instruction at least equivalent to that level of instruction represented by college courses in the basic sciences commonly offered or accepted in approved California dental schools.

(3) The length of instruction in the educational program shall include two academic years of fulltime instruction at the postsecondary college level or its equivalent, and a minimum of 1,600 clock hours.

(4) The instructor to student ratio shall meet approved accreditation standards.

(5) Instruction involving procedures that require supervision by a dentist shall be supervised by a faculty dentist who possesses an active California license or special permit with no disciplinary actions.

(c) Standards of Competency. Each educational program shall establish and maintain standards of competency. Such standards shall be available to each student, and shall be used to measure periodic progress or achievement in the curriculum.

(d) The policies and procedures by which the educational program is administered shall be in writing, shall reflect the mission and goals of the program, and shall be available to all students.

(e) The educational program shall have a written plan for evaluation of all aspects of the program, including admission and selection policy and procedures, attrition and retention of students, curriculum management, patient care competencies, ethics and professionalism, critical thinking, and outcomes assessment.

(f) Admission.

(1) The minimum basis for admission into an educational program shall be the successful completion of all of the following:

(A) A high school diploma or the recognized equivalent, which will permit entrance to a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation; and,

(B) College-level general education courses in:
(i). Oral and Written Communication
(ii) Psychology
(iii) Sociology
(iv) Mathematics
(v) Cultural Diversity*
(vi) Nutrition*

*This course is required prior to graduation, and may be waived as an admission requirement if included within the dental hygiene program curriculum.

(C) College-level biomedical science courses, each of which must include a laboratory component, in:
(i) Anatomy
(ii) Physiology
(iii) Chemistry
(iv) Biochemistry
(v) Microbiology

(2) Admission of students shall be based on specific written criteria, procedures and policies. Previous academic performance and/or performance on standardized national tests of scholastic aptitude or other predictors of scholastic aptitude and ability shall be utilized as criteria in selecting students who have the potential for successfully completing the educational program. Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability and the scope of practice of and employment opportunities for dental hygienists.

(g) The program shall have published student grievance policies.

(h) There shall be an organizational chart that identifies the relationships, lines of authority and channels of communication within the educational program, between the program and other administrative segments of the sponsoring institution, and between the program, the institution and extramural facilities and service learning sites.

(i) The educational program shall have learning resources, including faculty, library, staff and support services, technology and physical space and equipment, including laboratory and clinical facilities, to support the program's stated mission and goals and in accordance with accreditation standards.

(j) The educational program director shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.

(k) The number and distribution of faculty and staff shall be sufficient to meet the educational program’s stated mission and goals.

(l) When an individual not employed in the educational program participates in the instruction and supervision of students obtaining educational experience, his or her responsibilities shall be described in writing and kept on file by the dental hygiene program.

(m) In a two-year college setting, graduates of the educational program must be awarded an associate degree, and in a four-year college or university, graduates must be awarded an associate or baccalaureate degree.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Sections 1905 and 1941, Business and Professions Code.

§ 1105.1. Faculty.

(a) "Program Director" means a registered dental hygienist or dentist who has the authority and responsibility to administer the educational program in accordance with accreditation standards. The director shall have a full-time appointment as defined by the institution, whose primary responsibility is for the operation, supervision, evaluation and revision of the program. The program director shall meet the following minimum qualifications:

(1) Possess an active, current dental or dental hygiene license issued by the Committee or the Dental Board of California (DBC), with no disciplinary actions;

(2) Possess a master's or higher degree from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation that includes course work in dental hygiene, education, public health or administration;

(3) Documentation of two (2) years' experience teaching in pre- or post-licensure registered dental hygiene programs; and

(4) Documentation of a minimum of 2,000 hours in direct patient care as a registered dental hygienist, or working with a registered dental hygienist.

(b) “Program faculty” means an individual having a full-time or part-time agreement with the institution to instruct one or more of the courses in the educational program’s curriculum. As required by the program, the individual shall be responsible for advising students, facilitating and evaluating student progress in learning and clinical outcomes and providing didactic or clinical instruction. The individual shall hold a bachelor’s degree or higher from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation, and possess the following:

(1) An active California dental or dental hygiene license or special permit with no disciplinary actions; or

(2) A credential generally recognized in the field of instruction; or

(3) A degree, professional license, or credential at least equivalent to the level of instruction being taught or evaluated.

(4) All program faculty shall have documented background in educational methodology every two years, consistent with teaching assignments.

(c) Clinical teaching faculty shall have direct patient care experience within the previous five (5) years in the dental hygiene area to which he or she is assigned, which can be met by either:

(1) Two (2) years experience providing direct patient care as a registered dental hygienist or dentist; or

(2) One (1) academic year of registered dental hygienist level clinical teaching experience or its equivalent.

(d) Didactic teaching faculty shall possess the following minimum qualifications:

(1) A bachelor's degree or higher from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation, in the designated dental hygiene area; or

(2) Current knowledge of the specific subjects taught, which can be met by either:

(A) Possessing a degree, professional license or credential at least equivalent to the level of education being taught or evaluated; or

(B) Having completed twelve (12) hours of continuing education in the designated subject area; or

(C) Two (2) semester units or three (3) quarter units of dental hygiene education related to the designated dental hygiene area; or have national certification in the designated dental hygiene area.

(e) Faculty Responsibilities**.**

(1) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content as required by the educational program.

(2) Each faculty member shall participate in an orientation prior to teaching, including, but not limited to, the educational program's curriculum, policies and procedures, strategies for teaching, and student supervision and evaluation.

(2) Each faculty member shall be competent in the area in which he or she teaches.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Sections 1905 and 1941, Business and Professions Code.

§ 1105.2. Required Curriculum.

(a) The curriculum of an educational program shall meet the requirements of this section.

(b) The curriculum shall include education in the dental hygiene process of care and shall define the competencies graduates are to possess at graduation, describing (1) the desired combination of foundational knowledge, psychomotor skills, communication skills, and professional behaviors and values required, (2) the standards used to measure the students' independent performance in each area, and (3) the evaluation mechanisms by which competence is determined.

(c) The organization of the curriculum shall create opportunities for adjustments to and research of, advances in the practice of dental hygiene to ensure that graduates will have the knowledge, skills, and abilities to function within the dental hygiene scope of practice.

(d) The content of the curriculum shall include biomedical and dental sciences and dental hygiene sciences and practice. This content shall be of sufficient depth, scope, sequence of instruction, quality and emphasis to ensure achievement of the educational program's standard of competency.

(1) Biomedical and Dental Sciences Content

(A) Cariology
(B) Dental Materials
(C) General Pathology and/or Pathophysiology
(D) Head, Neck and Oral Anatomy
(E) Immunology
(F) Oral Embryology and Histology
(G) Oral Pathology
(H) Pain management
(I) Periodontology
(J) Pharmacology
(K) Radiography
(L) Dental Anatomy and Morphology

(2) Dental Hygiene Sciences and Practice Content

(A) Community Dental Health
(B) Dental Hygiene Leadership
(C) Evidence-based Decision Making and Evidence-based Practice
(D) Health Informatics
(E) Health Promotion
(F) Infection and Hazard Control Management
(G) Legal and Ethical Aspects of Dental Hygiene Practice
(H) Medical and Dental Emergencies
(I) Oral Health Education and Preventive Counseling
(J) Patient Management
(K) Preclinical and Clinical Dental Hygiene
(L) Provision of Services for and Management of Patients with Special Needs
(M) Research

(3) Approved educational programs shall, at a minimum, specifically include instruction in local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage in accordance with the provisions of this subdivision.

(A) An educational program shall provide infection control equipment according to the requirements of CCR Title 16, Division 10, Chapter 1, Article 1, Section 1005.

(B) An educational program shall provide at least one complete nitrous oxide-oxygen unit for each six (6) students enrolled in the course and shall include a fail-safe flowmeter, functional scavenger system and disposable or sterilizable nasal hoods for each laboratory partner or patient. All tubing, hoses and reservoir bags shall be maintained and replaced at regular intervals to prevent leakage of gases. When not attached to a nitrous oxide-oxygen unit, all gas

cylinders shall be maintained in an upright position, secured with a chain or in a cart designed for storage of gas cylinders.

(C) An educational program shall comply with local, state, and federal health and safety laws and regulations.

(i) All students shall have access to the program's hazardous waste management plan for the disposal of needles, cartridges, medical waste and storage of oxygen and nitrous oxide tanks.

(ii) All students shall have access to the program's clinic and radiation hazardous communication plan.

(iii) All students shall receive a copy of the program's bloodborne and infectious diseases exposure control plan, which shall include emergency needlestick information.

(D) General Curriculum Content. Areas of didactic, preclinical and clinical instruction shall include:

(i) Indications and contraindications for all patients of:
1. periodontal soft tissue curettage;
2. administration and reversal of local anesthetic agents;
3. nitrous oxide-oxygen analgesia agents

(ii) Head and neck anatomy;

(iii) Physical and psychological evaluation procedures;

(iv) Review of body systems related to course topics;

(v) Theory and psychological aspects of pain and anxiety control;

(vi) Selection of pain control modalities;

(vii) Pharmacological considerations such as action of anesthetics and vasoconstrictors, local anesthetic reversal agents and nitrous oxide-oxygen analgesia;

(viii) Recovery from and post-procedure evaluation of periodontal soft tissue curettage, local anesthesia and nitrous oxide/oxygen analgesia;

(ix) Complications and management of periodontal soft tissue curettage, local anesthesia and nitrous oxide-oxygen analgesia emergencies;

(x) Armamentarium required and current technology available for local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage;

(xi) Techniques of administration of maxillary and mandibular local infiltrations, field blocks and nerve blocks, nitrous oxide-oxygen analgesia and performance of periodontal soft tissue curettage;

(xii) Proper infection control procedures according to the provisions of Title 16, Division 10, Chapter 1, Article 4, Section 1005 of the California Code of Regulations;

(xiii) Patient documentation that meets the standard of care, including, but not limited to, computation of maximum recommended dosages for local anesthetics and the tidal volume, percentage and amount of the gases and duration of administration of nitrous oxide-oxygen analgesia;

(xiv) Medical and legal considerations including patient consent, standard of care, and patient privacy.

(E) Specific Curriculum Content.

(i) Local anesthetic agents curriculum must include at least thirty (30) hours of instruction, including at least fifteen (15) hours of didactic and preclinical instruction and at least fifteen (15) hours of clinical instruction. Preclinical instruction shall include a minimum of two (2) experiences per injection, which may be on another student. Clinical instruction shall include at least four (4) clinical experiences per injection on four different patients, of which only one may be on another student. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltration, field block and nerve block to include anterior superior alveolar (ASA) nerve block (infraorbital), middle superior alveolar nerve block (MSA), anterior middle superior alveolar nerve block (AMSA), posterior superior alveolar nerve block (PSA), greater palatine nerve block, nasopalatine (P-ASA) nerve block, supraperiosteal, inferior alveolar nerve block (to include Gow-Gates technique), lingual nerve block, buccal nerve block, mental nerve block, incisive nerve block and intraseptal injections. One clinical experience per injection shall be used to determine clinical competency. The competency evaluation for each injection and technique must be achieved at a minimum of 75%.

(ii) Nitrous oxide-oxygen analgesia curriculum must include at least eight (8) hours of instruction, including at least four (4) hours of didactic and preclinical instruction and at least four (4) hours of clinical instruction. This includes at least two (2) preclinical experiences on patients, both of which may be on another student, and at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency. Each clinical experience shall include the performance of a dental hygiene procedure while administering at least twenty (20) minutes of nitrous oxide-oxygen analgesia. The competency evaluation must be achieved at a minimum of 75%.

(iii) Periodontal soft tissue curettage curriculum must include at least six (6) hours of instruction, including at least three (3) hours of didactic and preclinical instruction and at least three (3) hours of clinical instruction. Education may include use of a laser approved for soft tissue curettage. This includes at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency. The competency evaluation for this procedure must be achieved at a minimum of 75%.

Out-of-state dental hygiene programs that are accredited by the Commission on Dental Accreditation or an approved accrediting body and who provide instruction according to this subdivision may be approved by the Committee to meet the requirements set forth in Business and Professions Code section 1909.

Note: Authority cited: Section 1905 & 1909, Business and Professions Code. Reference: Sections 1905 and 1941, Business and Professions Code.

§ 1105.3. Changes to an Approved Program.

(a) Each dental hygiene program holding a certificate of approval shall:

(1) File its legal name and current mailing address with the Committee at its principal office and shall notify the Committee at said office of any change of name or mailing address within thirty (30) days prior to such change. It shall give both the old and the new name or address.

(2) Notify the Committee within ten (10) days of any:

(A) Change in fiscal condition that will or may potentially adversely affect applicants or students enrolled in the dental hygiene program.

(B) Substantive or major change in the organizational structure, administrative responsibility, or accountability in the dental hygiene program, the institution of higher education in which the dental hygiene program is located or with which it is affiliated that will affect the dental hygiene program.

(C) Increase or decrease in program enrollment of more than 10%.

(D) Reduction in program faculty or support staff of more than 10%.

(b) An approved dental hygiene program shall not make a substantive change without prior Committee approval. These changes include:

(1) Change in location, ownership or educational program expansion through an additional campus or distance education.

(2) Expansion, reduction or elimination of the program's physical facilities.

(3) Any changes that require a report to the Commission on Dental Accreditation or equivalent accrediting body shall require approval from the Committee.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Section 1905, Business and Professions Code.

§ 1105.4. Appeals Process.

(a) The Committee may deny or withdraw its approval of an educational program. If the Committee denies or withdraws approval of a program, the reasons for withdrawal or denial will be provided in writing within ninety (90) days.

(b) Any educational program whose approval is denied or withdrawn shall be granted an informal conference before the Executive Officer or his or her designee prior to the effective date of such action. The educational program shall be given at least ten days' notice of the time and place of such informal conference and the specific grounds for the proposed action.

(c) The educational program may contest the denial or withdrawal of approval by either:

(1) Appearing at the informal conference. The Executive Officer shall notify the educational program of the final decision of the Executive Officer within ten days of the informal conference. Based on the outcome of the informal conference, the program may then request a hearing to contest the Executive Officer's final decision. An educational program or program applicant shall request a hearing by written notice to the Committee within 30 calendar days of the postmark date of the letter of the Executive Officer's final decision after the informal conference. Hearings shall be held pursuant to the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code. Or;

(3) Notifying the Committee in writing the program's election to forego the informal conference and to proceed with a hearing pursuant to the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code. Such notification shall be made to the Committee before the date of the informal conference.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Sections 1905 and 1941, Business and Professions Code.

§ 1106. Radiation Safety Certificate.

(a) Certificates. A certificate may be issued by an approved California dental hygiene program to their dental hygiene student or graduate who successfully completes the radiation safety course as part of the student's curriculum. A dental hygiene student or graduate shall be deemed to have successfully completed the course if the student has met all the course requirements and has obtained passing scores on both written and clinical examinations that includes theory and clinical application in radiographic techniques.

(b) A dental hygiene student or graduate who has received certification from an educational program approved the Committee shall be allowed to operate dental radiographic equipment, including the determination of radiographs, for the purpose of oral radiography.

Note: Authority cited: Sections 1905 , 1905.5(m), Business and Professions Code. Reference: Section 1905, Business and Professions Code; and Section 106975, Health and Safety Code.

INITIAL STATEMENT OF REASONS

DENTAL HYGIENE COMMITTEE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

INITIAL STATEMENT OF REASONS

Hearing Date: April 28, 2014

Subject Matter of Proposed Regulations: Educational Program Requirements

Sections Affected: 16 CCR § 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4 and 1106

Introduction

The Dental Hygiene Committee of California (Committee) proposes to adopt Sections 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4 and 1106 of Division 11 of Title 16 of the California Code of Regulations.

Section 1905(a)(9) gives the Committee statutory authority to "adopt, amend and revoke rules and regulations to implement the provisions of this article." The Committee's statutes, specifically Business and Professions Code Section 1905(a)(1) authorize the Committee to evaluate all registered dental hygienist (RDH) educational programs that apply for approval and grant or deny approval of those applications in accordance with regulations adopted by the Committee. Business and Professions Code Section 1905(a)(2) authorizes the Committee to withdraw or revoke its prior approval of a registered dental hygienist educational program in accordance with regulations adopted by the Committee. Business and Professions Code Section 1905(a)(3) authorizes the Committee to review and evaluate all registered dental hygienist applications for licensure to ascertain whether the applicant meets the appropriate licensing requirements specified by statute and regulations.

The purpose of adopting these regulations is to establish the necessary structure that will allow the Committee to carry out its responsibilities and duties allowable under the statutes.

Specific Purpose of each adoption, amendment, or repeal:

The purpose of the proposed language is to provide the Committee with specific criteria and standards for approval of registered dental hygienist (RDH) educational programs pursuant to Business and Professions Code (Code) section 1905(a)(1). Prior to the Committee's creation in 2009, the former Committee on Dental Auxiliaries (COMDA) recommended approval of RDH educational programs to the Dental Board, who was

responsible for program approval. COMDA and the Dental Board used criteria and standards contained in regulation, Title 16, Division 10, Chapter 3, Article 2, section 1072.1 of the California Code of Regulations (CCR), to govern the approval of RDH educational programs. Program and course definitions for all educational programs for dental assistants, registered dental assistants, registered dental hygienists contained in section 1070.1 for all auxiliaries. These regulations have not been amended since 1985, and do not reflect current educational standards; however, the Committee cannot amend the regulations under the Dental Board's authority. Therefore, the Committee needs these regulations to provide current standards and criteria for RDH educational program approval in order to allow the Committee to approve new dental hygiene educational programs and to audit existing programs to ensure that they meet current standards. Existing regulations do not provide a process for withdrawing an educational program's approval, or for programs to appeal the Committee's denial or withdrawal of the program's approval.

Specifically, the Committee is proposing the following;

Adopt Section 1103 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Definitions)

New Section 1103 defines terms used within the regulations and for requirements specified in new Sections 1105, 1105.1, and 1105.2 that all educational programs must meet in order to obtain and maintain Committee approval. These definitions establish the framework for approval of new RDH educational programs to ensure consumer protection and safety for California dental hygiene patients, and a quality education for students. The regulations also provide specific criteria that existing educational programs must comply with in order to maintain approval status, so that Committee staff has clear standards for auditing purposes and all educational programs continue to meet the same standards for RDH education.

The following subsections are proposed:

Section 1103(a) – This text defines the term "Academic year", since this term is used to establish the minimum length of program instruction in Section 1105(b)(3) and in faculty requirements contained in Section 1105.1(c)(2) .

Proposed Change: This new text is added to specify the length of an academic year for educational program instruction and clinical faculty requirements.

Problem: There are currently no regulations that define the term "academic year" and educational programs applying for approval need to know the minimum length of instruction that must be contained in their RDH program to be approved and to maintain approval. Additionally, educational programs need to know that clinical faculty may qualify as an instructor on the basis of at least one academic year of RDH level clinical

teaching experience to ensure a qualified clinical faculty.

Anticipated Benefits: Educational programs, consumers and DHCC staff will benefit by having a clear definition of this term so that all parties use the same criteria to describe a student's instructional requirements or a faculty member's qualifications. Consumers are protected by a clear definition of the length of an academic term so that only qualified clinical faculty teach RDH students, and students are instructed for an appropriate length of time to achieve competence in dental hygiene procedures.

Section 1103(b) – This text defines the term "Analgesia", as used in Section 1105.2(d)(3) to describe the treatment of pain during dental hygiene procedures by means of using nitrous oxide and oxygen either alone or in combination.

Proposed Change: This new text is added to specify a definition for the expected result of a dental hygiene procedure listed in Business and Professions Code section 1909(c).

Problem: There is no definition in regulation of this term, the result of a procedure that is performed under a dentist's supervision by a registered dental hygienist.

Anticipated Benefits: Licensees, consumers and staff need to know that the administration of nitrous oxide-oxygen is intended to reduce the sensation of pain.

Section 1103(c) – This text defines the term "Clinical instruction", as used in Sections 1105.2(d)(3)(D) and (E)(1) –(3) that specify requirements for instruction in educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is similar to CCR section 1070.1 in the Dental Practice Act that defines terms and sets instructor ratios for courses and programs for registered dental assistants. Since the educational requirements for dental hygienists are different from those for registered dental assistants by requiring that applicants and licensees show proof of completion of an accredited RDH educational program, the text differs from section 1070.1 by simply requiring that all educational programs meet approved accreditation standards.

Problem: The current definition of this term is contained in the Dental Board's regulations, which cannot be amended by the Committee. The Committee needs to clarify that the definition for RDH educational programs is not the same as that used in dental assisting education.

Anticipated Benefits: RDH educational programs and their students need to be know that clinical instruction within an RDH educational program must meet approved accreditation standards in order to be approved by the Committee.

Section 1103(d): This new text defines the term "clinical practice" as used in Section

1105(b)(1) as the hands-on instruction that RDH students need to receive in an educational program.

Proposed Change: This text is needed because there is no definition of the term “clinical practice” as used in an educational setting to describe required learning experiences within an approved RDH educational program.

Problem: Programs and students need to know that a program must contain clinical practice hours, which may include experiences in skills labs, simulation labs and computer labs, and not exclusively in healthcare agencies.

Anticipated Benefits: This new text informs students, instructors and course providers that clinical practice is required within the educational program to achieve approval by the Committee, and may take place in settings other than healthcare agencies.

Section 1103(e): This new text defines a “clinical setting” as a setting that accommodates patient care for the purposes of dental hygiene education,

Proposed Change: This text is needed because there is no language that specifies what constitutes a clinical setting for educational purposes within an approved RDH program.

Problem: Without this definition, educational programs could be constrained to only offer clinical instruction at the institution, rather than in any setting that will accommodate patient care, including health clinics or mobile clinics. If not defined broadly, it might be interpreted that this essential instruction involving patients might only be given within the walls of the educational program. Clinical instruction currently includes experience outside the institution, such as in health clinics.

Anticipated Benefits: This text informs students, instructors and course providers that this instruction, essential for successful completion of the program, may be provided in any setting that accommodates patient care. This text additionally benefits patients who may not otherwise have the opportunity to receive dental hygiene care.

Section 1103(f) – This text defines the term “Clinical outcome”, as used in Section 1105(e) as the result of a specific intervention or treatment, for the benefit of educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is no language in current regulation that defines the term “clinical outcome” as it is used to assess a student’s achievement within an educational program.

Problem: Students within a program are required to complete procedures that have specific results that are assessed and evaluated for grading purposes, and which determine the student’s successful completion of the educational program. Without this

definition, programs would not have clarity as to what constitutes a clinical outcome, thereby impacting the grading process and the assessment of students' competency.

Anticipated Benefits: This text informs students, instructors and education providers that this definition is to be used when measuring students' progress within an approved RDH educational program.

Section 1103(g) – This text defines the term "Competencies", as used in Section 1105.2(B) for educational programs that are approved or who apply for approval to teach dental hygiene. In order to successfully complete an RDH educational program, students must successfully complete competencies to move forward.

Proposed Change: This text is needed because there is no language in current regulation that defines the term "competencies" as required in an approved educational program.

Problem: Students, faculty and educational providers need to know that this is the term for abilities that students must learn in order to graduate the program and be competent to practice on patients, and instructors must possess in order to teach students.

Anticipated Benefits: This text informs students, instructors and educational providers of the definition for competencies that are necessary elements of an approved RDH program. The text benefits students by specifying that they must be performed independently in realistic settings, so that students become competent to practice on patients and benefits educational programs by informing them that this content is necessary to gain or maintain Committee approval.

Section 1103(h) – This text defines the term "Competent", as used in Sections 1103(r) and 1105.2(e)(3) relative to requirements for educational programs that are approved or apply for approval to teach dental hygiene so that programs use this terminology to assess the ability of students and faculty to perform dental hygiene procedures safely on patients.

Proposed Change: This text is needed because there is currently no definition of the term "competent" for educational programs to use in determining the ability of a student or instructor to perform dental hygiene procedures safely on patients.

Problem: Educational programs, faculty and students need a clear and consistent definition for the term "competent", since this is the term that is used to describe an individual who is able to teach or practice dental hygiene procedures safely on patients.

Anticipated Benefits: This text informs students, instructors and educational providers that this is the term that describes the ability of a student or instructor to perform dental hygiene procedures safely on patients or to provide instruction in dental hygiene.

Section 1103(i) – This text defines the term “Curriculum”, as used in Section 1105.2 relative to the requirements for educational programs that are approved or apply for approval to teach dental hygiene for an organized set of courses of learning required for a degree or diploma.

Proposed Change: This text is needed because there is no language currently in regulation that defines the term “curriculum.”

Problem: Students, instructors and educational providers all need to know what this term means and that it is a requirement for a degree or diploma in dental hygiene, otherwise a new educational program may not be approved, an existing educational program may lose approval and unqualified students could receive a degree or diploma.

Anticipated Benefits: This text informs students, instructors and educational providers that this is the term that describes the contents of an RDH educational program that are required to be completed successfully to result in the award of a diploma.

Section 1103(j) – This text defines the term “Dental hygiene process of care”, as used in Section 1105.2(b), for educational programs that are approved or apply for approval to teach dental hygiene. This informs students, instructors, and educational programs of the elements of the dental hygiene process of care that must be contained in all approved RDH programs.

Proposed Change: This text is needed because there is no current language in regulation that specifies the elements that an educational program must contain in order to be approved or retain approval by the Committee.

Problem: Educational programs need to know that these elements are required of all Committee-approved RDH educational programs. Students need to know the elements that an approved educational program must contain in order to learn to perform all of the functions of current dental hygiene practice.

Anticipated Benefits: This text informs students, instructors and course providers that this instruction must be a part of an RDH educational program in order to achieve or maintain approval by the Committee so that programs know to incorporate this instruction into the program and students know that their program is required to contain this instruction.

Section 1103(j) – This text defines the term “Didactic instruction”, as used in Section 1105.2 (d)(3)(D), for educational programs that are approved or apply for approval to teach dental hygiene. This text ensures that dental hygiene students, instructors, and educational programs use the same terminology to describe instruction through lecture, seminars or demonstrations.

Proposed Change: This text is needed because the Dental Practice Act, Title 16, Division 10, Section 1070.1 defines terms for courses and programs for registered dental assistants. Since the educational requirements for dental hygienists are different from those for registered dental assistants by requiring that applicants and licensees show proof of completion of an accredited RDH educational program, the text differs from section 1070.1 by mirroring the definition used by the American Dental Education Association (ADEA) for dental hygiene instruction.

Problem: Without this text, educational programs will use the definition of "didactic instruction" from the Dental Practice Act, not realizing that the requirements for RDH educational programs are different from those for dental assistants, and be denied approval or have their approval withdrawn. Students will receive instruction that differs from the accepted standards for dental hygiene instruction. The Committee does not have the authority to amend the Dental Board's regulations to correct this term.

Anticipated Benefits: This text informs students, instructors and course providers that this term describes a particular type of instruction which is required to gain or maintain Committee approval of an RDH educational program.

Section 1103(l) – This text defines the term "Distance education", as used in Section 1105.3(b)(1) that requires educational programs that are approved or apply for approval to teach dental hygiene to obtain the Committee's approval before making any substantive changes in the program.

Proposed Change: This text is needed because there is no language currently in regulation that defines the term "distance education" so that students, instructors and educational providers all understand what the term means.

Problem: This method of instruction is increasingly used, so it is important to have a definition in regulation that clarifies the Committee's definition of this term used for instruction where the instructor is not in a classroom with students, or students are not on campus for instruction. Without this definition, the interactive component that the Committee requires could be lost from the instructional process, and allowing online or pre-recorded dental hygiene programs that result in students that are not competent in the knowledge, abilities or skills required in dental hygiene practice.

Anticipated Benefits: This text informs students, instructors and educational providers that this is the term that the Committee uses to describe instruction where students are separated from the instructor, but are able to interact by various means of information transmission, as specified.

Section 1103(l)(1) – This text specifies that the term "Distance education", as used in Section 1105.3(b)(1) relative to requirements for educational programs may involve use

of the internet for instructional purposes in educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is nothing currently in regulation that specifies what the term “distance education” may include, so that students, instructors and educational providers all understand that instruction might be provided via the internet in a Committee-approved RDH educational program.

Problem: This method of instruction is increasingly being used in education, so it is important to have the criteria specified for this type of instruction where the instructor is not in a classroom with students, or students are not on campus for instruction.

Anticipated Benefits: This text informs students, instructors and educational programs that distance education may be provided via the internet, allowing programs to use instructors that may be specialists in their field, or those who cannot come to the campus, to instruct students. This benefits students in rural areas or others who may have difficulty otherwise attending a two- or four-year program, to complete portions of their coursework online.

Section 1103(l)(2) – This text specifies that the term “Distance education”, as used in educational programs may involve use of one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite or wireless communication devices for instructional purposes in educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is nothing currently in regulation that specifies what the term “distance education” may include, so that students, instructors and educational providers all understand how this type of instruction might be provided in a Committee-approved RDH educational program. This text informs students, instructors and educational programs that distance education may be provided by one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite or wireless communication devices, allowing programs to use instructors that may be specialists in their field, or those who cannot come to the campus, to instruct students.

Problem: This method of instruction is increasingly used, so it is important to have the criteria specified for this type of instruction where the instructor is not in a classroom with students, or students are not on campus for instruction.

Anticipated Benefits: This text benefits educational programs by specifying allowed methods of distance education and benefits students living in rural areas or others who may have difficulty otherwise attending a two- or four-year program, by allowing them to complete portions of their coursework at home or in other locations outside the campus.

Section 1103(l)(3) – This text specifies that the term “Distance education”, as used in educational programs may involve use of audio conferencing for instructional purposes in educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is nothing currently in regulation that specifies that the term “distance education” may include audio conferencing, so that students, instructors and educational providers all understand that this type of instruction might be provided through audio conferencing.

Problem: This method of instruction is increasingly used, so it is important to have the criteria specified for this type of instruction where the instructor is not in a classroom with students, or students are not on campus for instruction, so that educational programs are aware of allowable distance learning possibilities that a program may contain and still achieve or maintain Committee approval.

Anticipated Benefits: This text informs students, instructors and educational programs that distance education may be provided via audio conferencing, allowing programs to use instructors that may be specialists in their field, or those who cannot come to the campus, to instruct students through an interactive exchange. This benefits students in rural areas or others who may have difficulty otherwise attending a two- or four-year program, to complete portions of their coursework through audio conferencing.

Section 1103(l)(4) – This text specifies that the term “Distance education”, as used in educational programs may involve use of video cassettes, DVDs, and CD-ROMS, if the cassettes, DVDs or CD-ROMS are used in conjunction with the technologies listed in (l)(1-3) above for instructional purposes in approved educational programs.

Proposed Change: This text is needed because there is nothing currently in regulation that specifies what the term “distance education” may include, so that students, instructors and educational providers all understand how this type of instruction might be provided, and that it must involve instructor-student interaction in order to gain or maintain Committee approval.

Problem: This method of instruction is increasingly used, so it is important to have the criteria specified for this type of instruction where the instructor is not in a classroom with students, or students are not on campus for instruction. If not specified, instruction might take place solely through the use of video cassettes, DVDs and CD-ROMS provided to students with no instructor interaction to ensure that students understand the material covered. Without this definition, the interactive component that the Committee requires could be lost from the instructional process, allowing online or pre-recorded dental hygiene programs that result in students that are not competent in the knowledge, abilities or skills required in dental hygiene practice.

Anticipated Benefits: This text informs students, instructors and educational programs that distance education may be provided via the use of video cassettes, DVDs and CD-ROMS, only if used in conjunction with other interactive instruction methods listed in (1), (2), or (3). This benefits students by ensuring that they have the opportunity to ask questions and interact with an instructor during distance education and benefits educational programs by informing them that distance education may be a part of a Committee-approved educational program, but only if the opportunity for instructor-student interaction during course instruction is available.

Section 1103(m) – This text defines the term "Educational program", as used by the Committee in Section 1105 to determine whether an educational program will be approved or continued approval and meets the requirements for educating dental hygienist students for licensure in California.

Proposed Change: This text is needed because there is no current language in regulation that defines an educational program.

Problem: This definition clarifies the term for programs, instructors and students so that all parties understand that an educational program must consist of progressive, planned learning experiences in order to be approved by the Committee.

Anticipated Benefits: This section benefits educational programs, instructors, students and consumers by simply defining the term educational program, so that programs know they must have in place a progressive, planned system to educate students in the practice of dental hygiene and students are informed that an educational program must have such a system in place in order to be approved by the Committee. Consumers are protected by having specific criteria for approved RDH educational programs that are recognized as meeting the instructional requirements to teach students the safe practice of dental hygiene procedures on patients.

Section 1103(n) – This text defines the term "Goal" as used in Sections 1105(d), 1105(f)(2), 1105(i), and 1105(k) to specify requirements for educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is no current language in regulation to define a "goal", as in a set of achievable elements required for Committee approval of an RDH educational program.

Problem: Educational programs need to know that a program must contain goals that may be achieved by the completion of tasks for student learning in order to apply for or maintain approval by the Committee, and to know what those goals need to contain.

Anticipated Benefits: This section benefits educational provider applicants and students by clarifying the term "goal" so that programs provide information relative to the

program's goals and the tasks that will result in their achievement, in order to achieve or retain Committee approval. Students benefit by having clear tasks and goals set out within the program for effective learning.

Section 1103(o) – This text defines the term "Graduate", as used in Sections 1105(m), 1105.2(b), 1105.2(c), and 1106 to specify requirements for educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation of the term "graduate" as it applies to dental hygiene education.

Problem: Educational providers and students need a clear definition of this term so that programs are able to provide the requirements for graduation to the Committee for approval or auditing and to students so that students know the requirements that they must complete in order to obtain a degree.

Anticipated Benefits: The Committee needs to make clear that an approved educational program must contain a set of required studies that result in a degree.

Section 1103(p) – This text defines the term "Homebound", as used in Business and Professions Code Section 1926 to describe settings in which Registered Dental Hygienists in Alternative Practice (RDHAPs) may practice.

Proposed Change: This text is needed because educational programs, faculty and students need to have a clear definition of this term.

Problem: Only RDHAPs may provide dental hygiene care to homebound patients and patients who are in nursing homes, and are allowed by statute to employ other RDHAPs to assist in that care. Students need to know that only RDHAPs are allowed to provide dental hygiene care to homebound patients, so they do not inadvertently break the law.

Anticipated Benefits: Educational programs, instructors and students need to have a clear definition of this term so that only appropriately licensed professionals provide care to homebound individuals.

Section 1103(q) – This text defines the term "Laboratory instruction", as used in educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because the Dental Practice Act, Title 16, Division 10, Section 1070.1 defines terms for courses and programs for registered dental assistants. Since the educational requirements for dental hygienists are different from those for registered dental assistants by requiring that applicants and licensees show proof of completion of an accredited RDH educational program, the text differs from section 1070.1 by mirroring the definition used by the American Dental Education

Association (ADEA) and not requiring specific instructor-student ratios, but rather simply state that they meet approved accreditation standards, in the event that those standards change.

Problem: The Committee needs to clarify that the definition for “laboratory instruction” in RDH educational programs is not the same as that used in dental assisting education. The current definition of this term is contained in the Dental Board’s regulations, which cannot be amended by the Committee.

Anticipated Benefits: This text informs students, instructors and course providers that this term describes a particular type of instruction which is necessary for an RDH educational program to gain or maintain Committee approval. RDH educational programs and dental hygiene students need to know that laboratory instruction within an RDH educational program must meet approved accreditation standards in order to achieve and maintain approved by the Committee.

Section 1103(r) – This text defines the term “Learning experience”, as used in this Section to specify requirements for educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation for the term “learning experience.”

Problem: Educational programs and students need a clear definition of this term so that programs can develop a curriculum that contains specific learning experiences that meet the program’s objectives and obtain or maintain Committee approval. Students need to know that the program contains tasks and activities that will result in their ability to competently practice dental hygiene.

Anticipated Benefits: Educational programs and students benefit by regulations that clearly specify that in order to be approved by the Committee, the program must contain activities that are designed to meet course objectives that result in competent performance of dental hygiene procedures.

Section 1103(s) – This text defines the term “Learning outcomes”, as used in Section 1105(e) to specify requirements for educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation for the term “learning outcomes.”

Problem: Educational programs and students need a clear definition of this term so that programs can develop a curriculum that specifies the expected outcomes of the planned sections of coursework and obtain or maintain Committee approval. Students need to

know that the expected learning outcomes of the educational program will lead to the ability to practice dental hygiene competently.

Anticipated Benefits: Educational programs and students benefit by regulations that clearly specify that in order to be approved by the Committee, the program must have statements that clearly state the expected result of coursework as it relates to instruction in the competent performance of dental hygiene procedures.

Section 1103(t) – This text defines the term “Local anesthesia”, as used in Section 1105.2(d)(3) educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation for the term “local anesthesia” which is required to be taught in an approved RDH educational program.

Problem: Educational programs and students need a clear definition of this term so that all parties know how and why local anesthesia is performed, and that the intent does not result in the patient’s loss of consciousness.

Anticipated Benefits: Educational programs and students benefit by a clear definition of local anesthesia as an injected agent, since some subgingival agents that are used for a temporary loss of sensation are not injected and therefore not defined as “local anesthesia”. It is also important to clarify that such injected local anesthetics should not result in a patient’s loss of consciousness, for patient safety.

Section 1103(u) – This text defines the term “Mission”, as used in Section 1105(a) as required of educational programs that are approved or apply for approval to teach dental hygiene. A mission statement is required of all RDH educational programs in order to receive or retain Committee approval.

Proposed Change: This text is needed because educational programs need to know the components of the required mission statement.

Problem: Educational programs who apply for approval need to know what the Committee looks for in a mission statement for an approved program. Existing programs undergoing audit by the Committee will be asked to provide their mission.

Anticipated Benefits: Educational programs benefit having a clear and specific definition and content that the Committee looks for in an approved program.

Section 1103(u)(1): This new text specifies that an educational program’s mission must include the institution’s goals for educating students, including how students will acquire the knowledge contained in the program, and how students will be taught to think,

reason, and develop critical abilities and values, such as continuing education.

Proposed Change: This text is needed because educational programs need to know that the required mission statement must contain these elements in order to be approved, or to retain Committee approval.

Problem: An educational program needs to know that the stated educational reason for the program to exist must contain these specific elements for Committee approval; otherwise, programs would simply have to guess at what the Committee might consider a mission.

Anticipated Benefits: Course provider applicants are clearly informed of what elements a stated mission must contain in order to be approved or retain approval by the Committee.

Section 1103(u)(2): This new text specifies that an educational program's mission must relate to the educational expectations of the institution's students and faculty, as well as the community which the institution serves.

Proposed Change: This text is needed because educational programs need to know that the required mission statement must contain these elements in order to be approved, or to retain Committee approval.

Problem: An educational program needs to know that the stated educational reason for the program to exist must contain these specific elements for Committee approval; otherwise, programs would have to guess at what the Committee considers a mission.

Anticipated Benefits: Educational programs are clearly informed of what elements a stated mission must contain in order to be approved or retain Committee approval.

Section 1103(v) – This text defines the term "Nitrous Oxide-Oxygen", as used in Section 1103(b) and throughout Section 1105.2(d)(3) to specify this term for educational programs that are approved or apply for approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation for the term "Nitrous Oxide-Oxygen" which is required to be part of a Committee-approved RDH educational program.

Problem: Educational programs and students need to know what the Committee's definition of this term is, so that all parties know the requirement and purpose of nitrous oxide-oxygen administration and that it is not used for other purposes.

Anticipated Benefits: Educational programs and students benefit by a clear definition of "Nitrous Oxide-Oxygen" as an agent that produces analgesia. This definition clarifies

that other uses are not appropriate for this agent.

Section 1103(w) – This text defines the term “Outcomes assessment”, as used in Section 1105(e) that specifies requirements for educational programs that are Committee approved or apply for Committee approval to teach dental hygiene.

Proposed Change: This text is needed because there is currently no definition in regulation for the term “Outcomes assessment” as required within an approved RDH educational program.

Problem: Educational programs and students need a clear definition of this term so that all parties know that measurable standards that evaluate the program’s effectiveness in meeting its goals and learning outcomes are required for Committee approval of an RDH educational program.

Anticipated Benefits: Existing educational programs benefit by a clear definition of the term “Outcomes assessment” that the Committee will ask for during an audit. New educational programs benefit by this text so that they may include this required information when applying for Committee approval. Students benefit by knowing that the educational program has measures in place to improve student learning and the program’s effectiveness, so they are assured of a quality education.

Section 1103(x) – This text defines the term “Preclinical instruction”, as used in Sections 1105.2(d)(2)(K), 1105.2(d)(3)(D), and 1105.2(d)(3)(E) so that educational programs seeking Committee approval, or those that have Committee approval to teach dental hygiene have a definition of the term that pertains to dental hygiene education.

Proposed Change: This text is needed because the Dental Practice Act, Title 16, Division 10, Section 1070.1 defines terms for courses and programs for registered dental assistants. Since the educational requirements for dental hygienists are different from those for registered dental assistants by requiring that applicants and licensees show proof of completion of an accredited RDH educational program, the text differs from section 1070.1 by mirroring the definition used by the American Dental Education Association (ADEA) and not requiring specific instructor-student ratios, but rather simply state that they meet approved accreditation standards, in the event that those standards change.

Problem: The Committee needs to clarify that the definition for “preclinical instruction” in RDH educational programs is not the same as that used in dental assisting education. The current definition of this term is contained in the Dental Board’s regulations, which cannot be amended by the Committee.

Anticipated Benefits: This text informs students, instructors and course providers that this term describes a particular type of instruction which is necessary for an RDH

educational program to gain or maintain Committee approval. RDH educational programs and dental hygiene students need to know that preclinical instruction within an RDH educational program must meet approved accreditation standards in order to achieve and maintain approved by the Committee.

Section 1103(y): This new text defines the length of a “quarter” as used in Section 1103(a) for instructional requirements and Section 1105.1(d)(2)(C) for didactic faculty qualifications, so that educational programs and program applicants know that a quarter consists of at least ten (10) weeks of instruction.

Proposed Change: This text is needed because educational programs need to know that in order to be approved or to retain Committee approval, a quarter consists of a minimum of ten weeks of instruction, not only for instructional purposes, but to meet faculty qualifications specified in Section 1105.1(d)(2)(C) .Ten weeks is a widely accepted standard of measurement in education for a quarter of instruction.

Problem: If not specified, educational programs may vary in length of instruction and not contain enough time to give students the opportunity to learn required principles, practices, and skills necessary to safely practice dental hygiene on patients. A program could hire faculty that do not meet the Committee’s requirements for approval, and therefore be disapproved for this reason if the length of a quarter is not specified in regulation.

Anticipated Benefits: Educational programs are clearly informed of the length of a quarter of instruction required for instruction and for didactic teaching faculty to be qualified for Committee approval of the program.

Section 1103(z): This new text defines the minimum content of a “quarter unit” as used in Sections 1103(a) and 1105.1(d)(2)(C) that specify requirements for an approved RDH educational program as at least ten (10) hours of instruction, and further specifies that this does not include time outside of instruction in which students prepare or study for class.

Proposed Change: This text is needed because educational programs need to know that in order to be approved or to retain Committee approval, a “quarter unit” must consist of a minimum of ten hours of instruction within a quarter, and does not include time that students may spend in study, completion of projects, or preparation for class. Didactic faculty may qualify as instructors on the basis of three quarter units related to the subject area being taught. Ten hours of time is an accepted measurement in education for a quarter unit of instruction.

Problem: If not specified, educational programs may vary in the number of hours of instruction and not contain enough time to give students the opportunity to learn required principles, practices, and skills necessary to safely practice dental hygiene on

patients. If not specified, students may think that only ten hours per quarter per unit are necessary for successful program completion, and fail to successfully complete the program. Unqualified faculty members could be hired if the amount of qualifying education is not specified in regulation.

Anticipated Benefits: Educational programs, faculty and students are clearly informed of the length of a quarter unit of instruction necessary for approval by the Committee.

Section 1103(aa): This new text defines the term “remedial education” as used in Business and Professions Code Section 1917.3 for an approved RDH educational program as education designed to achieve competency required for initial, continuing, or reinstatement of licensure, and may also be required for disciplinary purposes. This text states that the purpose of remedial education is to correct a deficiency and the intent is to restore competence.

Proposed Change: This text is needed because educational programs need to know the Committee’s definition of remedial education so that if offered, remedial education conforms to the Committee’s standards.

Problem: If not specified, educational programs could offer remedial instruction that will not be approved by the Committee.

Anticipated Benefits: Educational programs are clearly informed of the purpose and process of remedial education in order to achieve or retain approval by the Committee.

Section 1103(ab): This new text defines the length of a “semester” as used in Section 1103(a) for an educational program’s instructional requirements and in Section 1105.1(d)(2)(C) for didactic faculty requirements as at least fifteen (15) weeks of instruction.

Proposed Change: This text is needed because educational programs need to know that in order to be approved or to retain Committee approval and for purposes of faculty qualifications, a semester consists of a minimum of fifteen weeks of instruction. Fifteen weeks is a widely accepted standard of measurement in education for a semester of instruction.

Problem: If not specified, educational programs may vary in length of instruction and not contain enough time to give students the opportunity to learn required principles, practices, and skills necessary to safely practice dental hygiene on patients. Programs may have unqualified faculty instructing students.

Anticipated Benefits: Educational programs are clearly informed of the length of a semester of instruction needed to be approved or retain approval by the Committee, and of the minimum qualifications for didactic teaching faculty.

Section 1103(ac): This new text defines the minimum content of a “semester unit” as used in Section 1103(a) to specify requirements for an academic year and in Section 1105.1(d)(2)(C) to specify requirements for didactic teaching faculty as at least fifteen (15) hours of instruction, and specifies that this does not include time outside of instruction in which students prepare or study for class.

Proposed Change: This text is needed because educational programs need to know that in order to be approved or to retain Committee approval, and for purposes of didactic faculty qualifications, a “semester unit” must consist of a minimum of fifteen hours of instruction in a semester, not including time that students may spend in study, completion of projects, or preparation for class. Fifteen hours of time is an accepted measure in education for a semester unit of instruction.

Problem: If not specified, educational programs may vary in the number of hours of instruction and not contain enough time to give students the opportunity to learn required principles, practices, and skills necessary to safely practice dental hygiene on patients. If not specified, students may think that only fifteen hours per semester per unit are necessary for successful program completion, and fail to successfully complete the program. Unqualified faculty members could be hired if the amount of qualifying education is not specified in regulation.

Anticipated Benefits: Educational programs, faculty and students are clearly informed of the length of a semester unit of instruction necessary for approval by the Committee.

Section 1103(ad): This new text defines “service learning” as used in Section 1105(h) in an approved RDH educational program as a teaching and learning experience that combines community service with academic preparation. The text specifies that students engaged in service learning learn about their roles as dental professionals by providing patient care and related services in a community setting.

Proposed Change: This text is needed because educational programs need to have a clear definition of “service learning”, which is commonly a component of a Committee approved RDH educational program.

Problem: If not specified, educational programs may not know what constitutes “service learning” for the Committee’s approval.

Anticipated Benefits: Educational programs are clearly informed of what the Committee looks for in service learning contained within an RDH educational program.

Section 1103(ae): This new text defines “sponsoring institution” for an approved RDH educational program as used in Section 1105(h) to specify that this term means an institution of higher education that is approved or has applied for approval of an RDH

educational program. The text specifies that if a “sponsoring institution” has more than one campus, the campus where the RDH educational program is physically located will be considered the sponsoring institution.

Proposed Change: This text is needed because RDH educational programs may have a sponsoring institution with multiple campuses, and the Committee requires that a sponsoring institution be in the same physical location as the RDH educational program, and not at an extramural or service learning site.

Problem: If not specified, educational programs may not know that the Committee’s definition of a “sponsoring institution” means an institution that must be in the same physical location as the RDH educational program, and may not be able to be approved or continue their approval status. It is important that the sponsoring institution be at the same location as the RDH program, for oversight and ease of communication.

Anticipated Benefits: Educational programs are clearly informed of what the Committee means by a “sponsoring institution” for an RDH educational program.

Section 1103(af): This new text defines the term “staff” for an approved RDH educational program as used in Section 1105(i) to specify that this term means the professional, technical and clerical employees that support the RDH educational program.

Proposed Change: This definition is needed because RDH educational programs have staff members other than faculty that support the educational program.

Problem: If not specified, educational programs may not know that the Committee defines staff separately from faculty and instructors, and requires staff support of an RDH educational program in order to achieve or retain approval.

Anticipated Benefits: Educational programs are clearly informed of what the Committee means by “staff” for approval of an RDH educational program.

Section 1103(ag): This new text defines “technology” for an approved RDH educational program as used in Sections 1105(i) and 1105.2(d)(3)(D)(x) to specify that this term means equipment, tools and devices that are used to facilitate and support teaching and learning in an RDH educational program.

Proposed Change: This text is needed because RDH educational programs need a clear definition of what the Committee considers “technology” and how it is used within an approved RDH educational program.

Problem: If not specified, educational programs may not know the Committee’s definition of “technology” as it relates to the requirement in Section 1105(i), and may not

be able to be approved or continue their approval status if they fail to have technology to support the RDH program. Technology is a term that is widely used in many fields, and can mean many different things if not specified.

Anticipated Benefits: Educational programs are clearly informed of what the Committee means by “technology” that is required for approval of a RDH educational program.

Adopt Section 1105 of Article 3 Division 11 of Title 16 of the California Code of Regulations (RDH Educational Programs)

New Section 1105 sets out requirements that all RDH educational programs must meet by January 1, 2016, and contains specific language that describes the information that programs must submit, including requirements for an approved educational program’s administration and organization, instruction, admission, and curriculum. These regulations can be used by new educational programs when applying for Committee approval, and will be used by Committee staff to audit existing educational programs after January 1, 2016.

The following subsections are proposed:

Section 1105: This new text states that this section contains requirements that all RDH educational program must comply with, and that compliance is expected of existing programs by January 1, 2016.

Proposed Change: This text is needed because RDH educational programs need to know what the Committee considers when approving a new educational program and when auditing an approved RDH educational program.

Problem: If not specified, educational programs may not know the requirements for approval and be approved or continue their approval status. New and existing programs need to know the standards used by the Committee when considering approval of a new RDH educational program or when auditing an existing approved program. January 1, 2016 will provide existing programs enough time to review and make sure they are in compliance with these regulations so that if audited, their approval will not be withdrawn.

Anticipated Benefits: Educational programs, students, faculty, and Committee staff are clearly informed of the Committee’s criteria for program approval or continued approval.

Section 1105(a): This new text specifies the requirements for the administration and organization of an RDH educational program, including a mission statement that takes into account the concepts of dental hygiene, as well as the process of care as it relates to dental hygiene, the continuum of well-being from health to illness, and knowledge

from other disciplines as they relate to dental hygiene.

Proposed Change: This definition is needed because RDH educational programs need to know that the Committee requires that they have a mission statement, and what that statement must include for approval or continued approval of the educational program.

Problem: If not specified, educational programs may not know the Committee's criteria for approval of an RDH educational program and may fail to be approved or lose their approval status.

Anticipated Benefits: Educational programs are clearly informed of what the Committee requires in the areas of administration and organization and a mission statement when considering approval of an RDH educational program.

Section 1105(b): This new text informs users that this section specifies the requirements for instruction in an RDH educational program.

Proposed Change: This text is needed so that RDH educational programs know that this section contains requirements for instruction that educational programs must comply with in order to be approved by the Committee.

Problem: If not specified, educational programs may not know where to find the Committee's criteria for instructional requirements used when considering approval of a RDH educational program and programs may fail to be approved or lose their approval status.

Anticipated Benefits: Educational programs are clearly informed of what the Committee requires in the area of instruction when considering approval of a RDH educational program.

Section 1105(b)(1): This new text informs users that instruction within an RDH educational program must be at the university level and include lectures, laboratory experiments and supervised clinical practice to meet the requirements for instruction in an approved RDH educational program.

Proposed Change: This text is needed because RDH educational programs need to know the requirements for instruction that approved educational programs must comply with.

Problem: If not specified, educational programs may not know the Committee's criteria for instructional requirements used when considering approval of an RDH educational program and programs may fail to be approved or lose their approval status. Students may not receive the instructional experiences needed for successful completion of an RDH educational program

Anticipated Benefits: Educational programs, faculty, students and Committee staff are clearly informed of what the Committee requires in the area of instruction when considering approval of an RDH educational program.

Section 1105(b)(2): This new text defines the term “university discipline” as used in Section 1105(b)(1) to describe the level of instruction required in an approved RDH educational program.

Proposed Change: This text is needed because RDH educational programs need to know the Committee’s definition of the required level of instruction that educational programs must comply with in order to be approved or retain approval.

Problem: If not specified, educational programs may not know the Committee’s criteria for instructional requirements used when considering approval of an RDH educational program and programs may fail to be approved or lose their approval status. Students may not receive instructional experiences at the level necessary for RDH licensure.

Anticipated Benefits: Educational programs, faculty, students and Committee staff are informed of the Committee’s definition of the required level of instruction when considering approval of an RDH educational program.

Section 1105(b)(3): This new text specifies the length and level of instruction required for all approved educational programs, including the number of clock hours.

Proposed Change: This text is needed because RDH educational programs need to know the Committee’s definition of the length and level of instruction that all approved educational programs must meet in order to be approved.

Problem: If not specified, educational programs may not know the Committee’s criteria for the length and level of instruction required for approval of an RDH educational program and programs may fail to be approved or lose their approval status. Students may not receive adequate instruction at the level necessary for RDH licensure. Two academic years of fulltime instruction and 1,600 clock hours is the minimum amount of time in which the elements of an RDH educational program can be taught adequately to students for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff are informed of the Committee’s definition of the required length and level of instruction when considering approval of an RDH educational program.

Section 1105(b)(4): This new text states that the instructor to student ratio must meet approved accreditation standards.

Proposed Change: This text is needed because RDH educational programs need to know the Committee's definition of the required level of instruction that approved educational programs must comply with, and that these ratios reference accreditation standards for RDH educational programs rather than placing a specific number into regulation that would have to be changed as accreditation standards are updated.

Problem: If not specified, educational programs may not know that the Committee's criteria for instructor to student ratios are the same as those in approved accreditation standards in considering approval of an RDH educational program, so programs may fail to be approved or lose their approval status. Students may not have a sufficient number of faculty during instruction to gain competence in procedures.

Anticipated Benefits: Educational programs, faculty, students and Committee staff are informed of the Committee's criteria for the required instructor to student ratio when considering approval of an RDH educational program.

Section 1105(b)(5): This new text specifies that instruction in procedures that require supervision by a dentist must be supervised by a faculty dentist who possesses an active California license or special permit that has had no disciplinary actions imposed.

Proposed Change: This text is needed because RDH educational programs need to know that instruction in procedures that require a dentist's supervision must be supervised by a faculty member who possesses the same credentials as would be required in practice.

Problem: If not specified, educational programs may think that instruction within an educational program does not require supervision at the same level as that required in practice, and programs may fail to be approved or lose their approval status. Students may not be appropriately supervised during instruction of procedures that require supervision when performed in practice, and injure other students or clinical patients.

Anticipated Benefits: Educational programs, faculty, students and Committee staff know that procedures requiring supervision by a dentist when performed in practice must also be instructed by an actively licensed California dentist faculty member with no disciplinary actions in order to be approved by the Committee, thereby protecting all parties.

Section 1105(c): This new text specifies that standards of competency must be established for approval of new and existing RDH educational programs and specifies that these standards must be used to measure student progress and must be available to students.

Proposed Change: This text is needed because RDH educational programs need to know that the Committee requires that educational programs establish standards of

competency in order for the program to be approved, and that those standards are to be used by the program as a measurement of students' progress and be made available to students.

Problem: If not specified, educational programs may not know that they must establish and maintain standards of competency to be approved or retain approval by the Committee. Consistent standards need to be used so that students progress can be tracked, and students need to know the standards to which they will be held.

Anticipated Benefits: Educational programs, faculty, students and Committee staff all know that in order to be approved, programs must have established standards that measure the progress of students' competency, and students know the standards and their progress in achieving competence in dental hygiene.

Section 1105(d): This new text specifies that an approved RDH educational program must have written policies and procedures that reflect the mission and goals of the program and must be available to all students.

Proposed Change: This text is needed because RDH educational programs need to know that in order to achieve or retain approval they must have written policies and procedures reflecting the program's mission and goals, which must be available to all students.

Problem: If not specified, educational programs may not know that they need to have written policies and procedures available to all students that reflect the program's mission and goals. The Committee needs to ensure that educational programs have a mechanism that allows students to have the opportunity to successfully complete the RDH educational program. Students may not know the program's policies and procedures, and inadvertently violate them.

Anticipated Benefits: Educational programs, faculty, students and Committee staff have a mechanism that informs all parties of the program's rules of operation.
Section 1105(e): This new text specifies that an approved educational program must have a written plan for evaluation of all aspects of the program, including policy and procedures for admission, selection, attrition and retention of students, management of the curriculum, patient care competencies, professionalism and ethics, critical thinking, and outcomes assessment in order to achieve or maintain approval.

Proposed Change: This text is needed because RDH educational programs need to have a mechanism in place to self-evaluate all areas of the program. This is required not only for Committee approval but also for accreditation eligibility.

Problem: If not specified, educational programs may not know that the Committee requires the same self-evaluation tools that accrediting agencies use when reviewing

RDH educational programs.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit by clear instructions regarding this standard requirement for RDH educational programs.

Section 1105(f): This new text informs users that admission standards and requirements may be found in this subsection.

Proposed Change: This text is needed because RDH educational programs and students need to know that this subsection contains criteria and requirements for students admitted to Committee-approved educational programs.

Problem: If not specified, educational programs will not know the Committee's criteria for admission to an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know if they are eligible for admission to an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having clear admission requirements
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Section 1105(f)(1): This new text specifies that in order to be admitted into an educational program, students must successfully complete all of the requirements specified in this subsection.

Proposed Change: This text is needed because RDH educational programs and students need to know that this subsection contains criteria and requirements for students admitted to Committee-approved educational programs, and that all of the listed components are required.

Problem: If not specified, educational programs will not know the Committee's criteria for admission to an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know if they are eligible for admission to an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having clear admission requirements.

Section 1105(f)(1)(A): This new text informs users that students must possess a high school diploma or its recognized equivalent permitting entrance to an accredited college or university in order to be admitted to a Committee-approved educational program.

Proposed Change: This text is needed because RDH educational programs, students, and Committee staff need to know that one of the requirements for students admitted to Committee-approved educational programs is a high school diploma or recognized equivalent.

Problem: If not specified, educational programs will not know that prospective students must possess a high school diploma or its recognized equivalent for admission to an approved RDH educational program. Programs may fail to be approved or lose their approval status. Students may think they are eligible for admission to an RDH program, when they do not have the educational background to successfully complete the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having clear admission requirements specified in regulation.

Section 1105(f)(1)(B): This new text informs users that RDH educational program admission requirements include the following listed college-level general education courses.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Certain of these prerequisites, cultural diversity and nutrition, may actually be offered within the program, so language is included to allow for this. Students need to know that this subsection contains a list of college-level courses that must be completed before they can be admitted to Committee-approved RDH educational programs.

Problem: If not specified, educational programs will not know that the Committee requires students to complete specified courses before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that these courses are required before they can be admitted to a RDH program, and programs could admit students that do not qualify and thereby fail to complete the program because they do not have this foundation knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(B)(i): This new text informs users that RDH educational program admission requirements include a college-level general education course in oral and written communication.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, one of which is oral and written communication. This coursework is necessary for successful completion of an RDH

educational program because students must have the ability to communicate orally in class and through written papers and assignments. Students need to know that this coursework is required before admittance to an approved program.

Problem: If not specified, educational programs will not know that the Committee requires students to complete specified courses in oral and written communication before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that these courses are required before they can be admitted to an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program because they do not have this foundation knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(B)(ii): This new text informs users that RDH educational program admission requirements include a college-level general education course in psychology.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Psychology is one of these prerequisites. Students need to know that a college-level course in psychology must be completed before they can be admitted to an approved educational program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a course in psychology before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a college-level psychology course is required before admittance into an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program because they do not have this foundation knowledge for successful completion.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(B)(iii): This new text informs users that RDH educational program admission requirements include a college-level general education course in sociology.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, including a course in sociology. Students need to know that a college-level course in sociology must be completed before admission into an RDH educational program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a college-level sociology course before admission into an

approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a sociology course is required before admittance into an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program because they do not have this foundation knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(B)(iv): This new text informs users that RDH educational program admission requirements include a college-level course in mathematics.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, including mathematics. Students need to know that a college-level course in mathematics must be completed before admittance into a program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a course in mathematics before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a course in mathematics is required for admission into an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundation knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(B)(v): This new text informs users that RDH educational program admission requirements include a college-level course in cultural diversity, and notes that this requirement may be waived if the course is included within the program.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, one of which is cultural diversity. This prerequisite may be waived if included within the program's curriculum, so language is included to allow for this. Students need to know that a college-level course in cultural diversity must be completed before admission into a program, unless contained within the program's curriculum.

Problem: If not specified, RDH educational programs will not know that a course in cultural diversity is required either before admission into an approved RDH educational program or must be included within the program and programs may fail to be approved or lose their approval status. Students would not know that these courses are required before they can be admitted to an RDH program or as part of the program, and

programs could admit students that do not qualify and who fail to complete the program because this coursework is not included within the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation, and by the option of providing a course in cultural diversity within the program that specifically relates to the practice of dental hygiene on Californians of various diverse cultures. California's diverse consumer population benefits by having dental hygiene professionals that are educated in providing care to members of diverse cultures.

Section 1105(f)(1)(B)(vi): This new text informs users that RDH educational program admission requirements include a college-level course in nutrition, and notes that this requirement may be waived if the course is included within the program.

Proposed Change: This text is needed because dental hygiene educational programs normally have prerequisites for admittance into the program, one of which is nutrition. This prerequisite may be waived if it is included within the program's curriculum, so language is included to allow for this. Students need to know that a college-level course in nutrition must be completed before admission into a program, unless contained within the program's curriculum.

Problem: If not specified, educational programs will not know that a course in nutrition is required either before admission into an approved RDH educational program or within the program and programs may fail to be approved or lose their approval status. Students would not know that these courses are required before they can be admitted to an RDH program or as part of the program, and programs could admit students that do not qualify and who fail to complete the program because this coursework is not included within the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation, and by the option of providing a course in nutrition within the program that includes nutrition as it relates to the practice of dental hygiene. Consumers benefit by having dental hygiene professionals that are educated in nutrition.

Section 1105(f)(1)(C): This new text informs users that RDH educational program admission requirements include the following listed college-level biomedical science courses, and that each of the courses must include a laboratory component

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, and, since they are science courses, must contain a laboratory component. Students need to know that this subsection contains a list of college-level biomedical science courses that must be completed before they can be admitted to Committee-approved RDH educational

programs, and specifies that each of the courses must include a laboratory component so that students gain the hands-on experience necessary to learn scientific principles.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete specified science courses before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that these courses are required before they can be admitted to an RDH educational program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundation knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite biomedical science coursework specified in regulation, including the requirement of a laboratory component in all science courses.

Section 1105(f)(1)(C)(i): This new text informs users that RDH educational program admission requirements include a college-level science course in anatomy.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program, one of which is anatomy. This coursework is necessary for successful completion of an RDH educational program because students must have the ability to distinguish various anatomical features and have basic knowledge of the interaction of anatomical processes before taking specialized courses in head, neck and oral anatomy, and dental anatomy and morphology that are a part of all approved RDH educational programs. Students need to know that this coursework is required before admittance to an approved program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a course in anatomy before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that this course is required before they can be admitted to an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundational knowledge for successful completion of an RDH program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite science coursework specified in regulation.

Section 1105(f)(1)(C)(ii): This new text informs users that RDH educational program admission requirements include a college-level science course in physiology.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Physiology is one of these prerequisites, and is required so that students have a basic knowledge of human

skeletal and muscular systems before taking more specialized coursework in oral pathology, pathophysiology and cariology that is part of all approved RDH educational programs. Students need to know that a college-level course in physiology must be completed before admittance to an approved RDH educational program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a college-level course in physiology before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a college-level physiology course is required before admittance into an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundational knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(C)(iii): This new text informs users that RDH educational program admission requirements include a college-level science course in chemistry.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Chemistry is one of these prerequisites, and is required so that students have a basic knowledge of chemical elements and reactions before taking more specialized coursework in administration of local anesthetic agents and nitrous oxide-oxygen analgesia that is part of all approved RDH educational programs. Students need to know that a college-level course in chemistry must be completed before admittance to an approved RDH educational program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a college-level course in chemistry before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a college-level chemistry course is required before admittance into an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundational knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(C)(iv): This new text informs users that RDH educational program admission requirements include a college-level science course in biochemistry.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Biochemistry is one of these

prerequisites, and is required so that students have a basic knowledge of carbon-based life forms, enzymes, and how human tissue reacts to various agents before taking more specialized coursework in oral pathology, cariology, and pharmacology that is part of all approved RDH educational programs. Students need to know that a college-level course in biochemistry must be completed before admittance to an approved educational program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a college-level course in biochemistry before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a college-level biochemistry course is required before admittance into an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundational knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(1)(C)(v): This new text informs users that RDH educational program admission requirements include a college-level science course in microbiology.

Proposed Change: This text is needed because RDH educational programs normally have prerequisites for admittance into the program. Microbiology is one of these prerequisites, and is required so that students have a basic knowledge of sampling techniques and scientific identification procedures before taking more specialized coursework in pathology, oral embryology and histology that is part of all approved RDH educational programs. Students need to know that a college-level course in microbiology must be completed before admittance to an approved program.

Problem: If not specified, RDH educational programs will not know that the Committee requires students to complete a college-level course in physiology before admission into an approved RDH educational program and programs may fail to be approved or lose their approval status. Students would not know that a college-level physiology course is required before admittance into an RDH program, and programs could admit students that do not qualify and who fail to complete the program because they do not have this foundational knowledge for successful completion of the program.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having necessary prerequisite coursework specified in regulation.

Section 1105(f)(2): This new text specifies that an RDH educational program must admit students based upon specific written criteria, procedures, and policies utilizing prior academic performance and standardized national scholastic aptitude tests as criteria, and that applicants must be informed of the selection criteria and procedures, as well as

the program's goals, curriculum content, course transferability, scope of practice and employment opportunities for dental hygienists.

Proposed Change: This text is needed because RDH educational programs and students need to know that a program's admission criteria, policies and procedures must be in writing and applicants must be provided this information, as well as program goals, criteria and selection procedures for students admitted to an RDH educational program, curriculum content course transferability, scope of practice and employment opportunities for the profession. RDH educational programs and students need to know that programs must use an applicant's previous academic performance or performance on scholastic aptitude tests as criteria for student selection.

Problem: If not specified, RDH educational programs will not know that they must have written criteria, procedures and policies for student admission using applicants' previous academic performance, standardized national scholastic aptitude tests or other predictors of an applicant's aptitude and ability to successfully complete the program and programs may fail to be approved or lose their approval status. Students would not know that these written admission selection criteria exist and would not know whether they are eligible for admission to an RDH program, and programs could admit students that do not qualify and thereby fail to complete the program. Applicants need to be informed of the course of study they are applying for, whether any courses are transferable if they move or change their course of study, and what they will be able to do and whether they can be employed once they successfully complete the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements that admission criteria, procedures be in writing, and that prior academic performance and scholastic aptitude tests will be used as criteria to select students for admission to a program. Applicants benefit from having clearly specified information to assist them in making the decision to enter the profession of dental hygiene.

Section 1105(g): This new text specifies that an RDH educational program must have published students grievance procedures.

Proposed Change: This text is needed because RDH educational programs need to disseminate information regarding its student grievance policies, so that students know the steps to take when filing a grievance.

Problem: If not specified, RDH educational programs will not know that the Committee requires an approved RDH educational program to have published student grievance policies and programs may fail to be approved or lose their approval status. Students would not know the procedure for pursuing a grievance, or if they have grounds for a grievance.

Anticipated Benefits: Educational programs, faculty, students and Committee staff benefit from having a requirement for published student grievance policies so that all parties have access to them.

Section 1105(h): This new text specifies that in order to achieve or retain approval, an educational program must have an organization chart identifying the relationships, lines of authority and channels of communication within the program, as well as between the program and other administrative segments of the sponsoring institution, and between the program, the institution, and extramural facilities and service learning sites.

Proposed Change: This text is needed because RDH educational programs need to know that the Committee will review a program's organization chart to determine that there are clear lines of authority and channels of communication between all of the program's components that ensure a program's viability.

Problem: If not specified, RDH educational programs will not know that an organization chart containing the specified elements is part of the Committee's criteria for approval of an RDH educational program and programs may fail to be approved or lose their approval status.

Anticipated Benefits: Educational programs and Committee staff benefit by having the requirement for an organization chart clearly specified in regulation, so programs do not have to guess at what information needs to be included in an organizational chart.

Section 1105(i): This new text specifies that in order to be approved, an RDH educational program must have learning resources to support the program's stated mission and goals in with accordance with accreditation standards that include faculty, library, staff, support services, technology, physical space, and equipment, including laboratory and clinical facilities.

Proposed Change: This text is needed because RDH dental hygiene educational programs need to know that in order to be approved or retain Committee approval, all RDH educational programs must contain these listed elements.

Problem: If not specified, RDH educational programs will not know the required learning resources for approval of an RDH educational program and programs may fail to be approved or lose their approval status. Students would not have the necessary resources to successfully complete the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly specified requirements for learning resources.

Section 1105(j): This new text specifies that in order to be approved, an RDH educational program must have a director that has the primary responsibility for

developing policies and procedures, planning, organizing, implementing and evaluating the program.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, the program's director must have these responsibilities for the program's oversight.

Problem: If not specified, RDH educational programs will not know the specific required duties for a program director and programs may fail to be approved or lose their approval status.

Anticipated Benefits: Educational programs and Committee staff benefit from having clearly specified responsibilities for the program's director so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements.

Section 1105(k): This new text specifies that in order to be approved, an RDH educational program must have an adequate number and distribution of faculty to meet the program's stated mission and goals.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, programs must have adequate faculty and staff to provide instruction and support of the program's mission and goals.

Problem: If not specified, RDH educational programs will not know that the Committee requires faculty and staff that are sufficient in number and distributed throughout the program in order to meet the program's stated mission and goals before approval of an RDH educational program and programs may fail to be approved or lose their approval status. Students would not have the necessary faculty and staff resources to successfully complete the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for faculty and staff so that programs can meet the requirements and Committee staff can direct programs to the specific Section of law.

Section 1105(l): This new text specifies that if an educational program uses an instructor or supervisor that is not employed by the program, that individual's responsibilities must be described in writing and kept on file by the program.

Proposed Change: This text is necessary because dental hygiene educational programs sometimes use experts to instruct certain sections of the program, such as infection control or basic life support. Programs need to know that outside instructors and supervisors that are not program faculty may be used, however are required to have a

description of his or her responsibilities on file with the program order to be approved or retain Committee approval.

Problem: If not specified, educational programs will not know that the Committee requires instructors or supervisors that are not employed program faculty or staff to have their responsibilities in writing on file with the program in order to be approved and programs may fail to be approved or lose their approval status. The Committee needs to know the responsibilities of all instructors or supervisors of student instruction within a program for approval and audit purposes.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for outside instructors or supervisors of students that may be utilized by a dental hygiene educational program so that programs can meet the Committee's requirements for approval. Committee staff can direct programs to the Section containing those requirements, and students benefit from having qualified instructors and supervisors that are outside the requirements for faculty.

Section 1105(m): This new text specifies that in order to be approved, an RDH educational program must award graduates an associate degree if in a two-year college setting, and a baccalaureate or associate degree if in a four-year college or university.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, programs must award a degree, and the type of degree, based on the length of education.

Problem: If not specified, educational programs will not know that the Committee requires a degree, rather than a certificate or other documentation be awarded by a RDH educational program and programs may fail to be approved or lose their approval status. Students would not achieve a degree upon program completion. All existing California RDH educational programs award either an associate or baccalaureate degree. This text ensures that new RDH programs that apply will also award a degree upon a student's successful completion of the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having a clearly stated requirements that an associate or baccalaureate degree be awarded to graduates so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements.

Adopt Section 1105.1 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Faculty)

New Section 1105.1 sets out specific requirements for RDH educational program

faculty, including the program director, program faculty, clinical teaching faculty, didactic teaching faculty, and faculty responsibilities. These regulations can be used by new RDH educational programs when applying for Committee approval, and will be used by Committee staff to audit existing educational programs after January 1, 2016 to ensure that approved RDH educational programs have qualified faculty.

The following subsections are proposed:

Section 1105.1(a): This new text defines the term program director, describes the responsibilities required of that individual, and specifies a list of required qualifications that follow.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, the program must have a director that is either a dental hygienist or a dentist who has authority to administer the program according to accreditation standards, and must be a full-time employee whose primary responsibility is the operation, supervision, evaluation and revision of the program, and that the program director must meet qualification requirements specified in regulations that follow.

Problem: If not specified, RDH educational programs will not know that the Committee requires that the program director be a registered dental hygienist or a dentist, the responsibilities of the program director in order to be approved and that specific qualifications for the director follow. Programs may fail to be approved or lose their approval status. Programs would not have a director that meets these standards to ensure that the program continues operation.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for a program director so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements. Students benefit by having a qualified director.

Section 1105.1(a)(1): This new text specifies that an RDH program director must possess a current, active California dental or dental hygiene license with no disciplinary actions.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, the program must have a director who is either a California-licensed dental hygienist or dentist with a current, active license with no disciplinary actions.

Problem: If not specified, educational programs will not know that the Committee requires that the program director hold an active and current California license as a registered dental hygienist or a dentist, and may have had no disciplinary actions on

that license in order to be approved. Programs may fail to be approved or lose their approval status or may have a director who fails to meet the same requirements as faculty members must meet.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for a program director so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements. Students benefit by having a qualified program director who possesses a California license that has not had any disciplinary action.

Section 1105.1(a)(2): This new text specifies that the RDH program director must possess a master's or higher degree from an accredited college or university that includes coursework in dental hygiene, education, public health, or administration.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, the program must have a director that has the appropriate educational background and knowledge to oversee and continue the program's operation.

Problem: If not specified, educational programs will not know that the Committee requires that the program director must have at least a master's degree that includes coursework in dental hygiene, education, public health or administration and programs may fail to be approved or lose their approval status. Programs would not have a director that possesses an educational background sufficient to oversee, implement and administer a dental hygiene educational program to ensure the program's continued operation.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for a program director so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements. Students benefit by having a qualified program director who has the background education at the level required to oversee, implement and administer an RDH educational program.

Section 1105.1(a)(3): This new text specifies that the RDH program director must have two years documented teaching experience in dental hygiene programs.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program must have a director that has verified teaching experience in a dental hygiene program. A program director needs at least this experience in order to effectively carry out his or her responsibilities.

Problem: If not specified, educational programs will not know that the Committee

requires that the program director have two years documented teaching experience in a dental hygiene program and programs may fail to be approved or lose their approval status. Two years is the minimum amount of time required as an instructor in an RDH program to provide the experience needed to be a program director, without being too lengthy or burdensome to program director applicants.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for a program director so that programs can meet the Committee's requirements for approval, students have a qualified program director, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(a)(4): This new text specifies that the RDH program director must have a minimum of 2,000 hours of documented direct patient care experience as a registered dental hygienist or working with a registered dental hygienist.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program must have a director that is either a registered dental hygienist or who has worked with a registered dental hygienist to provide at least 2,000 hours of direct patient care.

Problem: If not specified, educational programs will not know that the Committee requires that the program director have at least 2,000 hours of direct patient care experience as a registered dental hygienist or working with a registered dental hygienist in order to be approved, so programs may fail to be approved or lose their approval status. Programs could have a director that possesses no experience in dental hygiene direct patient care. Two thousand (2,000) hours of direct patient care experience is the equivalent of one year of work, and is a reasonable amount of patient care experience without being burdensome to be expected of a program director. The program director needs to have hands-on patient care experience to be able to translate into the administration of the educational process of an RDH educational program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for a program director so that programs can meet the Committee's requirements for approval, students have a qualified program director, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(a): This new text defines the term "program faculty", describes the responsibilities of faculty, specifies that a college or university bachelor's degree is required, and refers to a list of required qualifications that follow.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, the program must have full- or part-time faculty that have an agreement with the institution to instruct one or more courses within the program's curriculum, advise students, evaluate student

progress, provide didactic or clinical instruction, and possess at least a college or university bachelor's degree, as well as meeting qualification requirements specified in regulations that follow.

Problem: If not specified, RDH educational programs will not know that the Committee requires that faculty have specified responsibilities and meet educational requirements in order to be approved and that specific qualifications for faculty follow, so that programs may fail to be approved or lose their approval status. Programs would not have faculty that meets these standards to ensure that the program continues operation and students receive instruction, advisement, and evaluation by faculty members who are qualified to provide these services to a level that allows for successful completion of the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities and requirements for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive quality instruction and guidance, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(b)(1): This new text specifies that faculty must possess a valid, active California license with no disciplinary actions.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, program faculty must have an active California dental or RDH license or special permit with no disciplinary actions.

Problem: If not specified, RDH educational programs will not know that the Committee requires that faculty hold an active and current California license as a registered dental hygienist or a dentist, and may have had no disciplinary actions on that license in order to be approved. Programs may fail to be approved or lose their approval status, or unlicensed individuals or licensees who possess a revoked, cancelled, or expired license could instruct students.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive instruction from qualified faculty who have not been disciplined, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(b)(2): This new text specifies that faculty must possess a credential that is generally recognized in the field of instruction.

Proposed Change: This text is needed because dental hygiene educational programs

need to know that in order to be approved or retain Committee approval, program faculty must have recognized credentials in the field of instruction.

Problem: If not specified, uncredentialed faculty would be able to instruct students. It is important that faculty be credentialed to ensure that they have the knowledge in how to instruct students who are performing procedures on each other or on patients.

Anticipated Benefits: Educational programs, faculty, students and the Committee benefit from clear requirements for faculty credentialing so that programs can meet the Committee's requirements for approval, students receive quality instruction, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(b)(3): This new text specifies that faculty must possess a degree, professional license or credential that is at least equivalent to the level of instruction that is being taught or evaluated.

Proposed Change: This text is needed because RDH educational programs need to know that in order to be approved or retain Committee approval, program faculty must have a degree, professional license or credential that is at least at the level that the faculty is instructing or evaluating.

Problem: If not specified, unqualified or underqualified faculty would be able to instruct students. It is important that faculty possess education or other credentials showing that faculty who are instructing or evaluating students have at least the same level of knowledge as they are instructing or evaluating.

Anticipated Benefits: Educational programs, faculty, students and the Committee benefit from clear requirements for faculty education, licensing, or credentialing.

Section 1105.1(b)(4): This new text specifies that faculty must complete an educational methodology course every two years.

Problem: Faculty need to have current instruction in educational methodology in order to adequately instruct students according to proven methods so that students learn the skills necessary to successfully complete the program. Every two years is the same timeframe that continuing education is required for licensure, and therefore is a recognized measurement of a common timeframe in which education is required, and allows faculty to use this coursework toward continuation of their current license status.

Anticipated Benefits: Educational programs benefit from clear requirements for faculty so that they may achieve and maintain Committee approval. Students and the public benefit by ensuring that instruction will be effective by using current methods of education.

Section 1105.1(c): This new text specifies that clinical teaching faculty must have direct patient care experience within the previous five years in the area of dental to which he or she is assigned, and provides two methods of qualification that follow.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program's clinical teaching faculty must have experience in direct patient care in the area that he or she is assigned, and may meet this qualification requirement as specified in regulations that follow.

Problem: If not specified, educational programs will not know that the Committee requires that clinical faculty have direct patient care experience within the past five years in the area to which he or she is assigned in order to be approved and that specific methods of meeting this qualification follow, so that programs may fail to be approved or lose their approval status. Programs would not have faculty that have recent direct patient care experience when instructing students to perform procedures on other students or patients, or may have faculty whose experience is ten or twenty years out of date. Students receive instruction from clinical faculty who have recent experience in direct patient care, allowing for successful completion of the program. Experience within the past five years provides for current knowledge of direct patient care for safe practice without being burdensome to prospective clinical faculty.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities and requirements for clinical faculty in regulation so that programs can meet the Committee's requirements for approval, students receive instruction from faculty with recent experience in patient care, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(c)(1): This new text specifies that clinical teaching faculty must have direct patient care experience within the previous five years in the area of dental to which he or she is assigned, which can be met by two years of experience providing direct patient care as a registered dental hygienist.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program's clinical teaching faculty must have experience in direct patient care in the area that he or she is assigned, and may meet this qualification requirement through two years of experience providing direct patient experience as a registered dental hygienist.

Problem: If not specified, educational programs will not know that the Committee requires that clinical faculty have direct patient care experience within the past five years in the area to which he or she is assigned in order to be approved and that this qualification can be met by providing direct patient care for two years as a registered dental hygienist or dentist, so that programs may fail to be approved or lose their

approval status. Programs and faculty would not know how clinical teaching faculty can meet this requirement for direct patient care experience. Two years of experience providing direct patient care is the minimum needed for safe practice without being burdensome to prospective clinical faculty.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clear requirements for clinical faculty in regulation so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements. Students and patients benefit from having safe and qualified clinical faculty instruction.

Section 1105.1(c)(2): This new text specifies that clinical teaching faculty must have direct patient care experience within the previous five years in the area of dental to which he or she is assigned, which can be met by one academic year of clinical teaching experience in a registered dental hygiene program or its equivalent.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program's clinical teaching faculty must have experience in direct patient care in the area that he or she is assigned, and may meet this qualification requirement through one academic year of clinical teaching experience at a registered dental hygienist level program, or its equivalent.

Problem: If not specified, educational programs will not know that the Committee requires that clinical faculty have direct patient care experience within the past five years in the area to which he or she is assigned in order to be approved and that this qualification can be met by one academic year of clinical teaching experience in an RDH level program, and programs may fail to be approved or lose their approval status. Programs and faculty would not know how clinical teaching faculty can meet this requirement. One academic year of clinical teaching experience allows experienced clinical faculty to easily meet this requirement, while providing needed safeguards for instruction that includes experiences on other students and patients. Clinical faculty routinely provide hands-on patient care during student instruction.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clear requirements for clinical faculty in regulation so that programs can meet the Committee's requirements for approval and Committee staff can direct programs to the Section containing those requirements. Students and patients benefit from having safe and qualified clinical faculty instruction.

Section 1105.1(d): This new text specifies that didactic teaching faculty must have certain minimum qualifications that follow.

Proposed Change: This text is needed because RDH educational programs need to

know that in order to be approved or retain Committee approval, the program's didactic teaching faculty must meet qualification requirements specified in regulations that follow.

Problem: If not specified, educational programs will not know that the Committee requires that didactic faculty meet certain qualifications that follow in order to be approved, so that programs may fail to be approved or lose their approval status. Programs and faculty would not know that there are qualifications or how they may be met. Students need to have qualified didactic faculty in order to successfully complete the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for didactic teaching faculty in regulation so that programs can meet the Committee's requirements for approval, students have qualified didactic faculty to provide instruction, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(c)(2): This new text specifies that in lieu of a bachelor's degree or higher from an accredited college or university in the designated dental hygiene area in which the faculty member instructs, didactic teaching faculty may demonstrate current knowledge of the specific subjects being taught, and provides for three methods of demonstration in regulations that follow.

Proposed Change: This text is needed because dental hygiene educational programs need to know that in order to be approved or retain Committee approval, the program's didactic teaching faculty can meet qualification requirements by demonstrating current knowledge of the subjects taught by one of three methods, as specified in regulations that follow.

Problem: If not specified, RDH educational programs will not know that didactic faculty may meet qualification requirements through one of the three methods contained in regulations that follow in order to be approved, so that programs may be approved or retain their approval status. Programs and didactic faculty would not know how to meet their qualification requirements.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for didactic teaching faculty in regulation so that programs can meet the Committee's requirements for approval, students have qualified didactic faculty to provide instruction, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(c)(2)(A): This new text specifies that in lieu of a bachelor's degree or higher from an accredited college or university in the designated dental hygiene area in which the faculty member instructs, didactic teaching faculty may demonstrate current

knowledge of the specific subjects being taught by possessing a degree, professional license or credential at least equivalent to the level of education taught or evaluated.

Proposed Change: This text is needed because dental hygiene educational programs need to know that the program's didactic teaching faculty can meet qualification requirements needed for program approval by possessing a degree, professional license or credential that is equivalent to the level of the subjects taught or evaluated, rather than solely through possession of a bachelor's degree or higher.

Problem: Educational programs and prospective didactic faculty need to know how to meet qualification requirements, so that programs may be approved or retain their approval status. Otherwise, programs and didactic faculty would not know how to meet qualification requirements. Qualified individuals may have specific program knowledge without possessing a bachelor's degree, and would not be able to provide instruction without this provision.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for didactic teaching faculty in regulation so that programs can meet the Committee's requirements for approval, students receive quality instruction by knowledgeable faculty, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(c)(2)(B): This new text specifies that in lieu of a bachelor's degree or higher from an accredited college or university in the designated dental hygiene area in which the faculty member instructs, didactic teaching faculty may demonstrate current knowledge of the specific subjects being taught by having completed twelve hours of continuing education in the designated subject area.

Proposed Change: This text is needed because dental hygiene educational programs need to know that the program's didactic teaching faculty can meet qualification requirements necessary for program approval by completing twelve hours of instruction in the particular subject area being taught. Twelve hours of continuing education provides sufficient knowledge and experience in the subject area without being burdensome, and allows potential faculty the ability to gain the required knowledge while meeting continuing education requirements for continued current licensure.

Problem: Educational programs and prospective didactic faculty need to know how to meet qualification requirements, so that programs may be approved or retain their approval status. Otherwise, programs and didactic faculty would not know how to meet qualification requirements to gain or maintain Committee approval.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for didactic teaching faculty in regulation so that programs can meet the Committee's requirements for approval, students receive quality

instruction from didactic faculty, and Committee staff can direct programs to the Section containing those didactic faculty requirements.

Section 1105.1(c)(2)(C): This new text specifies that in lieu of a bachelor's degree or higher from an accredited college or university in the designated dental hygiene area in which the faculty member instructs, didactic teaching faculty may demonstrate current knowledge with two semester units or three quarter units of dental hygiene education or by having national certification in the designated subject area.

Proposed Change: This text is needed because dental hygiene educational programs need to know that the program's didactic teaching faculty can meet qualification requirements needed for program approval by possessing two semester units, three quarter units, or national certification in the subject area, rather than solely by the possession of a bachelor's degree.

Problem: Educational programs and prospective didactic faculty need to know how to meet qualification requirements, so that programs may be approved or retain their approval status. Otherwise, programs and didactic faculty would not know how to meet didactic faculty qualification requirements. Two semester units or three quarter units are a sufficient number of instructional hours for didactic faculty to learn and demonstrate subject knowledge without being burdensome. National certification shows that faculty has current knowledge of the designated subject area.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated requirements for didactic teaching faculty in regulation so that programs can meet the Committee's requirements for approval, students receive instruction from qualified faculty, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(e): This new text informs users that this subsection contains faculty responsibilities for approved educational programs.

Proposed Change: This text is needed because dental hygiene educational programs need to know that faculty responsibilities may be found in this subsection.

Problem: Educational programs and faculty need to know the responsibilities for faculty within an approved RDH educational program, otherwise programs could fail to achieve or lose program approval status. Faculty need clearly stated responsibilities to ensure quality education within the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive faculty support, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(e)(1): This new text informs users that each faculty member in a Committee-approved RDH educational program is responsible and accountable for instruction and evaluation of students, and implementing curriculum content.

Proposed Change: This text is needed because RDH educational programs and faculty need to know that faculty responsibilities include implementing the program's curriculum as well as the instruction and evaluation of students in order to achieve or retain program approval.

Problem: Educational programs and faculty need to know the faculty is responsibilities within an approved dental hygiene program, otherwise programs could fail to achieve or lose program approval. Faculty need clearly stated responsibilities to ensure that the approved curriculum is taught, as well as instructing and evaluating students.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive quality instruction and evaluation, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(e)(2): This new text informs RDH educational programs and faculty that prior to teaching in the program, faculty must be oriented in the program's curriculum, policies and procedures, strategies for teaching, and student supervision and evaluation.

Proposed Change: This text is needed because RDH educational programs, faculty and students need to know that faculty must be oriented prior to teaching, and what the orientation must include, so that the program clearly communicates faculty responsibilities to teaching faculty and effective instruction takes place.

Problem: Educational programs and faculty need to know the responsibilities for faculty within an approved dental hygiene program, otherwise programs could fail to achieve or lose program approval. Faculty needs an orientation on their responsibilities to ensure consistent and quality education within the program.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive quality instruction, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.1(e)(3): This new text informs RDH educational programs and faculty that each faculty member must be competent in the area in which he or she teaches, as defined in Section 1103(h).

Proposed Change: This text is needed because dental hygiene educational programs, faculty and students need to know that faculty must be competent in the area that he or she teaches, so that effective instruction takes place.

Problem: Educational programs, students and faculty need to know that faculty members are competent to teach the subject areas that they are teaching within an approved dental hygiene program, otherwise programs could fail to achieve approval or lose program approval.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated responsibilities for faculty in regulation so that programs can meet the Committee's requirements for approval, students receive instruction from competent faculty, and Committee staff can direct programs to the Section containing those requirements.

Adopt Section 1105.2 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Required Curriculum)

New Section 1105.2 specifies required curriculum that RDH educational programs must contain in order to be approved by the Committee. These regulations can be used by new RDH educational programs when applying for Committee approval, and will be used by Committee staff to audit existing RDH educational programs after January 1, 2016 to ensure that all approved RDH educational programs contain curriculum that meets the current standards for dental hygiene education in California.

The following subsections are proposed:

Section 1105.2: This new text informs users that this subsection contains required curriculum for approved RDH educational programs.

Proposed Change: This text is needed because RDH educational programs, faculty, and students need to know that required curriculum may be found in this subsection.

Problem: Educational programs, students, and faculty need to know that certain coursework is required within an approved dental hygiene program, otherwise programs could fail to achieve or lose program approval.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated curriculum requirements in regulation so that programs can meet the Committee's requirements for approval, students receive instruction in approved curriculum, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.2(a): This new text informs users that curriculum for approved RDH

educational programs must meet the requirements contained within this subsection.

Proposed Change: This text is needed because RDH educational programs, faculty, and students need to know that curriculum must meet the requirements contained in this subsection.

Problem: Educational programs, students, and faculty need to know that the program's curriculum must meet the requirements contained in this section, otherwise programs could fail to achieve or lose program approval. Students need to know the required elements of the curriculum that they will be learning.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated curriculum requirements in regulation so that programs can meet the Committee's requirements for approval, students receive instruction in the curriculum needed for successful completion of the program, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.2(b): This new text informs users that the curriculum for approved RDH educational programs must include education in the dental hygiene process of care and defines the competencies graduates must possess, including (1) the combination of foundational knowledge, psychomotor skills, communication skills, communication skills, and professional behavior and values required, (2) the standards used to measure students' independent performance in each area, and (3) the evaluation mechanisms used to determine competence.

Proposed Change: This text is needed because dental hygiene educational programs, faculty, and students need to know that required curriculum must include specific elements that describe the competencies that students are expected to achieve, and the standards used to measure and determine competence.

Problem: Educational programs, students, and faculty need to know that the program's curriculum must contain this information regarding required competencies, otherwise programs could fail to achieve or lose program approval. Students and faculty need to know the competencies that students are expected to achieve and how student evaluation will be measured.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated curriculum and competency requirements in regulation so that programs can meet the Committee's requirements for approval, students know the competencies that they will be expected to successfully achieve, and Committee staff can direct programs to the Section containing those requirements.

Section 1105.2(c): This new text informs users that the organization of the curriculum for approved RDH educational programs must create opportunities for adjustments to

and research of advances in dental hygiene practice so that graduates will have the knowledge, skills and abilities to function within the dental hygiene scope of practice.

Proposed Change: This text is needed because dental hygiene educational programs, faculty, and students need to know that the curriculum for an approved program must include the ability to adjust the curriculum according to changes or advances in the profession so that graduates have the current knowledge, skills and abilities needed to practice dental hygiene.

Problem: Educational programs, students, and faculty need to know that the program's curriculum must be flexible enough to adjust to and research advances in dental hygiene practice, otherwise programs could fail to achieve or lose program approval and would not have the ability to make curriculum changes that reflect current dental hygiene practice. Students need to know that they will receive the most current education possible. Faculty need to know that the curriculum may change according to advances in dental hygiene practice.

Anticipated Benefits: Educational programs and students benefit from having a curriculum that can be changed to accommodate advances in dental hygiene practice.

Section 1105.2(d): This new text informs users that the curriculum for approved RDH educational programs must include content in biomedical and dental sciences and dental hygiene sciences and practice of a sufficient depth and scope, sequencing, quality and emphasis to ensure that students achieve competency according to the program's standards, and provides a list of specific content areas that follow.

Proposed Change: This text is needed because RDH educational programs, faculty, and students need to know that required curriculum must include specific content areas in which students will receive instruction, and provides a list of content areas in subsections that follow.

Problem: Educational programs, students, and faculty need to know that the program's curriculum must contain specific subject content, and what this required content consists of, otherwise programs could fail to achieve or lose program approval and students and faculty would not know the required curriculum subjects.

Anticipated Benefits: Educational programs, students and Committee staff benefit from having clearly stated curriculum requirements in regulation so that programs can meet the Committee's requirements for approval, students know the subject areas they will be learning, and Committee staff can direct programs to the Section containing those requirements.

Following are rationale for each subject area of instruction.

Section 1105.2(d)(1): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain specific listed biomedical and dental sciences content, that follows, so that all users know the subject areas of coursework that must be taught within the program's curriculum.

Section 1105.2(d)(1)(A): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in cariology, the dental science that relates to tooth decay, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they know the process of dental caries so that process can be interrupted for preventative dental hygiene care.

Section 1105.2(d)(1)(B): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in dental materials used in the profession, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they are familiar with the materials that they will encounter and use in dental hygiene practice.

Section 1105.2(d)(1)(C): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in general pathology and pathophysiology, the medical sciences that teach students to observe tissue in a diseased state and the mechanisms whereby the disease was caused, so that all users know that these subject areas must be taught within the program's curriculum. Students need this coursework so that they know the causes and how to recognize diseased tissue.

Section 1105.2(d)(1)(D): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in head, neck and oral anatomy, the medical and dental sciences that teach students the anatomy of the areas necessary for dental hygiene practice, so that users know that these subject areas must be taught within the program's curriculum. Students need this coursework so that they become familiar with the muscles, bones, nerves and features of the areas of the human body in which they will work.

Section 1105.2(d)(1)(E): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in immunology, the medical science that teaches students the physiological functioning of the immune system in both health and disease, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they know the functions and malfunctions of the immune system and their impact on health.

Section 1105.2(d)(1)(F): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in oral

embryology and histology, the dental science that teaches students how to apply detailed knowledge about oral anatomy to planning, implementation, and assessment of dental hygiene care, so that all users know that these subject areas must be taught within the program's curriculum. Students need this coursework so that they can provide preventive and therapeutic services that promote oral health.

Section 1105.2(d)(1)(G): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in oral pathology, the dental science that teaches students about gingivitis, periodontitis, and other oral disease, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they know the oral diseases that they will encounter in practicing dental hygiene.

Section 1105.2(d)(1)(H): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in pain management, the medical science that teaches students the physical and psychological processes of managing the patient's pain during dental hygiene treatment, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they know how to manage patients' pain during the performance of dental hygiene procedures.

Section 1105.2(d)(1)(I): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in periodontology, the dental hygiene science that teaches students about the oral tissues supporting the teeth and the diseases and disorders related to it, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they know the result of the formation of dental plaque.

Section 1105.2(d)(1)(J): This new text specifies that in order to be approved or continue approval, an educational program's curriculum must contain instruction in pharmacology, a bridge science that incorporates knowledge from a number of science disciplines, including physiology, biochemistry, cell and molecular biology, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework to study how chemical agents used in the practice of dental hygiene affect biological systems.

Section 1105.2(d)(1)(K): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in radiography, the science of using a beam of energy to safely penetrate teeth and record the images either on film or digitally, so that all users know that this subject area must be taught within the program's curriculum. Students need this coursework to be able to safely take radiographs of patients' teeth.

Section 1105.2(d)(1)(L): This new text specifies that in order to be approved or continue

approval, an RDH educational program's curriculum must contain instruction in dental anatomy and morphology, the dental science that teaches students the anatomy and structure of the tooth, so that users know that these subject areas must be taught within the program's curriculum. Students need this coursework so that they become familiar with the composition and structure of teeth.

Section 1105.2(d)(2): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain specific listed dental hygiene sciences and practice content, that follows, so that all users know the subject areas of coursework that must be taught within the program's curriculum.

Section 1105.2(d)(2)(A): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in community dental health, the dental hygiene science that instructs students in the prevention of oral disease and promotion of oral health especially as it relates to communities, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they become familiar with these concepts and the methods used to employ them.

Section 1105.2(d)(2)(B): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in dental hygiene leadership, the dental hygiene practice that teaches students how to educate patients about proper oral care, wellness and home-care activities, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn to provide these dental hygiene services to the public.

Section 1105.2(d)(2)(C): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in evidence-based decision making and evidence-based practice, the dental hygiene practice that teaches students how to integrate clinical expertise with scientific evidence and patient perspectives to provide high-quality services, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn these skills to provide dental hygiene services to patients.

Section 1105.2(d)(2)(D): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in health informatics, the dental hygiene science that combines information technology and health to develop systems that advance clinical work flow and improve the security of the healthcare system, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn to collect, organize and secure information systems and health-related data.

Section 1105.2(d)(2)(E): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in health

promotion, the dental hygiene practice that promotes optimal health through lifestyle changes, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn how to encourage patients to adopt healthy habits and lifestyle changes that promote optimal health.

Section 1105.2(d)(2)(F): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in infection and hazard control management, the dental hygiene science and practices that teach students how to prevent contamination and the spread of disease, and minimize bio- and other workplace hazards, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn to provide dental hygiene services safely.

Section 1105.2(d)(2)(G): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in the legal and ethical aspects of dental hygiene practice, so that programs and faculty know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn the laws and ethical considerations that relate to dental hygiene practice.

Section 1105.2(d)(2)(H): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in medical and dental emergencies, the area of dental hygiene practice that teaches students the actions to take in the event of a medical or dental emergency, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn to act accordingly in a medical or dental emergency.

Section 1105.2(d)(2)(I): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in oral health education and preventative counseling, the area of dental hygiene practice that teaches students how to educate patients about proper oral care and prevention of oral disease, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn how to provide these dental hygiene services to patients.

Section 1105.2(d)(2)(J): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in patient management, the dental hygiene practice that teaches students proper methods to manage patients during dental hygiene treatment, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn to ensure that patients are comfortable and receive timely care.

Section 1105.2(d)(2)(K): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in

preclinical and clinical dental hygiene, the dental hygiene science and practices that teach students how to perform clinical dental hygiene procedures such as scaling, root planing, and removal of plaque, so that users know that this subject area must be taught within the program's curriculum. Students need this hands-on experience so that they learn to provide dental hygiene clinical services.

Section 1105.2(d)(2)(L): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in provision of services for and management of patients with special needs, the dental hygiene practice that teaches students methods to provide care to special needs patients, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they learn how to safely and effectively provide dental hygiene services to special needs patients.

Section 1105.2(d)(2)(M): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain instruction in research, the dental hygiene science that teaches students the process of conducting scientific research into the dental hygiene process of care and how it impacts patients, so that users know that this subject area must be taught within the program's curriculum. Students need this coursework so that they may learn to conduct research that furthers the provision of dental hygiene services to patients.

Section 1105.2(d)(3): This new text specifies that in order to be approved or continue approval, an RDH educational program's curriculum must contain, at a minimum, instruction in local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage in accordance with the provisions of this subdivision, so that users know that this subject area must be taught within the program's curriculum at least to the standards specified. The text further specifies that an out-of state program that is accredited by the Committee on Dental Accreditation (CODA) or other approved accrediting body who provides instruction according to the requirements of this subsection may be approved to meet the requirements stated in Business and Professions Code section 1909 that requires applicants to have instruction in these three functions in order to be licensed in California.

Proposed Change: This text is needed because dental hygiene educational programs, including those in other states, faculty, and students need to know that required curriculum must include instruction in these three functions as specified in these regulations. Students need this coursework so that they learn to safely administer local anesthesia, nitrous oxide analgesia and periodontal soft tissue curettage to patients.

Problem: Educational programs, students, and faculty need to know that the program's curriculum must contain this instruction, otherwise programs could fail to achieve or lose program approval and students would not receive this instruction that is required for licensure.

Anticipated Benefits: Educational programs in California and in other states, faculty, students and Committee staff benefit from having clearly stated requirements for instruction in local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage in regulation so that students meet licensure qualifications.

Section 1105.2(d)(3(A): This new text specifies that in order to be approved or continue approval, an RDH educational program must provide infection control equipment necessary to that prevent cross-contamination and the spread of disease as specified in regulation section 1005 of the Dental Practice Act, so that users know that this equipment must be provided by the program. If not provided by the program, students would not have the equipment necessary to perform infection control procedures.

Proposed Change: This text is needed because RDH educational programs, faculty, and students need to know that infection control equipment must be provided by the program according to standards established in regulation.

Problem: Educational programs, students, and faculty need to know that the program must provide infection control equipment according to the same requirements as in a dental office or clinic, otherwise programs could fail to achieve or lose program approval and faculty and students may be exposed to infectious disease and contaminants, compromising their safety.

Anticipated Benefits: Educational programs, faculty, and students benefit from having the same requirements for infection control within the program as required in dental practice.

Section 1105.2(d)(3)(B): This new text specifies that in order to be approved or continue approval, an RDH educational program must provide at least one complete nitrous oxide-oxygen unit for each six students and specified safety equipment for each laboratory partner or patient, and specifies requirements for maintenance, replacement and storage of this equipment, so that users know the minimum requirements for equipment used to instruct students in the safe administration of nitrous oxide-oxygen analgesia.

Proposed Change: This text is needed because RDH educational programs, faculty, and students need to have adequate and safe equipment provided by the program in order to learn this required procedure.

Problem: Educational programs, students, and faculty need to know that the program must provide sufficient, adequate and safe equipment according to the same requirements as in a dental office or clinic, otherwise programs could fail to achieve or lose program approval and faculty and students may be exposed to unsafe conditions.

Anticipated Benefits: Educational programs, faculty, and students benefit from having the same requirements for equipment within the program as required in dental practice.

Section 1105.2(d)(3)(C): This new text specifies that in order to be approved or continue approval, an RDH educational program must comply with local, state and federal health and safety laws and regulations.

Proposed Change: This text is needed so that faculty, students and patients are protected by laws and regulations regarding health and safety and programs know that they must comply with all health and safety provisions in law and regulation.

Problem: Educational programs, students, and faculty need to know that the program must comply with all laws and regulations that protect the public, otherwise programs could fail to achieve or lose program approval and faculty's, patients' and students' health and safety may be at risk.

Anticipated Benefits: Educational programs, faculty, patients and students benefit from the program's compliance with health and safety laws and regulations, for public protection.

Section 1105.2(d)(3)(C)(i): This new text specifies that in order to be approved or continue approval, an RDH educational program must ensure that all students have access to the program's hazardous waste management plan for needle, cartridge and medical waste disposal, and storage of oxygen and nitrous oxide tanks.

Proposed change: This text is needed so that RDH educational programs know that they must make this information available to students and students have access to this important safety information, so that faculty and students have access to appropriate methods for hazardous and medical waste disposal and for safe storage of tanks.

Problem: Educational programs, students, and faculty need to know that the program must ensure that students have access to the program's plan for disposal of medical and hazardous waste and for storage of oxygen and nitrous oxide tanks containing volatile gases, otherwise programs could fail to achieve or lose program approval and faculty, patients and students be exposed to hazardous and medical waste or their safety may be at risk due to gas leakage or explosion.

Anticipated Benefits: Educational programs, faculty, patients and students benefit from proper disposal of medical and hazardous waste and proper storage of oxygen and nitrous oxide tanks, so that faculty and students are not exposed to safety hazards.

Section 1105.2(d)(3)(C)(ii): This new text specifies that in order to be approved or continue approval, an RDH educational program must ensure that all students have access to the program's clinic and radiation hazardous communication plan.

Proposed change: This text is needed so that RDH educational programs know that they must make this information available to students, and students have access to this important safety information, so that faculty and students know who to notify in the case of an emergency in the clinic or radiology lab.

Problem: Educational programs, students, and faculty need to know that the program must ensure that students have access to the program's clinic and hazardous communication, otherwise programs could fail to achieve or lose program approval and students would not know the procedure for reporting hazards in the clinic or X-ray lab.

Anticipated Benefits: Educational programs, faculty, patients and students benefit from students who are able to appropriately communicate dangers in the clinic or X-ray lab.

Section 1105.2(d)(3)(C)(iii): This new text specifies that in order to be approved or continue approval, an RDH educational program must provide students with a copy of the program's bloodborne and infectious diseases exposure control plan, which must include emergency needlestick information.

Proposed change: This text is needed so that RDH educational programs know that they must provide this information to students, so that students know the procedures and protocols for handling exposure to bloodborne or infectious diseases, including those resulting from a needlestick.

Problem: Educational programs, students, and faculty need to know that the program must provide students with the program's bloodborne and infectious diseases exposure control plan, which must include emergency needlestick information, otherwise programs could fail to achieve or lose program approval and students would not know the procedure for handling needlestick emergencies or other exposure to bloodborne or infectious diseases.

Anticipated Benefits: Educational programs, faculty, patients and students benefit from students who are informed to take appropriate action in the event of a needlestick or other exposure to pathogens.

Section 1105.2(d)(3)(D): This new text specifies that in order to be approved or continue approval, an RDH educational program must contain didactic, preclinical and clinical instruction in areas of general curriculum content relative to instruction in local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage, as listed in subsections that follow.

Proposed change: This text is needed so that RDH educational programs know what areas of instruction that the general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must include in

order to be approved or to retain approval by the Committee.

Problem: Educational programs, students, and faculty need to know that instruction in the program's general curriculum for local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must include instruction in the following specified areas, otherwise programs could fail to achieve or lose program approval and students would not receive necessary instruction for licensure in the areas specified.

Anticipated Benefits: Educational programs and faculty benefit from a specific list of required elements of instruction that are required for approval. Patients and students benefit by students receiving instruction in all of the subject areas required for the safe and effective administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage before performing these procedures on patients.

Following are rationale for each specified area of general curriculum content:

Section 1105.2(d)(3)(D)(i): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must include instruction in indications and contraindications for all patients for each of the three procedures, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they know the protocols for procedures performed on adult, elderly, pediatric, underweight and obese patients, the observations and actions needed to ensure the safe performance of all three procedures, and how to counteract patients' adverse reactions to each procedure.

Section 1105.2(d)(3)(D)(ii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in head and neck anatomy as it relates to these procedures, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable about the anatomy of the areas of the human body into which they will inject local anesthetic agents, cut periodontal tissue and administer nitrous oxide-oxygen gases.

Section 1105.2(d)(3)(D)(iii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in physical and psychological evaluation procedures that relate to these three functions, so that users know that these subject areas must be

taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the evaluation of patients' physical and psychological ability to undergo each of the procedures, such as taking blood pressure readings, evaluating skin tone, observing anxiety and other considerations before performance of any of the three procedures.

Section 1105.2(d)(3)(D)(iv): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain a review of the muscular, skeletal, circulatory, lymph and other body systems that are related to these three functions, so that users know that these specific subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the body systems that are directly related to the course topics.

Section 1105.2(d)(3)(D)(v): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in the theory and psychological aspects of pain and anxiety control, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the theory and psychology of pain and anxiety control, such as keeping needles out of patients' visual range and psychological strategies to reduce patients' anxiety and lessen the perception of pain during the performance of the three procedures.

Section 1105.2(d)(3)(D)(vi): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in the selection of pain control modalities that relate to these three functions, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they have knowledge in the selection of the appropriate pain control modality depending on the patient and the procedure being performed, to prevent errors or accidents in the administration of pain control agents.

Section 1105.2(d)(3)(D)(vii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in pharmacological considerations such as the

actions of anesthetics and vasoconstrictors, local anesthetic reversal agents and nitrous oxide-oxygen analgesia, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in pharmacological considerations and properties of drugs and agents that they will administer to other students and patients.

Section 1105.2(d)(3)(D)(viii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in recovery from and evaluation of procedures that relate to these three functions, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the evaluation of patients' physical and psychological ability to undergo each of the procedures, such as taking blood pressure readings, evaluating skin tone, observing anxiety and other considerations before, during and after performance of any of the three procedures.

Section 1105.2(d)(3)(D)(ix): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in complications and their management when performing these three functions, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the complications that may arise during or after each of the procedures, and how to manage them safely.

Section 1105.2(d)(3)(D)(x): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in the armamentarium required and current technology available for performing these three functions, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they are knowledgeable in the use of armamentarium and current technology used for each of the procedures.

Section 1105.2(d)(3)(D)(xi): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in techniques of administration of maxillary and mandibular local infiltrations, field blocks and nerve blocks, nitrous oxide analgesia and

performance of periodontal soft tissue curettage, so that users know that these specified subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they become competent in the various techniques required to perform these procedures.

Section 1105.2(d)(3)(D)(xii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in the infection control procedures described in regulations Section 1005 of Title 16, Division 10 pertaining to the dental profession, so that users know that these subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they learn and use the same infection control requirements during instruction as used during the performance of these procedures in dental offices and clinics.

Section 1105.2(d)(3)(D)(xiii): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in patient documentation that meets the standard of care, so that users know that this specified subject area must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they learn the required documentation that must be used during the performance of these procedures to meet the standard of care.

Section 1105.2(d)(3)(D)(xiv): This new text specifies that in order to be approved or continue approval, an RDH educational program's general curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in medical and legal considerations that include patient consent, standard of care and patient privacy, so that users know that these specified subject areas must be taught within the program's general curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Students need this coursework so that they learn the current requirements for patient privacy, patient consent, standard of care, and other medical and legal considerations that are used in practice.

Section 1105.2(d)(3)(E): This new text specifies that in order to be approved or continue approval, an RDH educational program's specific curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain the instruction specified in the following subsections, so that users know that these specific content is required to be taught within the program's curriculum relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft

tissue curettage. Students need to know that this specified coursework must be contained within the program to meet educational requirements for licensure.

Proposed change: This text is needed so that RDH educational programs know that this subsection contains the specific content relative to administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage that is required to achieve and maintain program approval and students receive this specific instruction needed to achieve competence in the three procedures.

Problem: Educational programs, students, and faculty need to know that the program must provide students with the specific content described in the following subsections, otherwise programs could fail to achieve or lose program approval and students would not receive adequate instruction to learn to competently perform the procedures.

Anticipated Benefits: Educational programs benefit by knowing that this subsection contains specific curriculum requirements for instruction in administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage. Faculty, and patients benefit from students who receive sufficient instruction in these procedures to perform them competently.

Section 1105.2(d)(3)(E)(i): This new text specifies that in order to be approved or continue approval, an RDH educational program's specific curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain the instruction in local anesthesia as specified, including 15 hours of didactic and preclinical instruction and 15 hours of clinical instruction, specifies that preclinical instruction must include a minimum of two experiences in each injection, and that clinical instruction must include at least four experiences per injection on four different patients, specifies the fourteen types of injections and specifies that only one of each of the clinical experiences may be on another student. The text specifies that one clinical experience per injection be used to determine clinical competency, and that competency evaluation for each injection be achieved at a minimum of 75%.

Proposed change: This text is needed so that RDH educational programs know that this subsection contains specific content required relative to administration of local anesthesia, including number of hours in didactic, preclinical and clinical instruction, number of preclinical and clinical experiences, how many experiences may be on other students, and the minimum competency required, so that programs, faculty, and students know the number of hours and experiences that students need to complete for administration of local anesthesia, and the minimum level for competency. Fifteen hours of instruction in didactic and preclinical instruction with two experiences per injection followed by fifteen hours of clinical instruction containing four experiences per injection has proven to be effective in achieving student competence in local anesthetic injections. Standard competency levels in educational programs are 75%, the same standard competency level as for other program competencies. The fourteen types of

injections are those most commonly used in dental practice to prevent patients from feeling pain during treatment.

Problem: Educational programs, students, and faculty need to know that the program must provide students with this specific content in the administration of local anesthesia, otherwise programs could fail to achieve or lose program approval and students would not receive adequate instruction to learn to competently perform the injections.

Anticipated Benefits: Educational programs benefit by knowing that this subsection contains specific curriculum requirements for instruction in administration of local anesthesia. Faculty, patients and students benefit by students receiving sufficient instruction and experience in the administration of local anesthesia to allow them to perform it competently.

Section 1105.2(d)(3)(E)(ii): This new text specifies that in order to be approved or continue approval, an RDH educational program's specific curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain instruction in the administration of nitrous oxide-oxygen as specified, including at a minimum, 4 hours of didactic and preclinical instruction and 4 hours of clinical instruction, specifies that preclinical instruction must include a minimum of two experiences on patients, both of which may be on other students, and that clinical instruction must include at least three experiences on patients, and specifies that only one of the clinical experiences may be on another student. The text specifies that one clinical experience per injection be used to determine clinical competency, that each clinical experience be a minimum of twenty minutes, and that competency evaluation must be achieved at a minimum of 75%.

Proposed change: This text is needed so that educational programs know that this subsection contains specific content required relative to administration of nitrous oxide-oxygen analgesia, including number of hours in didactic, preclinical and clinical instruction, number of preclinical and clinical experiences, how many experiences may be on other students, and the minimum competency required, so that programs, faculty, and students know the number of hours and experiences that students need to complete for administration of nitrous oxide-oxygen, and the minimum level for competency. Four hours of instruction in didactic and preclinical instruction with two patient experiences followed by four hours of clinical instruction containing three patient experiences has proven to be the most effective in achieving student competence in administration of nitrous oxide-oxygen analgesia. Twenty minutes of analgesia is sufficient time so that students have the opportunity to learn to perform all of the tasks associated with the administration of nitrous oxide-oxygen analgesia on patients while keeping the timeframe short enough for patients' comfort and safety. Standard competency levels in RDH educational programs are 75%, so the competency level is the same as for other program competencies.

Problem: Educational programs, students, and faculty need to know that the program must provide students with this specific content in the administration of nitrous oxide-oxygen analgesia, otherwise programs could fail to achieve or lose program approval and students would not receive adequate instruction and experience to learn to competently and safely perform the analgesia.

Anticipated Benefits: Educational programs benefit by knowing that this subsection contains specific curriculum requirements for instruction in administration of analgesia. Faculty, patients and students benefit by students receiving sufficient instruction and experience in the administration of nitrous oxide-oxygen analgesia to perform it competently.

Section 1105.2(d)(3)(E)(i): This new text specifies that in order to be approved or continue approval, an RDH educational program's specific curriculum for administration of local anesthesia, nitrous oxide-oxygen analgesia, and periodontal soft tissue curettage must contain the instruction in periodontal soft tissue curettage as specified, including three hours of didactic and preclinical instruction and 3 hours of clinical instruction, specifies that a laser approved for soft tissue curettage may be used during this instruction, that clinical instruction must include at least three experiences on patients, and specifies that only one of each of the clinical experiences may be on another student. The text specifies that one clinical experience be used to determine clinical competency, and that competency evaluation be achieved at a minimum of 75%.

Proposed change: This text is needed so that RDH educational programs know that this subsection contains specific curriculum content required relative to periodontal soft tissue curettage, including number of hours in didactic, preclinical and clinical instruction, number of clinical experiences, how many experiences may be on other students, and the minimum competency required, so that programs, faculty, and students know the number of hours and experiences that students need to complete for periodontal soft tissue curettage and the minimum level for competency. Three hours of didactic and preclinical instruction followed by three hours of clinical instruction containing three patient experiences has proven to be effective in achieving student competence in periodontal soft tissue curettage. Standard competency levels in educational programs are 75%, so the competency level is the same as for other program competencies. A laser approved for soft tissue curettage is commonly used in practice to perform this procedure, so the text allows use of a laser.

Problem: Educational programs, students, and faculty need to know that the program must provide students with this specific content in periodontal soft tissue curettage, otherwise programs could fail to achieve or lose program approval and students would not receive adequate instruction to learn to competently perform the procedure as it is normally performed on patients.

Anticipated Benefits: Educational programs benefit by knowing that this subsection

contains specific curriculum requirements for instruction in periodontal soft tissue curettage. Faculty, patients and students benefit by students receiving sufficient instruction in periodontal soft tissue curettage to perform it competently on patients.

Adopt Section 1105.3 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Changes to an Approved Program)

New Section 1105.3 specifies instances in which an educational program must notify the Committee of certain changes in the program, and the timeframe in which such notification must take place.

The following subsections are proposed:

Section 1105.3(a): This new text specifies that every approved RDH program is required to provide certain information and perform a specific action in a specified timeframe, relative to changes in the program, as listed in following subsections.

Proposed change: This text is needed so that RDH educational programs know that they must provide information relative to changes in the program and notify the Committee of such changes within specified timeframes.

Problem: Educational programs need to know that they must notify the Committee when changes are made that could affect the program's approval status, applicants, or students enrolled in the program, otherwise programs could lose their approval and applicants and students may be impacted.

Anticipated Benefits: Educational programs, applicants and students all benefit by requirements for timely notifying the Committee of certain program changes described in subsections that follow.

Section 1105.3(a)(1): This new text specifies that every approved RDH program is required to provide its legal name and mailing address with the Committee's principal office and to notify the Committee of any change of name or mailing address 30 days before such change by giving both the old and new name or address.

Proposed change: This text is needed so that educational programs know that they must notify the Committee at its principal office at least 30 days before changing the program's name or mailing address by providing both the old and new name or address. Thirty days is sufficient notice, without being burdensome to programs, for the Committee to receive the program's name or address change information, and allows the Committee to have current program name and address information, should the Committee need to contact or communicate with the program. Providing the old name or address allows the Committee to cross-reference and correctly identify the program.

Problem: Educational programs need to know that they must notify the Committee at least 30 days before any changes are made to the program's name or mailing address so that the Committee continues to have current information to identify or contact the RDH educational program.

Anticipated Benefits: Educational programs, applicants and students all benefit by requirements for timely notifying the Committee of changes in the program's name or mailing address, so that programs receive information timely, applicants have correct information to contact or apply for a program, and students are informed of the change of name or address of the program that they are attending.

Section 1105.3(a)(2): This new text specifies that every approved RDH program is required to notify the Committee within ten days of any changes specified in subsections that follow.

Proposed change: This text is needed so that RDH educational programs know that they must notify the Committee within ten days of any changes to the program that may have an impact on the program's ability to function. Ten days is immediate enough for the Committee to receive this information that could adversely affect the program's viability, and take action to withdraw approval, while allowing sufficient time for programs to prepare and mail such notification.

Problem: Educational programs need to know that they must notify the Committee at least ten days within any changes specified in the subsections that follow. The Committee needs to be informed immediately of any of the specified problems that may affect the program's ability to continue to operate so that the Committee is aware of the problem and can monitor or withdraw the program's approval.

Anticipated Benefits: Educational programs, faculty, applicants and students all benefit by clear requirements for timely notifying the Committee of changes that could impact the program's ability to continue operation.

Section 1105.3(a)(2)(A): This new text specifies that every approved RDH educational program is required to notify the Committee within ten days of any change in its fiscal condition that will or may potentially adversely affect applicants or students enrolled in the program.

Proposed change: This text is needed so that RDH educational programs know that they must notify the Committee within ten days of any changes to the program's fiscal condition that may impact the program's applicants or students. Ten days is immediate enough for the Committee to receive this information that could adversely affect the program's viability, and take action to withdraw approval, while allowing sufficient time for programs to prepare and mail such notification.

Problem: Educational programs need to know that they must notify the Committee at least ten days within any change in fiscal condition which could result in applicants or students' not receiving a diploma upon successfully completing the program. The Committee needs to be informed immediately of any fiscal problems that could affect a program's operation, otherwise students could receive substandard education, or the program could continue to receive money from applicants and students while knowing that the program will close before students can graduate.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for a program to timely notify the Committee of changes in its fiscal condition that may adversely impact the program's ability to continue operation.

Section 1105.3(a)(2)(B): This new text specifies that every approved RDH educational program is required to notify the Committee within ten days of any substantive or major changes in the organizational structure, administrative responsibility, or accountability in the program or its affiliated institution that will affect the dental hygiene program.

Proposed change: This text is needed so that educational programs know that they must notify the Committee within ten days of any changes to the program's organizational structure that may have an impact on the program's ability to function. Ten days is immediate enough for the Committee to receive this information that could adversely affect the program's viability, and take action to withdraw approval, while allowing sufficient time for programs to prepare and mail such notification.

Problem: Educational programs need to know that they must notify the Committee at least ten days of a major change in organizational structure, such as the loss of affiliation with an institution or other such major changes. The Committee needs to be informed immediately of any such major changes that may affect the program's ability to continue to operate so that the Committee is aware of the problem and can monitor or withdraw the program's approval.

Anticipated Benefits: Educational programs, faculty, applicants and students all benefit by clear requirements for timely notifying the Committee of major administrative or organizational changes that could impact the program's ability to continue operation.

Section 1105.3(a)(2(C): This new text specifies that every approved RDH educational program is required to notify the Committee within ten days of any increase or decrease in program enrollment of more than 10%.

Proposed change: This text is needed so that educational programs know that they must notify the Committee within ten days of any increase or decrease of more than 10% in the program's enrollment that may have an impact on the program's ability to function. Some programs have only ten dental hygiene students, so a 10% decrease

could affect the program's viability. Conversely, if the program was approved at a capacity of ten students, there may be insufficient learning resources for the addition of even one more student. Ten days is immediate enough for the Committee to receive this information that could adversely affect the program's viability, and review any modifications to the program that would accommodate such an increase or decrease or take action to withdraw approval if necessary, while allowing sufficient time for programs to prepare and mail such notification.

Problem: Educational programs need to know that they must notify the Committee at least ten days within any increase or decrease in program enrollment of more than 10% to ensure that the program has sufficient faculty and learning resources for such an increase, and can monitor a significant decrease in enrollment that could indicate that the dental hygiene program is not viable. The Committee needs to be informed immediately of a substantial change in enrollment, specified by 10%, since this may affect the program's ability to continue to operate or to provide students the minimum level of instruction required, so that the Committee is aware of the problem and can monitor or withdraw the program's approval.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for timely notifying the Committee of changes that could impact the program's ability to continue operation.

Section 1105.3(a)(2)(D): This new text specifies that every approved RDH educational program is required to notify the Committee within ten days of any reduction in program faculty or support staff of more than 10%.

Proposed change: This text is needed so that educational programs know that they must notify the Committee within ten days of any significant reduction in the program's faculty or support staff. Programs are approved on the basis of having adequate staff to instruct students and support learning. Decreasing faculty or support staff may have an impact on the program's ability to function, and 10% is chosen as indicating a significant change. The Committee needs to monitor a program that decreases its' faculty or support staff by 10%, since this is reason for concern. Ten days is immediate enough for the Committee to receive this information that could adversely affect the program's viability, and advise the program to increase faculty and staff or take action to withdraw approval, while allowing sufficient time for programs to prepare and mail the notification.

Problem: Educational programs need to know that they must notify the Committee at least ten days within any reduction in faculty or support staff of more than 10%. The Committee needs to be informed immediately if a program has insufficient faculty or support staff to instruct or support student learning and which may affect the program's ability to continue to operate so that the Committee is aware of the problem and can monitor or withdraw the program's approval.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for timely notifying the Committee of changes that could impact the program's ability to continue operation. The Committee needs to monitor programs who make significant changes in faculty or staff support resources.

Section 1105.3(b): This new text specifies that an approved RDH educational program cannot make a substantive change in the program without prior Committee approval, as specified in subsections that follow.

Proposed change: This text is needed so that RDH educational programs know that they must request and receive the Committee's approval before making any changes to the program that may have an impact on the program's ability to operate.

Problem: Educational programs need to know that they must obtain the Committee's approval before making any changes specified in the subsections that follow. The Committee needs to ensure that approved RDH programs continue to provide the same standard of instruction as that initially approved by the Committee.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for obtaining the Committee's approval before making any changes that could impact the program's ability to provide adequate instruction, so that programs can comply with the requirements, and the Committee can monitor a program that may be in jeopardy of closing.

Section 1105.3(b)(1): This new text specifies that an approved RDH program cannot make a change in the program's location, ownership, or expansion of the program through distance education or by adding another campus without receiving prior Committee approval.

Proposed change: This text is needed so that RDH educational programs know that they must request and receive the Committee's approval before making any change in ownership, location or expansion of the program that may have an impact on the program's ability to operate or on the standards for student instruction.

Problem: Educational programs need to know that they must obtain the Committee's approval before making any changes in location, ownership or program expansion. The Committee needs to ensure that approved programs continue to provide the same standard of instruction as that initially approved by the Committee.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for obtaining the Committee's approval before making any changes that could impact the program's ability to provide adequate instruction to students. The Committee needs to review and approve any such changes to ensure that programs continue to be able to provide a quality RDH educational program.

Section 1105.3(b)(2): This new text specifies that an approved RDH educational program cannot make a substantive change to expand, reduce or eliminate the program's physical facilities without prior Committee approval.

Proposed change: This text is needed so that educational programs know that they must request and receive the Committee's approval before making any changes to the program's physical facilities that may have an impact on the program's ability to provide adequate instruction to students.

Problem: Educational programs need to know that they must obtain the Committee's approval before making any changes specified in the subsections that follow. The Committee needs to ensure that approved programs continue to provide the same standard of instruction, including facility requirements, as initially approved by the Committee.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for obtaining the Committee's approval before making any changes that could impact the program's ability to provide adequate instruction to students.

Section 1105.3(b)(3): This new text specifies that an approved RDH educational program cannot make a substantive change in the program that require a report to the Commission on Dental Accreditation (CODA) or an equivalent accrediting body without prior Committee approval.

Proposed change: This text is needed so that RDH educational programs know that they must request and receive the Committee's approval before making any changes to the program that would require a report to CODA or equivalent accrediting body.

Problem: Educational programs need to know that they must obtain the Committee's approval before making any changes that are significant enough to require a report to CODA or an equivalent accrediting body. The Committee needs to know of any changes that are substantive enough to require a report because CODA and other accrediting agencies are not required to notify the Committee of such changes. The Committee needs to ensure that approved programs continue to provide the same standard of instruction as that initially approved by the Committee.

Anticipated Benefits: Educational programs, applicants and students all benefit by clear requirements for obtaining the Committee's approval before making any changes that could impact the program's ability to provide adequate instruction.

Adopt Section 1105.4 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Appeals Process)

New Section 1105.4 specifies an appeals process that does not exist in current regulation and provides a mechanism by which an RDH educational program may appeal its denial or withdrawal of approval by the Committee, including timeframes.

The following subsections are proposed:

Section 1105.4(a): This new text specifies that if the Committee denies or withdraws approval of a dental hygiene program, the Committee must provide the reasons for withdrawal or denial to the program within 90 days.

Proposed change: This text is needed so that educational programs know that if the Committee denies or withdraws approval of a program, the reasons will be provided in writing within 90 days. This allows sufficient time for the Committee to create and provide a written document that describes the reasons for denial or approval to the program, so the program understands and may correct its deficiencies in order to achieve or regain approval status.

Problem: Educational programs need to know that they will receive a written report from the Committee that describes the reasons for the program's withdrawal or denial of approval, otherwise a program would not know why it was not approved or its approval was withdrawn, and would be unable to correct any deficiencies found by the Committee. The Committee needs to know the length of time that it has to provide its reasons for denial or withdrawal of program's approval so that staff resources can be directed toward the project. The Committee needs to ensure that approved programs provide instruction according to the minimum standards in regulation.

Anticipated Benefits: Educational programs and Committee staff benefit by knowing that the Committee will provide the reasons for a program's denial or withdrawal in writing within a specified timeframe. Students, applicants and consumers benefit by a program's approval being withdrawn or denied if the program fails or would fail to provide adequate instruction in dental hygiene.

Section 1105.4(b): This new text specifies that if the Committee denies or withdraws approval of an RDH educational program, the program must be granted an informal conference with the Committee's Executive Officer and provides for notification of the time and place of the conference and the specific grounds for the action at least 10 days before the action.

Proposed change: This text is needed so that educational programs know that if the Committee denies or withdraws approval of a program, an informal conference with the Committee's Executive Officer must be granted before the effective date of the action and the program must be given at least ten days notification of the time and place of the informal conference as well as the specific grounds for the action. Ten days allows

sufficient time for the program to prepare to answer the Committee's concerns and an informal meeting to be scheduled with the Committee's Executive Officer in order to do so, so that the program may answer questions and correct any deficiencies in a shorter, less formal, more efficient and less expensive process than the formal hearing process.

Problem: Educational programs need to know that they are entitled to an informal conference in which to discuss the reasons for the program's denial or withdrawal and any actions that the program has taken to address the problems before the denial or withdrawal of the program's approval, so the program has an opportunity to describe corrections that the program has made to address any deficiencies found by the Committee. The Committee needs to know the length of time that it has to provide its notice of informal conference to an educational program and the required contents of the notice. The Committee needs to ensure that approved programs provide instruction according to the minimum standards in regulation.

Anticipated Benefits: Educational programs and Committee staff benefit by knowing that the Committee will grant an informal conference and notify the program of the date and location within a specified timeframe, so that programs have an opportunity to resolve the matter through a shorter and less expensive mechanism than a formal hearing.

Section 1105.4(c)(1): This new text specifies that if the Committee denies or withdraws approval of an RDH educational program, the program may contest the Committee's withdrawal or denial of approval by appearing at the informal conference described in Section 1105.4(b), and based on the outcome of the informal conference, request a hearing by means of a written notice to the Committee within 30 days of the postmark date of the letter of the Executive Officer's final decision after the informal conference. The text specifies that hearings be held according to the provisions of Government Code section 11500.

Proposed change: This text is needed so that educational programs know that if the Committee denies or withdraws approval of a program, they may request a hearing within 30 calendar days of the postmark date of the letter of the Executive Officer's final decision after the informal conference, and that such hearing will be held according to the provisions of Chapter 5 (commencing with section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, allowing a program to contest the Committee's denial or withdrawal of approval. Thirty days provides sufficient time for a program to decide whether or not to request a formal hearing, and affords the Committee enough time to initiate the process for a hearing.

Problem: Educational programs need to know the method and timeframe in which to contest the program's denial or withdrawal, so the program has the knowledge to meet the requirements to do so.

Anticipated Benefits: Educational programs benefit by knowing how and when the

program may contest the Committee's denial or withdrawal of approval.

Section 1105.4(c)(2): This new text specifies that if the Committee denies or withdraws approval of an RDH educational program, the program may contest the Committee's withdrawal or denial of approval by notifying the Committee in writing before the informal conference of the program's election to forego the informal conference and to proceed with the hearing process according to the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

Proposed change: This text is needed so that educational programs know that if the Committee denies or withdraws approval of a program, they may forego the informal conference by notifying the Committee in writing before the conference of the program's election to forego the informal hearing and request to proceed with a hearing, and that such hearing will be held according to the provisions of Chapter 5 (commencing with section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, allowing a program to contest the Committee's denial or withdrawal of approval. Notifying the Committee before the informal conference allows the Committee to initiate the hearing process in a timely manner on the program's behalf.

Problem: Educational programs need to know how and when to contest the program's denial or withdrawal of approval, so the program has the knowledge to meet the requirements to do so. The Committee needs to be notified that the program wishes to proceed directly to a formal hearing so it can initiate that process.

Anticipated Benefits: Educational programs benefit by knowing how and when the program may contest the Committee's denial or withdrawal of approval. Committee staff benefits by having notification from the program to initiate the hearing process.

Adopt Section 1106 of Article 3 Division 11 of Title 16 of the California Code of Regulations (Radiation Safety Certificate)

New Section 1106 clarifies that an RDH educational program may issue a radiation safety certificate to a dental hygiene student or graduate who has successfully completed that portion of the coursework as part of their dental hygiene curriculum, allowing that individual to operate dental radiographic equipment in California pursuant to section 1656 of the Business and Professions Code.

The following subsections are proposed:

Section 1106(a): This new text specifies that an approved California RDH educational program may issue a radiation safety certificate to a student or graduate of their program who has successfully completed the radiation safety course as part of the program's curriculum. The text specifies that successful completion means that the

student or graduate has met all course requirements and has obtained passing scores on both written and clinical examinations including theory and clinical application of radiographic techniques.

Proposed change: This text is needed so that educational programs know that they may issue a certificate of radiation safety to a student or graduate of the program who has met all course requirements and passed written and clinical examinations that include theory and clinical applications of radiographic techniques, allowing a program to issue radiation safety certificates to its students who have successfully completed the required coursework and take radiographs as part of their employment.

Problem: Educational programs need the ability to issue a radiation safety certificate that is required for dental professionals to take radiographs in California according to the requirements of Business and Professions Code section 1656 to students who have completed the coursework required for successful completion. Some students work as dental assistants while completing their dental hygiene program, and graduates may be asked to produce a radiation safety certificate, even though this instruction is included within the RDH educational program. It is unfair to require these individuals to complete a separate radiation safety course when they have completed coursework that exceeds the requirements.

Anticipated Benefits: Educational programs, students and graduates benefit by the program's ability to issue radiation safety certificates required for employment in the dental field according to Business and Professions Code section 1656. .

Section 1106(b): This new text specifies that student who has received a certificate in radiation safety from an approved California RDH educational program may operate dental radiographic equipment, including the determination of radiographs, for the purpose of oral radiography according to the provisions of Business and Professions Code 1656.

Proposed change: This text is needed so that students and graduates of educational programs, employers and potential employers know that the holders of a certificate of radiation safety may operate dental radiographic equipment, including the determination of radiographs, for the purpose of oral radiography as part of their employment.

Problem: Employers require a radiation safety certificate according to the provisions of Business and Professions Code section 1656 for anyone taking oral radiographs in California. Dental hygiene students and graduates receive this instruction, including the determination of radiographs, as part of their approved educational program however, many employers ask for a certificate before allowing any operation of radiographic equipment. It is unfair to require these individuals to complete a separate radiation safety course when they have completed coursework that exceeds the requirements.

Anticipated Benefits: Students and graduates, as well as Committee staff benefit by the clarification that an approved RDH program may issue radiation safety certificates that are required for operation of dental radiographic equipment according to Business and Professions Code section 1656.

Factual Basis/Rationale

The DHCC is the regulatory board responsible for licensing and regulation of the dental hygiene profession in California.

Business and Professions Code Section 1905(a)(1) gives the Committee the authority to evaluate all dental hygienist educational programs that apply for approval, and grant or deny approval of those applications in accordance with regulations adopted by the Committee. These regulations provide needed specificity and clarity as to the requirements for educational courses to be approved or retain approval by the Committee, including an appeals process.

Business and Professions Code Section 1905(a)(2) gives the Committee the authority to withdraw or revoke its prior approval of a registered dental hygienist educational programs in accordance with regulations adopted by the Committee. These regulations provide needed clarity as to the conditions and causes for educational courses to have approval withdrawn or revoked by the Committee, including an appeals process.

Business and Professions Code Section 1905(a)(3) gives the Committee the authority to review and evaluate all registered dental hygienist applications for licensure to ascertain whether the applicant meets the appropriate licensing requirements specified by statute and regulations. These regulations provide needed clarity as to the requirements that educational programs for registered dental hygienists must meet in order for its graduates to be licensed by the Committee.

Business and Professions Code Sections 1905(a)(9) and 1906(a) authorize the Committee to adopt, amend and revoke rules and regulations to implement the requirements of Article 9.

These regulations provide definitions, criteria and requirements for approval, and withdrawal of approval, of RDH educational programs by the Committee. By clearly specifying the requirements for approval, RDH educational program applicants may use these regulations to ensure that their programs meet the necessary requirements for approval by the Committee, and existing programs may use them to review their programs to ensure that their programs continue to meet the requirements for approval. The Committee has placed standards in these regulations that ensure that consumers are protected through instructional requirements for students and graduates of

approved dental hygiene educational programs.

Underlying Data

1. Minutes of December 6-7, 2013 DHCC Meeting
2. American Dental Education Association – ADEA Competencies for Entry into the Allied Dental Professions (As approved by the 2011 ADEA House of Delegates)

Business Impact

This regulation will not have a significant adverse economic impact on businesses, unless those businesses are new dental hygiene educational programs. It is unknown how many businesses will apply to be dental hygiene educational programs, due to the laboratory and clinical facilities and equipment needed to adequately instruct students in the safe performance of dental hygiene functions. Students currently pay tuition costs from $10,000 to $80,000 for a dental hygiene educational program, depending on whether it is a two- or a four-year program, public or private institution, and if the student is located in-state or comes from out-of-state. Programs may instruct as few as ten (10) or as many as thirty (30) students annually; therefore programs receive from $50,000 to $2,400,000 per year in tuition costs paid by students, not including books, uniforms and other supplies. This regulation would require that educational programs meet specified requirements in order to be approved by the Committee, and to provide specified organization, facilities, curriculum, equipment and faculty to instruct in the procedures performed by a dental hygienist. Existing programs absorb the costs of administering the course as operating expenses. New programs must demonstrate the viability of operating a dental hygiene educational program through the requirements contained in this regulation, and meet the requirements specified that existing programs currently meet. Students' tuition costs for the program may potentially be reduced due to more availability of educational programs.

Economic Impact Assessment

This regulatory proposal will have the following effects:

- It will create jobs within the State of California when businesses decide to open new dental hygiene educational programs. It will not eliminate jobs because existing dental hygiene programs currently meet the requirements contained in these regulations.

- It will create new businesses by clarifying the requirements by which new dental hygiene educational programs may be approved, making it easier for businesses

to apply for approval. It will not eliminate existing businesses within the State of California because the proposal specifies requirements for educational programs that existing programs met or exceeded to become approved.

- It will not affect the expansion of businesses currently doing business within the State of California because existing educational programs are not prohibited from expanding to serve more students, and these regulations do not place any restrictions on expansion of the business of dental hygiene education.

- This regulatory proposal benefits the health and welfare of California residents who will continue to be protected from individuals who have not learned or demonstrated the ability to safely practice dental hygiene procedures on patients.

- This regulatory proposal benefits California consumers by allowing dental hygiene students to become licensed in California, or become licensed sooner, due to increased availability of required dental hygiene program instruction.

- This regulatory proposal enhances worker safety in approved programs and other places where dental hygiene is performed by students who have received instruction so they do not endanger workers.

- This regulatory proposal benefits the state's environment because it requires that students be instructed in California's standards for safe storage of oxygen and nitrous oxide tanks, hazardous waste management, infection control, and disposal of needles, cartridges, and medical waste before performing dental hygiene procedures involving the use of such equipment and materials.

Specific Technologies or Equipment

This regulation would not mandate the use of specific technologies or equipment.

Consideration of Alternatives

No reasonable alternative to the regulation would be either more effective in carrying out the purpose for which the action is proposed or would be as effective and less burdensome to affected private persons and equally effective in achieving the purposes of the regulation in a manner that ensures full compliance with the law being implemented or made specific.

Set forth below are the alternatives which were considered and the reasons each alternative was rejected:

Alternative No. 1: Do not pursue regulations. This is not reasonable because the DHCC needs regulations to clarify requirements for approval and withdrawal of approval of an educational program in dental hygiene. These regulations will make it easier for new educational programs to be approved to provide instruction in dental hygiene, and thereby make the instruction more available to students so that there are more dental hygienists available to provide care to California consumers. These regulations include requirements for notification to the Committee of substantive changes in a program, and an appeals process for programs whose approval is denied or withdrawn, so that programs that do not meet at least these minimum requirements may correct their deficiencies and appeal the Committee's denial or withdrawal of approval.

STATE OF CALIFORNIA
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MEMORANDUM

DATE	April 2, 2014
TO	Dental Board Members
FROM	Sarah Wallace, Legislative & Regulatory Analyst
SUBJECT	**Agenda Item 2(B):** Discussion and Possible Action Regarding Providing Formal Comments Regarding Scope of Practice Concerns During the 45-Day Public Comment Period for the DHCC's Regulatory Proposal to Adopt California Code of Regulations, Title 16, §§ 1103, 1105, 1105.1, 1105.2, 1105.3, 1105.4, and 1106 Relative to Educational Program Requirements

Board Action Requested:

Following the Dental Board of California's (Board) discussion and consideration of concerns relating to the Dental Hygiene Committee of California's (DHCC) regulatory proposal relating to dental hygiene educational program requirements, staff requests the Board take action to direct staff to submit a letter to the DHCC on or before April 28, 2014 providing comment on the Board's concerns with proposed Sections 1103, 1105, and 1106.