



**FULL BOARD MEETING**  
**Thursday, February 26, 2015**



**Double tree by Hilton**  
**1646 Front Street**  
**San Diego, CA 92101**



**BOARD MEETING AGENDA**  
**Thursday, February 26, 2015**

Doubletree by Hilton  
1646 Front Street  
San Diego, CA 92101  
619-239-6800 (Hotel) or 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

During this two-day meeting, the Dental Board of California will consider and may take action on any of the agenda items. It is anticipated that the items of business before the Board on the first day of this meeting will be fully completed on that date. However, should items not be completed, it is possible that it could be carried over and be heard beginning at 8:30 a.m. on the following day. Anyone wishing to be present when the Board takes action on any item on this agenda must be prepared to attend the two-day meeting in its entirety.

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](http://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, MPA, 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.

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

# Thursday, February 26, 2015

## 9:00 A.M. FULL BOARD MEETING – OPEN SESSION

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

### **CLOSED SESSION – FULL BOARD**

Deliberate and Take Action on Disciplinary Matters

The Board will meet in closed session as authorized by Government Code §11126(c)(3).

### **CLOSED SESSION – FULL BOARD**

Executive Officer Performance Evaluation

The Board will meet in closed session as authorized by Government Code §11126(a)(1).

### **CLOSED SESSION – LICENSING, CERTIFICATION, AND PERMITS COMMITTEE**

Issuance of New License(s) to Replace Cancelled License(s)

The Committee will meet in closed session as authorized by Government Code §11126(c)(2) to deliberate on applications for issuance of new license(s) to replace cancelled license(s).

### **RETURN TO OPEN SESSION – FULL BOARD**

2. Approval of the November 6-7, 2014 Board Meeting Minutes
3. President's Report
4. Update from the Dental Hygiene Committee of California (DHCC)
5. Discussion and Possible Action Regarding the Dental Hygiene Committee of California (DHCC) Proposed Dental Hygiene Regulations Relative to Definitions (CCR, Title 16, Division 11, §1101)
6. Discussion and Possible Action Regarding Appointments to the Dental Assisting Council
7. Discussion and Possible Action Regarding Proposed Occupational Analysis for Registered Dental Assistants (RDA), Registered Dental Assistants in Extended Functions (RDAEF), Orthodontic Assistants (OA), and Dental Sedation Assistants (DSA).

### **COMMITTEE/COUNCIL MEETINGS – SEE ATTACHED AGENDAS**

- DENTAL ASSISTING COUNCIL  
See attached Dental Assisting Council agenda.
- EXAMINATION COMMITTEE  
See attached Examination Committee agenda.

- **PRESCRIPTION DRUG ABUSE COMMITTEE**  
See attached Prescription Drug Abuse Committee agenda.
- **ACCESS TO CARE COMMITTEE**  
See attached Access to Care Committee agenda.
- **LICENSING, CERTIFICATION AND PERMITS COMMITTEE**  
See attached Licensing, Certification and Permits agenda.
- **ENFORCEMENT COMMITTEE**  
See attached Enforcement Committee agenda
- **LEGISLATIVE AND REGULATORY COMMITTEE**  
See attached Legislative and Regulatory Committee agenda.

### **RETURN TO OPEN SESSION – FULL BOARD**

8. **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)).
9. **Recess**



## **BOARD MEETING MINUTES**

**November 6-7, 2014**

Sportsmen's Lodge Events Center - Waterfalls Room  
12833 Ventura Blvd., Studio City, CA 91604

**DRAFT**

### **Members Present**

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, MA

### **Members Absent**

Stephen Casagrande – absent Friday

### **Staff Present**

Karen Fischer, MPA, Executive Officer  
Sarah Wallace, Assistant Executive Officer  
Teri Lane, Enforcement Chief  
Michael Placencia, Legislative and Regulatory Analyst  
Jana Adams, Staff Services Analyst  
Spencer Walker, Senior Legal Counsel

## **Thursday, November 6, 2014**

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

President Fran Burton called the meeting to order at 9:03 a.m. Judith Forsythe, Secretary, called the roll and a quorum was established. The Board immediately went into Closed Session.

### **CLOSED SESSION – FULL BOARD**

### **RETURN TO OPEN SESSION – FULL BOARD**

### **2. Approval of the August 25-26, 2014 and October 17, 2014 Board Meeting Minutes**

It was pointed out that on the August 25-26 meeting minutes, page one, Agenda Item number three the word "drug" was misspelled. Motioned/Seconded/ Carried

(M/S/C) (Afriat/Morrow) to approve the August 25-26, 2014 meeting minutes as amended. There was no public comment. The motion passed unanimously. M/S/C (Whitcher/McKenzie) to approve the October 17, 2014 Board Meeting Minutes. The motion passed with King and Afriat abstaining.

**3. President's Report**

President Fran Burton gave an overview of the accomplishments made by the Dental Board over the past year including lots of work on the report due to the Legislature known as Sunset Review, she has attended meetings of the Prescription Drug Task Force and, along with the Executive Officer, participated in a conference call with the Director of the Department of Consumer Affairs who gave an update on the Departments activities. She thanked Greg Salute, Deputy Attorney General, for his service and commitment to the Dental Board and presented him with a plaque. Ms. Burton warmly thanked the Vice President, Secretary, Board members, Counsel and staff for all of their hard work during the past year.

**4. Update from the Dental Hygiene Committee of California (DHCC)**

Lori Hubble, Executive Officer of the Dental Hygiene Committee of California (DHCC) gave an overview of the DHCC activities including the hiring of Guadalupe Castillo as their Legislative and Regulatory Analyst. She reported that they have completed their Sunset Review and the third edition of their newsletter will be available on their website soon.

**5. Discussion and Possible Action Regarding Western University Dental School Approval**

Dr. Morrow gave a report prepared by the subcommittee of himself and Dr. Le. He reported that Executive Officer Karen Fischer and Dr. Le, and he met with the dean and faculty of Western University of Health Sciences College of Dental Medicine on November 5, 2014. Student representatives were interviewed. M/S/C (Le/Forsythe) to accept the findings of the Commission on Dental Accreditation (CODA) of approval without reporting requirements and grant final approval of the Western University of Health Sciences College of Dental Medicine. There was no public comment. The motion passed unanimously.

**COMMITTEE/COUNCIL MEETINGS**

**CLOSED SESSION – LICENSING, CERTIFICATION, AND PERMITS COMMITTEE**

**RETURN TO OPEN SESSION – FULL BOARD**

**6. Public Comment of Items Not on the Agenda**

There was no further public comment.

**7. Recess**

The meeting recessed at 6:02 p.m.

## Friday, November 7, 2014

### 8. Call to Order/Roll Call/Establishment of Quorum

Fran Burton, President, called the meeting to order at 9:00 a.m. Ms. Forsythe, Secretary, called the roll and a quorum was established. The Board immediately went into closed session. Dr. Stephen Casagrande was absent.

### CLOSED SESSION – FULL BOARD

### RETURN TO OPEN SESSION – FULL BOARD

### 9. Executive Officer's Report

Karen Fischer, Executive Officer, gave an overview of the activities of the Dental Board over the past quarter. She reported that during Closed Session the Board voted to extend her term as Executive Officer for the coming year. Ms. Fischer began to report on the Foreign Dental School application from the Republic of Moldova. Dr. Dominicis recused himself and left the room. Ms. Fischer reviewed the Board's responsibilities for approving a foreign dental school found in Business and Professions Code Section 1636.4 and the California Code of Regulations Sections 1024.3-1024.12 and requested the Board President appoint a subcommittee to work with staff to review the information currently received. Retired Senator Richard Polanco gave a brief history of his background and relationship to the school in Moldova as well as information about the country itself. He commented that he appreciates the cooperative and collaborative effort of the Dental Board through this process. Susan Lopez, California Dental Hygienists Association (CDHA) commented that she would like to know if the school has applied for accreditation in any other state. Senator Polanco replied no, they have not. Fran Burton, President stated the two person subcommittee will consist of Dr. Whitcher and herself.

### 10. Budget Report

Ms. Fischer gave an overview of the information provided. She stated that the expenditure reports were not available for this meeting as they were being revised to reflect the Governor's new budget but will be provided at the February meeting. Mr. Afriat asked what the total costs are for holding a Board meeting. Ms. Fischer stated that we will put together a report for a future meeting. There was no public comment.

### 11. Report on the October 1, 2014 Meeting of the Elective Facial Cosmetic Surgery Permit Credentialing Committee; Discussion and Possible Action to Accept Committee Recommendations for Issuance of Permits

Dr. Whitcher reported that the committee met on October 1, 2014 via teleconference to review one application for issuance of a permit. The committee tabled the review of the application until the applicant could correct the application's deficiencies. There was no public comment.

### 12. Presentation by Dick Gregory, DDS Regarding Apple Tree Dental Delivery Model

Dr. Whitcher gave an overview of the information provided. Dr. Gregory introduced Dr. Michael Helgeson, founder and Chief Executive Officer (CEO) of Apple Tree

Dental. Dr. Helgeson provided his background information as well as how and why Apple Tree Dental started. He gave a presentation about how the Apple Tree Dental Model operates. Lisa Okamoto, California Dental Hygienists Association (CDHA) commented that they have been very supportive of the Apple Tree Model however; concerns have been expressed by some of the Registered Dental Hygienists in Alternative Practice (RDHAP) who are already established in residential facilities. Ms. Burton suggested she talk to Dr. Helgeson after the meeting.

**13. The Examination Committee and the Dental Assisting Council Joint Meeting Report**

Ms. Wallace reported that staff will be moving forward with the initiation of an Occupational Analysis of the Registered Dental Assistant Profession. In the interim, staff will work with psychometricians to conduct an interim validation of the Registered Dental Assistant (RDA) examination. She reported that a subcommittee of Judith Forsythe and Tamara McNealy was appointed to work with staff on a plan moving forward. Staff will also be developing a plan for communication with the Dental Program Directors including a letter summarizing the meeting events and the plan moving forward. M/S/C (Forsythe/King) to accept the report. The motion passed unanimously.

**14. Dental Assisting Council Report**

Teresa Lua, Chair, gave a report on the Council meeting. M/S/C (Burton/Morrow) to accept the report. The motion passed unanimously. Spencer Walker, Senior Legal Counsel, commented that it is not necessary to have a motion to accept a meeting report.

**15. Examination Committee Report**

Dr. Morrow, Vice Chair, gave a report on the Examination Committee meeting.

**16. Prescription Drug Abuse Committee Report**

Dr. Stewart, Chair, gave a report on the Prescription Drug Abuse Committee meeting. M/S/C (Burton/Whitcher) to accept the mission statement: "Our mission is to respond to the rise in prescription drug overdoses by developing strategies for safe but effective prescribing methods within the practice of dentistry." The motion passed unanimously.

**17. Access to Care Committee Report**

Dr. Le, Chair, gave a report on the Access to Care Committee meeting. M/S/C (Burton/Afriat) to accept the mission statement: "The Committee will maintain awareness of the changes and challenges within the dental community and serve as a resource to the Dental workforce by identifying areas where the Board can assist with workforce development, including the dental loan repayment program, and publicizing such programs to help underserved populations, exploring methods for promoting diversity within the dental community through surveys and workforce data to inform the Board as to existing workforce capacity." The motion passed unanimously.

**18. Legislation and Regulations:**



**A. 2015 Tentative Legislative Calendar - Information Only.**

Michael Placencia, Legislative and Regulatory Analyst gave an overview of the information provided.

**B. End of Two-Year Legislative Session Summary for 2013-2014:**

Mr. Placencia gave an overview of the information provided. M/S/C (Burton/Forsythe) to adopt the Legislative Summary and direct staff to post the report on the Board's website.

**C. Update on Pending Regulatory Packages:**

Mr. Placencia gave an overview of the information provided. Dr. William Langstaff, California Association of General Dentists (CAGD) commented that they submitted a letter to the Board regarding Business and Professions Code Section 726. CAGD is requesting that the Board amend the language during Sunset Review to include all licensed dental providers along with licensed medical providers in the exemption.

**D. Discussion and Possible Action Regarding Legislative Proposals for 2015**

Mr. Placencia gave an overview of the information provided. M/S/C (Dominicis/Forsythe) to accept the proposed revised language for Sections 1695 and 1695.1 which would replace the former name "Dental Examiners" with "Dental Board" and direct staff to prepare the proposal for submission to the Committee for inclusion in the 2015 healing arts boards omnibus bill. There was no public comment. The motion passed unanimously.

**E. Discussion of Prospective Legislative Proposals:**

Dr. Morrow commented that the standards within the California Code of Regulations relating to Dental Schools and the Institutional standards were last updated 12-15 years ago therefore when we are assessing new programs we are using these old standards. Dr. Morrow asked that the Board look into updating its standards for approving foreign dental schools. There was discussion regarding equivalency standards. Ms. Fischer suggested this be brought up during the discussion of regulatory changes. Dr. Whitcher mentioned that an update of General Anesthesia regulations is also in order.

**19. Licensing, Certification, and Permits:**

Dr. Whitcher, Chair of the Licensing, Certification and Permits (LCP) Committee reported that after Closed Session review of the submitted documentation, the committee recommended issuing a license to replace a cancelled license to applicant MW pending passing the Law and Ethics examination. M/S/C (Afriat/King) to accept the LCP committee's recommendation. There was no public comment. The motion passed unanimously.

**A. Discussion and Possible Action to Initiate a Rulemaking to Implement, Interpret, and Make Specific Business and Professions Code §1635.5 Relating to Licensure by Credential Application Requirements**

Dr. Whitcher gave a brief summary of the information provided. Ms. Burton tabled the item until the next Board Meeting to give Board members and legal staff time to review the proposed language.

**B. Discussion and Possible Action Regarding the Petition to Amend California Code of Regulations, Title 16 §1028.3 Relating to Licensure by Residency Requirements**

Dr. Whitcher gave an overview of the information provided. M/S/C (Burton/Afriat) to not move forward with a regulation amendment at this time. There was discussion regarding the intent of the legislation. Mr. Brandon Clary, representing Dr. Fred Horowitz, discussed arguments in favor of Dr. Horowitz. There was no further comment. The motion passed with Ms. King abstaining.

**20. Election of Board Officers for 2015**

Dr. Stewart nominated Ms. Burton to remain President of the Dental Board of California. Dr. Whitcher seconded the nomination. Ms. Burton accepted the nomination. There were no additional nominations. The Board unanimously elected Ms. Burton to serve a second term as President of the Dental Board of California. Ms. Burton nominated Dr. Whitcher to remain Vice-President of the Dental Board of California. Ms. Forsythe seconded the nomination. Dr. Whitcher accepted the nomination. There were no other nominees. The Board unanimously elected Dr. Whitcher Vice-President of the Dental Board of California for a second term. Dr. Whitcher nominated Judy Forsythe to remain Secretary of the Dental Board of California. Ms. King seconded the nomination. Ms. Forsythe accepted the nomination. There were no other nominees. The Board unanimously elected Ms. Forsythe to a second term as Secretary of the Dental Board of California.

**21. Public Comment of Items Not on the Agenda**

Michael Simmons, DDS, researcher and educator at UCLA commented that he has concerns regarding dentists diagnosing and treating sleep disorders with little to no training in this area as well as non-dentists providing equipment and diagnosis. He spoke about the number of accredited facilities and credentialed dentists in California. These facilities and dentists have been accredited or credentialed by the American Academy of Dental Sleep Medicine which is recognized by the American Academy of Sleep Medicine. Dr. Simmons cited several statistics related to percentages of the population that are affected by sleep disorders to show the need for more dentists to become educated on this subject. He proposed creating standards of continuing education requirements for sleep disorder education. He stated that dentists are the perfect candidates for sleep disorder education because of their knowledge of facial structure and airway anatomy. Dr. Whitcher clarified that Dr. Simmons is asking for a future agenda item to discuss diagnosis and management of sleep disorders by dentists. Dr. Simmons added yes, and he suggested spelling out the criteria by which dentists should be practicing. Dr. Alan Felsenfeld, Professor of Oral and Maxillofacial Surgery at the UCLA School of Dentistry and Medical Center commented that he treats sleep apnea patients and supports Dr. Simmons and his efforts to educate dentists on this subject. He explained that those not educated properly about the disease may make the mistake of treating all patients that snore for sleep apnea when this may

not be the case. He reiterated that for the protection of the public, dentists need to be educated about sleep disorders.

**22. Future Agenda Items**

There were no further agenda items requested.

**23. Board Member Comments for Items Not on the Agenda**

There were no comments.

**24. Adjournment**

The meeting was adjourned at 1:50 p.m.

DRAFT



## MEMORANDUM

<b>DATE</b>	January 28, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>Agenda Item 3:</b> Presidents Report

The President of the Dental Board of California, Fran Burton, MSW, will provide a verbal report.



## MEMORANDUM

<b>DATE</b>	January 28, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>Agenda Item 4:</b> Update from the Dental Hygiene Committee of California (DHCC)

A representative from the Dental Hygiene Committee of California will provide a verbal report.



## MEMORANDUM

<b>DATE</b>	February 18, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Sarah Wallace, Assistant Executive Officer Dental Board of California
<b>SUBJECT</b>	<b>Agenda Item 5:</b> Discussion and Possible Action Regarding the Dental Hygiene Committee of California (DHCC) Proposed Dental Hygiene Regulations Relative to Definitions (California Code of Regulations, Title 16, Division 11, §1101)

### **Background:**

At its December 2014 meeting, the Dental Hygiene Committee of California (DHCC) voted to initiate a rulemaking relative to definitions of dental hygiene terms. Lori Hubble, DHCC Executive Officer, delivered a letter to Karen Fischer, the Board's Executive Officer, on December 11, 2014 requesting the Board's review and comment regarding the proposed regulatory package in compliance with Business and Professions Code (Code) Section 1905.2. A copy of the letter is included with this agenda item.

Code Section 1905.2 specifies that recommendations made 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 within 30 days of the DHCC's request. The 90 day deadline for the Board to respond to the DHCC's letter is March 11, 2015.

### **Subcommittee Recommendations:**

Upon receipt of the letter from the DHCC, Board President Fran Burton appointed a subcommittee of Bruce Witcher, DDS and Katie Dawson, RDHAP to work with staff to review the proposed language. Copies of the DHCC's initial rulemaking documents have been included with this agenda item. The subcommittee met via teleconference to discuss its findings. Of the 22 proposed definitions, the subcommittee commented on only the following four:

- (1) Subdivision (c) of the DHCC's proposed language defines "assessment" as the systematic collection, analysis, and documentation of the oral and general health

status and patient needs through a variety of methods, including choice of radiographs, diagnostic tools, and instruments.

The subcommittee recommended the definition be amended to include:

“...utilized within the scope of dental hygiene practice and pursuant to Business and Professions Code Section 1910.5.” There are limitations on the use of diagnostic tools and instruments by a registered dental hygienist; therefore the subcommittee’s proposed amendment would address concerns that the definition could be interpreted to be outside the scope of a registered dental hygienist and provide clarification to the reader.

- (2) Subdivision (h) of the DHCC’s proposed language defines “dental hygiene care plan” as an organized presentation or list of interventions to promote health or prevent disease of the patient’s oral condition; plan is designed by the dental hygienist based on assessment data, dental hygiene diagnosis, and consists of services within the scope of dental hygiene practice.

The subcommittee did not find any issues related to scope of practice but did recommend the DHCC consider adding a definition for “dental hygiene diagnosis” since it is not currently defined in the Code or in regulation and would provide clarification and consistency.

- (3) Subdivision (j) of the DHCC’s proposed language defines “dental hygiene therapeutic interventions” as the specific procedure or set of procedures designed to intervene in the disease process to produce a therapeutic benefit.

The subcommittee recommended amending the definition as follows: ““Dental hygiene therapeutic interventions” as the specific procedure or set of procedures, provided within the scope of dental hygiene practice, designed to intervene in the disease process to produce a therapeutic benefit.” The subcommittee found that other definitions included qualifying statements to indicate that procedures are limited to the dental hygiene scope of practice and determined that this recommended amendment would provide clarity and consistency.

- (4) Subdivision (r) of the DHCC’s proposed language defines “Refer” to mean through assessment, diagnosis, or treatment, it is determined that services are needed beyond the practitioner’s competence or area of expertise.

The subcommittee recommended amending the definition as follows: ““Refer” means through dental hygiene assessment, diagnosis, or treatment, it is determined that services are needed beyond the practitioner’s competence or area of expertise.” The subcommittee made this recommendation as it would address concerns that the definition could be interpreted to be outside the scope of a registered dental hygienist and provide clarification to the reader.

Board Action Requested:

The Board may take action to approved, modify, or reject the subcommittee’s recommendations. Should the Board modify or reject the subcommittee’s recommendation, staff requests the Board provide a rationale. Additionally, the Board

may direct staff to notify the DHCC of the Board's recommendations in response to the DHCC's letter no later than March 11, 2015.

**California Dental Association (CDA) Concerns:**

Subsequent to the subcommittee's meeting to discuss its findings, the Board's Executive Officer, Karen Fischer, received a letter from Mayer Brown law firm representing the CDA. The letter, dated February 12, 2015, referenced a previous letter submitted in February 2014 noting CDA's concerns that certain regulatory definitions proposed by the DHCC exceeded the DHCC's authority by seeking to define the scope of dental hygiene practice.

The most recent letter asserts that the jurisdictional concern relating to DHCC's proposed regulations has not been resolved and urges the Dental Board to instruct the DHCC to remove the improper definitions and reissue new proposed rules that are compliant with California law. Staff has provided copies of the February 2014 and the February 2015 letters from Mayer Brown law firm with this agenda item.

Board Legal Counsel has reviewed the letters received from Mayer Brown and has determined that the DHCC's proposed definitions do not pose an issue with scope of practice or with jurisdictional authority between the Board and the DHCC. Definitions do not grant authority to do something because authority must be specifically articulated in statute itself.

**Board Action Requested:**

No action is necessary.





December 11, 2014

Karen Fischer, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

**COPY**

Dear Ms. Fischer,

Pursuant to Business and Professions Code Section 1905.2, attached are proposed regulations that contain definitions used in the practice of dental hygiene in California that were approved by the Committee at its December 5 – 6, 2014 meeting.

These proposed regulations are similar to the definitions contained in the Dental Practice Act, California Code of Regulations, Division 10, Section 1000, relating to the practice of dentistry. Our proposed definitions clarify terms used within Business and Professions Code Sections 1902, 1908, 1909, 1910, 1911, 1915, 1917.3, 1929, 1930, and 1955 relating to the practice of dental hygiene.

Business and Professions Code Section 1905.2 requires the Board to respond within 90 days of receipt of this letter. The Committee requests that the Dental Board also provide the reasoning for any adverse comments with any such comments. The Dental Hygiene Committee of California anticipates holding a public hearing on the proposed regulations in March 2015.

Sincerely,

A handwritten signature in cursive script that reads "Lori Hubble".

Lori Hubble, Executive Officer  
Dental Hygiene Committee of California

**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  
1<sup>st</sup> Floor Hearing Room  
2005 Evergreen Street  
Sacramento, California on

**April 30, 2015**

**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 30, 2015, 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 section 1905 of the Business and Professions Code, and to implement, interpret or make specific sections 1902, 1905, 1908, 1909, 1910, 1911, 1915, and 1917 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

The Committee currently regulates a total of 31,154 licensees; consisting of 30,636 registered dental hygienists, 480 registered dental hygienists in alternative practice and 38 registered dental hygienists with extended function. The Committee's highest priority is the protection of the public when exercising its licensing, regulatory, and disciplinary functions. The Committee issues licenses to eligible applicants; investigates complaints against licensees, disciplines licensees for violation of the Business and Professions Code Sections 1900-1966.6 and monitors licensees who are on probation.

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 1900-1966.6.

The main purpose of this proposal is to specify definitions for various terms used in statute. The Committee is currently utilizing the Dental Board's regulations in these areas, however many of those existing definitions relative to dental hygiene no longer conform to more recent statutory law. Pursuant to Business and Professions Code section 1905.2, a copy of the draft regulations was sent to the Dental Board of California for consideration on December 11, 2014. The Dental Board of California will have 90 days, or until March 11, 2015 to submit input on these draft regulations.

The Committee is proposing the following:

- o Adopt Section 1100 of Division 11, Title 16 of the California Code of Regulations  
This proposed section defines dental hygiene terms that are used within statute in regulation so that applicants, licensees, staff and the public have clear and consistent definitions for terms currently in statute or that are used in dental hygiene practice.

**B. Policy Statement Overview/Anticipated Benefits of Proposal**

The Committee's policy is to promulgate regulations for the protection of California consumers. This proposal protects California consumers by ensuring that all licensed registered dental hygienists, applicants and staff use the same current terminology relative to dental hygiene education and practice.

**C. Consistency and Compatibility with Existing State Regulations**

After conducting a review of any regulations that would relate to or affect this area, the Committee has evaluated this regulatory proposal and it is not inconsistent or 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 because only dental hygiene applicants and licensees would be affected by these regulations.

### **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 dental hygienist applicants and licensees have clear and consistent definitions for terms used within statute.

### **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 2050, 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: Guadalupe Castillo  
Address: 2005 Evergreen Street, Suite 2050  
Sacramento, CA 95815  
Telephone No.: (916) 263-1978  
Fax No.: (916) 263-2688  
E-Mail Address: Guadalupe.Castillo@dca.ca.gov

The backup contact person is:

Name: Donna Kantner  
Address: 2005 Evergreen Street, Suite 2050  
Sacramento, CA 95815  
Telephone No.: (916) 263-1978  
Fax No.: (916) 263-2688  
E-Mail Address: Donna.Kantner@dca.ca.gov

**AVAILABILITY OF DOCUMENTS ON THE INTERNET**

Copies of the Notice of Proposed Action, the Initial Statement of Reasons, and the text of the regulations in underline and strikeout can be accessed through our website at [www.dhcc.ca.gov](http://www.dhcc.ca.gov).

**Dental Hygiene Committee of California  
Department of Consumer Affairs**

Proposed Regulations

Adopt Section 1100 of Article 1 of Division 11 of Title 16 of the California Code of Regulations to read as follows:

**§1100. Definitions.**

For purposes of this division:

(a) "Administration of local anesthesia" means the administration of local anesthetic agents by infiltration injection or conductive injection.

(b) "Administration of nitrous oxide and oxygen" means the administration of nitrous oxide and oxygen when used as an analgesic during dental treatment.

(c) "Assessment" means the systematic collection, analysis, and documentation of the oral and general health status and patient needs through a variety of methods, including choice of radiographs, diagnostic tools, and instruments.

(d) "Basic supportive dental procedures" means fundamental duties or functions as referenced in California Code of Regulations Section 1067(l).

(e) "Committee office" means the Committee office located in Sacramento, California.

(f) "Executive Officer" means the Executive Officer appointed by the Committee.

(g) "Dental assistant" means an unlicensed person as referenced in California Code of Regulations (CCR) Section 1067(b).

(h) "Dental hygiene care plan" means an organized presentation or list of interventions to promote health or prevent disease of the patient's oral condition; plan is designed by the dental hygienist based on assessment data, dental hygiene diagnosis, and consists of services within the scope of dental hygiene practice.

(i) "Dental hygiene preventive services" means those services provided by the dental hygienist that prevent oral disease or pathology, promote oral health and improve the patient's quality of life.

(j) "Dental hygiene therapeutic interventions" means specific procedure or set of procedures designed to intervene in the disease process to produce a therapeutic benefit.

(k) "Dental hygiene treatment plan" means an organized presentation or list of interventions to promote health or prevent disease of the patient's oral condition designed by the registered dental hygienist in alternative practice based on assessment data and consists of services within the scope of practice of the registered dental hygienist in alternative practice.

(l) "Ethics" for the purposes of the examination required by Section 1917(d) of the Code, means an act or acts in accordance with the California Dental Hygienists' Association (CDHA) or the American Dental Hygienists Association (ADHA) Code of Ethics.

(m) "Gross trauma" means a burn, deep laceration, long laceration and/or puncture to soft tissue, hard tissue, and/or bone.

(n) "Licentiate" or "Licensee" means any individual licensed or registered by the Committee.

(o) "Periodontal debridement" means the process by which hard and soft deposits are removed from the supragingival and subgingival surfaces of the teeth, including the disruption of bacterial cell walls of nonadherent plaque.

(p) "Periodontal evaluation record" means that part of the dental hygiene assessment document pertaining to the clinical observations of the gingiva, periodontal pocket probe depths, measurement of the location of the free gingival margin/recession, calculation of attachment loss, measurement of keratinized/attached gingiva, detection of marginal and deep bleeding on probing, detection of suppuration, detection of furcation involvement, detection of fremitus and mobility, and assessment of plaque and calculus accumulations.

(q) "Polishing the coronal surfaces of teeth", or "coronal polishing" means a procedure limited to the removal of plaque on and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with rubber cup or brush and a polishing agent.

(r) "Refer" means through assessment, diagnosis, or treatment, it is determined that services are needed beyond the practitioner's competence or area of expertise.

(s) "Root planing" means the process of instrumentation which removes all residual calculus and toxic materials from the root to produce a clean, smooth tooth surface.

(t) "Scaling" means the removal of calculus and dental biofilm from the supragingival and subgingival exposed tooth surfaces.

(u) "Soft tissue curettage" means the removal of the inflamed soft tissue lateral to the pocket wall, which is not subgingival curettage referring to the procedure that is performed apical to the epithelial attachment, severing the connective tissue attachment down to the osseous crest.

(v) "Treatment facility" for purposes of section 1902 of the Code means any place where oral health services are provided.

Note: Authority cited: Section 1905, Business and Professions Code. Reference: Sections 1902, 1905, 1908, 1909, 1910, 1911 and 1917, Business and Professions Code.

**DENTAL HYGIENE COMMITTEE OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS**

**INITIAL STATEMENT OF REASONS**

**HEARING DATE:** April 30, 2015

**SUBJECT MATTER OF PROPOSED REGULATIONS:** Definitions

**SECTION(S) AFFECTED:** Title 16, Division 11, California Code of Regulations, Section 1100

**INTRODUCTION**

The Dental Hygiene Committee of California (DHCC) proposes to adopt Section 1100 of Division 11 of Title 16 of the California Code of Regulations.

Senate Bill 853 created the Dental Hygiene Committee of California which was established July 1, 2009. Section 1905(a)(9) gives the DHCC statutory authority to “adopt, amend and revoke rules and regulations to implement the provisions of this article.” The DHCC statutes, specifically Business and Professions Code Section 1906(d) authorize the DHCC to use the Dental Board of California’s regulations as they pertain to the practice of dental hygiene until DHCC adopts its own regulations.

The DHCC has incorporated into these regulations current sections of the Dental Practice Act that are pertinent to the practice of dental hygiene. Some of these existing regulations were revised to make them current to dental hygiene practice and to add clarity.

In addition to moving existing regulations pertaining to dental hygiene, the DHCC has added new sections to further clarify terminology used in the current statutes and regulations.

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

**SPECIFIC PURPOSE OF EACH ADOPTION, AMENDMENT, OR REPEAL:**

The DHCC currently regulates over 30,000 licensees: 30,208 registered dental hygienists, 555 registered dental hygienists in alternative practice and 38 registered dental hygienists in extended functions. The DHCC’s highest priority is the protection of the public when exercising its licensing, regulatory and disciplinary functions. The DHCC issues licenses to eligible applicants; investigates complaints against licensees, disciplines licensees for violations of Business and Professions Codes Sections 1900-1966.6, and monitors licensees on probation.

Business and Professions Code Section 1906(a) authorizes the DHCC to adopt, amend and revoke such rules and regulations as may be reasonably necessary to enable the DHCC to carry into effect the provisions of Business and Professions Code 1900-1966.6.

The proposed regulations would implement, interpret and make specific the provisions of Business and Professions Code sections 1900-1966.6 in a manner that will provide protection



for the people of California and guidance for dental hygiene applicants, licensees, educational programs and staff in matters relating to definitions within the practice of dental hygiene.

Since its creation in 2009, the DHCC has not had its own regulations and has used the Dental Board of California's regulations in the interim, as provided in Business and Professions Code Section 1906(d). Due to staff shortages, the hiring freeze, and budget cuts, the DHCC has only recently had staff available to work on undertaking the project of promulgating its own regulations for its dental hygienist applicants and licensees. The DHCC needs regulations specific to the population it serves, regulations that reflect recent developments in dental hygiene care, and regulations that dental hygiene applicants and licensees can easily understand, locate and reference.

Specifically, the DHCC is proposing the following:

**Adopt Section 1100 of Article 1 Division 11 of Title 16 of the California Code of Regulations (Definitions)**

Since its creation July 1, 2009, the DHCC has used the Dental Board's regulations pending the adoption of its own regulations to define the practice of dental hygiene. This section mirrors the Dental Board's Section 1000, last amended in 2001, with some definitions included from Section 1067, last amended in 1998, pertaining to dental auxiliaries. Other terms specific to dental hygiene that required clarification have been included as new text. Therefore, adopting this section is necessary to define dental hygiene terms, clarify and specify dental hygiene definitions and scope of practice in line with current terminology.

Section 1100 language is taken from Chapter 1 Article 1 Section 1000 and Chapter 3 Article 1 Section 1067 of the California Code of Regulations, Title 16. Changes and additions were made to make this section consistent with current terminology in the practice of dental hygiene. The following subsections within 1100 are proposed:

**Subsection 1100(a)** This new text defines "administration of local anesthesia", one of the duties allowed under Section 1909 of the Business and Professions Code (Code), to specify that this refers to agents that are injected.

*Problem:* California RDHs, RDHEFs and RDHAPs question whether they may subgingivally place local anesthetic agents that are not injected under the general supervision of a licensed dentist.

*Benefit:* This text clarifies for licensees, staff, and dentists that only the injection of local anesthetic agents must be directly supervised by a dentist because of the small potential for patient harm through subgingival placement of local anesthetic agents.

**Subsection 1100(b)** This new text defines "administration of nitrous oxide and oxygen," one of the duties allowed under Section 1909 of the Code, to specify that this terminology refers to this type of analgesia only when used as an adjunct to dental treatment.

*Problem:* Licensees contact the DHCC asking if they may administer nitrous oxide-oxygen analgesia for facial procedures.

*Benefit:* This text clarifies that this analgesia may not be administered for any other purpose than for dental treatment.

**Subsection 1100(c)** This new text defines the term "assessment" in Code sections 1908(a) and 1915 as it is currently used in required educational programs and by the

Commission on Dental Accreditation (CODA), the accepted standard for dental professionals.

*Problem:* There is no definition in regulation for the commonly used dental hygiene term “assessment”, and it needs to be clearly defined in the DHCC’s regulations so that it is not subject to interpretation by users.

*Benefit:* Provides a clear definition within California regulations for all users so that the components of the dental hygiene assessment process are distinguished from diagnosis, a process which may only be performed by a dentist.

Subsection 1100(d) This text provides a definition of “basic supportive dental procedures” that mirrors the definition contained in the Dental Board’s regulations, with the addition of “dental hygienist” as a supervisor, since statute (Code Section 1929) allows an RDHAP to employ and supervise unlicensed dental assistants.

*Problem:* There is confusion as to what dental assistants may do under an RDHAP’s supervision.

*Benefit:* This regulation clarifies for all users what duties a dental assistant may perform while under the supervision of an RDHAP.

Subsection 1100(e) This text defines the term “Committee office”, mirrors CCR Section 1000(d) and renumbers this section.

*Problem:* This section is necessary to clarify that there is only one office of the DHCC, and its location is in Sacramento.

*Benefit:* This regulation informs licensees, dentists, and the public that there is a single office location of the DHCC for information and transactions.

Subsection 1100(f) This text defines the term “Executive Officer”, renumbers and mirrors CCR Section 1000(e) to define the person responsible for the administration and daily operations of the DHCC.

*Problem:* Individuals contact the DHCC and ask for the “director” or the “head”.

*Benefit:* This regulation benefits licensees and the public by identifying the person who holds responsibility for the DHCC’s functions so that correspondence may be correctly addressed and correct nomenclature used.

Subsection 1100(g) This text mirrors section 1067(b) to define the term “Dental Assistant”.

*Problem:* Dental assistants may be hired to perform intraoral retraction and suctioning by RDHAPs according to sections 1750.1(d) and 1929(b) of the Code. This text clarifies what is meant by the term.

*Benefit:* This term is defined within DHCC’s regulations for consistency and ease of use by staff and licensees.

Subsection 1100(h) This new text defines the term “dental hygiene care plan” as used in section 1908 of the Code using the definition adopted by the American Dental Education Association (ADEA), which is currently taught in all dental hygiene educational programs in the United States.

*Problem:* The Dental Practice Act contains no definition for dental hygiene care plan, which consists of services that a dental hygienist provides to patients, causing confusion on the part of dentists, insurance carriers, licensees who may have completed an educational program before this definition was generally accepted, and the public.

*Benefit:* This definition benefits staff, licensees, dentists and the public by providing a clear explanation of the components of a dental hygiene care plan so that all parties

understand the services that a dental hygienist performs in assessing the need for dental hygiene care and the distinction from a dental care plan which is developed by a dentist.

Subsection 1100(i) This new text defines the term “dental hygiene preventive services”, as used in statute, Sections 1910(a) and 1911(c) of the Code.

*Problem:* There is currently no definition of what constitutes dental hygiene preventive services, causing confusion to dentists, insurance carriers, licensees, and the public.

*Benefit:* This definition clarifies the nature of services provided by the licensed dental hygienist, as distinguished from “therapeutic interventions,” for the information of licensees, staff and the public. This text assists dental offices in coding procedures for insurance purposes and benefits consumers by clarifying dental hygiene procedures that may be covered by their insurance carrier.

Subsection 1100(j) This new text defines the term “dental hygiene therapeutic interventions” as used in Section 1910(a) of the Code.

*Problem:* There is no definition for this term used in Section 1910(a) of the Code, leading to confusion on the part of licensees, dentists, the public and insurance carriers.

*Benefit:* Provides a clear and consistent definition within California regulations for the benefit of licensees, dentists, staff and the public who may not be knowledgeable of what constitutes dental hygiene therapeutic interventions, and distinguishes them from preventive services. This text assists dental offices in coding procedures for insurance purposes and benefits consumers by clarifying dental hygiene procedures that may be covered by insurers.

Subsection 1100(k) This new text defines the term “dental hygiene treatment plan”, a term used in Section 1915 of the Code, which describes the process of identification of oral health problems that a hygienist is educated and licensed to treat.

*Problem:* A dental hygiene treatment plan is within the scope of practice of a dental hygienist in alternative practice (RDHAP). Dentists, insurers and the public many times do not understand the services that may be provided under this category of license. No definition of this term exists in current regulations, and is needed so that the term is not subject to interpretation by users.

*Benefit:* This text provides dentists, licensees, insurers and the public with a definition that is used in current dental hygiene education and has been adopted by ADEA. This section defines a term found in statute and clarifies dental hygiene procedures that may be performed by RDHAPs and may be covered by consumers’ insurance carriers.

Subsection 1100(l) This new text defines the term “ethics” for the benefit of applicants, licensees, staff and the public.

*Problem:* There is currently no definition in regulation for ethics, which is the subject of statutorily required testing according to Code Section 1917(d) before a dental hygiene license of any category can be issued by the DHCC.

*Benefit:* This text provides applicants with sources for study materials that were used in developing the mandatory law and ethics examination.

Subsection 1100(m) This new text defines the term “Gross trauma” so that applicants, staff and the public are clearly informed of what constitutes grounds for failure of the dental hygiene clinical examination according to the provisions of Business and Professions Code Section 1917.3, and requires the applicant to complete remedial education.

*Problem:* Applicants need to know that one instance of gross trauma on a patient during

their required clinical exam will result in automatic failure and the requirement for remedial education before he or she is eligible to retake the examination.

*Benefit:* This text benefits applicants by clearly defining what constitutes gross trauma, referring to a serious injury that may occur to a patient during dental hygiene services, and will result in failure of the examination and a requirement for remedial education.

Subsection 1100(n) This text defines the terms “Licentiate” or “Licensee”, and renumbers and mirrors CCR Section 1000(p), replacing the term “board” with “committee.”

*Problem:* Users need to know that either of these terms means an individual who is licensed by the DHCC, and therefore subject to these regulations.

*Benefit:* This text benefits licensees, staff and the public by providing a clear definition of who is regulated by the DHCC.

Subsection 1100(o) This new text defines the term “periodontal debridement,” a current dental hygiene term for the removal of hard and soft deposits from supra and sub gingival surfaces.

*Problem:* This term is not defined in regulation and needs to be clarified as a process that is distinct from periodontal scaling for purposes of a dental cleaning.

*Benefit:* Consumers benefit by having a clear distinction between the terms “periodontal debridement” and “periodontal scaling” so that consumers understand and are billed correctly for dental hygiene procedures.

Subsection 1100(p) This new text defines “periodontal evaluation record” using current, widely accepted terminology that is used in educational programs to define and specify the terms and processes that comprise the documentation of a complete periodontal evaluation that is entered in the patient’s record by an RDH, RDHEF or RDHAP.

*Problem:* This term is not defined in regulation and therefore subject to interpretation.

*Benefit:* Users need to know what information should be included in this type of record and this definition will assist DHCC staff in enforcement of Code Section 1955(a).

Subsection 1100(q) This text mirrors section 1067(h) by defining the terms “Polishing the coronal surfaces of teeth” or “Coronal polishing” as these terms are used in dental hygiene treatment and clarifies Code Section 1915(c)(1).

*Problem:* This procedure may be performed by either a Registered Dental Hygienist (RDH) as part of a dental cleaning or by a Registered Dental Assistant (RDA) after a cleaning is done by an RDH or a dentist, and is often confused with a complete dental cleaning. It is only the final step in the dental cleaning, which may only be performed by a Registered Dental Hygienist. Terms relating to the practice of dental hygiene as overseen by the DHCC need to be defined within its own regulations.

*Benefit:* Clearly defining the process of coronal polishing benefits RDH and RDA licensees, staff, dentists and the public so that consumers are not incorrectly billed for a dental cleaning when only coronal polishing has been done.

Subsection 1100(r) This new text defines the term “refer”, as used in Section 1911(b), to clarify when a licensee needs to refer a patient, and the process by which it is done.

*Problem:* Licensees may not know the appropriate occasion that requires referral.

*Benefit:* This text clarifies what a referral is for all users.

Subsection 1100(s) This text redefines the term “root planing” to the current, widely used definition used in dental hygiene.

*Problem:* Licensees need to be provided with the most current and accurate description of the procedures that they are allowed to perform.

*Benefit:* This text benefits licensees, staff and the public by providing this information clearly and in written form for reference.

Subsection 1100(t) This text defines the term “Scaling” as used in Section 1910(a).

*Problem:* There is confusion as to whether periodontal scaling includes both supra and sub gingival scaling.

*Benefit:* This text clarifies the term scaling for the benefit of consumers, staff and the public.

Subsection 1100(u) This text defines the term “soft tissue curettage” to reflect the current, widely used definition in dental hygiene, and more accurately describe the procedure.

*Problem:* There is currently no definition in regulation of what constitutes “soft tissue curettage” for the statutory term used in Section 1909(a).

*Benefit:* This text specifies the components of the process of soft tissue curettage for licensees, staff and the public and defines the statutory term.

Subsection 1100(v) This new text defines the term “treatment facility” for the benefit of the public, staff and licensees.

*Problem:* There is currently no clear definition of the term “treatment facility” which causes questions to DHCC staff and confusion on the part of the public and licensees as to whether this means the dental operator, the dental office, or the building in which treatment takes place.

*Benefit:* This text clarifies that wherever dental hygiene treatment is given, which may be in a dental office, the home of a homebound patient, or in a public clinic.

## **FACTUAL BASIS/RATIONALE**

Since its creation on July 1, 2009, the DHCC is the regulatory entity responsible for the licensing and regulation of the dental hygiene profession in California. In the absence of its own regulatory framework, the DHCC has operated on statute and by utilizing some of the existing regulations in the Dental Board of California’s Dental Practice Act that pertain to dental hygienists, however many of those regulations no longer reflect current statute. The DHCC needs to have its own regulatory framework to govern its licensees according to current statutory provisions.

Existing law, Business and Professions Code section 1906(a) authorizes the DHCC to “adopt, amend and revoke regulations to implement the requirements” of Article 9.

Existing law, Business and Professions Code section 1906(d) allows the DHCC to use the Dental Board’s regulations “until other regulations are adopted by the committee.”

Pursuant to Business and Professions Code section 1905.2, a copy of the draft regulations was sent to the Dental Board of California for consideration on December 11, 2014. The Dental Board of California will have 90 days, or until March 11, 2015 to submit input on these draft regulations.

## **UNDERLYING DATA**

1. Approved December 5, 2010 Dental Hygiene Legislation and Regulation Subcommittee Meeting Minutes.

2. Approved December 5-6, 2010 Dental Hygiene Committee Meeting Minutes.
3. Approved December 12, 2011 Dental Hygiene Legislation and Regulation Subcommittee Meeting Minutes.
4. Approved December 13, 2011 Dental Hygiene Committee Meeting Minutes.
5. Approved December 3, 2012 Dental Hygiene Legislation and Regulation Subcommittee Meeting Minutes.
6. Draft September 6, 2013 Dental Hygiene Committee Meeting Minutes.
7. Dental Practice Act, California Code of Regulations, Title 16, Division 10, Sections 1000 and 1067.
8. American Dental Education Association – ADEA Competencies for Entry into the Allied Dental Professions (As approved by the 2011 ADEA House of Delegates)
9. Commission on Dental Accreditation standards for accreditation of dental hygiene programs

### **ECONOMIC IMPACT ASSESSMENT**

This regulatory proposal will have the following effects:

- It would not create or eliminate jobs within the State of California because this proposed regulation clarifies dental hygiene terms used in current practice and educational programs.
- It would not create new businesses or eliminate existing businesses within the State of California because the proposal specifies definitions that are currently being used in dental hygiene practice and education.
- It would not affect the expansion of businesses currently doing business within the State of California because this proposal does not change existing processes or requirements.
- This regulatory proposal would benefit the health and welfare of California residents by having clear definitions for dental hygiene terms used in statute.
- This regulatory proposal would benefit California consumers by clarifying terminology used in statute and in dental hygiene practice.
- This regulatory proposal would enhance worker safety in places where dental hygiene is performed by ensuring that all California licensed dental hygienists have clear and current definitions for terminology used in the practice of dental hygiene.
- This regulatory proposal would benefit the state's environment by clarifying and specifying definitions used in California dental hygiene practice.

### **BUSINESS IMPACT**

The Board has made the initial determination that the proposed regulation would not have a significant, statewide adverse economic impact directly affecting business, including the inability of California businesses to compete with businesses in other States because it does not change existing processes or requirements and specifies definitions that are currently used in dental hygiene practice and education.

**SPECIFIC TECHNOLOGIES OR EQUIPMENT**

This regulation does 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 than the proposed regulations. Many new laws have been enacted that affect the practice of dentistry and dental hygiene.

If rejected as a result of not passing this regulation, the terminology of dental hygiene practice will not be current nor will it provide the authority the DHCC's enforcement staff needs in order to protect consumers. Using outdated regulations will not provide maximum protection to the DHCC's licensees and consumers. DHCC will be required to use the Dental Board of California's Dental Practice Act which does not reflect current statutes and definitions.

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February 21, 2014

FEB 24 2014

VIA CERTIFIED MAIL

DENTAL BOARD  
OF CALIFORNIA

Ms. Denise Brown, Director  
Department of Consumer Affairs  
1625 North Market Blvd., Suite S-308  
Sacramento, CA 95834

Ms. Karen Fischer, Executive Officer  
Dental Board of California  
2005 Evergreen St., Suite 1550  
Sacramento, CA 95815

Re: Dental Hygienist Regulations Proposed by the  
Dental Hygiene Committee of California

Dear Director Brown and Ms. Fischer:

This firm represents the California Dental Association (“CDA”). We write today to apprise you of CDA’s concern that certain rules recently proposed by the Dental Hygiene Committee of California (“DHCC”) exceed DHCC’s authority. CDA previously submitted comments to DHCC on this issue, but because it is a jurisdictional issue that could ultimately affect the legality of the rules, we thought it prudent to also apprise you of the matter. We understand that DHCC is currently reviewing CDA’s comments and sincerely hope that all parties can work collaboratively to amend the proposed rules and finalize a package that is both sensible and legally defensible.

Specifically, CDA’s concern is that some of the proposed definitions effectively expand and interpret the statutory scope of practice of dental hygienists, which are areas *solely* within the jurisdiction of the Legislature and the Dental Board of California (“Dental Board”), respectively. It is our understanding that DHCC took at least some of these definitions from competency guidelines published by the American Dental Education Association (“ADEA”). But the ADEA guidelines were not meant to define or alter the practice of dental hygiene in California. They were meant to help educational programs develop core competencies to be taught as part of their instruction to dental hygienist students.

If CDA’s jurisdictional concerns are accurate, then the proposed rules cannot withstand judicial scrutiny. *Mineral Assoc. Coalition v. State Mining and Geology Bd.*, (2006) 138 Cal.App.4<sup>th</sup> 574, 582 (regulations that alter or amend the statute or enlarge or impair its scope are void); *Western States Petroleum Ass’n v. Dept. of Health Services* (2002) 99 Cal.App.4<sup>th</sup> 999, 1006 (an agency cannot enlarge or exceed the scope of authority that has been statutorily delegated to it). But it is not too late to correct the issue. The improper definitions seek to define



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unrelated statutory terms, not terms used in the proposed definitions or DHCC enabling statute. As such, the jurisdictional concerns can be rectified by simply deleting the improper definitions and refocusing the rules on subjects specifically entrusted to DHCC by the Legislature.

Some of DHCC's Proposed Definitions Exceed Its Limited Rulemaking Authority.

The Legislature created DHCC in 2008 through the enactment of SB 853. In doing so, the Legislature made clear that DHCC was under the jurisdiction of the Dental Board. Cal. Bus. & Prof. Code § 1901(a). The Legislature also made clear that DHCC has a limited role. Essentially, DHCC was given authority to oversee dental hygienist educational programs and to administer dental hygienist licensing and discipline. See Cal. Bus. & Prof. Code § 1905(a). Jurisdiction over other issues, including scope of practice, was left to the Dental Board. Indeed, the Legislature specifically stated that DHCC could only make "recommendations to the Dental Board" regarding scope of practice issues. Cal. Bus. & Prof. Code § 1905(a)(8).

Yet several of the proposed definitions seek to expand and interpret terms used in the dental hygienist scope of practice statutes, leaving the rules vulnerable to judicial challenge. See *Mineral Assoc. Coalition*, 138 Cal.App.4<sup>th</sup> at 582; *Western States Petroleum Ass'n*, 99 Cal.App.4<sup>th</sup> at 1006. DHCC effectively admits this, stating that the proposed definitions are meant, in part, to clarify dental hygienist scope of practice, and repeatedly referencing an intent to define statutory scope of practice terms. See DHCC Initial Statement of Reasons for Proposed Regulations ("DHCC Initial Statement"), pg. 2.<sup>1</sup> The improper definitions include the following:

1. Assessment – DHCC asserts that Section 1100(c) of the proposed rule is meant to "define the term 'assessment' in [Business and Professions] Code section 1908..." DHCC Initial Statement, pg. 3. According to DHCC, this will provide "a clear and consistent definition within California regulations for licensees and dentists so that the components of the assessment process are distinguished from diagnosis, a process which may only be performed by a dentist." *Id.*

DHCC does not have the authority to adopt this definition. Business and Professions Code section 1908 is a statutory provision defining dental hygienist scope of practice. In part, it provides that the practice of dental hygiene includes "assessment" of a patient in connection with a dental hygiene care plan. Obviously, a rule that seeks to interpret that term and list specific functions that a dental hygienist may perform affects scope of practice. That is particularly true here, given that DHCC is proposing the definition in order to establish a clear line between an "assessment" function that can be performed by a dental hygienist and a "diagnosis" function that must be performed by a dentist. DHCC cannot establish this line. Only the Legislature or the Dental Board may define what specific functions can be undertaken by a dental hygienist as part of his or her "assessment" of a patient.

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<sup>1</sup> For your convenience, a copy of DHCC's proposed regulations and Initial Statement are attached to this letter.

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The proposed definition is also troubling because it arguably authorizes dental hygienists to perform functions that go beyond established practice. Specifically, the definition purports to authorize dental hygienists to collect diagnostic records such as radiographic images for any dental hygienic purpose and without any direction by a dentist. But Business and Professions Code section 1684.5(a) limits the circumstances under which a dental auxiliary may perform such diagnostic procedures. The proposed definition could thus be read to expand dental hygienist scope of practice beyond statutory limits.

2. Dental Hygiene Care Plan – DHCC asserts that Section 1100(h) of the proposed rules is meant to define “the term ‘dental hygiene care plan’ in section 1908 of the [Business and Professions] Code.” DHCC Initial Statement, pg. 3. According to DHCC, this will provide “a clear explanation of the components of a dental hygiene care plan” so that all parties are aware of the services that a dental hygienist performs in assessing the need for treatment and the distinction from a dental care plan which is developed by a dentist.” *Id.*, pgs. 3-4.

DHCC does not have the authority to adopt this definition either. As noted above, section 1908 defines the statutory scope of practice of dental hygienists. Thus, a rule that interprets a term from that section and lists the specific services that can be performed by a dental hygienist, as opposed to services that must be part of a “dental care plan” prepared by a dentist, affects the scope of practice of dental hygienists. If this term is in need of any further interpretation (and we do not believe that it is), that interpretation must come from the Legislature or the Dental Board.

Again, in addition to the jurisdictional issue, the proposed definition is troubling because it appears to improperly expand dental hygienist scope of practice beyond established practice. Specifically, the definition does not focus the dental hygiene care plan on disease prevention and periodontal care, which are the recognized set of dental hygiene services. Instead, the definition includes more general language authorizing interventions “to promote health,” which could be read to expand dental hygiene practice into areas that must be performed by a dentist.

3. Dental Hygiene Preventive Services – DHCC asserts that Section 1100(i) of the proposed rule is meant to define “the term ‘dental hygiene preventive services,’ as used in statute, Section 1910(a) of the [Business and Professions] Code.” DHCC Initial Statement, pg. 4. According to DHCC, this will clarify “the nature of services provided by the licensed dental hygienist, as distinguished from ‘therapeutic interventions.’” *Id.*

Again, DHCC does not have the authority to adopt this definition. Although DHCC asserts that the rule will help dental offices in coding procedures, the reality is that Business and Professions Code section 1910 is another scope of practice provision that defines the functions that dental hygienists may perform under general supervision, such as “preventive and therapeutic interventions, including oral prophylaxis, scaling, and root planning.” A rule that further interprets the types of preventive services that may be performed by a dental hygienist under general supervision thus affects scope of practice.

Ms. Denise Brown, Ms. Karen Fischer  
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That is particularly true here, where the definition seeks to expand “preventive services” to include anything “that prevents oral disease or pathology, promote oral health and improve the patient’s quality of life.” Arguably, such a broad definition describes every possible dental treatment imaginable. If dental hygienist scope of practice is to be expanded to this degree, that must be done by the Legislature, not DHCC.

4. Dental Hygiene Therapeutic Interventions – DHCC asserts that section 1100(j) of the proposed rule is meant to define “the term ‘dental hygiene therapeutic interventions’ as used in Section 1910(a) of the [Business and Professions] Code.” DHCC Initial Statement, pg. 4. According to DHCC, this will provide “a clear and consistent definition... of what constitutes dental hygiene therapeutic interventions, and distinguishes them from preventive services.”

DHCC does not have the authority to adopt this definition. Again, while DHCC asserts that the rule will help dental offices in coding procedures, section 1910 is a scope of practice provision, so anything that interprets the types of “therapeutic interventions” that can be performed by a dental hygienist under general supervision affects scope of practice. Moreover, the proposed definition again potentially eliminates any limits on dental hygienist practice, enlarging section 1910’s authorization for oral prophylaxis, scaling, and root planing to any “procedures designed to intervene in the disease process to produce a therapeutic benefit.” Only the Legislature can expand dental hygienist scope in this manner.

5. Refer – DHCC asserts that section 1100(r) of the proposed rule is meant to define “the term ‘refer,’ as used in Section 1911(b) [of the Business and Professions Code], to clarify when a licensee needs to refer a patient, and the process by which it is done.” DHCC Initial Statement, pg. 5.

Again, DHCC does not have the authority to adopt this definition. Business and Professions Code section 1911 is another provision defining dental hygienist scope of practice. Specifically, it lists the functions that a dental hygienist may provide without supervision, and states that a hygienist must “refer any screened patients with possible oral abnormalities to a dentist for a comprehensive examination, diagnosis, and treatment plan.” Thus, a rule that further interprets when a dental hygienist cannot perform a function and must instead refer a patient to a dentist affects scope of practice.

Moreover, the proposed definition is troubling because it arguably conflicts with common practice by requiring a patient to “consent” to a referral. If such patient consent needs to be added to the referral process, it must be added by the Legislature or the Dental Board.

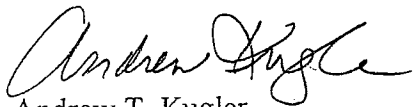
In sum, DHCC has limited authority to promulgate rules. That authority does not include the ability to adopt new definitions that interpret scope of practice statutes and that arguably expand the practice of dental hygiene beyond established norms. If such definitions or expansions are necessary, they must be effectuated by the Legislature and, if appropriate, the Dental Board. We ask that DCA and the Dental Board instruct DHCC to remove these definitions and reissue new proposed rules that are compliant with California law.

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Ms. Denise Brown, Ms. Karen Fischer  
February 21, 2014  
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If you have any questions concerning the foregoing, please do not hesitate to contact me.

Sincerely,



Andrew T. Kugler

Enclosures

cc: Doreatha Johnson, Deputy Director, DCA Legal Affairs Division  
Lori Hubble, Executive Officer, Dental Hygiene Committee of California  
Donna Kantner, Dental Hygiene Committee of California

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## Facsimile cover sheet

Date: 2015-02-12 19:04:09 CST

**To/Company:**  
Attention: Karen Fischer  
and Fran Burton

**Fax:**  
**19162632140**

MESSAGE:

Sent on behalf of Andrew Kugler.

---

Pearl Martinez Fuentes  
Assistant to Mickey Kantor, Paul de Bernier, Andrew Kugler  
and Laura Rosiecki  
Mayer Brown LLP  
350 South Grand Avenue, 25th Floor, Los Angeles, California 90071  
Tel: 213 621 9446 | Fax: 213 625 0248 | pfuentes@mayerbrown.com<mailto:pstigen@mayerbrown.com>  
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Direct Fax +1 213 576 8126  
akugler@mayerbrown.com

February 12, 2015

VIA FACSIMILE AND CERTIFIED MAIL

Ms. Karen Fischer, Executive Officer  
Dental Board of California  
2005 Evergreen St., Suite 1550  
Sacramento, CA 95815

Re: Dental Hygienist Regulations Proposed by the  
Dental Hygiene Committee of California

Dear Ms. Fischer:

This firm represents the California Dental Association ("CDA"). As you know, in February 2014, we wrote you to express CDA's concern that certain regulatory definitions proposed by the Dental Hygiene Committee of California ("DHCC") exceeded DHCC's authority by seeking to define the scope of dental hygiene practice. (To refresh your memory, we attach our prior letter which details the specific definitions and concerns.) Under Business & Professions Code section 1905(a)(8), DHCC does not have the authority to enact regulations pertaining to dental hygiene scope of practice; rather it only has the authority to "[m]ake recommendations to the dental board." It is our understanding that DHCC pulled their proposed rules last spring largely in response to CDA's concerns.

However, in December 2014, DHCC again released the same proposed rule package for public comment. The only practical difference is that DHCC set a 90-day public comment period during which time the Dental Board may submit comments in an attempt to satisfy Business & Professions Code section 1905.2.

This does not resolve the jurisdictional issue. Section 1905.2 does not confer authority on DHCC to enact the proposed regulations by simply extending the applicable comment period and asking the Dental Board's opinion. It provides that *recommendations* by DHCC pertaining to dental hygiene scope of practice shall be approved, modified or rejected by the Dental Board within 90 days of submission to the Board. The purpose of this language is to require the Dental Board to respond to *recommendations* made by DHCC. But the authority to approve regulations pertaining to scope of practice still resides with the Dental Board, not DHCC.

DHCC's reading of Section 1905.2 is also erroneous because it asks the Dental Board to opine on proposed rules. DHCC's proposed language may change. And even if it does not, under Sections 1905(a)(8) and 1905.2, that language can only serve as a recommendation that the Dental Board is free to approve, modify or reject.

Mayer Brown LLP

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February 12, 2015  
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We urge the Dental Board to instruct DHCC to remove the improper definitions and reissue new proposed rules that are compliant with California law. This is important not only to protect the Dental Board's jurisdiction, but because DHCC's attempt to act in excess of its authority cannot withstand judicial scrutiny. *Mineral Assoc. Coalition v. State Mining and Geology Bd.*, (2006) 138 Cal.App.4<sup>th</sup> 574, 582 (regulations that alter or amend the statute or enlarge or impair its scope are void); *Western States Petroleum Ass'n v. Dept. of Health Services* (2002) 99 Cal.App.4<sup>th</sup> 999, 1006 (an agency cannot enlarge or exceed the scope of authority that has been statutorily delegated to it).

If you have any questions concerning the foregoing, please do not hesitate to contact me.

Sincerely,



Andrew T. Kugler

Enclosures

cc: Fran Burton, President, Dental Board of California  
Lori Hubble, Executive Officer, Dental Hygiene Committee of California

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Direct Fax +1 213 576 8126  
akugler@mayerbrown.com

February 21, 2014

VIA CERTIFIED MAIL

Ms. Denise Brown, Director  
Department of Consumer Affairs  
1625 North Market Blvd., Suite S-308  
Sacramento, CA 95834

Ms. Karen Fischer, Executive Officer  
Dental Board of California  
2005 Evergreen St., Suite 1550  
Sacramento, CA 95815

Re: Dental Hygienist Regulations Proposed by the  
Dental Hygiene Committee of California

Dear Director Brown and Ms. Fischer:

This firm represents the California Dental Association ("CDA"). We write today to apprise you of CDA's concern that certain rules recently proposed by the Dental Hygiene Committee of California ("DHCC") exceed DHCC's authority. CDA previously submitted comments to DHCC on this issue, but because it is a jurisdictional issue that could ultimately affect the legality of the rules, we thought it prudent to also apprise you of the matter. We understand that DHCC is currently reviewing CDA's comments and sincerely hope that all parties can work collaboratively to amend the proposed rules and finalize a package that is both sensible and legally defensible.

Specifically, CDA's concern is that some of the proposed definitions effectively expand and interpret the statutory scope of practice of dental hygienists, which are areas *solely* within the jurisdiction of the Legislature and the Dental Board of California ("Dental Board"), respectively. It is our understanding that DHCC took at least some of these definitions from competency guidelines published by the American Dental Education Association ("ADEA"). But the ADEA guidelines were not meant to define or alter the practice of dental hygiene in California. They were meant to help educational programs develop core competencies to be taught as part of their instruction to dental hygienist students.

If CDA's jurisdictional concerns are accurate, then the proposed rules cannot withstand judicial scrutiny. *Mineral Assoc. Coalition v. State Mining and Geology Bd.*, (2006) 138 Cal.App.4<sup>th</sup> 574, 582 (regulations that alter or amend the statute or enlarge or impair its scope are void); *Western States Petroleum Ass'n v. Dept. of Health Services* (2002) 99 Cal.App.4<sup>th</sup> 999, 1006 (an agency cannot enlarge or exceed the scope of authority that has been statutorily delegated to it). But it is not too late to correct the issue. The improper definitions seek to define



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unrelated statutory terms, not terms used in the proposed definitions or DHCC enabling statute. As such, the jurisdictional concerns can be rectified by simply deleting the improper definitions and refocusing the rules on subjects specifically entrusted to DHCC by the Legislature.

Some of DHCC's Proposed Definitions Exceed Its Limited Rulemaking Authority.

The Legislature created DHCC in 2008 through the enactment of SB 853. In doing so, the Legislature made clear that DHCC was under the jurisdiction of the Dental Board. Cal. Bus. & Prof. Code § 1901(a). The Legislature also made clear that DHCC has a limited role. Essentially, DHCC was given authority to oversee dental hygienist educational programs and to administer dental hygienist licensing and discipline. See Cal. Bus. & Prof. Code § 1905(a). Jurisdiction over other issues, including scope of practice, was left to the Dental Board. Indeed, the Legislature specifically stated that DHCC could only make "recommendations to the Dental Board" regarding scope of practice issues. Cal. Bus. & Prof. Code § 1905(a)(8).

Yet several of the proposed definitions seek to expand and interpret terms used in the dental hygienist scope of practice statutes, leaving the rules vulnerable to judicial challenge. See *Mineral Assoc. Coalition*, 138 Cal.App.4<sup>th</sup> at 582; *Western States Petroleum Ass'n*, 99 Cal.App.4<sup>th</sup> at 1006. DHCC effectively admits this, stating that the proposed definitions are meant, in part, to clarify dental hygienist scope of practice, and repeatedly referencing an intent to define statutory scope of practice terms. See DHCC Initial Statement of Reasons for Proposed Regulations ("DHCC Initial Statement"), pg. 2.<sup>1</sup> The improper definitions include the following:

1. Assessment – DHCC asserts that Section 1100(c) of the proposed rule is meant to "define the term 'assessment' in [Business and Professions] Code section 1908..." DHCC Initial Statement, pg. 3. According to DHCC, this will provide "a clear and consistent definition within California regulations for licensees and dentists so that the components of the assessment process are distinguished from diagnosis, a process which may only be performed by a dentist." *Id.*

DHCC does not have the authority to adopt this definition. Business and Professions Code section 1908 is a statutory provision defining dental hygienist scope of practice. In part, it provides that the practice of dental hygiene includes "assessment" of a patient in connection with a dental hygiene care plan. Obviously, a rule that seeks to interpret that term and list specific functions that a dental hygienist may perform affects scope of practice. That is particularly true here, given that DHCC is proposing the definition in order to establish a clear line between an "assessment" function that can be performed by a dental hygienist and a "diagnosis" function that must be performed by a dentist. DHCC cannot establish this line. Only the Legislature or the Dental Board may define what specific functions can be undertaken by a dental hygienist as part of his or her "assessment" of a patient.

<sup>1</sup> For your convenience, a copy of DHCC's proposed regulations and Initial Statement are attached to this letter.

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The proposed definition is also troubling because it arguably authorizes dental hygienists to perform functions that go beyond established practice. Specifically, the definition purports to authorize dental hygienists to collect diagnostic records such as radiographic images for any dental hygienic purpose and without any direction by a dentist. But Business and Professions Code section 1684.5(a) limits the circumstances under which a dental auxiliary may perform such diagnostic procedures. The proposed definition could thus be read to expand dental hygienist scope of practice beyond statutory limits.

2. Dental Hygiene Care Plan – DHCC asserts that Section 1100(h) of the proposed rules is meant to define “the term ‘dental hygiene care plan’ in section 1908 of the [Business and Professions] Code.” DHCC Initial Statement, pg. 3. According to DHCC, this will provide “a clear explanation of the components of a dental hygiene care plan” so that all parties are aware of the services that a dental hygienist performs in assessing the need for treatment and the distinction from a dental care plan which is developed by a dentist.” *Id.*, pgs. 3-4.

DHCC does not have the authority to adopt this definition either. As noted above, section 1908 defines the statutory scope of practice of dental hygienists. Thus, a rule that interprets a term from that section and lists the specific services that can be performed by a dental hygienist, as opposed to services that must be part of a “dental care plan” prepared by a dentist, affects the scope of practice of dental hygienists. If this term is in need of any further interpretation (and we do not believe that it is), that interpretation must come from the Legislature or the Dental Board.

Again, in addition to the jurisdictional issue, the proposed definition is troubling because it appears to improperly expand dental hygienist scope of practice beyond established practice. Specifically, the definition does not focus the dental hygiene care plan on disease prevention and periodontal care, which are the recognized set of dental hygiene services. ~~Instead, the definition includes more general language authorizing interventions “to promote health,” which could be read to expand dental hygiene practice into areas that must be performed by a dentist.~~

3. Dental Hygiene Preventive Services – DHCC asserts that Section 1100(i) of the proposed rule is meant to define “the term ‘dental hygiene preventive services,’ as used in statute, Section 1910(a) of the [Business and Professions] Code.” DHCC Initial Statement, pg. 4. According to DHCC, this will clarify “the nature of services provided by the licensed dental hygienist, as distinguished from ‘therapeutic interventions.’” *Id.*

Again, DHCC does not have the authority to adopt this definition. Although DHCC asserts that the rule will help dental offices in coding procedures, the reality is that Business and Professions Code section 1910 is another scope of practice provision that defines the functions that dental hygienists may perform under general supervision, such as “preventive and therapeutic interventions, including oral prophylaxis, scaling, and root planning.” A rule that further interprets the types of preventive services that may be performed by a dental hygienist under general supervision thus affects scope of practice.

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Ms. Denise Brown, Ms. Karen Fischer  
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That is particularly true here, where the definition seeks to expand "preventive services" to include anything "that prevents oral disease or pathology, promote oral health and improve the patient's quality of life." Arguably, such a broad definition describes every possible dental treatment imaginable. If dental hygienist scope of practice is to be expanded to this degree, that must be done by the Legislature, not DHCC.

4. Dental Hygiene Therapeutic Interventions – DHCC asserts that section 1100(j) of the proposed rule is meant to define "the term 'dental hygiene therapeutic interventions' as used in Section 1910(a) of the [Business and Professions] Code." DHCC Initial Statement, pg. 4. According to DHCC, this will provide "a clear and consistent definition... of what constitutes dental hygiene therapeutic interventions, and distinguishes them from preventive services."

DHCC does not have the authority to adopt this definition. Again, while DHCC asserts that the rule will help dental offices in coding procedures, section 1910 is a scope of practice provision, so anything that interprets the types of "therapeutic interventions" that can be performed by a dental hygienist under general supervision affects scope of practice. Moreover, the proposed definition again potentially eliminates any limits on dental hygienist practice, enlarging section 1910's authorization for oral prophylaxis, scaling, and root planing to any "procedures designed to intervene in the disease process to produce a therapeutic benefit." Only the Legislature can expand dental hygienist scope in this manner.

5. Refer – DHCC asserts that section 1100(r) of the proposed rule is meant to define "the term 'refer,' as used in Section 1911(b) [of the Business and Professions Code], to clarify when a licensee needs to refer a patient, and the process by which it is done." DHCC Initial Statement, pg. 5.

~~Again, DHCC does not have the authority to adopt this definition. Business and Professions Code section 1911 is another provision defining dental hygienist scope of practice. Specifically, it lists the functions that a dental hygienist may provide without supervision, and states that a hygienist must "refer any screened patients with possible oral abnormalities to a dentist for a comprehensive examination, diagnosis, and treatment plan." Thus, a rule that further interprets when a dental hygienist cannot perform a function and must instead refer a patient to a dentist affects scope of practice.~~

Moreover, the proposed definition is troubling because it arguably conflicts with common practice by requiring a patient to "consent" to a referral. If such patient consent needs to be added to the referral process, it must be added by the Legislature or the Dental Board.

In sum, DHCC has limited authority to promulgate rules. That authority does not include the ability to adopt new definitions that interpret scope of practice statutes and that arguably expand the practice of dental hygiene beyond established norms. If such definitions or expansions are necessary, they must be effectuated by the Legislature and, if appropriate, the Dental Board. We ask that DCA and the Dental Board instruct DHCC to remove these definitions and reissue new proposed rules that are compliant with California law.

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Ms. Denise Brown, Ms. Karen Fischer  
February 21, 2014  
Page 5

If you have any questions concerning the foregoing, please do not hesitate to contact me.

Sincerely,



Andrew T. Kugler

Enclosures

cc: Doreathea Johnson, Deputy Director, DCA Legal Affairs Division  
Lori Hubble, Executive Officer, Dental Hygiene Committee of California  
Donna Kantner, Dental Hygiene Committee of California



## MEMORANDUM

<b>DATE</b>	February 4, 2015
<b>TO</b>	Dental Board Members
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>Agenda Item 6:</b> Discussion and Possible Action Regarding Appointments to the Dental Assisting Council

### Background

The Dental Assisting Council (Council) considers all matters relating to dental assistants in California and makes appropriate recommendations to the Board and the standing Committees of the Board. The members of the Council include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

In February 2012, the Board appointed members to the Council in staggered terms in accordance with Business and Professions Code Section 1742(9). On March 19, 2015, two Council members' initial terms expire. One candidate must be a faculty member of a registered dental assisting educational program approved by the Board and one candidate must be employed clinically in a private dental practice or public safety net or dental health care clinic. Both candidates must hold a current and active RDA license for at least the prior five years and cannot be employed by a current member of the Dental Board.

The Board posted a recruitment notice on its website and sent out an email blast. Ten applications were received. A subcommittee of Dr. Witcher and Ms. Forsythe reviewed the applications and interviewed candidates on the telephone. A subcommittee recommendation may be presented to the full Board for consideration.

The Board should consider the following qualifications in accordance with Business & Professions Code, Section 1742 when considering the Subcommittee's recommendations and its two appointments to the Council.

### **SECTION 1742 QUALIFICATION REQUIREMENTS FOR THIS VACANCY:**

Applicants must meet the following minimum requirements to be eligible for appointment:

One candidate shall be a Registered Dental Assistant (RDA) or Registered Dental Assistant in Extended Functions (RDAEF) and shall be employed as a faculty member of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years.

One candidate shall be employed clinically in private dental practice or public safety net or dental health care clinic.

The candidates shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:**

The term of office for each appointment will be four years.

The candidates to be considered for membership on the Dental Assisting Council by the Board are as follows:

Pamela Davis-Washington, RDA  
Benson Dimaranan, BS, MA.Ed, RPhT, RDA, OAP  
Chasidy Langley, RDAEF2  
Gina Macias, BS, RDAEF, CDA  
Andrea Powell, RDA, MBA  
Ryan B. Rae, RDA  
Emma K. Ramos, RDA  
Martha A. Ruiz, RDA  
Ramina Safar, RDA  
Carol Wilcox, RDA

Action Requested:

- After review and discussion, staff requests a motion to appoint two members to the Dental Assisting Council.

**DAVIS-WASHINGTON**

RECEIVED

January 20, 2015

JAN 26 2015

DENTAL BOARD  
OF CALIFORNIA

Council Members  
Dental Board of California

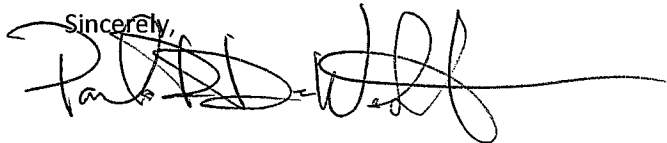
To the Dental Board of California Council Members:

My name is Pamela Davis-Washington. I am a practicing Registered Dental Assistant. I would like to have the opportunity to continue to serve as a Dental Assisting Council Member.

I have been a part of the first Dental Assisting Council, working along with the Dental Board members for the past three years. It has been a great learning experience. I am prepared to maintain the continuity of work I have done these past three years. Furthermore, I am more knowledgeable having been on the Board, and can provide better insight and depth towards the current issues and regulation packages that are being worked on.

I also have the drive and experience to understand the challenges and concerns of dental assistants, having been in the field for over thirty years. I am open to any changes, additions, and/or revisions to the rules and regulations that will improve our profession and maintain the safety of our patients. It would be an honor to serve another term on the Dental Assisting Council if given the opportunity.

Sincerely,

A handwritten signature in black ink, appearing to read 'Pamela Davis-Washington', with a long horizontal flourish extending to the right.

Pamela Davis-Washington, RDA  
Member, Dental Assisting Council  
Dental Board of California





## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

**PLEASE PRINT**

NAME Pamela Davis-Washington

ADDRESS\* [REDACTED]

PHONE NOS. (work) [REDACTED]

(home) [REDACTED]

(cell) [REDACTED]

EMAIL ADDRESS [REDACTED]

California License Type and Number: 16067

Expiration date: 01/16/2016

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

No

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

No

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Children's Dental Clinic-455 E.Columbia St. Long Beach, Ca. 90806  
Nhu Q. Tran, D.D.S.-1171 Puerta Del Sol, San Clemente, Ca. 92673

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

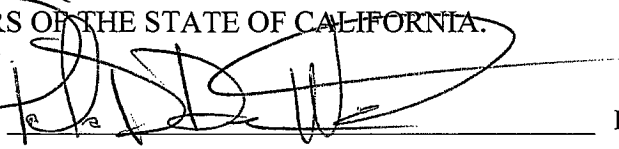
The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature



Date

1/21/15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

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# Pamela Davis-Washington

## Objective

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To serve as a Member of Dental Assisting Council on the Dental Board of California. As a Member, I would have an objective view towards all standard levels of examination, licensure, permits, and renewal. By working with the Board Members and Dental Assisting Council, I would be able to help consider all matters relating to dental assistants in California and make appropriate recommendations to the Board and the standing committees of the Board.

## Technical Skills/Proficiencies

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- Over 30 years of RDA experience, including but not limited to chair-side assisting, and other RDA duties
- Responsible for the training and monitoring of all RDA's duties, skills, and proficiencies
- Extensive knowledge of OSHA and DHS guidelines
- Extensive knowledge of JACHO guidelines for hospital dentistry and assisting
- Developing and monitoring standard operating procedures for the CDHC
- Able to manage and schedule a large staff of Dentists (8) and RDAs (10) and 3 offices
- Assist in the training of pediatric dental residents
- Work with medically compromised patients under general anesthesia, and IV sedation

## Experience

---

September 1981- Present                      **Children's Dental Health Clinic**                      Long Beach, CA

### RDA, Back Office Manager

- Hire, train, and monitor all RDAs
- Update clinic employees on OSHA and DHS guidelines and clinic policies and procedures
- Manage and schedule all dentists and assistants in the clinic
- Order and maintain all supplies and dental equipment
- Chair-side assist all dentists in the clinic

December 2010 - Present                      **Nhu Q. Tran, DDS, APC**                      San Clemente, CA

### RDA

- Chair-side assisting, take radiographs, coronal polishing, oral hygiene instruction

## Education

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Long Beach City College                      **Registered Dental Assistant**                      Long Beach, CA

Long Beach City College                      **Associate of Science, Biology**                      Long Beach, CA

## References

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John L. Blake, DDS  
Executive Director/Clinic Director  
Children's Dental Health Clinic (CDHC)  
(562)933-8929

Nhu Q. Tran, DDS  
Pediatric Dental Residency Director  
Children's Dental Health Clinic  
(562)933-3276

**DIMARANAN**

January 15, 2015

**RECEIVED**

**JAN 20 2015**

Ms. Karen M. Fisher  
Dental Board of California  
2005 Evergreen Street, Suite# 1550,  
Sacramento, CA 95815

**DENTAL BOARD  
OF CALIFORNIA**

RE: Dental Assisting Council

Dear Ms. Fisher:

In response to your advertisement in the Dental Board of California website in regards to a position to be part of the Dental Assisting Council, I have attached my curriculum vitae for the open position that you are seeking to fill.

As a result of my vast training and continuous pursuance of my education, I have acquired excellent skills and virtues in the teaching aspect of the dental field. My practical and hands-on experience, theoretical understanding of the dental field and experience in Clinical and Administrative Dental Assisting Classroom instruction may be of great interest to your company.

My outstanding qualifications as a professional Dental Auxiliary, both in chairside and administrative Dental Assisting, have been my sole training ground in developing my teaching skills. I believe that for one to be an excellent leader, one should be an excellent follower first. With this in mind, my ideology of training myself by subordination and cooperation have greatly influence my teaching techniques and my understanding of how students can learn in the most efficient way possible.

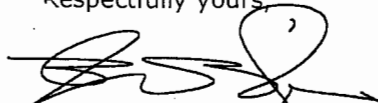
I have also the pleasure of working with the Dental Board of California as one of the Dental Consultants as well as Subject Matter Experts/ Site Evaluators. Through my participation with the board I gained a wide array of experience and knowledge in the curriculum application process of dental program through out the state of California. In addition to this, I offer strong decision-making skills, a high degree of self-motivation and competitive records in the field of academia, some aspects that can never be overlooked in identifying a well-rounded professional.

Being goal oriented, I enthusiastically thrive on challenging assignments. My ambitious persona makes me an individual who strives for excellence and perfection in my work. Also, I am a highly motivated individual with a record of achievements and leadership in my academic accomplishments, extra-curricular activities and my continuing dental educations, as well as diverse work background. I keep in mind that training and education goes hand in hand when it comes to achieving the highest of all career goals and that attitude blends in consideration to fully achieve success in the profession.

I am hopeful that you can use someone of my particular background, abilities and skills to be of great service for your organization's current necessities. If you have any questions, feel free to contact me at [REDACTED] or email me at dentalci@yahoo.com.

Thank you for your kind consideration regarding this matter.

Respectfully yours,

  
Benson B. Dimaranan



## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

**PLEASE PRINT**

NAME Benson Dimaranan

ADDRESS [REDACTED]

PHONE NOS. (work) [REDACTED] (home) \_\_\_\_\_ (cell) [REDACTED]

EMAIL ADDRESS [REDACTED]

California License Type and Number: RDA62124 OA71 Expiration date: 08/31/2016

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.



**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

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**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

N/A

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Yes. Cerritos Dental Spa

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

#### **Notice on Collection of Personal Information**

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**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

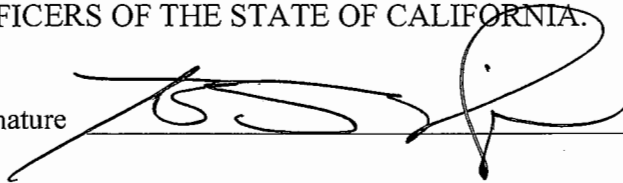
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- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature



Date

01-15-2015

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

## **Benson B. Dimaranan, BS, MA.Ed, RPhT, RDA, OAP**

### **OBJECTIVE**

Experienced and energetic professional educator seeking to experience various education-related activities and expand training capabilities in the dental field.

### **SKILLS PROFILE**

#### **Dental Program Director/ Instructor**

- Instruct Secondary and Post secondary students in all aspects of dentistry, including four handed dentistry, dental material, instruments, dental specialties, dental radiology, exposing and developing dental x-ray films, film mounting, infection control, HIPAA privacy requirements, California dental practice act, front office skills, dental billing, management of laboratory cases, coordinate public relation projects, and supervise students for internship.

#### **Dental Board of CA- Subject Matter Expert/ Site Evaluation Team Consultants**

- Reviews curriculum applications submitted to the Dental Board of California for various educational institutions; Performs site visitation prior to approval with the board; Determines deficiencies in the curriculum and analyzes necessities for program applicants; Recommends valid and complete curriculum applications for final board approval. Developed the examination standards for the new RDA state written examination.

#### **Book and Exam Writer**

- Create supplemental materials for Dental Instruments text references.

#### **Curriculum Development**

- Develop innovative curriculum to instruct individual students, small groups, and classes; Organize time, space and resources to balance heavy workloads and stringent deadlines; Use unconventional methods and resources to educate students in Theoretical, Administrative, Clinical and Practical Hands-on Dental Assisting; Create efficient ways for students to smoothly learn and enhance their skills and to apply them in a live clinical setting. Assist with the COE and WASC accreditation process.

#### **Dental Consultant/ Trainer**

- Monitor sterilization room; Monitor all the instruments; Check all the dental staff for proper attire and sterilization procedures; Conduct a weekly meeting for sterilization updates; Educate new dental staff for proper OSHA guidelines and dental office guideline; Update all the OSHA and MSDS folders; Check and evaluate sterilization book and manuals; Check all the charts for materials data fact sheets and inventory, sterilization supplies; Educate staff with compliance issues and update Dental Auxiliary duties; Impose organizational strategies in both the front office and back office area; Teach front office staff billing strategies and inspect insurance activities such as verifications, follow ups and billing.

### **Registered Dental Assistant**

- Prepares treatment rooms, instruments and tray setups for dental procedures; Greets and prepares patients for treatment; Exposes and mounts dental diagnostic x-rays; Assists the dentist during examinations and treatment procedures; Conducts work in compliance with office policies and procedures, safety, OSHA, MSDS and HIPAA guidelines; Records medical and dental history, vital signs and treatment information in patient records; Make temporary restorations; Applies and remove fluoride; Coronal polishing; Mouth mirror inspection; Take Impressions for diagnostic cast, opposing models, bleaching trays and temporary crowns and bridges; Sizing and fabricate temporary crowns; Temporary cementation and removal of temporary crowns; Place and remove dental rubber dams; Place and remove wedges and matrix bands; Provides patient for oral hygiene instructions prescribed by dentist; Participates in the achievement of patient satisfaction and office production goals by working efficiently and providing a high level of patient service; Assists other Dental Board of California/RDA duties as needed.

### **Financial Coordinator/ Biller**

- Front office maintenance-Maintains patient data to include required regulatory chart documents, personal information, treatment consultation documentation, account history transactions; Communicates payment options including insurance benefits, financing, Care Credit and payment plans; Contacts insurance company and patients regarding outstanding balances; Updates patient accounts consistently and without error to reflect current outstanding balances; Researches and resolves insurance billing issues; Sends delinquent accounts to collections; Processes insurance payments; Credits insurance payments to patient accounts in computerized system; Creates and mails insurance claims and statements; Rebills insurance companies and other third parties to secure payment for patients; Responds to patient billing and statement inquiries.

### **Orthodontic Assistant**

- Providing chair side support to orthodontist; Monitoring and reinforcing patient comfort; Exposing, developing and mounting dental radiographs; Patient education (hygiene instruction, and Office policy) as directed by orthodontist; Aiding and monitoring instrument sterilization, tray set up, operatory disinfection and barrier protection; Restocking of dental/ortho materials and supplies; Patient health history review and coverage status; Charting as instructed by DDS/Orthodontist; Remove orthodontic bands; Remove- place and ligate arch wires; Fluoride application; Take impressions and pour up diagnostic and opposing models; Remove ligature ties; Remove and place orthodontic separators; Mouth mirror inspection; Maintenance of dental hand piece, equipment and units; Daily set up and shut down all the system; Assists other Dental Board of California/ RDA and OAP duties as needed.

**EMPLOYMENT  
HISTORY**

**Cerritos Dental Spa** Cerritos, CA  
Registered Dental Assistant and Ortho Assistant December 2014 to Present

**Santa Maria Dental Office, Inc.** Bellflower, CA  
*Registered Dental Assistant and Ortho Assistant* November 2013 to December 2014

**Downey Adult School/ DUSD** Downey, CA  
Dental Program Director and Instructor April 2008 to Present

**Mosby, Inc. an affiliate of Elsevier, Inc.** Maryland Heights, MO  
*Book Contributor and Exam Writer* September 2010 to Present

**Dental Board of California** Sacramento, CA  
*SME/ RDA Written Exam Writer* November 2009 to Present  
*SME/ SET Consultant* May 2009 to February 2011

**Southeast Regional Occupational Program** Cerritos, CA  
*Dental Assisting and Radiology Instructor* September 2005 to September 2008

**Danette E. Ergina, DMD, Inc.** Lakewood, CA  
*RDA/ Financial Coordinator* December 2000 to January 2007

**EDUCATION,  
CERTIFICATIONS,  
LICENSES AND  
CREDENTIALS**

**Continuing Educations, License and Certifications**

- October 22, 2012 CASAS eTests Online Proctor Certification- CASAS
- August 20, 2010 Orthodontic Assistant Permit – Downey Adult School
- June 14, 2010 8-hr Infection Control Certification – Downey Adult School
- April 13, 2010 Dental Practice Act fo: Dental Assistants – Downey Adult School
- August 31, 2009 Pit & Fissure Sealant Certification– Dental Career Institute
- September 05, 2006 Ultrasonic Scaling Certification – PDE
- February 17, 2006 Radiation Safety & Dental Radiographic Refresh Course – Emory University
- November 05, 2005 Dental Insurance Billing – Cerritos College
- June 08, 2003 Coronal Polishing Certification – My Dentist
- Feb 13, 2001 Dental Assistant Certification – Cerritos -SEROP
- Jan 17, 2001 Dental X-ray Certification – Cerritos -SEROP

**Education**

- October 14, 2013 – December 12, 2014 – MA.Ed– Concordia University- Irvine
- April 17, 2010 - Level 2 / Instructional Practice of Adult & Career Technical Education – University of San Diego
- May 31, 2008 - Health Education for Teachers – University of San Diego
- Dec 13, 2006 - Level 1 / Principles of Adult & Vocational Instruction University of San Diego
- March 30, 2003 - B. S. in Psychology, – UP Help System, Philippines
- March 24, 1999 - High School Diploma – Liceo De Cabuyao, Philippines

**California Professional License**

- March 19, 2013 – Orthodontic Assistant Permit– Dental Board of CA OAP# 71
- January 07, 2010 – Registered Pharmacy Technician – Pharmacy Board of CA

RPhT# 97878

- July 01, 2006 Full-time Designated Dental & Medical Office Teaching Credential  
State of California
- July 01, 2005 Part-time Designated Dental Teaching Credential  
State Of California
- June 30, 2004 Registered Dental Assistant – Dental Board of CA RDA# 62124

**Groups and Association**

- 2014 – Western Association of Schools and Colleges Visiting Committee Team
- 2010-2011 – California Association of Dental Assisting Teachers  
- Board of Directors – Appointed as Council
- California Council for Adult Education – CCAE Member
- California Teachers Association – CTA Member
- California Association of Dental Assisting Teachers – CADAT Member

**ADDITIONAL  
INFORMATION**

Committed to exemplify well-rounded qualifications of the Dental professional and utilize the standards of proper Dental Care with my professional practice; Continuously update myself with the changing and improving regulatory language of the Registered Dental Assistant.

## **Benson B. Dimaranan**

### **REFERENCES**

Dr. Danette E. Ergina  
Dentist  
Danette E. Ergina, DMD, Inc.  
Work: (562) 860-9180

Dr. Tracy Montes  
President  
Applied Measurement Services, LLC  
Cell: (530) 788-5346

Ms. Brenda Jeter  
HR Coordinator  
Downey Adult School  
Work: (562) 940-6217  
Cell: (562) 522-9215



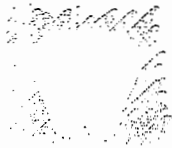


**MILAGROSA M. CABANBAN, D.D.S., INC.**

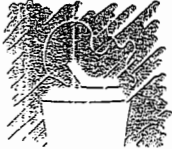
5911 South Street  
Lakewood, CA 90713

Telephone: (562) 461-2991

December 20, 2013



To whom it may concern,




I have known Mr Benson Dimaranan for over 10 years in variety of capacity. He has been my constant source of prospective employees for my dental practice.

Benson is a hard-working, extremely resourceful person with very good rapport with people of various ages.

I think he will be a valuable asset to any organization and recommend him for any endeavor that he seeks to pursue.

Please contact me if you have any questions.

Sincerely,



Mimi Hernandez-Cabanban DDS



## Downey Unified School District

### Adult School

12340 Woodruff Avenue, Downey, California 90241-5610  
(562) 940-6200 FAX: (562) 940-6221

#### Board of Education

*President*

Donald E. LaPlante

*Vice President*

William A. Gutierrez

*Clerk*

Tod M. Corrin

*Members*

D. Mark Morris  
Barbara R. Samperi  
Martha E. Sodemani  
Nancy A. Swenson

*Superintendent*

John A. Garcia Jr., Ph.D.

December 9, 2013

To Whom It May Concern,

I'm pleased to write a letter of recommendation for Benson Dimaranan. I have known Mr. Dimaranan since March 20, 2008 when he became employed at Downey Adult School where I also work. During that time, I have found him to be a conscientious and dedicated person and have also witnessed growth in his professional endeavors. He pays attention to detail and completes all his required duties in a timely manner. He is an asset to our school and a pleasure to know and work with.

Sincerely,

A handwritten signature in cursive script, appearing to read "Brenda Jeter".

Brenda Jeter  
Certificated Personnel/Payroll Assistant

**BEVERLY DENTISTRY**

5031 La Palma Ave. #B La Palma, CA 90623

562.865.0999

December 5, 2013

To whom it may concern,

I, Beverly Gonzales, DDS highly recommend Benson Dimaranan for the position. I am honored to write this letter for a stellar instructor and dental expert who is able to bring out the best in his students and everyone around him as well.

I have known Benson since 2001 and I have seen him succeed in his career and life in general. This success is brought about by his hard work, determination to be the best in his field and a kind heart. I have kept in contact with him even though I moved my practice from Norwalk to La Palma because he has such a vast knowledge of the dental profession. He is also well connected with the dental community. I come to him to ask questions from all aspects of dentistry-from OSHA regulations to dental marketing. Aside from these talents, Benson is also a very friendly individual who will provide excellent team work and camaraderie.

In the best interest of your company, I highly recommend Mr. Benson Dimaranan. An opportunity may kindly be given to him and i am sure he will prove to be an asset to your organization.

Thank you for your time and kind consideration.

Sincerely,

  
Beverly Gonzales, DDS

**LANGLEY**

RECEIVED

JAN 30 2015

DENTAL BOARD  
OF CALIFORNIA

To whom it may concern

I have been an RDA for several year and just recently became an RDAEF2. I look forward to my daily challenges and strive to learn, better techniques. I have always enjoyed the adventure and knowledge I have grown through the years. I know there are many different aspects of dentistry. To be a part of the Dental Board could help me learn more, to help others and myself in my lives career path, I enjoy so much.



## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

**PLEASE PRINT**

NAME Chasidy Langley

ADDRESS\* [REDACTED]

PHONE NOS. (work) [REDACTED] (home) [REDACTED] (cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number: 538 62 Expiration date: 3-31-15

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

n/a

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

n/a

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Dr Ripley DDS  
1473 Live Oak Blvd YC CA 95991

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?  Yes or No (please circle one)

5. Are you employed by a current member of the Dental Board?  Yes or No (please circle one) Dental expert witness for the Dental Board

6. Have you served on the Dental Assisting Forum? Yes or  No (please circle one)

7. Do you have a financial interest in any registered dental assisting school? Yes or  No (please circle one). If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members?  Yes or No (please circle one)

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.



**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature Chasidy Langley Date 1/26/15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RÉSUMÉ, AND REFERENCES  
BY May 16, 2014 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

# Chasidy Langley RDAEF2 - RDA

## OBJECTIVE

To learn every aspect of the position and to strive for excellence.

## PROFESSIONAL EXPERIENCES

### **DR. Robert Ripley, Yuba city, Ca**

RDAEF2, Sept 2013 - present

RDA, Sept 1999 - present

- : Place and contour restorations, cementation of orthodontic appliances, assist in dental procedures, IV sedation, oral surgery, coronal polish, taking dental x-rays, instrument sterilization and processing, set up and break down of dental rooms, in charge of all dental inventory.

### **DR. Mark Hagele, Nevada, Ca**

RDA, Jan 2000 - present

- : Assisting in Hospital Dentistry under general anesthesia, break down and set up room. Sierra Nevada hospital, Feather River surgical center.

### **DR Nguyen, Greenback Lane Citrus Heights, Ca**

RDA, DA, March 1998 - July 1998

- : Assisting in dental procedures, taking and processing dental x-rays, instrument sterilization and processing, set up and break down of dental rooms, patient scheduling.

### **U.S Postal Service, Marysville, Ca**

July 1994 - 1998

- : All manual sorting operations and Bar code Sorting Machines.

## EDUCATION

### **Lindhurst High School,**

: High School Diploma 1991,

Clubs and sports, Class treasure 3 year president 1 year, 2 years drum major.

### **Western Career Collage, Sacramento, Ca**

: Dental Assisting Program, Diploma, July 1998,

4.0 GPA. Team player award, Perfect attendance.

### **J Productions Dental Seminars, Sacramento, Ca**

: RDAEF2 license 2013,

## ACTIVITIES

Coached softball for 4 years, participated in many dental health months and dental fairs, Volunteer for CDA Cares health fair, participated in music in the park to raise money for breast cancer, Involved with breaking the record for most people brushing at once, guinness 2004, helped with a scuba clean the river day and many church functions.

## ALL LICENSES AND CERTIFICATES

- : X-ray license
- : RDA license
- : Sealant certificate
- : RDAEF2 license
- : CPR certificate

**MACIAS**

RECEIVED

JAN 27 2015

DENTAL BOARD  
OF CALIFORNIA

Karen Fischer, MPA  
Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

Dear Mrs. Fischer,

Enclosed you will find a completed application for appointment to the dental assisting council. I have also attached letters of recommendation to support my application.

As an educator and program director, I have a broad knowledge base in dental assisting education, regulations and statues from a first hand perspective. I have previously worked in the clinical setting as a RDAEF for 15 years. I obtained my licensure via work pathway; which allows me to have a varied perspective.

Your consideration is greatly appreciated.

Cordially,

  
*Gina Macias*

*Gina Macias, BS, RDAEF, CDA  
Dental Assisting Program Director  
Heald College- Modesto Campus  
5260 Pirrone Court  
Salida, Ca. 95368*

████████████████████

## **RECRUITMENT NOTICE DENTAL ASSISTING COUNCIL**

The Dental Board of California (Board) established a seven member Dental Assisting Council which considers all matters relating to dental assistants in California and makes recommendations to the Board and the standing committees of the Board. In March 2015, the initial term of two of the members of the Dental Assisting Council will expire. The Board is now accepting applications from qualified registered dental assistants (RDAs) to fill these vacancies. Candidates must either be a faculty member of a registered dental assisting educational program approved by the Board, or employed clinically in a private dental practice or public safety net or dental health care clinic.

Candidates must also meet the following requirements:

1. Hold a current and active RDA license for at least the prior five years
2. Cannot be employed by a current member of the Dental Board

Refer to the application (below) for additional qualification requirements. If interested, please complete the application and return it along with a cover letter and résumé to the Dental Board.

**Applications must be received by the Dental Board by Friday, January 30, 2015.**



**APPLICATION FOR APPOINTMENT TO THE  
DENTAL ASSISTING COUNCIL**

**RECEIVED**

JAN 27 2015

**PLEASE PRINT**

DENTAL BOARD  
OF CALIFORNIA

NAME **Gina Macias**

ADDRESS [REDACTED] ne

PHONE NOS. (work) [REDACTED] (home) [REDACTED] (cell) [REDACTED]

EMAIL [REDACTED]

California License Type and Number: **RDAEF 604** Expiration date: **10/31/2015**

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

I worked for Kaplan Higher Education in Salida, CA in 2009, teaching and Managing the Dental Assisting program. I then began my career at Heald College January 2010 where I am currently employed.

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

No, I am employed at an Educational Institution

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.



**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature

*Hina Maas*

Date

1/15/15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300



NCLR  
National Council of  
La Raza

June 10th 2014

To Whom It May Concern:

The purpose of this letter is to recommend Gina Macias for a position on the Dental Board of California's Dental Assisting Council. Mrs. Macias has been instrumental in the planning and implementing with El Concilio and other community partners the Binational Health fair that is the Americas' largest community development initiative. Its aim is to improve the health and well-being of the Latino population living in the United States and Canada. We hold this at Hanshaw Middle school the first week in October and Gina has been helping with this initiative for the past 3 years.

During BHW, federal, state and local government agencies, community-based organizations and thousands of volunteers come together during October to conduct a series of health promotion and health education activities including: flu vaccinations, vision and hearing screenings, HIV/STI testing, blood pressure, blood glucose, and cholesterol screenings, and many other activities and services.

Gina is a great liason to the community and a team player, I would recommend Gina to represent the dental auxiliary education industry and the seat at the Council.

Thank you

*Yamilet Valladolid*

Yamilet Valladolid  
Site Director Modesto Office  
209-338-5716  
yval@elconcilio.org

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[www.elconcilio.org](http://www.elconcilio.org)

1314 H St

Modesto, CA 95354

MODESTO OFFICE

Phone: (209) 338-5700

Fax: (209) 523-2873

224 S. Sutter Street

Stockton, CA 95203

ADMINISTRATION

Phone: (209) 644-2600

Fax: (209) 547-2867



January 19, 2015

Ms. Karen Fischer  
Executive Officer – Dental Board of California  
2005 Evergreen St., Ste. #1550  
Sacramento CA 95815

RE: Recommendation to Dental Board for Appointment of Ms. Gina Macias, CDA, RDAEF, BS to  
Dental Assisting Council

Dear Ms. Fischer:

The California Association of Dental Assisting Teachers is pleased to present this letter of recommendation to the Dental Board in support of Ms. Gina Macias, CDA, RDAEF, BS, who has been a member in good standing with the teachers association for several years.

Currently, Ms. Macias is a member of the CADAT Public Policy Council, has attended all meetings of the DA Council and the Dental Board, and has obtained a great deal of knowledge in all aspects of dental assisting-related issues. Gina is a member of the American Dental Assistants Association and attends professional association meetings and conferences regularly. As a qualified Program Director, she participates in local and statewide professional development training seminars, and regularly participates in curriculum design and development activities.

We are pleased to recommend Ms. Macias for the educator-member of the DA Council and encourage her appointment at the earliest possible opportunity.

Respectfully,

*Lori Gagliardi*

Lorraine Gagliardi, CDA, RDA, RDH, Ed.D  
President - CADAT

C: CADAT Executive Board  
Dr. Kathleen Shanel – CADAT Director of Public Policy



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EST. 1863

Karen M. Fischer, MPA  
Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

To Whom It May Concern:

The purpose of this letter is to recommend Gina S. Macias for the open educator position on the Dental Assisting Council at the Dental Board of California.

As Campus President during the launch of opening the Heald – Salida Campus in mid-2010, it was my responsibility for hiring the position of Dental Assisting Program Director for the Salida Campus. I chose Gina Macias for this position because of her in-depth knowledge and experience with the California Dental Practice Act and Dental Assisting Education. In preparation for opening our Dental Assisting Program, Mrs. Macias primary responsibility was preparation of the initial application for approval through the Dental Board of California in mid 2010. The Salida Heald campus received the Dental Board of California's provisional approval in December of 2010 and earned permanent approval effortlessly in July 2013.

Gina Macias has been able to ensure adherence with Statues and Regulations as they apply to approved dental assisting programs in California. Mrs. Macias has most recently completed and submitted a program self study for the national accreditation with the Commission on Dental Accreditation (CODA) and is awaiting the Salida campus site visit in early Spring of 2015.

Mrs. Macias serves on the California Dental Assisting Teachers Association as a Public Policy Committee member; which makes her the ideal candidate for the open educator position on the Dental Assisting Council.

Sincerely,

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

Ezra Salas  
Campus President

MODESTO

5260 Pirrone Court, Salida, CA 95368

---

Tel: 209.416.3700 - Fax: 209.416.3690 - [www.heald.edu](http://www.heald.edu)

Mr. Richard Geraghty  
938 Marina Way South  
Richmond, CA 94804  
209.298.2345

January 19, 2015

To Whom It May Concern:

I strongly recommend my colleague, Gina Macias, for employment with your organization. I have had the pleasure of working alongside Gina for 4 years at Heald College Modesto, where she has been entrusted with the success of 800 plus active students, 1,200 graduates, and over 90 full and part time Dental Assisting Students


I have had the opportunity to observe Gina's professional skills as well as interpersonal style. She is consistently pleasant, and takes on all assignments with enthusiasm, vigor, and dedication. Gina's attention to detail and unwavering focus on compliance and ethics is second to none.

Regardless of deadlines or other pressure, Gina always delivers. Gina's superior organizational skills make her the consummate multi-tasker and has also led to Heald College Modesto's superior internal and external audit scores and receiving the prestigious "Campus of the Year" award every year that it has been in operation.

Beyond audit scores, another strength of Gina's is retention of both employee's and students. Gina has been instrumental in implementing several retention tactics that have been modeled and implemented division wide. Gina is highly respected by her co-workers and peers, for her willingness to help anyone anytime she can. She has also been instrumental in the overall success and well being of the department. Gina is very well organized, diligent in her paperwork, easily reachable, and always on time.

While I will miss seeing Gina around the campus, she has earned the opportunity to further her career at your organization. I would highly recommend her and encourage you to make her a part of your organization immediately. Please feel free to call me if any other information is needed.

Sincerely,



Richard Geraghty  
Director of Career Services  
209.298.2345

**Mrs. Gina Macias, CDA, RDAEF, BS  
Curriculum Vitae**



**I. PROFESSIONAL BACKGROUND**

**Education**

<i>Date</i>	<i>Institution</i>	<i>Degree</i>	<i>Major</i>
1991-1993	San Joaquin Delta College	Prerequisites	General Ed.
2005-2008	University of Phoenix	Bachelors of Science	Business Management
2009-Present	University of Phoenix	Masters of Education	Adult Education

**Professional Business**

**2010– Present                      Program Director of Dental Assisting                      Heald College- Modesto Campus**

- Recruit, screen, hire, train, develop, observe, mentor, coach, lead and evaluate employees to maintain the overall quality and integrity of teaching and learning within the assigned discipline.
- Assign employees quarterly schedule and courses, staff program with qualified instructors, and coverage to cover shifts.
- Ensure customer surveys are administered quarterly, consult on survey results to management and staff to enhance metrics and results.
- Conduct employee coaching when performance warrants improvement, conduct annual performance reviews and evaluations.
- Assist in staff development of a positive classroom learning environment to insure high rates of student success.
- Create annual program budget, oversee and manage a quarter million dollar programmatic financial operational budget required for accreditation.
- Maintains compliance with all accrediting standards, program requirements and agreements.
- Actively participate in the college's student retention management program and achieve annual campus quarterly retention targets (2011 ended at 5.7 on 6.2 budget)
- Provides leadership for the college's student retention management program and achieves quarterly, campus retention targets for Dental Assisting program.
- Works with the Director of Academic Affairs and other campus academic affairs department staff to plan and implement student activities, including Student Orientation and Graduation.
- Provide input for the quarterly Master Schedule including identifying course offerings and scheduling students for appropriate classes as needed to maintain an effective and efficient course schedule that keeps student on track for graduation and falls within budgeting guidelines.
- Implement the Heald plan for the assessment of student learning outcomes and support services including participation in systematic program review.
- Work with students for any requested schedule changes prior to the end of the add/drop period of a quarter.
- Provide regularly scheduled academic advising to students within the program.
- Participate in curriculum design and development activities including actively working with CAO, other campus faculty, and program directors as needed to maintain the overall quality and integrity of the curriculum.
- Implement new or revised curriculum on campus including text book selection and selection of equipment and supplies.
- Ensure program-level compliance with all internal academic policies and procedures and all applicable accrediting standards, state licensing requirements, FERPA, and all other applicable external rules and regulations.

- Recruit participants and actively participate in employer advisory committees and other activities designed to solicit input into curriculum and build relationships with the employers and potential employers of Heald graduates.
- Respond to industry needs within campus's region with community involvement and the development and management of student internships.
- Identify and develop internship/externship sites and intern/extern agreements. Monitor and supervise internship/externship activities and ensure compliance with intern/extern site agreements..
- Ensures students are placed in externship sites within the first week of the appropriate quarter in which the extern is scheduled.
- In conjunction with corporate academic affairs, develop Dental Assisting program articulation agreements.
- Assist the Director of Academic Affairs and other staff in ensuring high quality student services, specifically, provide academic advising for students as it relates to their Dental Assisting program.
- Maintains on-going communications with corporate academic affairs, regional business, Dental Assisting providers, and industry to assure program relevance and viability.

**2010–2010                      Dental Assisting Program Instructor                      Heald College- Stockton Campus**

- Prepare and provide all lecture, laboratory and clinical instruction according to the required curriculum.
- Follow current course outlines, objectives, and evaluation mechanisms for the program and/or develop such when indicated by the Program Director.
- Maintain a lesson plan of daily instructional events.
- Monitor student attendance and retention.
- Grading assignments, returning graded assignments to students, and assigning final grades for all students in a timely manner.
- Provide educational assistance to students during regularly scheduled times (i.e., office hours) or by appointment.
- Advise students as it relates to school policies, satisfactory performance, etc.
- Maintain professional appearance and ensure students al maintain a professional appearance and attitude..
- Maintain professional expertise (faculty development) to meet accreditation standards by attending educational seminars in professional field, reading current literature, attending online courses, etc.
- Serve on committees (e.g., curriculum development, retention, etc) as assigned based upon expertise or campus needs.

**2008 – 2010                      Dental Assisting Program Director                      Kaplan Higher Education**

- Managing the instructors and the educational activities of the department and all classes both day and evening.
- Adherence to applicable accreditation commission standards or agencies regulations, the school policies and procedures, and the department's curricula.
- Monitor student progress, conduct student orientations and advise students throughout the program.
- Assist with on-going review and development of curricula in the department and make suggestions per policy.
- Function as the Instructor of Record for all assigned externship students within the programs of responsibility.
- Evaluate each student's competency progress and skill attainment using a standardized performance evaluation form.
- Evaluate and approve potential extern facilities and their equipment in support of programmatic needs.
- Work closely with site supervisory personnel to present positive student experiences. Maintain knowledge of all industry standards, certifications, trends and technology. Make recommendations for updating course materials and textbooks.
- Assist in the development of sufficient externship sites to support the school's programs and the student population therein.
- Coordinate the initiation, approval and signing of sufficient affiliation agreements in support of programmatic needs.
- Maintain adequate records to effectively document the various aspects of the position.
- Facilitate communication between the Career Services and Education Departments.

- Present Externship and Site Assignment orientation workshops.
  - Prepare students with the knowledge, skills, and work habits required for entry-level dental assisting positions including:
  - The dental team, legal and ethical issues of dentistry, anatomy and physiology, preventive dentistry, chair side assisting, dental materials, dental laboratory procedures, dental radiology, office management communications, and PC skills as they relate to dental practice.

**1995 – 2008**

**Full-time Lead RDAEF (AEF604)**

**Valley Oak Dental Group**

- Highly trained in Cerec 3 restoration treatment and procedures.
- Experienced in Oral Conscious Sedation treatment and procedures.
- Experienced in Full mouth cosmetic and functional restoration.
- Advanced in all aspect of four-handed chair-side assisting.
- Lead assistant in charge of training clinical new hires.
- Developed a new hire training manual defining employee policy, procedures and protocol both clinical and administrative.
- Systematically organized bimonthly ordering process resulting in a 12% reduction in annual ordering budget.
- Assist dentists and oversee daily operations necessary for patient flow.
- Managed daily, monthly, and annual production target levels resulting in a exceeding our annual production goal of \$740,000 for the 2007 year.
- Introduced work and scheduling processes that improved work productivity which enabled DDS to achieve consistent budgetary production goals.
- Fluent in Microsoft Word, Excel, Power Point, Softdent
- Experienced in Dentirx, Eaglesoft and Dexsis.

## II. SCHOLARLY ACTIVITIES and PROFESSIONAL ACTIVITIES

- 2014-Current CADAT Public Policy Committee member
- 2013-Current Heald College Salida Campus Chair and member for the Regional Academic Council of Heald College.
- 2010-Current Active in on-going revisions in Dental Assisting program curriculum to meet both Dental Board of California and Commission on Dental Accreditation (CODA) regulatory Compliance requirements.
- 2009-2011 Assisted in the development, coordination and implementation of RDA written Examination questions and answers with the Dental Board of California.
- 2008-2009 Assisted in on-going update and revision of complete full-time DA program curriculum At Kaplan Higher Education
- 2010-Current Dental Assisting National Board (DANB) – Certified Dental Assistant
- 2010-Current American Dental Assistants Association (ADAA)
- 2010-Current California Association of Dental Assisting Teachers (CADAT)
- 2010-Current San Joaquin Dental Society (SJDS)
- 2010-Current California Dental Association (CDA)

## III. PROFESSIONAL REFERENCES

Dr. Bonnie Morehead D.D.S  
Dentist- Owner Valley Oak Dental Group  
Manteca, CA  
(209) 823-9341

Richard Geraghty Jr.  
Director of Career Services at Kaiser Permanente  
School of Allied Health Sciences (KPSAHS)  
(209) 298-2345

Ezra Salas  
Campus President  
Salida, CA  
(209) 416-3718

Patricia Nulia  
Sr. Registrar of Student Records  
Salida, CA  
(209) 416-3761





**Dental Assisting National Board, Inc.**  
*Measuring Dental Assisting Excellence®*

## DANB-Issued Credential Verification

**Gina Macias**  
 Riverbank, CA

DANB Certifications Earned	Date Earned	Status
Certified Dental Assistant	10/06/2010	Current Through 10/06/2015
-----		
Certificates Of Competency	Date Earned	Status
Infection Control	10/06/2010	No Expiration Date
Radiation Health and Safety	10/06/2010	No Expiration Date

### Search by Social Security or Certification Number

### Search by First and Last Name and State

### Search by Arizona or Oregon Certificate Number

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## DENTAL BOARD OF CALIFORNIA

Licensee Name:	MACIAS GINA SUZETTE
License Type:	REGISTERED DENTAL ASSISTANT - EXTENDED FUNCTIONS
License Number:	604
License Status:	RENEWED/CURRENT <a href="#">Definition</a>
Expiration Date:	October 31, 2015
Issue Date:	January 25, 1999
County:	STANISLAUS
Actions:	No

### Related Licenses/Registrations/Permits

No records returned

### Disciplinary Actions

No information available from this agency

Public Record Action(s)

**This information is updated Monday through Friday - Last updated: JAN-14-2015**

#### **Disclaimer**

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**POWELL**

Andrea Powell, RDA, MBA



January 24, 2015

Karen M. Fischer, MPA  
Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

**RECEIVED**

JAN 28 2015

DENTAL BOARD  
OF CALIFORNIA

Dear Ms. Fischer:

Tamara McNealy, a dental assisting instructor at San Joaquin Valley College in Fresno, who I have known for over ten years, suggested that I contact you regarding the open Dental Assisting Council position with the Dental Board of California. My professional experience, along with my educational background in business, makes me an excellent candidate for this position.

As you will see from the enclosed resume, I have more than 12 years of experience in the field of dentistry. My resume shows that in addition to practicing as an RDA, I have furthered my education. Implementation of business concepts, combined with the dental experience is the ultimate goal in my career journey. I would be grateful for an opportunity to influence the dental community. My commitment to personal and professional excellence, my excellent written and oral communication skills, and my work ethic would complement this role.

If you have questions, or if you want to schedule an interview, please contact me via phone or email. I look forward to meeting you to discuss the opportunity with the Dental Board of California.

Sincerely,

A handwritten signature in black ink, appearing to read 'APowell'.

Andrea Powell, RDA, MBA

Enclosure

# Andrea Powell

---

## OBJECTIVE

Currently seeking an opportunity for appointment to the Dental Assisting Council

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## EDUCATION

University of Phoenix, Fresno, California September 2012 to Apr. 2014  
**MBA, GPA 3.8**

Worked in a variety of learning teams throughout the program to assemble presentations, papers, and projects. Conducted various analyses using statistics and financial information. Implemented critical thinking skills and sound judgment to solve problems. Regularly lead teams, directed team meetings, applied effective communication, and edited team assignments. Consistently met deadlines. Honed leadership skills and gained more knowledge in making business decisions.

University of Phoenix, Fresno, California Feb. 2010 to Apr. 2012  
**B.S., Business Management, GPA 3.7**

Introduced to business concepts including, accounting, ethics, marketing, leadership, critical thinking, and management. Effectively used time management and a variety of resources to complete assignments. Completed multiple presentations during the program using creative approaches and audience engagement.

San Joaquin Valley College, Fresno, California Feb. 2001 to Mar. 2002  
**A.S., Dental Assisting, GPA 3.75**

Volunteered at multiple events providing dental care to the community and offices to obtain more knowledge and experience. Appointed team leader during large projects.

---

## PROFESSIONAL EXPERIENCE

Scott Janzen, D.D.S, Inc., Fresno, California May 2002 to Present  
**Back Office Manager and Lead Dental Assistant**

- Train interns and new hires using effective communication and leadership
- Implemented organizational tools for organization, tracking supplies, and equipment maintenance
- Reduce costs by researching the most affordable products, taking advantage of promotions, utilizing the just-in-time method, and networking with vendors
- Created a bonus incentive program by analyzing data to set reasonable goals and track progress
- Order products, maintain vendor relationships, and manage resources
- ZOOM bleaching
- Chairside assisting
- Sterilization
- Take alginate impressions, fabricate temporary crowns, lab work
- Answer telephone, schedule appointments, and provide exceptional customer service
- Maintain patient flow, anticipate patient and doctor's needs
- Provide exceptional patient management and care
- Exceed customary protocol to retain patients by establishing a rapport and actively listening to patient concerns
- Application of OSHA standards
- *Certified in coronal polish, radiography, and CPR*

---

## PERSONAL SKILLS

- 
- 
- Proficient user of MS Word, PowerPoint, Excel
  - Critical thinking and problem solving
  - Leadership
  - Effective Communicator
  - Organized, Detail-oriented
  - Quick learner and Multi-tasking skills
  - Responsible, Reliable
  - Team player
  - Exceptional attendance

### **MEMBERSHIPS & AFFILIATIONS**

- Delta Mu Delta International Honor Society in Business



# RECEIVED APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

JAN 28 2015

DENTAL BOARD  
OF CALIFORNIA

**PLEASE PRINT**

NAME Andrea Powell

ADDRESS\* [REDACTED]

PHONE NOS. (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number: RDA 59990 Expiration date: 04/2016

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

NO



2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

NO

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

YES Dr. Scott Janzen  
7730 N. Fresno St. suite 101  
Fresno, Ca 93720

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes

No

5. Are you employed by a current member of the Dental Board?

Yes

No

6. Have you served on the Dental Assisting Forum?

Yes

No

7. Do you have a financial interest in any registered dental assisting school?

Yes

No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

#### **Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

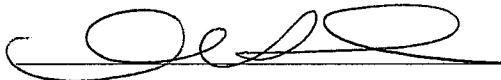
The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature



Date

01/25/2015

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

Dr. Scott Janzen  
7730 N. Fresno St. Suite 101  
Fresno, Ca 93720

January 26, 2015

To Whom It May Concern,


It is a great honor and pleasure to give Andrea Powell my highest recommendation for a position on the Board of Dental Assistants for the State of California. Andrea has worked with me for over 12-years and has proven to be an exemplary employee. She began her career as an extern in my office and soon finished school, passed her RDA exam, and quickly demonstrated her leadership skills by becoming the head dental assistant, responsible for the entire back office.

Andrea is intelligent, articulate, outgoing and an excellent communicator. Over the past several years, she attended school in the evenings to pursue both a Bachelors and Masters degree in Business Administration. She excelled in her courses and worked well with her classmates on team projects, all the while continuing to work overtime hours at my office. She always goes above and beyond to ensure the back office runs smoothly, professionally and all patients are well cared for.

I believe Andrea will be a great asset to the board. She will take her commitment seriously and always give her best effort. I would expect her to be insightful and offer positive contributions as a board member. She is passionate about her work and possesses the skills and knowledge to make improvements for the entire dental profession.

Please feel free to contact me for any further information I may provide regarding Andrea.

Sincerely,  
Dr. Scott Janzen

  
Scott Janzen

janzendds@yahoo.com  
559-779-5590

**RAE**

**RECEIVED**

**JAN 30 2015**

January 25, 2015

Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

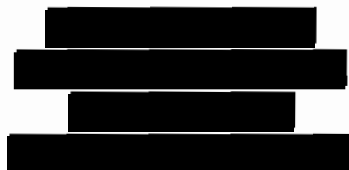
DENTAL BOARD  
OF CALIFORNIA

Dear Members of the Dental Board,

I am passionate about the dental profession. I have been a Registered Dental Assistant for over eight years, and in this time have experienced and learned much through my different positions. Most recently, my position with the Tolosa Children's Dental Center (Tolosa) as Lead Dental Assistant has been eye opening and an invaluable experience. Tolosa is a private non-profit pediatric dental office that sees the underserved population of San Luis Obispo County. There are few places that provide the type of care that Tolosa does and we see the effect that it has on our patients every day. While many of our state's underserved have access to care problems and do not have access to pediatric specialty care, our county is served well. This experience has shown me both what the public health dentistry is about and what a pediatric specialty office can offer. Within my first year at the clinic I was promoted to the Lead Dental Assistant overseeing all Dental Assistants, staff training, infection control, ordering, OSHA, and many other clinical responsibilities. Recently Tolosa opened a second office to increase access to care, I was given the responsibility to help start and oversee all operations as well as Dental Assistants. In addition, I gained experience starting and running a School Sealant program in many of the local schools and have volunteered and helped to coordinate our local Give Kids a Smile Program. At this point in my career, I am looking for ways to continue to make our profession better and serve the community that we support. I would be honored to serve and offer my expertise as a leader, innovator and problem solver in the next four years.

Sincerely,

Ryan B. Rae RDA





# Ryan B. Rae RDA

## Education

- **Bachelor of Science in Biological Science** Biola University, La Mirada, CA
- **Registered Dental Assistant** Hancock College Dental Assisting, Santa Maria, CA
- **High School Diploma** Righetti High School, Santa Maria, CA

## Experience

- **Tolosa Children's Dental Center** Pediatric Dental Clinic Paso Robles, CA  
(Lead Dental Assistant)  
October 2011 to current
- **Dr. David Tassej DDS** General Dentist Irvine, CA  
September 2010 to July 2011
- **Dr. Daniel Suh DDS** Implant Specialist Irvine, CA  
September 2010 to July 2011
- **Dr. Roodzant DDS/ Dr. Redden** General Dentist / Prosthodontist La Mirada, CA  
September 2007 to September 2010
- **Dr. Warren Gabaree Jr. DDS** General Dentist Santa Maria, CA  
October 2005 to September 2008
- **Dr. David F. Ouellet DDS/ Dr. Kobliska** General Dentist Santa Maria, CA  
Summer 2008
- **Dr. Kirk A. Specht DDS** Orthodontist Santa Maria, CA  
Summer 2006 and Summer 2007
- **Dr. Robert Caraco DDS** General Dentist Santa Barbara, CA  
January 2007
- **Dr. Paritosh Patel DDS** Children Limited Pismo Beach, CA  
Spring 2006

## Licenses and Skills

RDA 2006: CPR Certified, Coronal Polishing License, X-ray License, Sealant License

Cerac, Invisalign, Lumineers, Panorex, Sirona 3-D Imaging, Dextrix, Eaglesoft, Nitrous Oxide and More

Hospital Privileges: Sierra Vista Regional Medical Center, French Hospital Medical Center, Twin Cities Community Hospital

## Programs

Give Kids a Smile Program, San Luis Obispo County Sealant Program  
Santa Maria Royal Family Kids Camp



# **Ryan B. Rae RDA**

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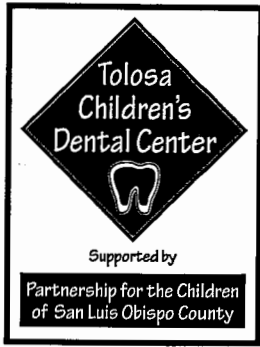
**Suzanne Russell Clinic Director  
James Forester DDS Dental Director/ Pediatric Specialist  
Andy Livingood DDS Pediatric Specialist  
717 Walnut Drive  
Paso Robles, CA 93446  
(805) 238-5334**

**Warren F. Gabaree JR., DDS  
Barcellus Professional Plaza  
426 E. Barcellus Suite 105  
Santa Maria, CA 93455  
(805) 347-4785**

**Kathy Johnson RDA  
Instructor/Coordinator, Dental Assisting Program  
Allan Hancock College  
800 South College Drive  
Santa Maria, CA 93454  
(805) 922-6966 Ext. 3386**

**Gerald P. Roodzant DDS  
11311 La Mirada Blvd Suite C  
Whittier, CA 90604  
(562) 944-2995**

**David L. Tasseey DDS  
4950 Barranca Pkwy Suite 302  
Irvine, CA 92604  
(949) 857-1244**



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"To help ensure access to dental care for children from underserved families in San Luis Obispo County"

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January 27, 2015

Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

Dear Members of the Dental Board-

I am writing this letter in support of Ryan Rae's application for a position on the Dental Assisting Council. Ryan currently serves as the Lead Dental Assistant for the Tolosa Children's Dental Center. I am the Dental Director of the Clinic and have been involved since 2007. In that time we have seen the ups and downs of a local non-profit pediatric dental office that has aspirations of continued growth and optimal service to our community. We continue to see this on a daily basis and it is not without the help of an amazing staff. We have more than doubled in size, more than doubled in staff, and are seeing an incredible amount of patients every day.

Ryan came to us as a confident and experienced RDA in 2011. This was shortly after a second expansion of the current clinic and an attempt to hire the necessary staff to support this move. His integration in the clinic was rapid and his leadership was evident immediately. Within a short amount of time he was the go to person for all of the staff including the doctors. It was not long before we realized the necessity of having a Lead Dental Assistant and Ryan was a unanimous and easy choice.

I rely on Ryan every day to keep the clinic in working order. This includes and is even more important on the days that I am not present in the clinic. I do not have to be concerned with how the flow is going and who will be taking care of the details. He has very high expectations for both himself and our other staff and therefore gets the most out of people. He is reliable and responsible and does not shy away from difficult situations. His ability to take the initiative to



find solutions to problems is unmatched by any assistant that I have worked with.

Every few days I wonder, "How long are we lucky enough to have Ryan around?" For us he has proven to be a game changer in realizing our goals for community service but overall he is a great person with great potential to lead. I strongly urge you to consider Ryan Rae for the Dental Assisting Council.

Regards,

A handwritten signature in black ink, appearing to read "James A. Forester". The signature is fluid and cursive, with a large loop at the beginning and a long, sweeping tail.

James A. Forester, DDS  
Diplomate - American Board of Pediatric Dentistry  
Dental Director - Tolosa Children's Dental Center  
717 Walnut Drive  
Paso Robles, CA 93446  
(805)238-5334  
foresterdds@gmail.com



## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

PLEASE PRINT

NAME Rhyan B. Rae

ADDRESS\* [REDACTED]

PHONE NOS. (work) [REDACTED] (home) [REDACTED] (cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number: 68075 Expiration date: June 30th, 2015

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

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**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

*NO*

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

NO

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Yes

Tolosa Children's Dental Center  
717 Walnut Dr.  
Paso Robles, CA 93446

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

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**Possible Disclosure of Personal Information.**


We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature  Date 01/25/15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

**RAMOS**

**Emma K Ramos RDA 36727**

---

**RECEIVED**

JAN 29 2015

DENTAL BOARD OF CALIFORNIA  
2005 Evergreen Street, Suite 1500  
Sacramento, CA 95815  
(916) 263-2300

DENTAL BOARD  
OF CALIFORNIA

RE: Re-appointment to the Dental Assisting Council for the Dental Board of California

Dear Karen M. Fischer, Executive Officer

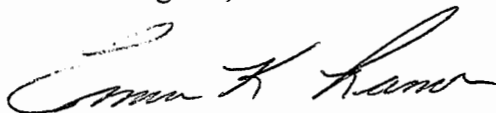
I would like the opportunity to continue serving the Board especially with the current involvement with resent involvement with CODA and looking forward to working with everyone with future assignments.

With my educational background and experience with an RDA Program, I have the qualifications you are seeking to help you with the many changes that our state is doing with the DA and RDA programs here in California. I have a strong working knowledge of the dental industry working both in the field and teaching for 36 years. While working for UEI I started out as an instructor working my way to the Program Director position for 5 yrs, working my way up to the company's Program Chair for the entire company. As the RDA Program Chair, I was responsible for Curriculum Development, Product Knowledge to management teams, Training Meetings for all RDA instructors keeping the program up to date with state regulations has the program needed to be in compliance with the board. I would enjoy the opportunity to sit on the board sharing my experience, knowledge and organizational skills with members with the same qualifications.

Please allow me to show you what I can bring to the board. My attached resume outlines all that I can offer the dental board. I strongly believe that I will be a good fit and would love the opportunity to become a valued member of the dental board. The attached resume details my extensive experience and training. If you choose to interview and hire me, you will not be disappointed. My passion for this field, combined with my respect for the dental board, the depth of experience I can offer will contribute to the dental board.

I appreciate your consideration.

Best regards,



Emma K Ramos

# Emma K Ramos RDA 36727

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## SUMMARY

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Responsible RDA Instructor with excellent communication skills demonstrated by over 20 years of teaching experience, motivated, enthusiastic educator with 34 years experience in the Dental field. Enthusiastic in teaching student's professionalism with creative instructing experience in vocational schools addressing student needs and ensuring proper student development. Resourceful in developing student's hands-on skills and the knowledge necessary for them to be successful in the dental field. Experience in curriculum development and creating proficiency sheets.

## Core Qualifications

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- Mastery of RDA teaching methods
- Expertise in curriculum development
- Motivating students
- Performance assessments
- Interactive teaching/learning
- Innovative lesson planning
- Classroom management
- Positive learning environment
- Learning style assessment
- Creative questioning
- Performance assessments
- Creative lesson plan development
- Creative learning strategies
- Effective time management
- Audio-visual aid implementation
- Expertise in RDA practical skills
- Experience with instructional design
- Critical thinking

## Achievements

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### Administration:

Managed RDA Program for 12 campuses opening 3 campuses.

### Material Development.

Created materials, curriculum targeting different types of learners to create an engaging educational experience.

### Curriculum Design.

Designed, developed and implemented daily lessons per modules.

Skills books with proficiency sheets for step-by-step procedures.

Employed activities and techniques to encourage instructor's different learning techniques to use within their classroom.

### Team Building and Leadership.

Employed activities and techniques to encourage instructor's different learning techniques to use within their classrooms to keep students motivated

### Training:

Implemented training modules to inter-departmental teams to ensure smooth adoption of RDA Program.

Ensured training during all new changes taken place during curriculum development

Organized training dates with instructors and outside vendors on new materials or equipment



# Emma K Ramos RDA 36727

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## Professional Experience

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Dental Instructor  
UEI College – Riverside CA  
May 2014 to Current  
Instructor

UEI College – El Monte CA  
May 2013- November 2013  
Interim CDC and Instructor

Dental Instructor  
IEC – Irvine CA  
November 2012 to April 2013  
Curriculum Development with Mariam Mohammed, Campus Audits , Preparing campuses for Board visits.

Dental Instructor  
UEI College – Ontario CA  
November 1999 to 2012  
Program Director 00/08. Program Chair 08/11. Combined discipline plan with effective measures and various lesson plans to increase concentration, participation, and progress student accountability.

Dental Instructor  
North-West College – Pomona CA  
June 1993 to November 1999  
Instructor/Responsible for placement of students

RDA Assistant  
October 1987 to November 1999  
Anthony Kavorinos DDS – Chino, CA  
Supervisor-back office

RDA Assistant  
February 1979 to September 1987  
William H. Stanley – Ontario, CA  
Front and Chair-side assisting

## Education and Training

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North-West College  
Pomona, CA  
Dental Assisting  
Diploma

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## **Certifications**

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- BLS Instructor Certificate
- CPR Certified
- X-ray License
- Pit and Fissure License
- Ultra-sonic scaling License
- RDA License
- HIPAA Cert
- Dental Practice Act

## **Community Involvement**

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CDA CARES – Volunteer worker November 2014

Volunteered for LA care know in 2010 - 2013 in the Dental department

Maria Shriver women's clinic in 2010

Elementary schools 1-4 grades. RDA student's giving hygiene instructions. Through out the years (3-4 times a year)

## **Affiliations**

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CADAT California Association of Dental Assisting Teachers. Member since 2000

Dental Board of California – Dental Council Member since 2012



## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

**PLEASE PRINT**

NAME Emma K Ramos

ADDRESS: [REDACTED]

PHONE NOS. (work) [REDACTED]

(home) [REDACTED]

(cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number:

RDA 36727

Expiration date:

07/15

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

NO

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

Yes UEI College 1860 University Ave Riverside, CA 92507  
IEC Corporation is the Colleges corporate offices located in Irvine, CA

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

NO

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
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Signature



Date

01/15/15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

**RUIZ**



## APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

**RECEIVED**

JAN 20 2015

**PLEASE PRINT**

NAME Martha A Ruiz

DENTAL BOARD  
OF CALIFORNIA

ADDRESS\* [REDACTED]

PHONE NOS. (work) \_\_\_\_\_

(home) [REDACTED]

(cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number: 54643

Expiration date: 2/28/2015

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**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

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**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.



**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

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**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

I hold a Program Support Team (PST) position with the Health Correctional System, that entails overseeing of the dental assistants in the dental institution clinics. We perform infection control and clinical duty audits and review policy and give training when necessary.  
Dental Health Care System (DHCS)  
California Department of Correction and Rehabilitation

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

San Joaquin Valley College  
201 New Stine Rd Bakersfield CA 93309 2004-2014

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Dental Health Care System (DHCS)(CDCR)  
5509 Young St Bakersfield CA 93311

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years? +

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

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Signature Martha Rhee Date 1-16-15

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300

## Martha A Ruiz



### **Objective**

To become part of the Dental Assisting Council

### **Qualifications**

Diligent and motivated with 15 yrs experience: Dental Assisting in all aspects, Teaching Dental assisting courses, Directing Dental assisting programs, being a part of the quality management team for California Department of Correction and Rehabilitations (CDCR) for the Dental Department and interpreter/translator certified, Dental Examiner for California Dental State Board.

### **Education**

San Joaquin Valley College

Bakersfield, CA 1999

***Associate of Science Degree, Dental Assisting***

### **License & Certificates**

Registered Dental Assisting, CPR certified/BLS Instructor and interpreter/translator certified, T 4T Master Trainer

### **Employment**

California Department of Corrections and Rehabilitation Bakersfield, CA 2009 –Present

#### ***Dental Assistant, CF/PST***

Assist in Quality Management, Development, Assessment tools and monitoring of the onsite dental health care program. Monitoring and assessments related to the dental assistant's roles and functions. Translates when ever needed to answer or ask questions for the delivery of Dental or Medical health care. Participates in reviews of the Unit Health Record, observation and implementation of critical systems. Assist in the development of assessment tools to evaluate the quality of dental services related to the Dental Assistant's functions and duties in clinics. Conduct surveys to evaluate areas such as the chair side Dental Assistant's role ie; Infection Control Procedures; Radiographic Procedures; Operatory set-up and breakdown operatory flow. Assists dental field staff in the appropriate maintenance of Proof of Practice documents related to the dental assistant's duties and functions. Provides clinical duties as a dental assistant to institutions as needed during dental assistant staff shortage to include acting as Supervising Dental Assistant. Participates in the committees, subcommittees, and Quality Improvement Teams that comprise the headquarters' performance management system.

San Joaquin Valley College

Bakersfield, CA 2004-2014

#### ***Dental Instructor/Director***

In partnership with the Division Manager and Academic Dean in interview and selection of faculty, developing and maintaining teaching curriculum. Participates in new faculty orientation and training and participates in classroom observation and faculty evaluations and maintains patient records. Participates in curriculum revision and maintains appropriate levels of lab supply inventory. Assures that lab equipment is properly maintained. Participates in the selection of textbooks, software, and capital equipment. Facilitates advisory committee meetings, monitors

graduate placement and pass rates on applicable licensure and registry examinations and participates in accreditation and approval processes. Instructs, guides and mentors students in prep class for state board examination.

Adept Dental Group Bakersfield CA 2006-2008

Chairside assisting in Cosmetic Dentistry, Oral Surgery, Pediatrics, able to work in multispecialty office.

Hani Guirguis DMD Bakersfield, CA 2004-2006

***Registered Dental assistant/back office manager***

Chairside assisting in Cosmetic Dentistry, knowledgeable in temporization, able to maintain dental material orders, OSHA logs and maintenance of dental equipment and training of additional needed staff. Facilitating translation with patients necessary for Dental Care.

National Health Services Wasco, CA 1999-2004

***Dental Assistant/Coordinator***

Chairside assisting in Restorative, Endodontic, and Oral Surgery Procedures, maintaining assistants schedules, performing evaluations, assisting in our company on the job training programs. Involved in community health-education services offered by our company to better and help our communities.

**AFFILIATIONS:** CDA, ADAA, KCDS,DBC

**REFERENCES:** Available Upon Request

April 7, 2014

Letter of Recommendation for Martha Ruiz, RDA

To whom it may concern,

I am please to recommend Martha Ruiz for the position of Board Examiner. I have worked with Martha for the past 3 years. Martha demonstrates a detailed knowledge of the tasks which must be completed by Registered Dental Assistants. During the course of her work, Martha has regularly proved training and audit review to dental clinics. Martha is knowledgeable in the dental requirements set forth in the Business and Professions Code, OSHA guidelines and Centers for Disease Control mandates.

Additionally, Martha has been instrumental in the activation of new clinic facilities. Specifically in the role of Supervising Dental Assistant with overall responsibility to oversee the daily work practices of multiple Registered Dental Assistants.

Please feel free to contact me with further questions.

Dr. Matthew Milnes DDS  
Regional Dental Director  
CDCR – Region III

February 27, 2014

Letter of Recommendation for Martha Ruiz, RDA

To Whom It May Concern:

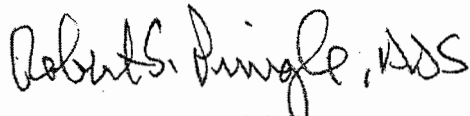
I have had the pleasure of knowing and working with Martha Ruiz for the past 5 years as a Regional Dental Director and Supervising Dentist for the California Department of Corrections and Rehabilitation (CDCR). She is one of the most proficient, thorough, dedicated, and morally strong individuals I have been associated with.

Martha is a top notch dental assistant for the CDCR Region III Dental Program and has an astute understanding of the numerous tasks required by all staff members and is able to successfully organize, assign and carry out multiple duties on a daily basis by making sure everything, and I mean everything, is prepared. These responsibilities to name a few involve tracking audits, training institutional dental staff, monitoring and supporting institutional administrative staff performance with creative ideas for improved performance. Martha gives extra effort willingly to ensure all particulars of her duties as well as the overall function of the department are handled appropriately and within the parameters of CDCR and/or Court regulations. Her unique ability to stay focused and organized allows her to be a dynamic and adept staff member who is much appreciated by all who are fortunate to have contact with her.

Martha enthusiastically gives of her time in support of numerous dental professional events and energetically participates in multiple activities in support of her family. Martha is an exceptional individual and whose professionalism and conscientious efforts contribute greatly to the harmony and success wherever her assistance is bestowed.

Martha Ruiz is a warm, delightful, and compassionate person who I feel fortunate to be associated with. She has my highest recommendation for any positions with increased challenges/responsibilities and her pleasant personality will be a wonderful and welcome addition.

Sincerely,



Robert S. Pringle, DDS  
Supervising Dentist  
CSP Corcoran  
559-707-9938 (Cell)  
559-992-9438 (Office)

# SAN JOAQUIN VALLEY COLLEGE

*The Board of Directors  
upon the recommendation of the Faculty,  
has conferred upon*

Martha A. Ruiz

*this*

Associate of Science Degree  
Dental Assisting

*with all the rights, honors, and responsibilities, this  
Twentieth day of May, Nineteen Ninety Nine,  
in Bakersfield, California*



*Mark Perry*

PRESIDENT

*David Baker, Ph.D.*

COLLEGE DIRECTOR

*Michael Perry*

CHIEF EXECUTIVE OFFICER

*Matt D. Keshel*

MEMBER OF THE BOARD OF GOVERNORS



**SAFAR**



**APPLICATION FOR APPOINTMENT TO THE  
DENTAL ASSISTING COUNCIL** **RECEIVED**

JAN 30 2015

DENTAL BOARD  
OF CALIFORNIA

**PLEASE PRINT**

NAME RAMINA

ADDRESS\* [REDACTED]

PHONE NOS. (work) [REDACTED] (home) [REDACTED] (cell) [REDACTED]

EMAIL ADDRESS: [REDACTED]

California License Type and Number: RDA62254 Expiration date: 04/30/2016

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Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

NO

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

NO

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

YES,  
NORTHERN DENTAL  
122 SARATOGA AVE.

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?

Yes  No

5. Are you employed by a current member of the Dental Board?

Yes  No

6. Have you served on the Dental Assisting Forum?

Yes  No

7. Do you have a financial interest in any registered dental assisting school?

Yes  No

If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature Ramona Sebr Date 01-27-2015

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300



Dental Board of California  
 2005 EVERGREEN STREET, SUITE 1550  
 SACRAMENTO, CA 95815-3831  
 916 263-2595



CUT HERE

**I M P O R T A N T**

1. Please include your License Number on any correspondence
2. Notify the Board of any name or address change in writing
3. Report any loss immediately in writing to the Board
4. Please sign and carry the Pocket License with you.

**Registered Dental Assistant/Coronal Polishing/  
 X-Ray Certification**

LICENSE NO. RDA 62254 EXPIRATION 04/30/16

**RAMINA SAFAR**



RAMINA SAFAR

Signature Ramina Safar

LICENSE NO.	EXPIRATION DATE	RECEIPT NO.
RDA 62254	04/30/16	40980105

**This is your receipt. Please save for your re**

**WILCOX**

**Carol Wilcox**

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**January 26, 2015**

**Dental Board Of California**

2005 Evergreen Street, Suite 1550

Sacramento, CA 95815

(916) 263-2300

[www.dbc.ca.gov](http://www.dbc.ca.gov)

To Whom It May Concern,

I am applying to be a member of the Dental Assisting Council. My educational background in the field of Dentistry, along with my professional experience, makes me an excellent candidate for this position. After becoming an RDA I joined the Pomona Valley Dental Assisting Society to help influence the RDA position within the local Dental community. As a member of the Pomona Valley Dental Society I was elected to the Board of Officers where I served as the secretary of the Board, the treasure, the vice president and the president.

As you will see from the enclosed resume, I have more than **30** years of experience in the field of **dental assisting**. My resume shows that I have been consistently working in the field of dentistry and am looking forward to applying my experience as a member of the Dental Assisting Council to help define and expand the scope of the RDA duties.

Sincerely,

*Carol Wilcox, RDA*

**Carol Wilcox, RDA**

Enclosure



**Carol Wilcox**

**EDUCATION**

**Associates of Science**

June 1979

Chaffey College, Rancho Cucamonga, CA

**EXPERIENCE**

RDA/Dispensary/Sterilization

April 18, 2011 – Present

Western University of Health Sciences/Patient Care Center  
The Dental Center

**Implant Treatment Coordinator and Marketer**

January 2004-January 2011

Dr. Thomas J. Kopic

250 East 7<sup>th</sup> St.

Upland, CA

- Presented to patient implant treatment plan
- Reviewed fees and payment options
- Scheduled appointments
- Scheduled all implant consultations and took X-ray's
- Follow-up calls to patient and referring doctor
- Handled the transferring of patient-care information to general dentist for further treatment
- Handled insurance pre-estimate and billing
- Coordinated and taught "Lunch and Learns" for general dentists and staff
- Visited and coordinated with referring doctors for both implants and periodontal procedures

**Surgical Assistant**

April 20, 1980-January 2011

Dr. Thomas J. Kopic

250 East 7<sup>th</sup> St.

Upland, CA

- Assisted in all surgeries
- Handled all sterilization processes
- Set- up and maintained all OSHA requirements and MSDS book
- Scheduled and assisted all post-op appointments, exams and consultations
- Took full mouth set of X-Ray's (trained for both film and digital)

**Front Desk Coordinator**

August 2009-October 2009

Dr. Thomas J. Kopic

250 East 7<sup>th</sup> St.

Upland, CA

- Coordinate schedules for implants and periodontal work
- Bill insurances
- Pre-determination to insurance companies
- Answered phones and placed appointment calls to patients
- Maintained organized files and balanced Day Sheet for production each day
- Made payment deposits each day

**QUALIFICATIONS**

- RDA License
- Coronal Polishing License
- X-Ray Certificate
- Completed courses in Levin Management, Implant Treatment Coordination, Appointment Scheduling, Insurance Billing, Treatment Coordination and Marketing

**SKILLS**

- Proficient in Microsoft Word
- Experience with working in Microsoft Excel
- Proficient at gathering information and organizing it for meetings
- Proficient in Soft Dent
- Proficient in Outlook and e-mail
- Proficient in both film and digital X-Ray's
- Proficient in taking impressions for study models, anatomical wax up and surgical guide



**APPLICATION FOR APPOINTMENT TO THE  
DENTAL ASSISTING COUNCIL** **RECEIVED**

JAN 30 2015

DENTAL BOARD  
OF CALIFORNIA

**PLEASE PRINT**

NAME Carol Wilcox

ADDRESS\* [REDACTED]

PHONE NOS. (work) [REDACTED] (home) [REDACTED] (cell) [REDACTED]

EMAIL ADDRESS [REDACTED]

California License Type and Number: RDA13196 Expiration date: 12/16

*\* By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

**PLEASE READ THIS APPLICATION IN ITS ENTIRETY.**

**COUNCIL COMPOSITION:** The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

**RESPONSIBILITIES:** The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

**QUALIFICATIONS:** The Board will consider applications to appoint five (5) members to the Council. Applicants must meet the following minimum requirements to be eligible for appointment.

Two (2) of those members shall be employed as faculty members of a registered dental assisting educational program approved by the Board, and shall have been so employed for at least the prior five years. Three (3) of those members, which shall include one registered dental assistant in extended functions, shall be employed clinically in private dental practice or public safety net or dental health care clinics.

All five members shall have possessed a current and active registered dental assistant or registered dental assistant in extended functions license for at least the prior five years, and shall not be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

**TERM OF OFFICE:** Each member shall serve for a term of four years.

**TRAVEL:** The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

**OTHER TIME COMMITMENTS:** Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

**In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:**

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

No

2. Have you been a faculty member of a registered dental assisting educational program approved by the Board for the past 5 years? If so, please provide the name and address of the program and dates of employment in the space below.

No

3. Are you currently employed in a clinical position in a private practice, public safety net clinic, or dental health care clinic? If so, please provide the name and address of the facility by which you are employed in the space below.

Western University of Health Sciences/College of Dental Medicine  
795 East Second Street,  
Pomona, CA 91766

4. Have you maintained a current and active RDA or RDAEF license for the past 5 years?  
Yes  No
5. Are you employed by a current member of the Dental Board?  
Yes  No
6. Have you served on the Dental Assisting Forum?  
Yes  No
7. Do you have a financial interest in any registered dental assisting school?  
Yes  No   
If yes, please indicate the name of the school in the space below and describe the nature of the financial interest (attach additional sheets if necessary).

8. Are you willing to comply with conflict of interest requirements that apply to board members? Yes  No

**In a cover letter, please write a brief statement indicating why you wish to serve as a member of the Council.**

**Employment references, not to exceed three (3), will be accepted but are not required.**

**An interview may be conducted as part of the application process.**

**Notice on Collection of Personal Information**

**Collection and Use of Personal Information.** The Dental Board of California collects the information requested on this form as authorized by Business and Professions Code Section 1742. The Board uses this information to evaluate applicants for appointment to the Dental Assisting Council of the Dental Board of California.

**Providing Personal Information Is Voluntary.** You do not have to provide the personal information requested. If you do not wish to provide personal information, such as your address, home telephone number, or employment experience, you may do so. In that case, however, the Board may not be able to communicate with you regarding your qualifications for appointment or to consider your eligibility for appointment to the Council.

**Access to Your Information.** You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

**Possible Disclosure of Personal Information.**

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

**Contact Information.** For questions about this application, the Department's privacy policy, or access to your records, you may contact the Board's Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature Carol Wilcox Date January 26, 2015

**SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES  
BY JANUARY 30, 2015 TO:**

Karen M. Fischer, MPA, Executive Officer  
Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815  
(916) 263-2300



Western  
University  
OF HEALTH SCIENCES

*The discipline of learning. The art of caring.*

College of Dental Medicine

January 28, 2015

Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

RE: Ms. Carol Wilcox

To Whom It May Concern:

This letter is provided in strong support of Carol Wilcox's application to the Dental Assisting Council of the Dental Board of California. I have known Ms. Wilcox for almost four years as an employee in the College and feel very comfortable providing this letter of support.

Carol serves the college as a Registered Dental Assistant in the sterilization and dispensary areas of our very active student clinic. She has been an excellent employee and brings a wealth of maturity and experience to our clinical operation. Working with more than 150 dental students and faculty can be challenging and demanding for some, but certainly not for Carol. She is always calm and helps others adopt a similar mind set.

Carol is interested in the position on the Dental Assisting Council to assure the RDAs in California continue to be viewed as professionals who serve the needs of the patients. She was positively influenced by Irma Noble, one of her instructors in dental assisting school. Carol was encouraged to be active in support of RDAs and views this as an exceptional opportunity to do just that.

Thank you for considering Ms. Wilcox for the open position. If there is any additional information I can provide on behalf of her application, please do not hesitate to contact me directly.

Sincerely,

A handwritten signature in black ink that reads "Steven W. Friedrichsen" followed by a horizontal line and the number "125".

Steven W. Friedrichsen, DDS  
Professor and Dean



Western  
University  
OF HEALTH SCIENCES

*The discipline of learning. The art of caring.*

College of Dental Medicine

January 26, 2015

Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

To Whom It May Concern:

**Letter of Recommendation: Carol Wilcox, RDA**

I am very pleased to support Carol Wilcox, RDA, in her application to the vacant position on the Dental Assisting Council of the Dental Board of California. I have known Carol since she began employment here at the College of Dental Medicine at Western University of Health Sciences in 2011. Carol currently works in our dispensary/sterilization area and is also the primary coordinator of our implant system components.

Due to her many years of experience as a dental assistant, I believe that Carol is ideally suited to represent her profession on the board. She has assisted in all phases of general dentistry and has special skills and knowledge in implant surgery, coordinating, and marketing. She previously also worked as a front desk coordinator so she has knowledge of both the clinical and administrative aspects of dental practice. Her thorough understanding of the various areas of practice would be a definite benefit in dealing with the many complex issues that I'm sure come before the assisting council for consideration. Carol also demonstrates the positive personal characteristics that you would be looking for in a representative. She is intelligent, hardworking, dependable, and can work independently with minimal supervision. She is proficient in computer skills, meets established deadlines, and gets along well with the many staff, students, and faculty she encounters on a daily basis in our dental school clinic. She has high ethical standards and the maturity and wisdom of experience that lead me to believe that she could make decisions on issues in a fair and objective manner to the benefit of those she would represent on the council. Overall, you would find her to have a humble attitude and be a pleasure to work with. She is quite excited about this opportunity and I know she would devote herself to doing the best job possible.

In summary, it is without hesitation that I give her my highest recommendation for this position.

Sincerely,

A handwritten signature in black ink, appearing to read "DLazarchik".

David A. Lazarchik, DMD  
Associate Dean  
Patient Care and Clinical Education

DAL/jda



*The discipline of learning. The art of caring.*

College of Dental Medicine

27 January 2015

Dental Board of California  
2005 Evergreen Street, Suite 1550  
Sacramento, CA 95815

Dear Dental Board Members:

It is my privilege to write this letter of recommendation for Carol Wilcox, RDA, as a candidate for a position on the Dental Assisting Council. I have known Carol for four years, and have worked closely with her during that time. She has a pleasant personality and has shown an ability to work well with faculty, staff and students in our dental clinic.

Carol is a dedicated, conscientious worker. As a leader in our dispensary and sterilization areas, she has demonstrated exceptional organization skills, and adapted quickly to our protocols and procedures. She was also helpful in developing and even changing some of the protocols to help us become more efficient.

Carol has a sterling character: she is dependable and trustworthy. When she is given a task to complete, she gets it done quickly, or enlists help to get it done. I have seen her function in group situations, and her collaborative skills are exemplary. Because of this, I feel that she will be a great asset to the Dental Assisting Council.

Carol has been a Registered Dental Assistant since 1979 in Upland, California. During this time, she has been exposed to both the administrative and the patient care sides of the dental practice. It is particularly noteworthy that she worked for the same dentist for the first 32 years of her career.

I feel that Carol Wilcox has the ability to make a significant contribution to the Dental Assisting Council. I give her my highest recommendation, without reservation, and ask that you give her serious consideration for a position.

Thank you for your consideration.

Sincerely yours,

A handwritten signature in black ink that reads 'Robert D. Stevenson'.

Robert D. Stevenson, DDS  
*Assistant Professor / Clinical Managing Partner*  
Western University College of Dental Medicine  
309 East Second Street  
Pomona, CA 91766  
(909) 706-3836





## MEMORANDUM

<b>DATE</b>	February 18, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Sarah Wallace, Assistant Executive Officer
<b>SUBJECT</b>	<b>Agenda Item 7:</b> Discussion and Possible Action Regarding Proposed Occupational Analysis for Registered Dental Assistants (RDA), Registered Dental Assistants in Extended Functions (RDAEF), Orthodontic Assistants (OA), and Dental Sedation Assistants (DSA)

### **Background:**

Business and Professions Code Section 139 specifies that the Legislature finds and declares that occupational analyses and examination validation studies are fundamental components of licensure programs and the Department of Consumer Affairs (Department) is responsible for the development of a policy regarding examination development and validation, and occupational analysis. Section 139 provides that this policy is required to address the following issues:

- (1) An appropriate schedule for examination validation and occupational analyses, and circumstances under which more frequent reviews are appropriate.
- (2) Minimum requirements for psychometrically sound examination validation, examination development, and occupational analyses, including standards for sufficient number of test items.
- (3) Standards for review of state and national examinations.
- (4) Setting of passing standards.
- (5) Appropriate funding sources for examination validations and occupational analyses.
- (6) Conditions under which boards, programs, and bureaus should use internal and external entities to conduct these reviews.
- (7) Standards for determining appropriate costs of reviews of different types of examinations, measured in terms of hours required.
- (8) Conditions under which it is appropriate to fund permanent and limited term positions within a board, program, or bureau to manage these reviews.

It is the policy of the Department that occupational analyses and examination development studies are fundamental components of licensure programs. Licensure examinations with substantial validity evidence are essential in preventing unqualified individuals from obtaining a professional license. To that end, licensure examinations must be:

- Developed following an examination outline that is based on a current occupational analysis.
- Regularly evaluated.
- Updated when tasks performed or prerequisite knowledge in a profession or on a job change, or to prevent overexposure of test questions.
- Reported annually to the Legislature.

An occupational analysis is defined as a method for identifying the tasks performed in a profession and the knowledge, skills, and abilities required to perform those tasks. For occupational licensing, the term occupational analysis is preferred over job analysis or practice analysis because the scope of analysis is across a profession, not an individual job.

According to the Department's policy, an occupational analysis and examination outline should be updated every five years to be considered current; however, many factors are taken into consideration when determining the need for a shorter interval. For instance, an occupational analysis and examination outline must be updated whenever there are significant changes in a profession's job tasks and/or demands, scope of practice, equipment, technology, required knowledge, skills and abilities, or laws and regulations governing the profession. The board is responsible for promptly notifying the examination development specialist of any significant changes to the profession. This is true both for California-specific and national licensure examination-related occupational analyses.

New forms of a licensure examination assist in the legal defensibility of the examination, prevent overexposure of test items, and keep the examination current. The decision to create an examination, or new forms of an examination, is made by the board responsible for the license in consultation with the examination development specialist. The creation of new examination forms depends on the needs of the testing program and the number of people taking the examination.

Boards have the ultimate responsibility to ensure that a licensure examination meets technical, professional, and legal standards and protects the health, safety, and welfare of the public by assessing a candidate's ability to practice at or above the level of minimum acceptable competence.

The inferences made from the resulting scores on a licensing examination are validated on a continuous basis. Gathering evidence in support of an examination and the resulting scores is an on-going process. Each examination is created from an

examination outline that is based upon the results of a current occupational analysis that identifies the job-related critical tasks, and related knowledge, skills, and abilities (KSAs) necessary for safe and competent practice. Examinations are designed to assess those KSAs. To ensure that examinations are job-related, SMEs must participate in all phases of examination development. All aspects of test development and test use, including occupational analysis, examination development, and validation, should adhere to accepted technical and professional standards to ensure that all items on the examination are psychometrically sound, job-related, and legally defensible.

**Proposed Occupational Analysis for Registered Dental Assistants (RDA) and Registered Dental Assistant in Extended Functions (RDAEF):**

At the November 2014 Board meeting, staff reported during the joint meeting of the Dental Assisting Council (Council) and the Board's Examination Committee (Committee) that an occupational analysis may be necessary in the near future. The Council and the Committee discussed concerns relating to the RDA practical examination and the fact that the pass rate has significantly decreased over the last year. Staff identified some of the challenges presented and recommended that an occupational analysis of the RDA and RDAEF professions may be an appropriate avenue to reestablish how best to assess an applicant's level of competence.

Subsequent to the meeting, staff met with the Department's Office of Professional Examination Services (OPES) to discuss the parameters of an occupational analysis and potential cost.

The occupational analysis would describe the RDA and RDAEF practice in terms of the tasks that are performed on the job and the knowledge required to practice safely and competently. The results of the occupational analysis would establish the foundation of an examination program that protects the health, safety, and welfare of the public.

An occupational analysis would require approximately 32 to 40 RDAs and 18 to 24 RDAEFs to serve as expert consultants. In licensure examination development work, expert consultants are known as subject matter experts (SMEs).

Approximately 8 RDAs and 4 RDAEFs would participate in interviews during the information-gathering phase of the project to identify job tasks and knowledge. Interviews would be conducted as long as new information is being generated. One practice focus group meeting would be held to provide additional information about RDA job tasks and knowledge. Eight to ten SMEs would be needed for each of the workshops to evaluate and redefine the tasks and knowledge and some SMEs may participate in both workshops and interviews.

A survey questionnaire based on the interview information would be developed and sent to a proportionate sample of licensed RDAs and RDAEFs throughout California. Additionally, a sample of licensed dentists who employ RDAs and/or RDAEFs would also be included in the survey. From these findings, OPES would prepare a report of findings and submit it to the Board for review.

The OPES projects its costs to conduct this occupational analysis to be \$60,000 and could take up to a year to complete.

**Staff Recommendation:**

Due to the concerns regarding the pass/fail rates of the currently administered RDA practical examination and the fact that the Board has not had the opportunity to conduct a complete occupational analysis for the RDA and RDAEF professions since their licensing programs were brought under the umbrella of the Board in 2009, Board staff strongly recommends that an occupational analysis be conducted as soon as possible. At this time, the cost of the occupational analysis is absorbable by the Dental Assisting Budget and the results would lay the foundation of an examination program that aligns with the Board's mission of protection of the public.

# **COMMITTEE MEETINGS**

# **DENTAL ASSISTING COUNCIL**



**NOTICE OF DENTAL ASSISTING COUNCIL MEETING AGENDA**

**Thursday, February 26, 2015**

*Upon Conclusion of Agenda Item 7*

Doubletree by Hilton

1646 Front Street, San Diego, CA 92101

619-239-6800 (Hotel) or 916-263-2300 (Board Office)

**Members of the Dental Assisting Council**

Chair - Judith Forsythe, RDA

Vice Chair - Anne Contreras, RDA

Pamela Davis-Washington, RDA

Teresa Lua, RDAEF

Tamara McNealy, RDA

Emma Ramos, RDA

Bruce Whitcher, DDS

Public comments will be taken on agenda items at the time the specific item is raised. The Council 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 Council Chair. For verification of the meeting, call (916) 263-2300 or access the Board's website at [www.dbc.ca.gov](http://www.dbc.ca.gov). This Council 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, MPA, 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.

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

1. Call to Order/Roll Call/Establishment of Quorum
2. Approval of the November 26 and December 15, 2014 Dental Assisting Council Meeting Minutes
3. Overview of the Dental Assisting Educational Program and Course Application Process and Site Visits
4. Discussion and Possible Action Regarding the Status of Dental Assisting Program and Course Applications
5. Dental Assisting Program Licensure and Permit Statistics

6. Update on the Registered Dental Assistant (RDA) Practical Examination
  - Update on January 31, 2015 RDA Examiner Calibration Meeting
7. Update on the 2015 RDAEF Examination Dates
8. Staff Report on the December 15, 2014 Dental Assisting Council Workshop
9. Discussion and Possible Action Regarding the Side-by-Side Comparison of the Commission on Dental Accreditation (CODA) Accreditation Standards for Dental Assisting Education Programs and the California Code of Regulations, Title 16, Division 10, Chapter 3, Article 2, Regarding Dental Assisting Educational Programs
10. Discussion and Possible Action Regarding Staff's Findings Related to the Credit Towards Work Experience from a Dental Assisting Program in a Postsecondary Institution Approved by the Department of Education as Provided by Business and Professions Code § 1752.1
11. Update Regarding the Spring 2015 Dental Assisting Educator Newsletter
12. Public Comment for Items Not on the Agenda  
The Council 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)).
13. Council Member Comments for Items Not on the Agenda  
The Council may not discuss or take action on any matter raised during the Council Member Comments 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)).
14. Adjournment





## **DENTAL ASSISTING COUNCIL MEETING MINUTES**

**Thursday, November 6, 2014**

Sportsmen's Lodge Events Center, Waterfalls Room  
12833 Ventura Blvd., Studio City, CA 91604

**DRAFT**

### **Members Present**

Chair - Teresa Lua, RDAEF  
Vice Chair - Anne Contreras, RDA  
Pamela Davis-Washington, RDA  
Judith Forsythe, RDA  
Tamara McNealy, RDA  
Emma Ramos, RDA  
Bruce Whitcher, DDS

### **Members Absent**

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

Teresa Lua, Chair, called the Dental Assisting Council to order at 4:00 p.m. Roll was called and a quorum established.

#### **2. Approval of the May 29, 2014 and August 25, 2014 Dental Assisting Council Meeting Minutes**

M/S/C (Whitcher/Forsythe) to approve the May 29, 2014 minutes. The motion passed unanimously. M/S/C (McNealy/Forsythe) to approve the August 25, 2014 minutes. The motion passed unanimously.

#### **3. Staffing Update**

Sarah Wallace, Assistant Executive Officer gave an overview of the information provided.

#### **4. Discussion and Possible Action Regarding the Status of Dental Assisting Program and Course Applications**

Ms. Wallace gave an overview of the statistics provided. There was discussion about the timeline from provisional approval to full approval. Ms. Wallace stated that she would provide a timeline at the next meeting. There was discussion regarding subject matter experts (SME's). Dr. Lori Gagliardi, California Association of Dental Assisting Teachers (CADAT) asked if the Board was aware of how many students the provisional schools were graduating for assurance of space in the examination. Ms. Wallace stated that she would provide that data at the next meeting. There was discussion regarding the Orthodontic Assistant examination and whether there were statistics on how many licentiates held an ultrasonic scaling permit prior to taking this course which contains a requirement for ultrasonic scaling. Ms. Wallace will research that data.

**5. Dental Assisting Program Licensure and Permit Statistics**

Ms. Wallace gave an overview of the statistics provided and asked the Council members if they had ideas about what types of trends they would like to see. Ms. Forsythe suggested trends on reasons for delinquency. Ms. McNealy asked about fingerprint holds. Ms. Wallace stated that she is currently working with staff to determine the cause of the delays. Dr. Lori Gagliardi, CADAT, commented that she would also like to know the reasons for delinquencies. Ms. Fischer explained that with the current system we are not able to add a category such as reason for cancellation or delinquency. It may be possible to collect that information when the new system is put in place.

**6. Discussion and Possible Action Regarding the Re-Appointment of Existing Registered Dental Assistant in Extended Functions (RDAEF) Examiners Pursuant to Business & Professions Code Section 1753.4**

Ms. Wallace stated that staff is still in the process of collecting and reviewing the curriculum vitae's of the examiners. She requested that this item be tabled for a future meeting. Ms. Lua tabled the item for a future meeting.

**7. Update on the 2015 Examination Dates**

Ms. Wallace gave an update regarding the information provided. She commented that staff is working on confirming sites and dates in 2015 for the Registered Dental Assistant in Extended Functions (RDAEF) examination. Shelly Sorensen, Reedley College commented that she and her students support the Santa Maria examination site. Claudia Pohl, Citrus College, commented on the criteria that qualifies or disqualifies a candidate to take the examination. There was discussion surrounding this topic.

**8. Update on the December 15, 2014 Dental Assisting Council Workshop**

Ms. Wallace gave an update regarding the information provided confirming that the Dental Assisting Council workshop will be held on December 15, 2014 in Sacramento.

**9. Dental Assisting Council Officer Elections**

Dr. Bruce Witcher opened nominations for Chair and Vice-Chair of the Dental Assisting Council for 2015. Judith Forsythe was nominated for Chair. Ms. Forsythe accepted the nomination. Tamara McNealy was nominated for Chair. Ms. McNealy respectfully declined the nomination. The vote in favor of Ms. Forsythe was unanimous with no abstentions. Anne Contreras was nominated for Vice-Chair. Ms. Contreras accepted the nomination. Tamara McNealy was nominated for Vice-Chair. Ms. McNealy accepted the nomination. There were three votes for Ms. McNealy and four votes for Ms. Contreras. The majority vote goes to Ms. Contreras for Vice-Chair.

**10. Public Comment for Items Not on the Agenda**

Zena Delling commented that many applicants for the RDA examinations who are trained on the job ask if all of the requirements must be met prior to applying to take the examination. Ms. Fischer suggested that she speak with Ms. Wallace after the meeting or request that this item be placed on a future agenda.

**11. Council Member Comments for Items Not on the Agenda**

Tamara McNealy commented that she would like to revisit the re-evaluation of examiners for the RDA examination.

**12. Adjournment**

The Council adjourned at 4:30 p.m.

DRAFT



## DENTAL ASSISTING COUNCIL MEETING MINUTES

**Monday, December 15, 2014**  
Department of Consumer Affairs  
2005 Evergreen Street, Hearing Room  
Sacramento, CA 95815

**DRAFT**

### **Members Present**

Teresa Lua, RDAEF, Chair  
Anne Contreras, RDA, Vice Chair  
Pamela Davis-Washington, RDA  
Judith Forsythe, RDA  
Michele Jawad, RDA  
Emma Ramos, RDA  
Bruce Witcher, DDS

### **Members Absent**

### **Staff Present**

Karen Fischer, MPA, Executive Officer  
Sarah Wallace, Assistant Executive Officer  
Jennifer Casey, Educational Program Analyst  
Michael Placencia, Legislative and Regulatory Analyst

## **10:00 A.M. MEETING OF THE DENTAL ASSISTING COUNCIL**

1. **Call to Order/Roll Call/Establishment of Quorum**  
Teresa Lua, Chair, called the Dental Assisting Council meeting to order at 10:06 a.m. Roll was called and a quorum established.
2. **Welcome and Introductions**  
Sarah Wallace, Assistant Executive Officer and manager of the Dental Assisting Program, stated that the Board's current priorities include an update and review of Dental Assisting educational component. At the August 25, 2014 Council meeting, members had asked for additional information on the Commission on Dental Accreditation (CODA). The Council members and public were given the opportunity to introduce themselves.
3. **Presentation by Representatives from the American Dental Association's (ADA) Commission on Dental Accreditation (CODA) Relating to the Accreditation Standards and Application Process for Dental Assisting Educational Programs**

Dr. Sherin Tooks, Director of the American Dental Association's (ADA) Commission on Dental Accreditation (CODA), gave an overview of accreditation in general and CODA as an accrediting organization, recognized by the United States Department of Education. Patrice Renfrow, Manager of CODA's Allied Dental Education, presented on dental assisting accreditation, standards, policies and procedures, and the documents used to assess and continually monitor programs.

4. **Open Discussion Regarding the Presentation by Representatives from CODA Relating to the Accreditation Standards and Application Process for Dental Assisting Educational Programs**

In response to Vice Chair Anne Contreras' question regarding the total cost for a school going through the CODA accreditation process, Dr. Tooks stated that for 2015 the application fee is \$15,000 per program, the annual accreditation fee is \$1,620, and additional incidental fees include a \$35 administrative fee, \$4,000 if a focused site visit is required outside of the 7 year review cycle. These fees cover the manpower needed to oversee the accredited program as well as the cost incurred by the site visits. It was also noted that during the year of the site visit, the annual fee is double.

Dr. Bruce Whitcher asked if CODA reviews the applicable state laws when they do a site visit and review initial applications. Ms. Renfrow answered, yes, the state laws are reviewed. Dr. Whitcher inquired as to whether or not CODA would provide accreditation if a program did not comply with the state's standards. Dr. Tooks stated that if a program does not meet the state's standards, it is identified at the time of the site visit as a recommendation. Outstanding recommendations would place a program on Approval with Reporting Requirements status. Programs have a set amount of time they can be on this status in an effort to come into compliance. In the last 6 months of that time frame the Commission can issue Intent to Withdraw status. The Commission can take action to withdraw.

Dr. Whitcher asked about radiation safety and difference between California and CODA standards with regards to the number of FMX's that need to be taken, for the program to be compliant with that standard would they need to include the number of FMX's that are required in California? Ms. Renfrow answered, no, that standard is a National standard representing the minimum requirement. Schools with California students would need to demonstrate compliance with the state regulations. Dr. Whitcher asked about the accessibility of the information obtained by the site visits and whether or not there would be a problem if California requested the site visit report from the program. Dr. Tooks stated that all of the materials are considered confidential, but the program is able to release the information if they would like. The Board would not receive any information from CODA on any program's accreditation progress. Dr. Whitcher explained that the Board and Board staff would want to see a summary, for further review, that ensures consistency with California's application process and program requirements in order to use CODA's findings to expedite the California approval process. Dr. Tooks clarified that the site visit reports are formatted in such a way

that only shows deficiencies. They do not go standard-by-standard or include information on all that was seen at the site visit.

Emma Ramos asked how CODA acceptance would affect California schools with program directors not having a bachelor's degree. Dr. Tooks responded that those California approved programs that have a program director that does not have a bachelor's degree would be identified in the review process and would be considered deficient. Every program in the U.S. that is accredited by CODA must abide by the same standards. Tamara McNealy asked for clarification on whether or not laboratory, preclinical, and clinical instructors require a bachelor's degree. Ms. Renfrow confirmed that a CDA is required for those hands-on instructors.

Ms. Contreras asked about the approximate turnaround time for schools seeking CODA accreditation. Dr. Tooks re-stated that it is a minimum of 9 months, as it is multilayered process.

Karen Fischer, Executive Officer of the Dental Board, asked if CODA has had issues with programs not meeting the standards between site visits and or programs dropping out, and if statistics can be presented to the Council. Dr. Tooks did not have specific statistics to present, but stated that CODA oversees compliance in a variety of ways, including annual surveys and reports of program changes. If it is found that a change requires review, it will be placed on the Commission's review committee and Commission's agenda and the program is requested to make progress reports with regard to the changes between cycles. These sometimes result in review and require a focused site visit or a review and approval of the change. Complaints may also come in inner-cycle and are also considered in the review process.

Ms. Fischer asked if it is CODA's policy to communicate with state boards when a complaint is filed. Dr. Tooks responded that state boards receive the CODA Accreditation Action Report which would include any complaints brought to the Commission's attention. Notifications are not addressed to the state board, but they are disseminated to boards of dentistry and are available to the public via CODA's website.

Dr. Whitcher commented that in the presentation, there were approximately 9,000 students in CODA accredited dental assisting programs, while California approved programs hold approximately 35,000 students. Dr. Tooks responded that it is her belief that this is due to licensure requirements in other states.

LaDonna Drury-Cline, a representative from the California Association of Dental Assisting Teachers (CADAT), asked the CODA representatives if they are currently issuing reports to the state dental boards of all of the findings of accredited programs and the actions of the Commission for dental hygiene programs and dental programs in the state of California. Dr. Tooks answered yes, the Accreditation Action Report lists all of the actions, identifying the name of the institution, the status that the program came into the Commission with and the

status it left with. This information is public and on their website as well as mass emailed to the state dental boards. The listing does not give detail on the specific deficiencies of the programs.

Ms. Drury-Cline asked if the Commission requests that a representative from the state board be present during the site visit to address the differential between the state's regulations and CODA standards. Dr. Toombs responded that CODA welcomes the state board's presence in the accreditation process. The representative must be a current sitting member of the board and is required to sign a confidentiality agreement and agree to abide by it. Spencer Walker, legal counsel for the Dental Board, explained that a board member is a representative of the Board; if a board member participates in an inspection of a school or in the accreditation process, they must have the ability to report back to the Board. A board member in California should never sign the confidentiality agreement.

5. **Discussion and Possible Action Regarding the Following Items Requested by the California Association of Dental Assisting Teachers (CADAT):**

A. **Discussion and Possible Action to Formally Enact the Provisions of California Code of Regulations Section 1070.2 Effective January 1, 2015**

Ms. Drury-Cline, representing CADAT, requested that the Council recommend that the Board consider accepting the findings of CODA to assist in the Board's application process for Registered Dental Assisting (RDA) programs. Ms. Drury-Cline requested that an abbreviated application be created and approved by the Board for RDA programs that are CODA accredited. Ms. Fischer asked how this will change things. Ms. Drury-Cline believes the current application process is preventing students from taking the exams after graduation from a CODA-approved school that is not approved by California. The application process for California approval would be a simplified process if the Board were to accept the findings on the CODA accreditation report. Ms. Forsythe requested that the Council look at a side-by-side comparison of CODA standards and the Board's requirements for program approval, to make an educated recommendation to the Board. A subcommittee of Ms. McNealy and Ms. Ramos was established, to analyze the side-by-side comparison prior to the Board's review. Board Staff was then directed to compile a side-by-side comparison with the new CODA standards and to research the issue further.

B. **Discussion and Possible Action to Establish an Ad-Hoc Panel of CADAT Representatives, the Dental Assisting Council Chair and Board Staff to Establish, in a Specified Time Period, a New Abbreviated Application for Approval of a Registered Dental Assisting Program for Institutions who are Applying for or have Obtained CODA- Accredited Status**

Ms. Drury-Cline requested that the Council appoint an ad-hoc panel to develop an abbreviated application and process for those programs that have obtained CODA accreditation. Staff was directed to work with CADAT on creating an abbreviated application and process.

**C. Discussion and Possible Action to Formally Recognize All New CODA-Accredited RDA Programs as Being Approved by the Dental Board and Whose Graduates Shall be Deemed Qualified to Sit for the California Examinations**

Ms. Drury-Cline asked for the Council to consider recognizing all CODA-accredited programs so that the students of non-Board approved programs may sit for an upcoming examination.

**D. Discussion and Possible Action to Approve, as Eligible Candidates, Examination Applications from Graduates of a CODA-Accredited Dental Assisting Program Outside of California who Shall Present, as Part of the Examination Application, Evidence of Graduation from a CODA-Accredited Program and the California Specific Certifications, Without Necessity to Obtain Additional Work Experience to Qualify**

Ms. Wallace requested that Board Staff work with a subcommittee to research Business and Professions Code Section 1752.1 (c) relating to *Licensing as registered dental assistant; Educational and examination requirements; Obtaining permit as orthodontic assistant or dental sedation assistant*. Council directed staff to research this item.

**E. Discussion and Possible Action to Seek Legislative Clarity in the Dental Board Sunset Review Legislation, Language Allowing for Graduates of Both Board-Approved and CODA Programs to be Eligible for Application to Take the State Board Examination for the RDA**

Ms. Fischer explained that Ms. Drury-Cline previously requested that the Board seek clarification of this in the Sunset Review process.

**6. Public Comment of Items Not on the Agenda**

There was no public comment.

**7. Future Agenda Items**

There were no future agenda item requests.

**8. Council Member Comments for Items Not on the Agenda**

There were no Council member requests.

**9. Adjournment**

Ms. Lua, Chair, adjourned the Council meeting at 3:07 p.m.





## MEMORANDUM

<b>DATE</b>	February 4, 2015
<b>TO</b>	Dental Assisting Council Members, Dental Board of California
<b>FROM</b>	Jennifer Casey, Dental Assisting Educational Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>DAC 3:</b> Overview of the Dental Assisting Educational Program and Course Application Process and Site Visits

### **Background:**

Pursuant to California Code of Regulations (CCR), Title 16, Section 1070, *General Provisions Governing All Dental Assistant Educational Programs and Courses*, the Dental Board of California (Board) may approve, provisionally approve, or deny approval of any program or course for which an application to the Board for approval is required. Dental Assisting (DA) educational programs and courses that require an application include:

- Registered Dental Assistant (RDA) Program
- Registered Dental Assistant in Extended Functions (RDAEF) Program
- Coronal Polishing Course
- Dental Sedation Assistant Course
- Infection Control Course
- Orthodontic Assistant Course
- Pit and Fissure Sealant Course
- Radiation Safety Course
- Ultrasonic Scaling Course

### **Program and Course Application Process:**

Applicants for program or course approval are required to submit the application, applicable fees, and all supporting documentation requested to be considered for approval. Subject matter experts are utilized for review of the curriculum and facilities during site visits. The timeline for initial application review is typically 90 days from the date the application is received. Failure to submit a complete application may significantly delay program or course approval. If deficiencies are found, the applicant will be notified in writing. It is the responsibility of the applicant to correct all deficiencies before the approval process can continue. Once all application requirements are met, the applicant will be provided with an approval or site visit provisional approval letter. RDA and RDAEF Programs must complete a site visit prior to receiving provisional

approval. The Board then grants provisional approval to RDA and RDAEF programs that pass the site visit, with the intention of revisiting the facility within one year of the approval date; however, the provisional approval is valid until the Board revisits the facility.

The Board will schedule a site visit with each RDA and RDAEF program applicant after the curriculum has been reviewed and any deficiencies have been addressed. Initial site visits include the following: meeting with the program director and administrators, a tour of the dental assisting facilities, curriculum review, review of the facilities, review of equipment and supplies, evaluation of the library and internet, and a formal exit interview. Site visits to remove provisional status include the following: meeting with the program director and administrators, a tour of the dental assisting facilities, curriculum review, review of the facilities, equipment and supplies, review of the radiation safety records, review of the coronal polishing records, review of the pit and fissure sealant records, review of the evaluation from clinical facilities, review of the advisory committee meeting minutes, review of faculty meeting minutes, observation of students performing basic dental assisting and registered dental assisting duties, private conferences with students, evaluation of the library and internet, and a formal exit interview.

Following approval, the Board may audit a program or course for compliance with regulations in the event the Board deems it necessary. Pursuant to CCR, Title 16, Section 1070(b), all programs and courses must maintain records for five (5) years and inform the Board of any changes to the course content, physical facility, or faculty within 10 days of the change. The Board may audit a program or course for compliance with regulations in the event the Board deems it necessary.

**Program and Course Application Requirements:**

Applicants for RDA program approval must meet the requirements outlined in CCR Section 1070.2, *Approval of Registered Dental Assistant Educational Programs*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Registered Dental Assistant (RDA) Program Application for Approval by the Dental Board of California*;
- 2) Submit \$1,400 application fee;
- 3) If a program wishes to provide stand-alone courses in Infection Control, Radiation Safety, Coronal Polish, and/or Pit and Fissure Sealants, individual applications, fees, and appropriate documentation must be submitted separately;
- 4) Submit a copy of the program director's license issued by the Board;
- 5) Submit a copy of the license and resume of each faculty member;
- 6) Submit evidence that each faculty member instructing Pit and Fissure Sealants has completed a Board-approved course in the application of pit and fissure sealants;
- 7) Submit a table or chart containing information regarding the intended daily hours for each faculty member in the areas of: daily student contact, class preparation, student advising, and extern visitation;
- 8) Submit a copy of the certificate of completion that will be issued to students;
- 9) Submit a list of equipment and supplies that will be provided by each party to instruct all dental assistant and registered dental assistant duties;
- 10) Submit a description of the operatories, their number, and a list of the equipment and supplies that are housed in the operatory area;

- 11) Submit a copy of protocols for the following: student immunizations, personal protective equipment, equipment and supply infection control, biohazardous waste, OSHA training requirement for dental office employees, management of training records, management of occupational exposure to blood and body fluids, infection control protocol for operatory set-up and clean-up, infection control protocol during dental treatment, disinfection, sterilization, sanitation, barrier use, surface disinfection, and responsibilities of infection control officer in the dental office;
- 12) Submit a description of the space and equipment;
- 13) Submit a copy of each faculty and instructional staff members' current CPR card issued by the American Heart Association or American Red Cross;
- 14) Submit a copy of the document the program will use for the clinical evaluation of students during externship, which must be signed and dated by the student and instructor;
- 15) Submit the complete orientation packet that is given to the dentist and all licensed dental healthcare workers who may provide instruction, evaluation, and oversight of the student in the clinical setting prior to placement of a student in the extern site which shall include, at a minimum: student evaluation forms, objective evaluation criteria, procedures on how the extern's clinical experience is to be conducted including at a minimum when and how the student receives his/her first evaluation, and at the completion of the training, extern time sheet;
- 16) Submit the evaluation form that will be completed by the student;
- 17) If an extramural facility is used, submit a copy of the contract of affiliation with each extramural facility;
- 18) Submit a table or chart showing the following: maximum number of students enrolled per session, number of operatories, faculty/student ratios for laboratory, preclinical, and clinical, the proposed class session schedule with hours, number of students, number of faculty providing instruction, and name of the faculty providing instruction;
- 19) Submit a table showing the following information for each of the advisory members: name, license number, license expiration date, title, and telephone number;
- 20) Submit a description of the content and subjects of the advisory committee meeting including its responsibilities;
- 21) Submit a copy of the certification or diploma for each faculty/instructional staff member;
- 22) Submit a table or chart containing information regarding the intended daily hours for the program director in the following areas: administrative, student contact, class preparation, student counseling, and extern visitation;
- 23) Submit a description of the intended frequency and content of staff meetings;
- 24) Submit an explanation of the financial resources available to support the program and comply with the laws governing program approval;
- 25) If the program is required to be approved by any other governmental agency, specify which agency and provide a copy of the approval document(s);
- 26) If the program is accredited by another agency, specify which agency;
- 27) Submit a floor plan of the entire facility, identifying the location of the following major areas of instruction: lecture area, laboratory, dental operatories, x-ray exposure area, sterilization area, and x-ray processing area;
- 28) Submit a list of the types, location, and number of the required equipment and armamentarium;

- 29) Submit a detailed description on how students will be instructed in CAD machine and patient monitoring;
- 30) Submit a list of all instruments and the quantity that will be utilized to instruct general and specialty dentistry;
- 31) Submit the following information for each reference material: name, author, publisher, and publication date;
- 32) Submit a copy of the written policy on managing emergency situations;
- 33) Submit a description of the location of the eye wash stations and oxygen tank, a list of the contents of the working emergency kit, and a list of the contents of the first aid kit;
- 34) Submit the curriculum materials, including methods, materials, and examinations with keys, for all subjects taught in the orientation curriculum, which must include tooth anatomy, tooth numbering, general program guidelines, basic chairside skills, emergency and safety precautions, infection control, and sterilization protocols associated with and required for patient treatment;
- 35) Submit a complete *Application for Approval of Course in Radiation Safety*;
- 36) Submit a complete *Application for Approval of a Course in Coronal Polishing by an RDA*;
- 37) Submit a complete *Application for Approval of Course in Pit and Fissure Sealants*; and
- 38) Submit the following for each program course/module: a detailed program outline, general program objectives, specific objectives in the cognitive and psychomotor domain, criteria for all psychomotor skills, minimum number of satisfactory performances for all psychomotor skills, lesson plans, process evaluation grade sheets, product evaluation grade sheets, and practical and clinical examinations;

Applicants for RDAEF program approval must meet the requirements outlined in CCR Section 1071, *Approval of RDAEF Educational Programs*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Registered Dental Assistant in Extended Functions (RDAEF) Program Application for Approval by the Dental Board of California*;
- 2) Submit \$1,400 application fee;
- 3) Submit the name and license number of the proposed program director;
- 4) Submit a description of the responsibilities of the program director;
- 5) Submit a table containing the name and license number of each faculty member;
- 6) Submit a copy of the certificate of completion of a six-hour methodology course in clinical evaluation for each faculty member;
- 7) Submit a copy of each faculty and staff members' current CPR card issued by the American Red Cross or American Heart Association;
- 8) Submit a copy of the certificate of completion that will be issued to students;
- 9) Submit a copy of the written policy on managing emergency situations;
- 10) Submit a description of the location of the eye wash stations and oxygen tank and a list of the contents of the first aid kit;
- 11) Submit a copy of protocols for the following: personal protective equipment, equipment and supply infection control, biohazardous waste, management of occupational exposure to blood and body fluids, infection control protocol for operatory set-up and clean-up, infection control protocol during dental treatment, disinfection, sterilization, sanitation, barrier use, and surface disinfection;

- 12) Submit a description of how reusable instruments are properly sterilized before use on patients;
- 13) Submit a table or chart containing information on the following: maximum students enrolled per session, number of operatories, and faculty/student ratios for didactic, laboratory, and clinical;
- 14) Submit a description of the entire facility, identifying the location of the following major areas of instruction: lecture area, laboratory, dental operatories, and sterilization area;
- 15) Submit a list of the types, location, and number of the required equipment and armamentarium;
- 16) Submit a description of the operatories, their number, and a list of the equipment and supplies that are housed in the operatory area; and
- 17) Submit the following for each program course/module: a detailed program outline, general program objectives, specific objectives in the cognitive and psychomotor domain, criteria for all psychomotor skills, minimum number of satisfactory performances for all psychomotor skills, lesson plans, process evaluation grade sheets, product evaluation grade sheets, and practical and clinical examinations;

Applicants for Coronal Polishing course approval must meet the requirements outlined in CCR Section 1070.4, *Approval of Coronal Polishing Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Application for Approval of a Course in Coronal Polishing by an RDA*;
- 2) Submit \$300 application fee;
- 3) Submit a copy of the documentation of the required prerequisites for this course;
- 4) Submit a copy of each faculty member's license and proof of basic life support provided by the American Red Cross or American Heart Association;
- 5) Submit a copy of the certificates of completion of teaching methodology in clinical evaluation for all faculty;
- 6) Submit a memorandum of understanding that the course director is aware of his/her responsibilities with regard to course approval;
- 7) Submit a copy of the certificate of completion to be issued to students;
- 8) Submit a diagram and description of the facilities (lecture classroom, operatories, laboratories, sterilization area);
- 9) Submit a copy of the asepsis protocol, written policy on managing emergency situations that will be available to all students, faculty, and staff;
- 10) Submit a copy of the policy on managing emergency situations;
- 11) Submit a detailed course outline;
- 12) Submit general program objectives and specific instructional unit objectives, including theoretical aspects of each subject as well as practical application;
- 13) Submit a copy of the objective evaluation criteria used to measure student progress;
- 14) Submit a copy of the task/product evaluation forms;
- 15) Submit a copy of the standard of performance established by the program that defines the minimum satisfactory performances required for each procedure;
- 16) Submit a copy of the school's infection control protocols;
- 17) If an extramural facility is used, submit a copy of the contract used; and
- 18) Submit a copy of the final examination and answer key

Applicants for Dental Sedation Assistant course approval must meet the requirements outlined in CCR Section 1070.8, *Approval of Dental Sedation Assistant Permit Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Dental Sedation Assistant Course Application for Approval by the Dental Board of California*;
- 2) Submit \$300 application fee;
- 3) Submit a description of how the course will assure that the dental assistant has completed six months of work experience prior to commencing the course;
- 4) Submit the name and license number of the proposed course director;
- 5) Submit a table containing the name and license number of each faculty member;
- 6) Submit a copy of the certificate of completion of a two-hour teaching methodology course in clinical evaluation for each faculty member;
- 7) Submit a copy of each faculty and staff members' CPR card issued by the American Red Cross of American Heart Association;
- 8) Submit a copy of the certificate of completion that will be given to students;
- 9) Submit a copy of the written policy on managing emergency situations;
- 10) Submit a copy of protocols for the following: personal protective equipment, equipment and supply infection control, biohazardous waste, management of occupational exposure to blood and body fluids, infection control protocol for operatory set-up and clean-up, infection control protocol during dental treatment, disinfection, sterilization, sanitation, barrier use, and surface disinfection;
- 11) Submit a description of how reusable instruments are properly sterilized before use on patients;
- 12) Submit a chart on the faculty/student ratios for didactic, laboratory, and clinical;
- 13) Submit a description of the entire facility, identifying the location of the following major areas of instruction: lecture area, laboratory, dental operatories or surgical suites, and sterilization area;
- 14) Submit a list of the types, location, and number of the required equipment and armamentarium;
- 15) Submit a description of the operatories or surgical suites, their number, and a list of the equipment and supplies that are housed in that area;
- 16) Submit a detailed course outline including subsections that clearly state curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, laboratory, clinical, and externship instruction;
- 17) Submit general course objectives;
- 18) Submit specific objectives in the cognitive and psychomotor domain;
- 19) Submit criteria for all psychomotor skills;
- 20) Submit the minimum number of satisfactory performances for all psychomotor skills;
- 21) Submit lesson plans including information sheets/procedure sheets when applicable;
- 22) Submit process evaluation grade sheets;
- 23) Submit product evaluation grade sheets;
- 24) Submit practical and clinical examinations;
- 25) Submit written examinations and keys; and
- 26) If an extramural facility is used, submit a copy of the contract used;

Applicants for Infection Control course approval must meet the requirements outlined in CCR Section 1070.6, *Approval of Infection Control Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Infection Control Course Application for Approval by the Dental Board of California*;
- 2) Submit \$300 application fee;
- 3) Submit the name and license number of the proposed course director;
- 4) Submit a table containing the name of each faculty member, including a description of each faculty member's experience in the instruction of the infection control regulations and guidelines issued by the Board and the Division of Occupational Safety and Health (Cal-DOSH);
- 5) Submit a copy of the certificate of completion of a two-hour methodology course in clinical evaluation for each faculty member;
- 6) Submit a copy of each faculty and staff members' CPR card issued by the American Red Cross or American Heart Association;
- 7) Submit a copy of the certificate of completion that will be given to students;
- 8) Submit a copy of the written policy on managing emergency situations;
- 9) Submit a copy of protocols for the following: personal protective equipment, equipment and supply infection control, biohazardous waste, OSHA training requirements for dental office employees, management of training records, management of occupational exposure to blood and body fluids, infection control protocol for operatory set-up and clean-up, infection control protocol during dental treatment, disinfection, sterilization, sanitation, barrier use, surface disinfection, and responsibilities of infection control officer in a dental office;
- 10) Submit a description of how reusable instruments are properly sterilized before use on patients;
- 11) Submit a description of how the simulation of contamination will occur;
- 27) Submit a chart on the faculty/student ratios for didactic, laboratory, and clinical;
- 12) Submit a description of the clinical facility and instrument processing area(s), identifying the location of the following major areas of instruction: lecture area, laboratory, dental operatories, x-ray exposure area, and sterilization area;
- 13) Submit a list of the types, location, and number of the required equipment and armamentarium;
- 28) Submit a description of the operatories, their number, and a list of the equipment and supplies that are housed in that area;
- 29) Submit a detailed course outline including subsections that clearly state curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, laboratory, clinical, and externship instruction;
- 30) Submit general course objectives;
- 31) Submit specific objectives in the cognitive and psychomotor domain;
- 32) Submit criteria for all psychomotor skills;
- 33) Submit the minimum number of satisfactory performances for all psychomotor skills;
- 34) Submit lesson plans including information sheets/procedure sheets when applicable;
- 35) Submit process evaluation grade sheets;
- 36) Submit product evaluation grade sheets;
- 37) Submit practical and clinical examinations;
- 38) Submit written examinations and keys; and

39) If an extramural facility is used, submit a copy of the contract used

Applicants for Orthodontic Assistant course approval must meet the requirements outlined in CCR Section 1070.7, *Approval of Orthodontic Assistant Permit Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Orthodontic Assistance Course Application for Approval by the Dental Board of California*;
- 2) Submit \$300 application fee;
- 3) Submit a description of how the course will assure that the dental assistant has completed the prerequisite of six months of work experience as a dental assistant prior to commencing the course;
- 4) Submit the name and license number of the proposed course director;
- 5) Submit a table containing the name and license number of each faculty member;
- 6) Submit a copy of the certificate of completion of a two-hour course in teaching methodology in clinical evaluation for each faculty member;
- 7) Submit a copy of each faculty and staff members' CPR card issued by the American Red Cross or American Heart Association;
- 8) Submit a copy of the certificate of completion;
- 9) Submit a copy of the written policy on managing emergency situations;
- 10) Submit a copy of protocols for the following: personal protective equipment, equipment and supply infection control, biohazardous waste, OSHA training requirements for dental office employees, management of training records, management of occupational exposure to blood and body fluids, infection control protocol for operatory set-up and clean-up, infection control protocol during dental treatment, disinfection, sterilization, sanitation, barrier use, and surface disinfection;
- 11) Submit a description of how reusable instruments are properly sterilized before use on patients;
- 12) Submit a chart on the faculty/student ratios for didactic, laboratory, and clinical;
- 13) Submit a description of the entire facility, identifying the location of the following major areas of instruction: lecture area, laboratory, dental operatories, and sterilization area;
- 14) Submit a list of the types, location, and number of the required equipment and armamentarium;
- 15) Submit a description of the operatories, their number, and a list of the equipment and supplies that are housed in the operatory area;
- 16) Submit a detailed course outline including subsections that clearly state curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, laboratory, clinical, and externship instruction;
- 17) Submit general course objectives;
- 18) Submit specific objectives in the cognitive and psychomotor domain;
- 19) Submit criteria for all psychomotor skills;
- 20) Submit the minimum number of satisfactory performances for all psychomotor skills;
- 21) Submit lesson plans including information sheets/procedure sheets when applicable;
- 22) Submit process evaluation grade sheets;
- 23) Submit product evaluation grade sheets;
- 24) Submit practical and clinical examinations; and



- 25) If an extramural facility is used, submit a copy of the contract used

Applicants for Pit and Fissure Sealant course approval must meet the requirements outlined in CCR Section 1070.3, *Approval of Pit and Fissure Sealant Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Application for Approval of a Course in Pit and Fissure Sealants*;
- 2) Submit \$300 application fee;
- 3) Submit a copy of the documentation of the required prerequisites for this course;
- 4) Submit a copy of each faculty member's license and proof of CPR certification issued by the American Red Cross or American Heart Association;
- 5) Submit a copy of the certificates of completion of teaching methodology in clinical evaluation for all faculty;
- 6) Submit a memorandum of understanding that the course director is aware of his/her responsibilities with regard to course approval;
- 7) Submit a copy of the certificate of completion to be issued to students;
- 8) Submit a diagram and description of the facilities (lecture classroom, operatories, laboratories, sterilization area);
- 9) Submit a copy of the asepsis protocol, written policy on managing emergency situations that will be available to all students, faculty, and staff;
- 10) Submit a copy of the policy on managing emergency situations;
- 11) Submit a detailed course outline;
- 12) Submit general program objectives and specific instructional unit objectives, including theoretical aspects of each subject as well as practical application;
- 13) Submit a copy of the objective evaluation criteria used to measure student progress toward attainment of specific course objectives;
- 14) Submit an equipment list specifying how each item will be used and how it has been adapted and/or prepared to be used in the application of pit and fissure sealants;
- 15) If an extramural facility is used, submit a copy of the contract used; and
- 16) Submit a copy of the final examination and answer key

Applicants for Radiation Safety course approval must meet the requirements outlined in CCR Section 1014, *Approval of Pit and Fissure Sealant Courses*, and 1014.1, *Requirements for Radiation Safety Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Application for Approval of a Course in Radiation Safety*;
- 2) Submit \$300 application fee;
- 3) Submit a diagram of the facility;
- 4) Submit a copy of the certificate of completion that will be issued to students;
- 5) Submit a document signed by the supervising dentist that states that the dentist agrees to be responsible for and in control of the quality, radiation safety, and technical aspects of all x-ray examinations and procedures in accordance with Section 106974 of the Health and Safety Code;
- 6) Submit a copy of the program director data sheet, curriculum vitae, current CPR certification and teaching credential and/or teaching methodology certification;

- 7) Submit a copy of the program faculty data sheet, curriculum vitae, current CPR certification and teaching credential and/or teaching methodology certification for all faculty members;
- 8) Submit a description and any prerequisites of the established criteria and procedures used for admission to the class;
- 9) Submit a description and diagram of the operator(s);
- 10) Submit a copy of the infection control procedures followed in the x-ray operatory to include at a minimum the equipment, surface barriers, pre-cleaning, set up and clean-up protocol;
- 11) Submit a copy of the documentation that establishes that each radiographic operatory fully complies with the California Radiation Control Regulations (Title 17, California Code of Regulations, commencing with Section 30100), and that it is properly equipped with supplies and equipment for practical work and includes for every seven (7) students at least one (1) functioning radiography machine that is adequately filtered and collimated in compliance with Department of Health Services regulations and is equipped with a minimum of one (1) set of position-indicating film holding devices for each machine;
- 12) Submit a copy of the infection control procedures followed in the x-ray darkroom or processing area to include at minimum the equipment, surface barrier, pre-cleaning, set-up and clean-up protocols, special precautions for daylight and installed automatic processing units;
- 13) Submit a description of the process by which the position-indicating film holding devices are sterilized;
- 14) Submit a description of the method(s) for waste removal of processing chemicals;
- 15) Submit a list of the audiovisual equipment and classroom instructional materials used for the course;
- 16) Submit a list of all x-ray equipment, manikins, and supplies maintained by the program;
- 17) Submit a comprehensive curriculum that includes: a detailed course outline that states curriculum subject matter, specific instructional hours in the individual areas of didactic, laboratory and clinical instruction, general program objectives, specific instructional unit objectives in the cognitive and psychomotor domain and objective evaluation criteria with noted critical steps and number of attempts required for psychomotor skills;
- 18) Submit a description of the laboratory (manikin) and clinical practice (patients) experience that includes a description of the amount of exposures for bitewing and full mouth surveys, sequence of performance from laboratory to clinical experience; film packet requirement for laboratory and clinical experience, how students progress towards attainment of clinical competency, detailed description of prescription form used prior to exposure on clinical patients and patient criteria;
- 19) Submit a copy of the criteria for an acceptable bitewing and periapical film that includes a description of root apex of the periapical exposure, contact area, density and contrast;
- 20) Submit a description of the retake policy for periapical and bitewing films that are deemed undiagnostic;
- 21) Submit an explanation of the procedures used for assisting students with academic difficulties;

- 22) Submit a description of the procedures for conducting the written examination and what constitutes a passing score for this examination;
- 23) Submit a description of the procedures used to evaluate the bitewing and full mouth surveys and include the radiograph evaluation forms that include the following: description of student and faculty evaluation protocol, worksheets that include areas of identification for commonly encountered exposure and processing errors, x-ray manikin and clinical patient product evaluation sheets;
- 24) Submit a description of how the clinical examination is conducted and what constitutes a passing score for this examination;
- 25) Submit a copy of a written contract of affiliation that describes the settings in which the clinical experience is received, verification that all equipment meets the State requirements, a medical health history form used for each patient being exposed, and the signature of the provider of the facility with address and phone number;
- 26) Submit a copy of a sample certificate that would contain the student's name, course provider name, course provider address, date course was completed, signature of administrator/faculty, Dental Board issued course ID number, and school seal; and
- 27) If an extramural facility is used, submit a copy of the contract used

Applicants for Ultrasonic Scaling course approval must meet the requirements outlined in CCR Section 1070.5, *Approval of Ultrasonic Scaling Courses*, by submitting proof of the following, prior to being approved by the Board:

- 1) Submit completed *Application for Approval of a Course in the use of Ultrasonic Scaler*,
- 2) Submit \$300 application fee;
- 3) Submit a copy of each faculty member's license and proof of basic life support provided by the American Red Cross or American Heart Association;
- 4) Submit a diagram of the operatories used for training; and
- 5) Submit a copy of complete curriculum, course outlines, objectives, and grading criteria



## MEMORANDUM

<b>DATE</b>	February 3, 2015
<b>TO</b>	Dental Assisting Council Members, Dental Board of California
<b>FROM</b>	Jennifer Casey, Dental Assisting Educational Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>DAC 4:</b> Discussion and Possible Action Regarding the Status of Dental Assisting Program and Course Applications

Table 1a identifies the number of applications which have received approval since the November 2014 Board Meeting. The table also displays applications of those that are currently moving through the approval process. Table 1b identifies the total number of applications which were approved in 2014. Table 2 is a list of names of the applicants who have received approval since the last Board meeting.

Table 1a DA Program & Course Applications Approved and Received Since Last Board Meeting						
Program or Course Title	Approved	Denied	Withdrawn		Received	Currently Processing
			By Provider	By Board		
RDA Program/Prov	0	0	0	0	0	5
RDA Program/Full	0	0	0	0	N/A	N/A
Radiation Safety	0	0	1	0	1	7
Coronal Polish	4	0	0	0	0	6
Pit and Fissure	1	0	0	0	2	4
Ultrasonic Scaler	0	0	0	0	0	0
Infection Control	1	0	0	0	1	7
OA Permit	9	0	0	0	3	2
DSA Permit	0	0	0	0	0	0
<b>Total Applications</b>	<b>15</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>7</b>	<b>31</b>

Table 1b Total DA Program and Course Applications Approved in 2014											
Course Totals	RDA Programs		RDAEF	Radiation Safety	Coronal Polish	Pit and Fissure Sealants	Ultrasonic Scaler	Infection Control	Orthodontic Assistant	Dental Sedation Assistant	Total
	Provisional	Full									
	5	7	0	1	4	2	0	4	27	3	53





## MEMORANDUM

<b>DATE</b>	February 4, 2015
<b>TO</b>	Dental Assisting Council Members, Dental Board of California
<b>FROM</b>	Jennifer Casey, Dental Assisting Educational Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>DAC 5: Dental Assisting Program Licensure and Permit Statistics</b>

The following table provides current statistics by **license** type as of February 1, 2015.

<b>License Type</b>	<b>Registered Dental Assistant (RDA)</b>	<b>Registered Dental Assistant in Extended Functions (RDAEF)</b>	<b>Total Licenses</b>
<b>Active</b>	34,267	1,389	35,656
<b>Inactive</b>	8,198	119	8,317
<b>Renewal in Process</b>	523	8	531
<b>Fingerprinting Hold</b>	628	25	653
<b>Delinquent</b>	9,495	172	9,667
<b>Suspended No Coronal Polish/X-ray</b>	1,282	0	1,282
<b>Total Current Population</b>	54,393	1,713	56,106
<b>Total Cancelled Since Implementation</b>	37,599	196	37,795

New RDAEF licenses issued since January 1, 2010 = 255

Existing RDAEF licenses enhanced since January 1, 2010 = 161

The following table provides current statistics by **permit** type as of February 1, 2015.

<b>Permit Type</b>	<b>Dental Sedation Assistant (DSA)</b>	<b>Orthodontic Assistant (OA)</b>
<b>Active</b>	31	271
<b>Inactive</b>	0	2
<b>Renewal in Process</b>	0	2
<b>Fingerprinting Hold</b>	0	0
<b>Delinquent</b>	1	7
<b>Total Current Population</b>	32	282
<b>Total Cancelled Since Implementation</b>	0	0



## MEMORANDUM

<b>DATE</b>	February 19, 2015
<b>TO</b>	Dental Assisting Council, Dental Board of California
<b>FROM</b>	Jana Adams, Examination Coordinator Dental Board of California
<b>SUBJECT</b>	<b>DAC 6:</b> Update on the RDA Practical Examination

At the November Board meeting, the Dental Assisting Council (Council) and the Board's Examination Committee (Committee) held a joint meeting to discuss the Registered Dental Assistant (RDA) practical examination. This discussion included an overview of issues, candidate responsibilities, equipment rentals, and the potential for an occupational analysis and examination validation. During the meeting a subcommittee was established to work with staff to assist with identifying and resolving issues and concerns.

Staff met with the subcommittee in December to review the issues and concerns brought up at the November meeting and established items that could be resolved in the immediate future. As a result of this meeting, the following has or is being coordinated for the future:

- A RDA Examiner Calibration meeting was held on Saturday, January 31, 2015. RDA examiners and proctors were in attendance and were calibrated for the 2015 RDA Practical Examinations.
- Staff is coordinating facilities for two potential dates during the month of March to conduct an examination workshop for educators to promote clear communication from the Board regarding examination requirements and expectations.
- Staff is coordinating updates and potential additions that can be made to the Board's web site to more clearly convey candidate expectations to eliminate the potential for examination issues.

Sarah Wallace, Assistant Executive Officer and Dental Assisting Program Manager, will be providing additional information as a verbal report to the Council at the meeting and hopes to provide preliminary statistical results from the February RDA Practical examinations held in San Francisco and Pomona.





## MEMORANDUM

<b>DATE</b>	February 3, 2015
<b>TO</b>	Dental Assisting Council, Dental Board of California
<b>FROM</b>	Jana Adams, Examination Coordinator Dental Board of California
<b>SUBJECT</b>	<b>DAC 7:</b> Update on the 2015 RDAEF Examination Dates

Currently, staff has confirmed two dates for the RDAEF examination in 2015 and is looking to secure another Southern California location for the month of October. Program directors will be contacted requesting information regarding their anticipated class sizes and graduation dates so that Board staff may determine when and where additional examination locations should be added. This examination schedule has been posted on the Board's web site.

While Sacramento City College is no longer an option as an examination facility due to contractual changes, staff is looking to secure another Sacramento examination site for the future.

Examination Date	Examination Location	Filing Period
Saturday, June 13, 2015	University of California, San Francisco School of Dentistry 707 Parnassus Avenue San Francisco, CA 94143	March 30, 2015 – May 1, 2015
Saturday, July 25, 2015	University of California, Los Angeles School of Dentistry 10833 Le Conte Avenue Los Angeles, CA 90095	April 27, 2015 – May 29, 2015



## MEMORANDUM

<b>DATE</b>	February 3, 2015
<b>TO</b>	Dental Assisting Council Members, Dental Board of California
<b>FROM</b>	Jana Adams, Dental Assisting Examination Coordinator Dental Board of California
<b>SUBJECT</b>	<b>DAC 8:</b> Staff Report on the December 15, 2014 Dental Assisting Council Workshop

The Dental Assisting Council held a meeting on Monday, December 15, 2014 in Sacramento in response to the Council's request to have a presentation from the American Dental Association's (ADA) Commission on Dental Accreditation (CODA) regarding its accreditation standards for dental assisting education programs.

Dr. Sherin Tooks and Ms. Patrice Renfrow from CODA presented on the dental assisting accreditation, standards, policies and procedures, and the documents used to access and continually monitor ongoing programs.

Many questions came up during this presentation from the Council members. Anne Contreras asked about the costs associated with schools going through the accreditation process. Dr. Tooks was able to touch upon the \$15,000 application fee per program, the \$1,620 annual accreditation fee, and the additional incidental fees including the \$35 administrative fee and \$4,000 site visit which could be required outside of the seven year review cycle. Ms. Contreras also asked about the approximate turnaround time for schools seeking accreditation. Dr. Tooks discussed the nine month minimum multilayer process which includes a paper peer-review, a site visit and a site visit report which is reviewed during the by-annual CODA meeting.

Dr. Bruce Witcher asked whether or not CODA would provide accreditation to a program who did not meet California's standards. Dr. Tooks explained that if standards were not met, it would come out during the site visit. The program would then have a set time frame in which they would need to meet the appropriate standards. Dr. Witcher also asked about radiation safety and the difference between California and CODA's standards with regards to number of Full Mouth X-rays. Ms. Renfrow stated that the standard is a national standard and that California students would need to have the ability to demonstrate compliance with our state's standards. Dr. Witcher then asked about the accessibility of the information gained at the site visits. Dr. Tooks explained

that although the information is considered confidential, the program is willing to release information if needed. However, the reports only show present deficiencies.

Emma Ramos asked about CODA's acceptance being affected if program directors did not have a bachelor's degree. Dr. Tooks responded that this would be discovered during the review process which would cause the program to be considered deficient. Ms. Renfrow also confirmed that laboratory, preclinical, and clinical instructors are required to have a bachelor's degree.

Karen Fischer asked if CODA has issues with programs not meeting standards between site visits and if there are any statistics that can back up this information. Dr. Tooks explained that, although there aren't any specific statistics covering this topic, CODA does oversee compliance of these programs with annual surveys and reports of program changes. Ms. Fischer also asked if CODA communicates with the state boards when a complaint is filed. Dr. Tooks said the state boards receive an Accreditation Action Report, which is also available to the public on their website.

LaDonna Drury-Cline asked if CODA generates a report to the state dental boards which states the findings of the accredited programs and actions of the Commission for dental hygiene programs and the dental programs in California. Dr. Tooks was able to confirm that the Accreditation Action Report does list all actions and statuses. She also mentioned that the report information is emailed to the dental boards, is public, and is listed on their website.

After the presentation, the following agenda items were discussed as requested by the California Association of Dental Assisting Teachers (CADAT):

1. CADAT requested the Council to formally enact the provisions of California Code of Regulations Section 1070.2, which went into effect on January 1, 2015 by:
  - The Council recommending that the Board considers accepting CODA's findings in assisting with the Board's application process for the Registered Dental Assisting (RDA) programs.
  - An abbreviated application be created and approved by the Board for RDA programs that are accredited by CODA.

As a result of the requested agenda item, a subcommittee was created to work with staff to conduct a side-by-side comparison of CODA standards and the Board's requirements for program approval.

2. CADAT requested the establishment of an Ad-Hoc Panel of CADAT representatives, the Dental Assisting Council Chair and board staff to establish a new shortened application for approval of an RDA Program for institutions who are applying for, or have obtained an accredited status from CODA.

As a result of the requested agenda item, staff will work with CADAT.

3. CADAT requested the Council to formally recognize all new RDA programs that have been accredited by CODA as being approved by the Dental Board and whose graduates shall be qualified to take California examinations.

As a result of the subcommittee that was created for the side-by-side comparison in the first requested agenda item, this was not discussed.

4. CADAT requested to approve, as eligible candidates, exam applications from graduates of a CODA accredited dental assisting program outside of California who would produce evidence of graduation from a CODA accredited program without the necessity to obtain additional work experience to qualify for the exam.

As a result of the requested agenda item, Council has directed staff to clarify and research this.

5. CADAT requested to seek legislative clarity in the Dental Board Sunset Review legislation, Language allowing for graduates of both board approved, and CODA approved programs to be eligible for application to take the State Board Exam to become an RDA.

As a result of the subcommittee that was created for the side-by-side comparison in the first requested agenda item, this was not discussed.

Council Action Requested:

No action necessary



## MEMORANDUM

<b>DATE</b>	February 12, 2015
<b>TO</b>	Dental Assisting Council, Dental Board of California
<b>FROM</b>	Michael Placencia, Legislative and Regulatory Analyst; Jennifer Casey, Dental Assisting Educational Program Analyst
<b>SUBJECT</b>	<b>DAC 9:</b> Discussion and Possible Action Regarding the Side-by-Side Comparison of the Commission on Dental Accreditation Standards for Dental Assisting Education Programs and the California Code of Regulations, Title 16, Division 10, Chapter 3, Article 2, Relating to Dental Assisting Educational Programs

Staff will hand carry this item to the meeting.



# MEMORANDUM

<b>DATE</b>	February 5, 2015
<b>TO</b>	Dental Assisting Council Members Dental Board of California
<b>FROM</b>	Jana Adams, Dental Assisting Examination Coordinator Jennifer Casey, Dental Assisting Educational Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>DAC 10:</b> Discussion and Possible Action Regarding Staff's Findings Related to the Credit Toward Work Experience from a Dental Assisting Program in a Postsecondary Institution Approved by the Department of Education as Provided by Business and Professions Code § 1752.1

At the December 15, 2014 Dental Assisting Council meeting, a representative from the California Association of Dental Assisting Teachers (CADAT) asked the Council to consider an agenda to approve, as eligible candidates, examination applications from graduates of a CODA-accredited dental assisting program outside of California who shall present, as part of the examination application, evidence of graduation from a CODA-accredited program and the California-specific certifications, without necessity to obtain additional work experience to qualify.

Pursuant to Business and Professions Code Section (Code Section) 1752.1(c), the Board has statutory authority to allow an applicant seeking licensure for the Registered Dental Assistant (RDA) profession, 'credit' toward the work experience criteria outlined in the *Application for RDA Examination and Licensure (Qualification through Satisfactory Work Experience)*, when the applicant can display classroom training and internship work from a postsecondary institution approved by the Department of Education or a board approved educational program. Credit will equal the total weeks spent in a classroom training and internship on a week-for-week basis.

Staff has been processing the *Application for RDA Examination and Licensure (Qualification through Satisfactory Work Experience)* giving credit to applicants on a week for week basis for classroom training and internship work obtained from a postsecondary institution approved by the Department of Education or a board approved educational program, per Code Section 1752.1(c).

Staff recommends that council consider issuing a credit. However, the requirement will need to be implemented via the regulatory process. Therefore, staff recommends including such a provision in the Dental Assisting comprehensive rulemaking package.



## MEMORANDUM

<b>DATE</b>	February 6, 2015
<b>TO</b>	Dental Assisting Council Members, Dental Board of California
<b>FROM</b>	Jennifer Casey, Dental Assisting Educational Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>DAC 11:</b> Update Regarding the Spring 2015 Dental Assisting Educator Newsletter

The Dental Assisting Program expects to release a newsletter to dental assisting educators in the second quarter. The newsletter will be a quarterly e-newsletter emailed to program and course directors in an effort to increase transparency and provide clarity in the Dental Assisting Program's processes and procedures. The Dental Assisting Program would like to keep program and course directors informed on changes in the program including: examination updates and statistics, failure rate concerns, examiner calibrations, and processes for candidates applying for licenses and permits.

# **EXAMINATION COMMITTEE**





**NOTICE OF EXAMINATION COMMITTEE MEETING**

**Thursday, February 26, 2015**

*Upon Conclusion of the Dental Assisting Council Meeting*

Doubletree by Hilton

1646 Front Street, San Diego, CA 92101

619-239-6800 (Hotel) or 916-263-2300 (Board Office)

**MEMBERS OF THE EXAMINATION COMMITTEE**

Chair – Stephen Casagrande, DDS

Vice Chair – Steven Morrow, DDS

Yvette Chappell-Ingram, Public Member

Judith Forsythe, RDA

Ross Lai, DDS

Huong Le, DDS, MA

Debra Woo, DDS

Public comments will be taken on agenda items at the time the specific item is raised. The Committee 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 Committee Chair. For verification of the meeting, call (916) 263-2300 or access the Board's website at [www.dbc.ca.gov](http://www.dbc.ca.gov). This Committee 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, MPA, 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.

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

1. Call to Order/Roll Call/Establishment of Quorum
2. Approval of the November 6, 2014 Examination Committee Meeting Minutes
3. WREB Update
4. Staff Update on Portfolio Pathway to Licensure
5. Discussion and Possible Action Regarding Approval of the Portfolio Audit Handbook
6. Public Comment of Items Not on the Agenda

The Committee 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)).

7. Future Agenda Items

Stakeholders are encouraged to propose items for possible consideration by the Committee at a future meeting.

8. Committee Member Comments for Items Not on the Agenda

The Committee may not discuss or take action on any matter raised during the Committee Member Comments 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)).

9. Adjournment



## **EXAMINATION COMMITTEE MEETING MINUTES**

**Thursday, November 6, 2014**

Sportsmen's Lodge Events Center, Waterfalls Room  
12833 Ventura Blvd., Studio City, CA 91604

**DRAFT**

### **MEMBERS PRESENT**

Chair – Stephen Casagrande, DDS  
Vice Chair – Steven Morrow, DDS  
Yvette Chappell-Ingram, Public Member  
Judith Forsythe, RDA  
Ross Lai, DDS  
Huong Le, DDS, MA  
Debra Woo, DDS

### **MEMBERS ABSENT**

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

Dr. Casagrande, Chair, called the Examination Committee meeting to order at 12:12 p.m. Dr. Woo called the roll and a quorum was established.

#### **2. Approval of the August 25, 2014 Examination Committee Meeting Minutes**

M/S/C (Morrow/Forsythe) to approve the August 25, 2014 minutes. The motion passed unanimously.

#### **3. WREB Update**

Dr. Joe D. Zayas, President of the Western Regional Examination Board (WREB) provided an overview of WREB activities.

#### **4. Portfolio Pathway to Licensure – Regulatory Update – Program Launch**

Dr. Casagrande announced that the Portfolio Pathway to Licensure regulations became effective on November 5, 2014. Dr. Morrow thanked Dr. Casagrande for his work on this project over the past 8 years. Alan Felsenfeld, MA, DDS, FACD, FICD commented that he was happy to be a part of this historic project.

#### **5. Discussion and Possible Action Regarding the Acceptance of Other Regional Examinations as Pathways to Licensure and the Need to Conduct an Occupational Analysis for Dentists**

Dr. Casagrande explained that the American Board of Dental Examiners (ADEX) would like the Board to accept its dental clinical examination as a pathway to licensure, similar to what was done when the Board accepted the Western Regional Examination Board (WREB) examination. The ADEX examination is currently administered by the North East Regional Examination Board (NERB). Dr. Casagrande appointed a subcommittee of Dr.'s Le and Lai to work with staff in researching the feasibility of accepting other regional exams. There was no public comment.

6. **Public Comment of Items Not on the Agenda**

There was no public comment.

7. **Future Agenda Items**

Dr. Casagrande requested a future agenda item regarding the restorative procedures component of the Western Regional Examination Board (WREB).

8. **Committee Member Comments for Items Not on the Agenda**

There were no further comments from the committee.

9. **Adjournment**

The Examination Committee adjourned at 1:15 p.m.

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## MEMORANDUM

<b>DATE</b>	January 28, 2015
<b>TO</b>	Examination Committee Members Dental Board of California
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>EX 3:</b> Update on Western Regional Examining Board (WREB) Activities

Dr. Huong Le will provide a verbal report.



## MEMORANDUM

<b>DATE</b>	February 5, 2015
<b>TO</b>	Examination Committee Members
<b>FROM</b>	Tina Vallery, Licensing Analyst Dental Board of California
<b>SUBJECT</b>	<b>EX 4:</b> Staff Update on Portfolio Pathway to Licensure

Staff has been busy since the implementation of the portfolio pathway to licensure on November 5, 2014. A reference binder was put together that included a copy of the portfolio legislation, the Candidate and Examiner handbooks, the full regulatory package, all of the forms, and a CD that contains all of the binder contents as well as the board approved calibration courses. This binder has been provided to all schools participating in the portfolio pathway to licensure.

The University of California, San Francisco dental school (UCSF) notified staff on December 2, 2014, that they have trained and calibrated their faculty in compliance with the Board's requirements and that they currently have students enrolled in the program.

The University of the Pacific (UOP) dental school is in the process of calibrating its faculty also.

Plans are in the works for board staff to check in with all schools during the months of March and April to observe calibration of faculty and to interview students taking the portfolio pathway for feedback on the process.

On December 5, 2015, Dr. Steve Casagrande, Dr. Steve Morrow, Dr. Richard Frieden, and Dr. Robert Blye met to finalize the exam calibration materials. Initially, Dr. Frieden and Dr. Blye will serve as the auditors for the Board. In the future, staff intends to recruit additional auditors.

Staff is currently working on updating the portfolio page on its website.

Action Requested:

No action is being requested by staff for this item.



## MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Examination Committee Members
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>EX 5:</b> Discussion and Possible Action Regarding Approval of the Portfolio Audit Handbook

The subcommittee of Dr.'s Casagrande and Morrow will lead the discussion regarding approval of the Portfolio Audit Handbook.

# PORTFOLIO EXAMINATION AUDIT PROCESS 2015/2016



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# Chapter 1 – Introduction

## ***Purpose of audit process***

This Audit Process is designed to serve multiple purposes. First it will provide information for auditors who will conduct site visits on behalf of the Dental Board of California (Board). The purpose of the site visits is to determine if the participating dental schools are following the procedures established for the evaluation and calibration system set forth by the Board for the Portfolio Examination. Second, it will provide information on which participating dental schools can conduct a self-assessment of its adherence to the Board's examination procedures. Third, it will provide a protocol for collecting documentation that will serve as validity evidence for the examination.

During an audit, in-depth information is obtained about the administrative and psychometric aspects of the portfolio examination, much like the accreditation process. An audit team comprised of faculty from the dental schools and persons designated by the Board would verify compliance with accepted professional testing standards, e.g., Standards for Educational and Psychological Testing, as well as verifying that the portfolios have been implemented according to the goals of the portfolio process.

## ***Applicable psychometric standards***

Standard 3.15 of the Standards for Educational and Psychological Testing<sup>1</sup> state:

“When using a standardized testing format to collect structured behavior samples, the domain, test design, test specifications and materials should be documented as for any other test. Such documentation should include a clear definition of the behavior expected of the test takers, the nature of expected responses, and any materials or directions that are necessary to carry out the testing.” (p. 46)

## ***Role of the Board***

The Board has several responsibilities with regard to the audit:

- Oversight of audit process
- Establishment of grading standards necessary for public protection

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<sup>1</sup> American Educational Research Association, American Psychological Association, & National Council on Measurement in Education (1999). Standards for Educational and Psychological Testing. Washington, DC: Author.

- Developing audit protocols and criteria for assessing schools' compliance with the evaluation system and calibration process
- Hands-on training for auditors in the evaluation system
- Selecting auditors who can maintain the independence between themselves and the Portfolio Examination process

## ***Role of the audit team***

The audit team is responsible for verification of the examination process, examination results, collection and evaluation of specific written documentation which respond to a set of standardized audit checklist, and summarizing the findings in a written report. A site visit can be conducted to verify portfolio documentation and clear up unresolved questions.

The audit team would be comprised of persons who can remain objective and neutral to the interests of the school being audited. The audit team should be knowledgeable of subject matter, psychometric standards, psychometrics and credentialing testing.

The audit team should be prepared to evaluate the information provided in a written report to the Board that documents the strengths and weaknesses of each school's administrative process.

## ***Documentation for validity evidence***

Each student will have a portfolio of completed, signed rating (grade) sheets which provide evidence that clinical competency examinations in the six areas of practice have been successfully completed.

In addition to the signed grade worksheets and summary of candidates' competency examinations, the following content specific documentation should be provided at the time of the audit site visit:

<i>ORAL DIAGNOSIS AND TREATMENT PLANNING</i>	<ul style="list-style-type: none"> <li>• Full workup of case</li> </ul>
<i>DIRECT RESTORATION</i>	<ul style="list-style-type: none"> <li>• Restorative diagnosis and treatment plan</li> <li>• Preoperative radiographs, e.g., original lesion in Class II, III, IV</li> </ul>
<i>INDIRECT RESTORATION</i>	<ul style="list-style-type: none"> <li>• Restorative diagnosis and treatment plan</li> <li>• Preoperative radiographs</li> </ul>
<i>REMOVABLE PROSTHODONTICS</i>	<ul style="list-style-type: none"> <li>• Removable prosthodontic diagnosis and treatment plan</li> <li>• Preoperative radiographs illustrating treatment condition</li> </ul>
<i>ENDODONTICS</i>	<ul style="list-style-type: none"> <li>• Endodontic diagnosis and treatment plan</li> <li>• Preoperative radiographs of treatment site</li> <li>• Postobturation radiographs of treatment site</li> </ul>

<i>PERIODONTICS</i>	<ul style="list-style-type: none"><li>• Periodontal diagnosis and treatment plan</li><li>• Charted pocket readings</li><li>• Preoperative radiographs including subgingival calculus</li><li>• Follow-up report</li></ul>
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It is anticipated that auditors will be presented with a representative sample of documentation from the candidate competency examination.

### ***Schedule for audits***

The Board will conduct audits of the Portfolio competency instructors and examinations every two years (biennially).

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## Chapter 2 – School Audit Information

### RESOURCES

- Who is responsible for training dental school staff to assign final scaled scores and prepare final score reports and other required documentation to the Board?
- What quality control procedures are in place to ensure that the final scaled scores and score reports are accurate?

### TRAINING AND CALIBRATION OF EXAMINERS

- Who is responsible for the Calibration Training of Board-approved Portfolio examiners?

### TEST SECURITY

- Are procedures in place to permit auditors to view patient information for the purposes of the audit?
- Are procedures in place to maintain the security of the Portfolio examination materials before, during and after each competency examination?
- Are procedures in place to maintain security of final scoring procedures and final scores?

### QUALITY OF DOCUMENTATION

- Is the quality of the documentation consistent with accepted standards of care for each type of competency examination?
- Are comments routinely available on the grading worksheets to justify an examiner's ratings?

### PERFORMANCE STATISTICS

- Are procedures in place to produce reliability statistics for Portfolio examiners?
- Are procedures in place to maintain pass/fail statistics for all factors?

### INCIDENT REPORTS

- Are procedures in place to handle incidents that may arise during the implementation of competency examinations of the Portfolio Examination?

### UNSUCCESSFUL CANDIDATES

- What procedures are in place for candidates who fail a competency examination and who wish to pursue the Portfolio Examination pathway to initial licensure?

## Chapter 3 – Portfolio Audit Checklist

The audit checklist will be used to determine the standardization of the candidate portfolios at each dental school and must be completed prior to the ending of the site visit.

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# Portfolio Examination Audit Checklist

Candidate Name: \_\_\_\_\_

Candidate ID #: \_\_\_\_\_

<b>Review of Applicant Portfolio</b>			
<b>Oral Diagnosis and Treatment Planning (ODTP)</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of ODTP for a minimum of twenty (20) cases?	Y	N	Comments:
<b>Competency Examination</b>			
Does the portfolio contain completed grade sheets in the required fifteen (15) scoring factors?	Y	N	Comments:
How many attempts did the candidate take in order to pass the portfolio competency examination?	# of attempts _____ <i>(After three (3) failed attempts remedial education is required.)</i>		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
Does the treatment plan include at least three (3) of the following six (6) disciplines? Mark all that apply: <input type="checkbox"/> Periodontics <input type="checkbox"/> Endodontics <input type="checkbox"/> Operative (direct and indirect restoration) <input type="checkbox"/> Fixed and removable prosthodontics <input type="checkbox"/> Orthodontics <input type="checkbox"/> Oral Surgery	Y	N	Comments:
<b>Patient Parameters</b>			
<ul style="list-style-type: none"> <li>• Maximum of ASA II</li> <li>• Missing or will be missing two or more teeth, not including third molars</li> <li>• At least moderate periodontitis (probing depth of 5 mm or more)</li> </ul>	<i>Informational Only</i>		

## Portfolio Examination Audit Checklist

<b>Elements of ODTP Portfolio</b>			
Does the medical history include: <input type="checkbox"/> Evaluations of past illness and conditions, hospitalizations and operations <input type="checkbox"/> Allergies <input type="checkbox"/> Family history <input type="checkbox"/> Social history <input type="checkbox"/> Current illnesses and medications and their effect on dental condition	Y	N	Comments:
Does the dental history include: <input type="checkbox"/> Age of previous prostheses, existing restorations, prior history of orthodontic/periodontic treatment, and oral hygiene habits/adjuncts	Y	N	Comments:
Documentation of a comprehensive examination for dental treatment provided to patients?	Y	N	Comments:
Documentation the candidate evaluated data to identify problems?	Y	N	Comments:
Documentation the candidate worked up the problems and developed a tentative treatment plan?	Y	N	Comments:
Documentation the candidate developed a final treatment plan?	Y	N	Comments:
Was this a full workup of the case?	Y	N	Comments:
<b>Direct Restoration</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of Direct Restoration clinical experiences for a minimum of sixty (60) restorations?	Y	N	Comments:
<b>Competency Examination</b>			
Does the portfolio contain completed grade sheets in the required seven (7) scoring factors for the Class II amalgam or composite; maximum one slot preparation?	Y	N	Comments:



## Portfolio Examination Audit Checklist

Does the portfolio contain completed grade sheets in the required seven (7) scoring factors for the Class II amalgam or composite or Class III or IV composite?	Y	N	Comments:
How many attempts did the candidate take in order to pass each of the portfolio competency examinations?	# of attempts _____ (After three (3) failed attempts remedial education is required.)		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
<b><i>Patient Parameters</i></b>			
<p><b>Class II</b> Any permanent posterior tooth</p> <ul style="list-style-type: none"> <li>• More than one test procedure can be performed on a single tooth</li> <li>• Caries shown on either of the two required radiograph of an unrestored proximal surface must extend to or beyond the dento-enamel junction</li> <li>• Tooth treated must be in occlusion</li> <li>• Must have adjacent tooth to be able to restore proximal contact</li> <li>• Tooth must be asymptomatic with no pulpal or periapical pathology</li> <li>• Tooth with bonded veneer not acceptable</li> </ul> <p><b>Class III/IV</b> Any permanent anterior tooth <i>(optional)</i></p> <ul style="list-style-type: none"> <li>• Treatment needs to be performed in the sequence described in the treatment plan</li> <li>• Caries shown on radiograph image of an unrestored proximal surface must extend to or beyond dento-enamel junction</li> <li>• Carious lesions must involve the interproximal contact area</li> <li>• Must have adjacent tooth to be able to restore proximal contact</li> <li>• Tooth must be asymptomatic with no pulpal or periapical pathology</li> <li>• Tooth with bonded veneer not acceptable</li> </ul>	<i>Informational Only</i>		

## Portfolio Examination Audit Checklist

<b><i>Elements of Direct Restoration</i></b>			
Includes documentation of the candidate's competency to perform a class II direct restoration on a tooth containing primary carious lesions to optimal form, function and esthetics using amalgam or composite restorative materials?	Y	N	Comments:
Includes documentation of the candidate's competency to perform a class III/IV direct restoration on a tooth containing primary carious lesions to optimal forms, function and esthetics using composite restorative material?	Y	N	Comments:
Was there a restorative diagnosis and treatment plan?	Y	N	Comments:
Were there preoperative radiographs, E.g., original lesion in Class II, III, IV?	Y	N	Comments:
<b>Indirect Restoration</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of Indirect Restoration clinical experiences for a minimum of fourteen (14) restorations?	Y	N	Comments:
<b>Competency Examination</b>			
Does the portfolio contain completed grade sheets in the required seven (7) scoring factors?	Y	N	Comments:
How many attempts did the candidate take in order to pass the portfolio competency examination?	# of attempts _____ (After three (3) failed attempts remedial education is required.)		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
<b><i>Patient Parameters</i></b>			
Was the treatment performed in the sequence described in the treatment plan?	Y	N	Comments:

## Portfolio Examination Audit Checklist

Was the tooth asymptomatic with no pulpal or periapical pathosis?	Y	N	Comments:
Was the tooth in occlusal contact with a natural tooth or permanent restoration?	Y	N	Comments:
Does the restoration include at least one cusp?	Y	N	Comments:
Is there an adjacent tooth in order to restore proximal contact?	Y	N	Comments:
Did the candidate perform any portion of the crown in advance?	Y	N	Comments:
Direct restoration materials which are placed to contribute to the retention and resistance form of the final restoration (build-ups) may be completed ahead of time if needed.	<i>Informational only</i>		
Was the restoration completed in the same tooth on the same patient by the same candidate?	Y	N	Comments:
Validated lab or fabrication error will allow a second delivery attempt starting from a new impression or modification of existing crown.	<i>Information only</i>		
<b><i>Elements of Indirect Restoration</i></b>			
Includes documentation of the candidate's competency to complete a ceramic onlay or more extensive indirect restoration? The treatment needs to be performed in the sequence in the treatment plan. The tooth must be asymptomatic with no pulpal or periapical pathosis and cannot be in need of endodontic treatment. The tooth selected for restoration, must have opposing occlusion that is stable. The tooth selected for restoration must have an adjacent tooth to be able to restore a proximal contact. The proximal surface of the tooth adjacent to the planned restoration must be either an enamel surface or a permanent restoration. Temporary restorations or removable partial dentures are not acceptable adjacent surfaces. The tooth selected must require an indirect restoration at least the size of the onlay or greater. The tooth selected cannot replace existing or temporary crowns.	Y	N	Comments:

## Portfolio Examination Audit Checklist

Buildups may be completed ahead of time, if needed. Teeth with cast post are not allowed. The restoration must be completed on the same tooth and same patient by the same candidate.			
Was the treatment performed in the sequence of the treatment plan?	Y	N	Comments:
<p>Includes documentation of the candidate's competency to complete a partial gold restoration must be an onlay or more extensive indirect restoration?</p> <p>The treatment must be performed in the sequence of the treatment plan. The tooth must be asymptomatic with no pulpal or periapical pathosis; cannot be in need of endodontic treatment. The tooth selected for restoration must have opposing occlusion that is stable. The tooth selected for restoration must have an adjacent tooth to be able to restore a proximal contact. The proximal surface of the tooth adjacent to the planned restoration must be either an enamel surface or a permanent restoration. Temporary restorations or removable partial dentures are not acceptable adjacent surfaces. The tooth selected must require an indirect restoration at least the size of an onlay or greater. The tooth selected cannot replace existing or temporary crowns. Buildups may be completed ahead of time, if needed. Teeth with cast post are not allowed. The restoration must be completed on the same tooth and same patient by the same candidate.</p>	Y	N	Comments:
Was the treatment performed in the sequence of the treatment plan?	Y	N	Comments:
<p>Includes documentation of the candidate's competency to complete a full gold restoration?</p> <p>The treatment must be performed in the sequence of the treatment plan. The tooth must be asymptomatic with no pulpal or periapical pathosis; cannot be in need of endodontic treatment. The tooth selected for restoration must have opposing occlusion that is stable. The tooth selected for restoration must have an adjacent tooth to be able to restore a proximal contact. The proximal surface of the tooth adjacent to the planned restoration must be either an enamel</p>	Y	N	Comments:

## Portfolio Examination Audit Checklist

<p>surface or a permanent restoration. Temporary restorations or removable partial dentures are not acceptable adjacent surfaces. The tooth selected must require an indirect restoration at least the size of an onlay or greater. The tooth selected cannot replace existing or temporary crowns. Buildups may be completed ahead of time, if needed. Teeth with cast post are not allowed. The restoration must be completed on the same tooth and same patient by the same candidate.</p>			
<p>Was the treatment performed in the sequence of the treatment plan?</p>	Y	N	Comments:
<p>Includes documentation of the candidate's competency to complete a metal-ceramic restoration? The treatment must be performed in the sequence of the treatment plan. The tooth must be asymptomatic with no pulpal or periapical pathosis: cannot be in need of endodontic treatment. The tooth selected for restoration must have opposing occlusion that is stable. The tooth selected for restoration must have an adjacent tooth to be able to restore a proximal contact. The proximal surface of the tooth adjacent to the planned restorations must be either an enamel surface or a permanent restoration. Temporary restorations or removable partial dentures are not acceptable adjacent surfaces. The tooth selected must require an indirect restoration at least the size of an onlay or greater. The tooth selected cannot replace existing or temporary crowns. Buildups may be completed ahead of time, if needed. Teeth with cast post are not allowed. The restoration must be completed on the same tooth and same patient.</p>	Y	N	Comments:
<p>Was the treatment performed in the sequence of the treatment plan?</p>	Y	N	Comments:
<p>A facial veneer is not acceptable documentation of the candidate's competency to perform indirect restorations.</p>	<i>Informational only</i>		
<p>Was there a restorative diagnosis and treatment plan?</p>	Y	N	Comments:

## Portfolio Examination Audit Checklist

Were there preoperative radiographs?	Y	N	Comments:
<b>Removable Prosthodontics</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of removable prosthodontics clinical experiences for a minimum of five (5) prostheses?	Y	N	Comments: <i>One of which may be used for the portfolio competency examination.</i>
<b>Competency Examination</b>			
Does the portfolio contain completed grade sheets in the required scoring factors for the prosthodontic performed?	Y	N	Comments:
How many attempts did the candidate take in order to pass the portfolio competency examination?	# of attempts _____ (After three (3) failed attempts remedial education is required.)		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
<b>Patient Parameters</b>			
Procedures may be performed on patients with supported soft tissue, implants or natural tooth retained overdentures.	<i>Informational only</i>		
<b>Elements of Removable Prosthodontics</b>			
Includes documentation of the candidate's competency to: <ul style="list-style-type: none"> <li>• Develop a diagnosis</li> <li>• Determined treatment options and prognosis for the patient to receive a removable prosthesis</li> </ul>	Y	N	Comments:
Includes documentation of the candidate's competency to successfully restore edentulous spaces with removable prostheses?	Y	N	Comments:

## Portfolio Examination Audit Checklist

Includes documentation of the candidate's competency to successfully manage tooth loss transitions with immediate or transitional prostheses?	Y	N	Comments:
Includes documentation of the candidate's competency to successfully manage prosthetic problems?	Y	N	Comments:
Includes documentation of the candidate's competency to successfully direct and evaluate the laboratory services for the prostheses?	Y	N	Comments:
Was there a removable prosthodontic diagnosis and treatment plan?	Y	N	Comments:
Were there preoperative radiographs illustrating the treatment condition?	Y	N	Comments:
<b>Endodontics</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of Endodontic clinical experiences for a minimum of five (5) canals or any combination of canals in three separate teeth?	Y	N	Comments:
<b>Competency Examination</b>			
Does the portfolio contain completed grade sheets in the required ten (10) scoring factors?	Y	N	Comments:
How many attempts did the candidate take in order to pass the portfolio competency examination?	# of attempts _____ (After three (3) failed attempts remedial education is required.)		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
<b>Patient Parameters</b>			
Any tooth to completion by the same candidate on the same patient. Completed case is defined as a tooth with an acceptable and durable coronal seal.	<i>Information only</i>		

## Portfolio Examination Audit Checklist

<b><i>Elements of Endodontics</i></b>			
Includes documentation of the candidate's competency in applied case selection criteria for endodontic cases?	Y	N	Comments:
Includes documentation of the candidate's competency to perform pretreatment preparation for endodontic treatment?	Y	N	Comments:
Includes documentation of the candidate's competency in performing access openings?	Y	N	Comments:
Includes documentation of the candidate's competency in performing proper cleaning and shaping techniques?	Y	N	Comments:
Includes documentation of the candidate's competency in performing proper obturation protocols?	Y	N	Comments:
Includes documentation of the candidate's competency in demonstrating proper length control of obturation, including achievement of dense obturation of filling material, obturation achieved to a clinically appropriate coronal height?	Y	N	Comments:
Includes documentation that the candidate competently completed the endodontic case including evidence that the candidate achieved coronal seal to prevent re-contamination and the candidate created diagnostic, radiographic and narrative documentation?	Y	N	Comments:
Includes documentation of the candidate's competency in providing recommendations for post endodontic treatment, including evidence that the candidate recommended final restoration alternatives and provided the patient with recommendations for outcome assessment and follow-up?	Y	N	Comments:
Was there an endodontic diagnosis and treatment plan?	Y	N	Comments:
Were there preoperative radiographs of the treatment site?	Y	N	Comments:
Were there postobturation radiographs of the treatment site?	Y	N	Comments:



## Portfolio Examination Audit Checklist

<b>Periodontics</b>			
<b>Clinical Experiences</b>			
Does the portfolio include documentation of periodontal clinical experiences for a minimum of twenty five (25) cases?	Y	N	Comments:
<b>Competency Examination</b>			
Did the combined clinical experience include a minimum of five (5) quads of scaling and root planing procedures?	Y	N	Comments:
Does the portfolio contain completed grade sheets in the required nine (9) Scoring factors?	Y	N	Comments:
How many attempts did the candidate take in order to pass the portfolio competency examination?	# of attempts _____ (After three (3) failed attempts remedial education is required.)		
Was remediation required?	Y	N	Comments:
If yes above, was remediation form completed?	Y	N	Comments:
Has the case been scored in the following three (3) parts? <input type="checkbox"/> Part A Review medical and dental history, radiographic findings, comprehensive periodontal data collection, evaluate periodontal etiology/risk factors, comprehensive periodontal diagnosis, treatment plan <input type="checkbox"/> Part B Calculus detection, effectiveness of calculus removal <input type="checkbox"/> Part C Periodontal re-evaluation	Y	N	<i>In the event that the patient does not return for periodontal re-evaluation, Part C may be performed on a different patient.</i>
<b>Patient Parameters</b>			
Examination, diagnosis and treatment planning <ul style="list-style-type: none"> <li>• Minimum twenty (20) natural teeth with at least 4 molars</li> <li>• At least one probing depth of 5 mm or greater must be present on at least four (4) of the teeth, excluding third molars, with at least two of</li> </ul>	<i>Informational only</i>		

## Portfolio Examination Audit Checklist

<p>these teeth with clinical attachment loss of 2 mm or greater</p> <ul style="list-style-type: none"> <li>• Full mouth assessment or examination</li> <li>• No previous periodontal treatment at this institution, and no nonsurgical or surgical treatment within past 6 months</li> </ul>	
<p>Calculus detection and periodontal instrumentation (scaling and root planing)</p> <ul style="list-style-type: none"> <li>• Minimum of six (6) natural teeth in one quadrant, with at least two (2) adjacent posterior teeth in contact, one of which must be a molar.</li> <li>• Third molars can be used but they must be fully erupted</li> <li>• At least one probing depth of 5 mm or greater must be present on at least two (2) of the teeth that require scaling and root planing.</li> <li>• Minimum of six (6) surfaces of clinically demonstrable subgingival calculus must be present in one or two quadrants. Readily clinically demonstrable calculus is defined as easily explorer detectable, heavy ledges. At least four (4) surfaces of the subgingival calculus must be on posterior teeth. Each tooth is divided into four surfaces for qualifying calculus: mesial, distal, facial, and lingual.</li> </ul> <p>If additional teeth are needed to obtain the required calculus and pocket depths two quadrants may be used.</p>	<p><i>Informational only</i></p>
<p>Re-evaluation</p> <ul style="list-style-type: none"> <li>• Candidate must be able to demonstrate a thorough knowledge of the case</li> <li>• Candidate must perform at least two (2) quadrants of scaling and root planing on the patient being reevaluated</li> <li>• Candidate must perform at least two</li> </ul>	<p><i>Informational only</i></p>

## Portfolio Examination Audit Checklist

<p>documented oral hygiene care (OHC) instructions with the patient being reevaluated 4-6 weeks after scaling and root planing is completed. The scaling and root planing should have been completed within an interval of 6 weeks or less.</p> <ul style="list-style-type: none"> <li>• Minimum twenty (20) natural teeth with at least four (4) molars</li> <li>• Baseline probing depth of at least 5 mm on at least four (4) of the teeth, excluding third molars</li> </ul>			
<b>Elements of Periodontics</b>			
<p>Includes documentation that the candidate competently performed a comprehensive periodontal examination?</p>	Y	N	Comments:
<p>Includes documentation that the candidate competently diagnosed and developed a periodontal treatment plan that documents the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> The candidate determined the periodontal diagnosis</li> <li><input type="checkbox"/> The candidate formulated an initial periodontal treatment plan that demonstrated the following:             <ul style="list-style-type: none"> <li>○ Determined to treat or refer patient</li> <li>○ Discussed with patient the etiology, periodontal disease, benefits of treatment, consequences of no treatment, specific risk factors, and patient specific oral hygiene instructions</li> <li>○ Determined non-surgical periodontal therapy</li> <li>○ Determined need for re-evaluation</li> <li>○ Determined recall interval</li> </ul> </li> </ul>	Y	N	Comments:
<p>Includes documentation that the candidate competently performed nonsurgical periodontal therapy that he/she:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Detected supra and subgingival calculus</li> <li><input type="checkbox"/> Performed periodontal instrumentation             <ul style="list-style-type: none"> <li>• Removed calculus</li> <li>• Removed plaque</li> <li>• Removed stains</li> </ul> </li> </ul>	Y	N	Comments:

## Portfolio Examination Audit Checklist

<input type="checkbox"/> Demonstrated that the candidate did not inflict excessive soft tissue trauma <input type="checkbox"/> Demonstrated that the candidate provided the patient with anesthesia			
Includes documentation that the candidate competently performed a periodontal re-evaluation?	Y	N	Comments:
Was there a periodontal diagnosis and treatment plan?	Y	N	Comments:
Were there charted pocket readings?	Y	N	Comments:
Was there preoperative radiographs?	Y	N	Comments:
Was there a follow-up report?	Y	N	Comments:

DRAFT



**PRESCRIPTION  
DRUG ABUSE  
COMMITTEE**



## **NOTICE OF PRESCRIPTION DRUG ABUSE COMMITTEE MEETING**

**February 26, 2015**

*Upon Conclusion of the Examination Committee Meeting*

Doubletree by Hilton

1646 Front Street, San Diego, CA 92101

619-239-6800 (Hotel) or 916-263-2300 (Board Office)

## **MEMBERS OF THE PRESCRIPTION DRUG ABUSE COMMITTEE**

Chair – Thomas Stewart, DDS

Vice Chair – Fran Burton

Huong Le, DDS, MA

Steven Morrow, DDS

Bruce Whitcher, DDS

Debra Woo, DDS, MA

Public comments will be taken on agenda items at the time the specific item is raised. The Committee 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 Committee Chair. For verification of the meeting, call (916) 263-2300 or access the Board's website at [www.dbc.ca.gov](http://www.dbc.ca.gov). This Committee 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, MPA, 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.

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

1. Call to Order/Roll Call/Establishment of Quorum
2. Approval of the November 6, 2014 Prescription Drug Abuse Committee Meeting Minutes
3. Staff Update on Opioid Prescription Misuse and Overdose Workgroup Meetings
4. Staff Update on California's Controlled Substance Review and Evaluation System (CURES)
5. Discussion and Possible Action Regarding the Medical Board of California's Prescription Guidelines.

6. **Public Comment of Items Not on the Agenda**  
The Committee 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)).
7. **Future Agenda Items**  
Stakeholders are encouraged to propose items for possible consideration by the Committee at a future meeting.
8. **Committee Member Comments for Items Not on the Agenda**  
The Committee may not discuss or take action on any matter raised during the Committee Member Comments 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)).
9. **Adjournment**





## **PRESCRIPTION DRUG ABUSE COMMITTEE MINUTES**

**Thursday, November 6, 2014**

Sportsmen's Lodge Events Center, Waterfalls Room  
12833 Ventura Blvd., Studio City, CA 91604

**DRAFT**

### **MEMBERS PRESENT**

Chair – Thomas Stewart, DDS  
Vice Chair – Fran Burton  
Huong Le, DDS, MA  
Steven Morrow, DDS  
Bruce Whitcher, DDS  
Debra Woo, DDS, MA

### **MEMBERS ABSENT**

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

Dr. Thomas Stewart, Chair, called the meeting to order at 4:54 p.m. Roll was called and a quorum established.

#### **2. Approval of the August 25, 2014 Prescription Drug Abuse Committee Meeting Minutes**

M/S/C (Le/Whitcher) to approve the August 25, 2014 Prescription Drug Abuse Committee meeting minutes. Dr. Alan Felsenfeld commented that he would like the minutes to be amended to reflect that at the August 25, 2014 Prescription Drug Abuse Committee meeting, he commented that the California Dental Association has a variety of methods of communicating with its members regarding this subject including through the CDA updates, journal, and a presentation that will be given. There was no further public comment. Amend the motion to approve the August 25, 2014 Prescription Drug Abuse Committee meeting minutes as amended. The amended motion passed unanimously.

#### **3. Define the 2014 Mission Statement of the Prescription Drug Abuse Committee**

Dr. Stewart read the proposed mission statement. There was discussion regarding the wording. M/S/C (Burton/Morrow) to amend the proposed mission statement to read "Our mission is to respond to the rise in prescription drug overdoses by developing strategies for safe but effective prescribing methods within the practice of dentistry." There was no public comment. The motion passed unanimously.

#### **4. Update on the Medical Board of California Prescription Drug Taskforce Meeting and Prescription Guidelines**

Karen Fischer, Executive Officer of the Dental Board gave an overview of the information provided. There was no public comment.

5. **Discussion and Possible Action Regarding the Prescription Drug Misuse and Overdose Prevention Workgroup's Launch of the Medical Board of California's Prescription Drug Abuse Guidelines**

Ms. Fischer gave an overview of the information provided. There was no public comment.

6. **Update on the Drug Enforcement Agency (DEA) Rescheduling of Hydrocodone to Schedule II**

Dr. Debra Woo gave an overview of the information provided. There was discussion about the implementation and impact of the new rescheduling. Gayle Mathe, California Dental Association (CDA) commented that they are researching emergency situation prescriptions that can be verbally authorized then followed up with a written prescription on a controlled substance prescription form relating to Health and Safety Code Sections 11167 and 11167.5. She commented that she is working with the Executive Officer of the Pharmacy Board to gain clarity regarding this issue. CDA will post their findings as soon as they verify the information. Ms. Mathe further commented that at the last Controlled Substance Utilization Review and Evaluation System (CURES) meeting she requested that a dentist be included to sit on the beta testing panel.

7. **Public Comment of Items Not on the Agenda**

There was no further public comment.

8. **Future Agenda Items**

Dr. Morrow commented that pending a report from the Medical and or Pharmacy Board he would like to have the Committee review the guidelines specific to dentistry.

9. **Committee Member Comments for Items Not on the Agenda**

There were no further comments.

10. **Adjournment**

The committee adjourned at 5:27 p.m.



## MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Prescription Drug Abuse Committee
<b>FROM</b>	Theresa Lane, Enforcement Chief
<b>SUBJECT</b>	<b>PDA 3: Staff Update on Opioid Prescription Misuse and Overdose Workgroup Meetings</b>

In response to what was determined to be a national epidemic, the California Department of Public Health (CDPH) and its state partners convened a Prescription Opioid Misuse and Overdose Prevention Workgroup in Spring 2014. The Board President, Fran Burton, Executive Officer Karen Fischer and Board staff have been involved in the Opioid Prescription Misuse and Overdose Workgroup Meetings.

The workgroup is exploring opportunities to improve collaboration and expand joint efforts among state departments working to address this epidemic. They have identified two priorities: expansion and strengthening of prevention strategies and improvement of monitoring and surveillance.

The participants in the workgroup include: California Department of Public Health, Department of Health Care Services, Department of Justice, Emergency Medical Services Authority, California Department of Education, California State Board of Pharmacy, the Medical Board of California and the Dental Board of California.

Prescription medication misuse and overdose is a national epidemic, according to the Centers for Disease Control and Prevention (CDC). More people die from prescription medication overdoses than in motor vehicle crashes, when it comes to unintentional injury deaths in the U.S. The workgroup reports that in 2012, there were more than 41,000 deaths in this country related to drug overdoses – more than half of those deaths involved prescription drugs.

In the past, prescription opioids (such as hydrocodone, oxycodone, morphine and codeine) were prescribed for relieving short-term (acute) pain. Today, these medications are increasingly being used for long-term (chronic) pain management. As a result, sales of opioid pain relievers quadrupled in the past 10 years.

On December 30, 2014, the workgroup launched a press release letting the public know that the California state agencies are combining resources to prevent deaths and injuries from prescription painkiller misuse and overdoses by alerting health care providers, pharmacists and the public to this epidemic. After its release, there was a lot of media attention surrounding the topic.

The plans for the up and coming year include the formation of an interagency data group which will include a proposed opioid hotspot “fire map” project. There is hope that the collecting of data will quickly convey information about overdose death so that any patterns can possibly be discovered.

There has been recent discussion that the group would like to make a presentation to the Legislature to ask for assistance. Although no date or specifics are yet available, the Dental Board will monitor the process.

At the October 2014 meeting we learned that there will be an annual drug abuse prevention rally at the Capitol sometime in March. No date or specifics have yet to be released.



## MEMORANDUM

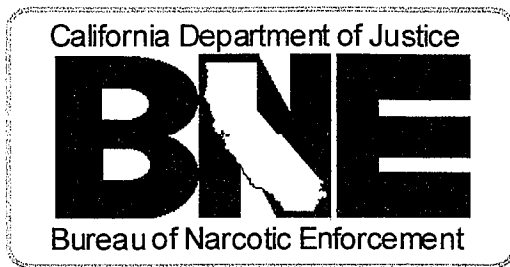
<b>DATE</b>	February 6, 2015
<b>TO</b>	Dental Board Members
<b>FROM</b>	Kelly Silva, Investigator
<b>SUBJECT</b>	<b>PDA 4: California's Controlled Substance Review and Evaluation System (CURES)</b>

In order to comply with Senate Bill 809 that was passed requiring prescribers and dispensers to apply for access to the Controlled Substance Utilization Review and Evaluation System (CURES), the California Department of Justice began to automate and improve the CURES system.

In May of 2014, the Dental Board of California was invited to attend the CURES 2.0 Joint Application Design (JAD) sessions to give input to provide a user-friendly, web based user registration process.

The goal of the new CURES system is to provide timely Schedule II through V controlled substance dispensing information to prescribers and dispensers. It will also provide regulatory agencies and criminal justice authorities sufficient prescribing and dispensing information and assistance to discern, investigate and prosecute criminal pharmaceutical diversion violations.

After several months of JAD sessions and the analysis section, the CURES system is currently in the design, development and infrastructure phase. The project will be moving to the testing and training section in May 2015 and will go live June 2015.



## **CURES Frequently Asked Questions**

The California prescription-monitoring program, CURES, is committed to fighting pharmaceutical drug diversion without affecting legitimate medical practice and patient care.

### **Q: What is CURES?**

A: All prescription drug history information is maintained in the California's Controlled Substance Utilization Review and Evaluation System, or CURES, a database which contains 86 million records. The database includes information about the drug dispensed, drug quantity and strength, patient name, address, prescriber name, and authorization number including DEA number or prescription number. California doctors and pharmacies are required to report to the California Department of Justice, within seven days, every schedule II, III and IV drug prescription that is written. There are 7,500 pharmacies and 155,000 prescribers in California reporting prescription information annually.

### **Q: What are schedule II, III and IV drugs?**

A: Examples of Schedule II drugs include: Ritalin, Methadone and Morphine. Some Schedule III drugs include: Vicodin, Katamine and Anabolic steroids. Valium, Ambien and Clonazepam are examples of Schedule IV drugs.

### **Q: When was CURES established?**

A: CURES evolved from California's triplicate prescription program, created in 1940 to monitor schedule II controlled drugs including morphine, oxycotin, and methadone using duplicate prescription pads. In 1996 CURES was established as a pilot project by the California Board of Pharmacy. The Pain Treatment and Drug Diversion Prevention Act of 2003 made CURES a permanent program.

### **Q: How do authorized agencies use prescription history information?**

A: The Attorney General's Office currently provides authorized agencies with Patient Activity Reports which reflect all controlled substances dispensed to an individual. This report alerts doctors and pharmacies to individuals who try to collect multiple narcotics prescriptions from many different doctors. This information is currently made available by fax or telephone. California's new system will provide real-time online access for authorized agencies.

California's new system will provide doctors, pharmacies, midwives, registered nurses, authorized law enforcement agencies, and medical profession regulatory boards with real-time access to the database. The new CURES database will help practitioners made better informed prescribing decisions regarding controlled substances. It will allow practioners to check what drugs a patient has already received before deciding whether to authorize additional medications.

### **Q: How active is CURES?**

A: The California Department of Justice has provided over 11,000 Patient Activity Reports to authorized agencies since January 2008. Last year, the department released 53,000 reports. In 2007, there were 990 investigative requests from regulatory boards, local law enforcement and DEA. The Department of Justice internally tracked 558 suspicious activities.

**Q: What are some of the benefits of the new real-time system?**

A: Some of the social and economic benefits of the new CURES online system will include the state's ability to:

- Reduce drug trafficking and abuse of dangerous prescription medications which often results in injury or death
- Reduce direct financial losses to health care providers, hospitals and pharmacies that waste time and lose productivity when patients doctor shop to feed drug addiction or criminal activity
- Reduce lost productivity to employers, employee lost wages, and drug rehabilitation expenses
- Reduce prescriber, hospital, and pharmacy liability and increasing healthcare costs
- Reduce hospital emergency room visits attributed to prescription drug overdose and misuse

**Q: Who will have access to the new database?**

A: The same agencies that are currently authorized to have access to patient prescription drug history information. This includes: doctors, pharmacists, and regulatory boards including the Board of Pharmacy, Medical Board, Dental Board, Board of Registered Nursing, Veterinary Board and Osteopathic Medical Board. Law enforcement agencies may also request Patient Activity Reports to assist with an ongoing investigation.

**Q: How much will the new system cost and who will maintain it?**

A: The Troy and Alana Pack foundation will obtain the \$3.5 million necessary for building the system which includes new software and server space. The California Department of Justice will maintain the system using existing resources.

**Q: What types of prescription drug abuse cases does the California Department of Justice investigate?**

A: The California Attorney General's Office investigates patients who visit many different doctors, a practice known as doctor shopping, to obtain many controlled narcotics through deceit and outright fraud. The office also investigates physicians who sell or divert prescriptions to drug dealers or addicts. The office also investigates pharmacists who falsify records and employees who steal narcotics and prescription pads.

**Q: To what extent are crooked doctors responsible for a rise in prescription drug abuse?**

A: In 2006, the California Medical Board took 84 actions against physicians: 53 for gross negligence resulting in bodily injury or death, 9 for excessive prescribing (11%), 18 for sexual misconduct with a patient and 4 for practicing under the influence. There are 96,000 license physicians and surgeons in California.

The attorney general has also investigated doctors for criminal violations related to prescribing practices. In May, state agents arrested Dr. Wesley Albert in Lake Elsinore for writing large quantities of prescription drugs from a hotel room which led to an individual's death in Riverside. In October 2007, state agents served search warrants at various doctors' offices, billing locations, and residences in both Los Angeles and Orange Counties, related to the death of Anna Nicole Smith. That investigation is ongoing.

During the last 5 years the Bureau of Narcotic Enforcement has also conducted two investigations into doctors for fraud. The Bureau of Medical Fraud and Elder Abuse has conducted undercover investigations into doctors accused of improper prescribing practices.

**Q: How do analysts evaluate CURES information?**

A: CURES Criminal Intelligence Specialists analyze data to identify abuse and fraud. The analysts compile intelligence reports and send them to state Bureau of Narcotic Enforcement regional offices and local and federal law enforcement. Analysts also monitor specific patients' activity over time periods to identify trends or possible patterns of abuse.

**Q: How will the state ensure that the new database is secure?**

A: For 30 years, the California Department of Justice has protected highly sensitive and confidential law enforcement information and database using the latest technology and strict security standards.

The new CURES database will be accessible only to authorized medical regulatory boards, law enforcement agencies with active criminal cases, pharmacies and medical practitioners. The California Department of Justice data center, where the CURES database will reside, meets some of the most stringent security and privacy standards established by the Governors Office and mandated by the Healthcare Insurance Portability and Accountability Act or HIPAA. Highlights include:

- State-of-the-art secure data center with automated redundant control systems, including power, air conditioning and communication for data recovery and backup.
- Compliance with latest federal security and encryption standards.
- 24x7 real-time monitoring and protection of the CURES database using refined intrusion detection and prevention tools.
- Sophisticated redundant network firewalls with real-time network traffic analysis.
- Advanced encryption of all confidential CURES data both in storage and in transmission for maximum data protection.
- Automated authentication and authorization systems restricting access only to authorized individuals.
- Complete logging of all CURES database access and transactions for auditing and traceability.
- Comprehensive disaster recovery plans and technology to protect CURES in the event of a catastrophic event.

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## MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Prescription Drug Abuse Committee
<b>FROM</b>	Theresa Lane, Enforcement Chief
<b>SUBJECT</b>	<b>PDA 5: Discussion and Possible Action Regarding the Medical Board of California's Prescription Guidelines</b>

The Medical Board of California approved the "Guidelines for Prescribing Controlled Substances for Pain" for release to their licensees at their Board meeting on October 24, 2014. These guidelines were not intended to mandate the standard of care but to assist and provide clear expectations to prescribers regarding their role in deciding to prescribe opioids for pain control to their patients as well as follow-up after treatment has been provided.

During a summit that took place on May 7, 2014, medical experts in the substance abuse treatment field testified that on average, physicians and dentists receive 11 hours of instruction in pain control during their entire medical/dental training.

In California, most licensed physicians are required to take, as a one-time requirement, 12 hours of Continuing Education (CE) on pain management and the appropriate care and treatment of the terminally ill. At present, the Dental Board has no similar requirements.

Adopting a CE requirement that addresses pain management and substance abuse may contribute to the reduction of overprescribing and the misuse of prescription drugs. In addition it may reinforce a critical treatment modality and emphasizes the priority placed on this component of dental practice.

A copy of the Medical Board of California approved Guidelines for Prescribing Controlled Substances for Pain is attached.

The committee may wish to consider establishing similar guidelines for dentists.

# **ACCESS TO CARE COMMITTEE**



## **NOTICE OF ACCESS TO CARE COMMITTEE MEETING**

**Thursday, November 6, 2014**

*Upon Conclusion of the Prescription Drug Abuse Committee Meeting*

Doubletree by Hilton

1646 Front Street, San Diego, CA 92101

619-239-6800 (Hotel) or 916-263-2300 (Board Office)

### **MEMBERS OF THE ACCESS TO CARE COMMITTEE**

Chair – Huong Le, DDS

Vice Chair – Meredith McKenzie, Public Member

Fran Burton, MSW, Public Member

Katie Dawson, RDH

Kathleen King, Public Member

Thomas Stewart, DDS

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While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

1. Call to Order/Roll Call/Establishment of Quorum
2. Approval of the November 6, 2014 Access to Care Committee Meeting Minutes
3. Update on Workforce Statistics by Conrado Barzaga, MD, Executive Director of the Center for Oral Health
4. Discussion and Possible Action Regarding the Dental Board's Loan Repayment Program
5. Public Comment of Items Not on the Agenda  
The Committee 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)).

6. **Future Agenda Items**  
Stakeholders are encouraged to propose items for possible consideration by the Committee at a future meeting.
7. **Committee Member Comments for Items Not on the Agenda**  
The Committee may not discuss or take action on any matter raised during the Committee Member Comments 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)).
8. **Adjournment**



## **ACCESS TO CARE COMMITTEE MEETING MINUTES**

**Thursday, November 6, 2014**

Sportsmen's Lodge Events Center, Waterfalls Room  
12833 Ventura Blvd., Studio City, CA 91604

**DRAFT**

### **MEMBERS PRESENT**

Chair – Huong Le, DDS  
Vice Chair – Meredith McKenzie, Public Member  
Fran Burton, MSW, Public Member  
Katie Dawson, RDH  
Kathleen King, Public Member  
Thomas Stewart, DDS

### **MEMBERS ABSENT**

1. **Call to Order/Roll Call/Establishment of Quorum**  
Dr. Huong Le, Chair, called the meeting to order at 5:29 p.m. Roll was called and a quorum established
2. **Approval of the August 25, 2014 Access to Care Committee Meeting Minutes**  
M/S/C (McKenzie/Burton) to approve the August 25, 2014 Access to Care Committee meeting minutes. The motion passed unanimously.
3. **Define the 2014 Mission of the Access to Care Committee**  
M/S/C (McKenzie/King) to accept the mission statement as written: "The Committee will maintain awareness of the changes and challenges within the dental community and serve as a resource to the Dental workforce by identifying areas where the Board can assist with workforce development, including the dental loan repayment program, and publicizing such programs to help underserved populations, exploring methods for promoting diversity within the dental community through surveys and workforce data to inform the Board as to existing workforce capacity." There was no public comment. The motion passed unanimously.
4. **Public Comment of Items Not on the Agenda**  
There was no public comment.
5. **Future Agenda Items**  
There were no future agenda item requests.
6. **Committee Member Comments for Items Not on the Agenda**  
There were no additional comments.
7. **Adjournment**  
The committee adjourned at 5:32 p.m.



## MEMORANDUM

<b>DATE</b>	February 9, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Linda Byers, Executive Assistant
<b>SUBJECT</b>	<b>ATC 3:</b> Update on Workforce Statistics by Conrado Barzaga, MD, Executive Director of the Center for Oral Health

Dr. Conrado Barzaga, MD, Executive Director of the Center for Oral Health will provide an update on Workforce Statistics.



## MEMORANDUM

<b>DATE</b>	February 12, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Rosa Mata, Licensing Analyst Dental Board of California
<b>SUBJECT</b>	<b>ATC 4:</b> Discussion and Possible Action Regarding the Dental Board's Loan Repayment Program

On January 1, 2002, the California Dental Corps Loan Repayment Program (CDCLRP) was established by legislation. Business and Professions Code (BPC) Section 1970 established the CDCLRP of 2002. BPC Section 1970.5 defined the intent to establish the program. The intent of this article was for the Dental Board of California, in consultation with the Office of Statewide Health Planning and Development, the dental community, including ethnic representatives, dental schools, health advocates representing ethnic communities, primary care clinics, public hospitals and health systems, statewide agencies administering state and federally funded programs targeting underserved communities, and members of the public with health care issue-area expertise to develop and implement the California Dental Corps Loan Repayment Program of 2002. The program assists dentists who practice in the dentally underserved area with repayment of their dental school loans. This program became operative January 1, 2003. A total of three million dollars (\$3,000,000) was authorized to expend from the State Dentistry Fund for this program.

To date the Board has awarded funds to 19 participants. The practice locations are throughout the state. The facilities are located in Bakersfield, Chico, Compton, Corcoran, Los Angeles, Petaluma, Redding, San Diego, San Francisco, San Ysidro, Smith River, Vallejo, Ventura, Vista, Wasco and West Covina.

The first cycle of applications were received in January 2004. A total of 24 applications were received and 9 applicants were approved. A total of \$739,381.00 was paid over a 3 year period.

The second cycle of applicants were received in July 2006. A total of 21 applications were received and 6 applicants were approved. A total of \$643,928.00 was paid over a 3 year period.

In September 2010 the Board opened a third cycle of applications. The Board received 1 application and approved the applicant.

In October 2012 the Board opened a fourth cycle of applications. The Board received 3 applications and approved all applicants.

Senate Bill 540 (Price) (Chapter 385, Statutes of 2011) extended the California Dental Corps Loan Repayment Program until all monies in the account are expended. There are currently three participants in the program.

The Dental Board of California promotes this program on its website and includes this information in its presentation to senior students in California dental schools. In addition, the Board has worked with stakeholders and professional associations to distribute this information through their publications.

Staff is continuing to research other loan repayment programs offered by the California Dental Association, the Medical Board of California, and the Office of Statewide Health Planning and Development. Additional information may be provided at the meeting.



**LICENSING,  
CERTIFICATION  
AND PERMITS  
COMMITTEE**



**NOTICE OF LICENSING, CERTIFICATION AND PERMITS COMMITTEE MEETING**

**Thursday, February 26, 2015**

*Upon Conclusion of the Access to Care Committee Meeting*

Doubletree by Hilton

1646 Front Street, San Diego, CA 92101

619-239-6800 (Hotel) or 916-263-2300 (Board Office)

**MEMBERS OF THE LICENSING, CERTIFICATION, AND PERMITS COMMITTEE**

Bruce Whitcher, DDS, Chair

Yvette Chappell-Ingram, Public Member, Vice Chair

Steve Afriat, Public Member

Judith Forsythe, RDA

Luis Dominicus, DDS

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While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

1. Call To Order/Roll Call/Establishment Of Quorum
2. Approval of the August 25, 2014 Licensing, Certification and Permits Committee Meeting Minutes
3. Review of Dental Licensure and Permit Statistics
4. Review of General Anesthesia/Conscious Sedation Permit Evaluation Statistics
5. Update on General Anesthesia/Conscious Sedation Calibration Course
6. Update on the Continuing Education Audits

7. **Public Comment of Items Not on the Agenda**  
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8. **Future Agenda Items**  
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10. **Adjournment**



## **LICENSING, CERTIFICATION AND PERMITS COMMITTEE MEETING MINUTES**

**Monday, August 25, 2014**  
Courtyard by Marriott Cal Expo  
1782 Tribute Road  
Sacramento, CA 95815

**DRAFT**

### **MEMBERS PRESENT**

Chair – Bruce Witcher, DDS  
Steve Afriat, Public Member  
Judith Forsythe, RDA  
Ross Lai, DDS

### **MEMBERS ABSENT**

Vice Chair – Yvette Chappell-Ingram

- 1. Call To Order/Roll Call/Establishment Of Quorum**  
Dr. Witcher, Chair, called the Licensing, Certification and Permits Committee meeting to order at 8:30 a.m. Roll was called and a quorum established.
- 2. Approval of the February 27, 2014 Licensing, Certification and Permits Committee Meeting Minutes**  
Motioned/Seconded/Carried (M/S/C) to approve the February 27, 2014 Licensing, Certification and Permits Committee meeting minutes. The motion passed unanimously.
- 3. Review of Dental Licensure and Permit Statistics**  
Dr. Witcher gave an overview of the statistics provided.
- 4. Review of General Anesthesia/Conscious Sedation Permit Evaluation Statistics**  
Dr. Witcher thanked Jessica Olney for the increase in evaluations due to the added evaluators. He gave an overview of the statistics provided.
- 5. Update on General Anesthesia/Conscious Sedation Calibration Webinar**  
Dr. Witcher reported that there was a pilot webinar on June 25, 2014 which included audience polling. He commented that there was a limited test audience. Dr. Witcher stated that the webinar would function better with a co-presenter to field questions. Karen Fischer, Executive Officer, thanked Dr. Witcher for his hard work in putting together the webinar concept. Dr. Witcher mentioned that continuing education credits would be granted for participation in the webinar.
- 6. Update on the Dental Board of California Fee Increase**  
Sarah Wallace, Assistant Executive Officer, gave an overview of the information provided. She stated that the bill was signed by the Governor on June 28, 2014 and would go into effect January 1, 2015.

7. **Discussion and Possible Action to Initiate a Rulemaking to Implement, Interpret and Make Specific, Business and Professions Code § 1635.5 Relating to Licensure by Credential Application Requirements**  
M/S/C (Afriat/Forsythe) to hold this item for a future meeting. The motion passed unanimously.
8. **Discussion and Possible Action Regarding the Petition to Amend California Code of Regulations, Title 16, § 1028.3 Relating to Licensure by Residency Requirements**  
Dr. Whitcher reviewed the information provided. M/S/C (Afriat/Forsythe) to refer this item to staff for further study. The motion passed unanimously.
9. **Public Comment of Items Not on the Agenda**  
There were no public comments.
10. **Future Agenda Items**  
There were no future agenda item requests.
11. **Committee Member Comments for Items Not on the Agenda**  
There were no committee member comments.
12. **Adjournment**  
Dr. Whitcher, Chair, adjourned the committee meeting at 8:48 a.m.



## MEMORANDUM

<b>DATE</b>	February 5, 2015
<b>TO</b>	Licensing Certification and Permits Committee Dental Board Members
<b>FROM</b>	Jana Adams, Associate Governmental Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>LCP 3: Review of Dental Licensure and Permit Statistics</b>

**Following are statistics of current license/permits by type as of February 5, 2015**

<b>Dental License (DDS)</b>	
<b>Active</b>	36,429
<b>Inactive</b>	3,797
<b>Retired</b>	1,722
<b>Disabled Non practice</b>	134
<b>Renewal in Process</b>	322
<b>Fingerprinting Hold</b>	99
<b>Delinquent</b>	3,915
<b>Total Cancelled Since Licensing was required</b>	13,095

<b>Dental Licenses Issued via Pathway</b>	<b>Total Issued in 2014</b>	<b>Total Issued in 2013</b>	<b>Total Issued in 2012</b>	<b>Total Issued to Date</b>	<b>Date Pathway Implemented</b>
California Exam	0	0	0	53,977	Prior to 1929
WREB Exam	752	767	697	6,341	January 1, 2006
Licensure by Residency	190	171	163	1,246	January 1, 2007
Licensure by Credential	144	141	148	2,704	July 1, 2002
LBC Clinic Contract	1	3	1	26	July 1, 2002
LBC Faculty Contract	0	0	0	3	July 1, 2002

<b>License/Permit /Certification/Registration Type</b>	<b>Current Active Permits</b>	<b>Delinquent</b>	<b>Total Cancelled Since Permit was Required</b>
Additional Office Permit	2,286	404	5,692
Conscious Sedation Permit	503	29	369
Continuing Education Registered Provider Permit	1,207	813	1,185
Elective Facial Cosmetic Surgery Permit	27	0	0
Extramural Facility Registration*	154	0	0
Fictitious Name Permit	6,184	1,273	4,103
General Anesthesia Permit	838	36	804
Mobile Dental Clinic Permit	34	14	35
Medical General Anesthesia Permit	80	24	149
Oral Conscious Sedation Certification (Adult Only 1,148; Adult & Minors 1,395)	2,410	650	162
Oral & Maxillofacial Surgery Permit	80	9	13
Referral Service Registration*	153	0	0
Special Permits	42	15	155

\*Current population for Extramural Facilities and Referral Services are approximated because they are not automated programs.

## Active Licensees by County as of February 5, 2015

County	DDS	County	DDS
Alameda	1,476	Placer	445
Alpine	0	Plumas	17
Amador	27	Riverside	1,094
Butte	164	Sacramento	1,110
Calaveras	21	San Benito	26
Colusa	5	San Bernardino	1,334
Contra Costa	1,076	San Diego	2,738
Del Norte	17	San Francisco	1,238
El Dorado	156	San Joaquin	365
Fresno	570	San Luis Obispo	245
Glenn	7	San Mateo	885
Humboldt	90	Santa Barbara	334
Imperial	42	Santa Clara	2,244
Inyo	13	Santa Cruz	194
Kern	346	Shasta	128
Kings	64	Sierra	3
Lake	26	Siskiyou	23
Lassen	24	Solano	303
Los Angeles	8,478	Sonoma	413
Madera	53	Stanislaus	286
Marin	346	Sutter	65
Mariposa	5	Tehama	26
Mendocino	62	Trinity	4
Merced	91	Tulare	210
Modoc	5	Tuolumne	52
Mono	3	Ventura	715
Monterey	300	Yolo	111
Napa	108	Yuba	10
Nevada	94	Out of State	4,162
Orange	3,825	Out of Country	242
		<b>TOTAL</b>	<b>36,416</b>





# MEMORANDUM

<b>DATE</b>	February 26, 2015
<b>TO</b>	Licensing, Certifications and Permits Committee Members
<b>FROM</b>	Jessica Olney, Associate Governmental Program Analyst Dental Board of California
<b>SUBJECT</b>	<b>LCP 4: General Anesthesia/Conscious Sedation/Medical General Anesthesia Evaluation Statistics</b>

## 2014-2015 Statistical Overview of the On-Site Inspections and Evaluations Administered by the Board

### General Anesthesia Evaluations

	Pass Eval	Fail Eval	Permit Cancelled / Non Compliance	Postpone no evaluators	Postpone by request	Permit Canc by Request
<b>January</b>	13	0	1	1	2	1
<b>February</b>	14	0	1	2	4	1
<b>March</b>	14	1	0	3	1	0
<b>April</b>	11	0	0	2	3	4
<b>May</b>	14	0	2	3	1	0
<b>June</b>	11	1	0	0	1	1
<b>July</b>	7	1	1	1	4	1
<b>August</b>	7	0	2	3	2	1
<b>September</b>	15	0	1	0	2	1
<b>October</b>	13	0	2	0	1	1
<b>November</b>	10	0	0	2	3	1
<b>December</b>	5	0	4	0	2	3
<b>January*</b>	15	0	0	1	2	0
<b>February*</b>	18	0	0	1	5	0
<b>Total</b>	<b>167</b>	<b>3</b>	<b>14</b>	<b>19</b>	<b>33</b>	<b>15</b>

\*Approximate schedule for January and February

## Conscious Sedation Evaluations

	Pass Eval	Fail Eval	Permit Cancelled / Non Compliance	Postpone no evaluators	Postpone by request	Permit Canc by Request
January	4	1	2	0	1	2
February	5	0	0	1	1	0
March	5	2	0	1	2	1
April	5	0	0	2	1	5
May	2	0	0	3	1	0
June	5	0	1	1	1	1
July	5	1	0	0	1	1
August	3	1	2	0	1	3
September	4	1	0	1	2	2
October	7	0	0	0	0	0
November	1	0	5	3	2	1
December	3	1	1	1	1	4
January*	4	0	0	1	0	1
February*	9	0	0	0	0	0
<b>Total</b>	<b>62</b>	<b>7</b>	<b>1</b>	<b>14</b>	<b>14</b>	<b>21</b>

\*Approximate schedule for January and February

**There is a great need for conscious sedation evaluators throughout California. Several evaluations have been postponed recently due to a lack of available evaluators. The Board is actively recruiting for the evaluation program.**

## Medical General Anesthesia Evaluations

	Pass Eval	Fail Eval	Permit Cancelled / Non Compliance	Postpone no evaluators	Postpone by request	Permit Canc by Request
January	0	0	1	1	1	0
February	0	0	0	0	0	1
March	0	0	0	1	0	0
April	0	0	1	0	0	2
May	0	0	1	1	0	1
June	0	0	2	1	0	2
July	0	0	2	0	0	1
August	0	0	1	1	0	1
September	0	0	1	1	0	1
October	0	0	2	0	0	0
November	1	0	1	0	0	1
December	0	0	1	1	0	0
January*	1	0	0	0	0	0
February*	1	0	0	0	0	0
<b>Total</b>	<b>3</b>		<b>13</b>	<b>7</b>	<b>1</b>	<b>10</b>

\*Approximate schedule for January and February

### Evaluators Approved after December 1, 2014

<b>Region</b>	<b>GA</b>	<b>CS</b>	<b>MGA</b>
Northern California	0	0	0
Southern California	1	1	0

### Pending Evaluator Applications\*

<b>Region</b>	<b>GA</b>	<b>CS</b>	<b>MGA</b>
Northern California	0	1	0
Southern California	3	0	0

\*Application deficient, or does not meet 3 year requirement.

### Current Evaluators per Region

<b>Region</b>	<b>GA</b>	<b>CS</b>	<b>MGA</b>
Northern California	147	66	15
Southern California	187	92	14

Action Requested:  
No action requested



## MEMORANDUM

<b>DATE</b>	February 26, 2015
<b>TO</b>	Licensing, Certifications and Permits Committee Members
<b>FROM</b>	Jessica Olney, Associate Governmental Program Analyst
<b>SUBJECT</b>	<b>Agenda Item LCP 5:</b> Update on General Anesthesia/Conscious Sedation Calibration Course

In 2014 the Board offered a test webinar using Microsoft Live to a small group of current evaluators. Due to technical issues the webinar was put on hold until they can be resolved.

As an alternative, the Board is currently in the development process of a home study course which will allow Board Staff to provide an inexpensive ongoing calibration course training to General Anesthesia, Conscious Sedation Evaluators.

The Board has recently lost several evaluators. This is due to several factors, most often the retirement of permit holders. As new permit holders become eligible and meet the requirements set forth in Section 1043.2 of the California Code of Regulations, the Board would benefit from a home study course that may be completed at any time.



## MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Licensing, Certification, and Permits Committee Members
<b>FROM</b>	Rosa Mata, Staff Service Analyst
<b>SUBJECT</b>	<b>LCP 6 – Update on Continuing Education Audits</b>

### Background

The Dental Board of California (Board) conducts random continuing education audits of its dental licensees.

Licensees are required to maintain documentation of successful completion of their courses, for no fewer than three (3) renewal periods and if audited, they are required to provide that documentation to the Board upon request. As part of the renewal process, licensees are also required to certify under penalty of perjury that they have completed the requisite number of continuing education hours, including any mandatory courses, since their last renewal.

The Board has been auditing about 5% of the dental license renewals received each month (approximately 60 licensees). A dentist who is not able to provide proof of the CE hours may be issued a citation with a fine. The citation also includes an abatement condition requiring the licensee to complete the deficient number of credits within a specified time period. These units are in addition to the credits required for the new renewal cycle. A licensee who fails to pay the fine or comply with the citation's abatement may be referred for discipline and his/her license will not be renewed.

Effective January 1, 2015, Board staff began conducting random continuing education audits of its dental licensees three months prior to their renewal expiration date. To avoid a hold placed on the license renewal, licensees must submit the required certificates as stated in 1017(l)(n).

Conducting a CE Audit prior to renewal allows the Board to place a hold on a license and assure that the licensee has complied with California Code of Regulations (CCR) Section 1017.

Since the inception of the program, the staff discovered some problems listed below:

- Licensees are destroying their certificates or failing to keep records for three (3) renewal periods.
- Licensees are taking classes that are not dentally related and trying to count them toward the required units.

While conducting the CE Audits it has allowed the Board to review how Registered Providers are keeping their records and the compliance with the certificates. The following have been identified as problems with the providers:

- Continuing Education Providers are not in compliance with their certificates. They are not following CCR Section 1016(h). Items such as the course number, licensees name and license/ permit number, the number of units earned and the 11 digit course registration number are often missing.
- Providers are not submitting the Biennial Reports as required.
- Mandatory courses, Infection Control and Dental Practice Act are not current with the new Laws and Regulations.
- Per CCR 1017(g), eight units shall be the maximum continuing education credits granted in one day. Providers who provide Home study courses are using the date they received the materials from the licensee on certificate. This causes confusion as the licensees have submitted CE certificates showing that they are doing more than 8 hours per day.

Action Requested:

Staff recommends conducting random audits on the Continuing Education Registered Providers as defined in CCR 1016 (e)(3). This will allow the CE Audit for Licensees to be more efficient and less time consuming.

# **ENFORCEMENT COMMITTEE**





## **ENFORCEMENT COMMITTEE MEETING MINUTES**

**Monday, August 25, 2014**

Courtyard by Marriott Cal Expo

1782 Tribute Road

Sacramento, CA 95815

**DRAFT**

### **MEMBERS PRESENT**

Chair – Steven Afriat, Public Member

Vice Chair – Ross Lai, DDS

Katie Dawson, RDH

Luis Dominicis, DDS

Thomas Stewart, DDS

### **MEMBERS ABSENT**

1. **Call to Order/Roll Call/Establishment of Quorum**  
Steve Afriat, Chair, called the Enforcement Committee meeting to order at 1:11 p.m. Roll was called and a quorum established.
2. **Approval of the February 27, 2014 Enforcement Committee Meeting Minutes**  
M/S/C (Lai/Dominicis) to approve the February 27, 2014 Enforcement Committee meeting minutes.
3. **Presentation by Mike Small from the Department of Justice Regarding the Controlled Substance Utilization Review and Evaluation System (CURES)**  
Mike Small from the Department of Justice provided a PowerPoint presentation outlining the history of the CURES system and the upcoming enhancements and developments.
4. **Staff Update Regarding Enforcement Program Status**  
Kim Trefry, Enforcement Chief, gave an overview of the information provided.
5. **Enforcement – Statistics and Trends**  
Ms. Trefry gave an overview of the statistics provided.
6. **Review of Fourth Quarter Performance Measures from the Department of Consumer Affairs**  
Ms. Trefry gave an overview of the fourth quarter performance measures. Dr. Dominicis asked who sets the target dates and can they be adjusted. Ms. Trefry responded that the Department of Consumer Affairs sets the target dates and the Executive Officer could bring up the Dental Board's concerns at the next Executive Officer meeting.
7. **Diversion Program Report and Statistics**  
Ms. Trefry gave an overview of the information provided.

8. **Discussion and Possible Action Regarding Recommendations for the Appointment of Diversion Evaluation Committee Members**  
M/S/C (Stewart/Dominicis) to recommend that the Board appoint Michael P. Shaw DDS to fill the dental vacancy and Lawrence D. Podolsky, MD to fill the physician/psychologist vacancy on the Northern Diversion Evaluation Committee. The motion passed unanimously.
9. **Public Comment of Items Not on the Agenda**  
There was no public comment.
10. **Future Agenda Items**  
There were no future agenda item requests.
11. **Committee Member Comments for Items Not on the Agenda**  
There were no committee member comments.
12. **Adjournment**  
Mr. Afriat, Chair, adjourned the committee meeting at 2:22 p.m.



## MEMORANDUM

<b>DATE</b>	February 6, 2015
<b>TO</b>	Enforcement Committee Members
<b>FROM</b>	Theresa Lane, Enforcement Chief
<b>SUBJECT</b>	<b>ENF 3: Enforcement Program Status</b>

I took over as Chief in September of 2014 and worked closely with Kim Trefry, the former Enforcement Chief, for several weeks so the transition was smooth. I have been with the Board for over 23 years and I am looking forward to taking on the challenges of the Enforcement Unit. I plan to complete projects that were in process such as major updates to all manuals and find ways to increase the use of our citation program.

In addition, I plan to make updates to our Inspection program, conduct expert calibration training and hold in house dental training for our Investigative staff. With the new staff coming on it will be a wonderful opportunity to provide the training they will need to be successful and for the Board to have highly trained staff.

### **Staffing**

In November of 2014, Carlos Alvarez was promoted to Supervising Investigator in the Sacramento Office; taking over the position formerly held by Nancy Butler who retired.

In January of this year, Patrick Morrissey was promoted to Supervising Investigator in the Orange Office to replace the position I vacated.

The Sacramento and Orange offices currently each have three Investigator vacancies. Interviews have been conducted and candidates are in the background phase of the hiring process. Typically the process can take from six to nine months.

In the Investigative Analyst Unit (IAU), one of the founding Special Investigators, Dawn Kammerer, left the Board for employment with another agency. Bernal Vaba, who was with the unit as an Analyst, received a promotion to the fill the position. There is currently an opening for an Analyst and we anticipate holding interviews in the next few weeks.

All other units are fully staffed.

## **Outreach Efforts**

On October 23, 2014, I made a presentation at the California Dental Association (CDA) Ethics Seminar which was held in Sacramento. Executive Officer Karen Fischer was also in attendance and assisted in answering questions. The audience for this presentation consisted of approximately 32 component dental society executive directors and the respective ethics committee chairs. The meeting is a biennial all-day seminar focused on dental ethics/laws to provide information on how the components can best handle ethics complaints and ethics case management at the local level. There were about 60 people in attendance.

On December 16, 2014, Hygiene Committee of California (DHCC) Executive Office, Lori Hubble and I made a presentation to the dental hygiene students at San Joaquin College. The presentation was to the graduating students advising them of the enforcement process and procedures surrounding the dental profession.

On January 23, 2014, Deputy Attorney General Nicholas Tsukamaki and I spoke before the graduating class of the UC San Francisco, School of Dentistry. The two hour presentation provided an overview of the Board, the Board's enforcement program including Complaint Intake, Investigative Analysis, Inspection and Investigation units. In addition, we covered the Top 10 violations we see occurring in the complaints we receive, investigate and prosecute. About 80 graduating students attended.

I have future presentations planned for March 4-5, 2015 for the California Dental Society of Anesthesiology's annual conference. In addition, I was asked to speak at the California Dental Association at their annual conference in Anaheim on Thursday, April 30, 2015.

I will be available during the Board meeting to answer any questions or concerns you may have.



## MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Enforcement Committee Members
<b>FROM</b>	Theresa Lane, Enforcement Chief
<b>SUBJECT</b>	<b>ENF 4: Enforcement Statistics and Trends (Complaints and Investigations)</b>

Attached please find Complaint Intake and Investigation statistics for the previous five fiscal years, and quarter one and two of the current fiscal year 14/15. Below is a summary of some of the program's trends (as of December 31, 2014):

### Complaint & Compliance Unit

#### Complaints Received

The total number of complaints received during the first quarter (July - September) was **1120**, averaging **373** per month.

The total number of complaints received during the second quarter (October-December) was **990**, averaging **330** per month.

**Active Caseload:** **1046** First Quarter  
**1133** Second Quarter

The average caseload per Consumer Services Analyst (CSA) during the first quarter was **199** complaint cases.

The average caseload per Consumer Services Analyst (CSA) during the second quarter was **216** complaint cases.

## Complaint Aging

Quarter One FY 14/15

July - September

# Months Open	# of Cases	% of Total Cases
0 – 3 Months	697	66%
4 – 6 Months	200	19%
7 – 9 Months	125	12%
10 – 12 Months	8	1%
1 – 3 Years	16	2%

Quarter Two FY 14/15

October –December

# Months Open	# of Cases	% of Total Cases
0 – 3 Months	698	62%
4 – 6 Months	260	23%
7 – 9 Months	89	8%
10 – 12 Months	69	6 %
1 – 3 Years	17	1%

### Cases Closed:

The total number of complaint files closed between July 1, 2014 and September 30, 2014, was **822**, averaging **274** per month.

The total number of complaint files closed between October 1, 2014 and December 31, 2014, was **561**, averaging **187** per month.

The average number of days a complaint took to close within the last year was **102** days (a 12% decrease from last year's average of 117 days).

Chart 2 displays the average complaint closure age over the previous five fiscal years.

## Investigations

### Current Open Caseload:

There are currently approximately **881** open investigative cases, **255** probation cases, and **80** open inspection cases.

Average caseload per full time Investigator = 45 (40 in North, 46 in South)

Average caseload per Special Investigator = 42

Average caseload per Analyst = 36

# Months Open	# of Cases	% of Total Cases
0 – 3 Months	152	19%
4 – 6 Months	155	19%
6 - 12 Months	221	27%
1 – 2 Years	203	25%
2 – 3 Years	63	8%
3+ Years	20	2%

Since our last report in July 2014, the number of cases over one year old has increased from 33% to 35%. The number of cases in the oldest category (three years and older) has increased from 10 to 20. The cases in the older category are investigations involving allegations of unlicensed dentistry. These types of investigations do not have a statute of limitations. The enforcement unit plans on working these cases in the next few months with another unlicensed task force. Case audits are currently being conducted and are focused on identifying the cases that are in the older category.

### **Case Closures:**

#### **First Quarter**

The total number of investigation cases closed, filed with the Attorney General's Office or filed with the District/City Attorney during the first quarter is **298**, an average of approximately **100** per month.

Of the closures, approximately 12% were referred for criminal action or administrative discipline.

The average number of days an investigation took to complete during the first quarter was **407** days.

#### **Second Quarter**

The total number of investigation cases closed, filed with the Attorney General's Office or filed with the District/City Attorney during the second quarter is **275**, an average of approximately **92** per month. The previous five-year average was 75 per month.

Of the closures, approximately 11% were referred for criminal action or administrative discipline.

The average number of days an investigation took to complete within the last three months was **209** days. The previous five-year average number of days to close a case was 428 days (refer to [Chart 2](#)).

[Chart 2](#) displays the average closure age over the previous five fiscal years.

### **Cases Referred for Discipline:**

The total number of cases referred to the AGO's during the first quarter was **29** (approximately nine referrals per month). The three-month average for a disciplinary case to be completed was **1052** days.

The total number of cases referred to the AGO's during the second quarter was **27** (approximately nine referrals per month). The three-month average for a disciplinary case to be completed was **906** days.

Chart 2 displays the average closure age over the previous four fiscal years for cases referred for discipline.

### **Chart 3 – Case Categories**

Chart 3 provides a breakdown of the number of cases based on allegation.

I will be available during the Board meeting to answer any questions or concerns you may have.

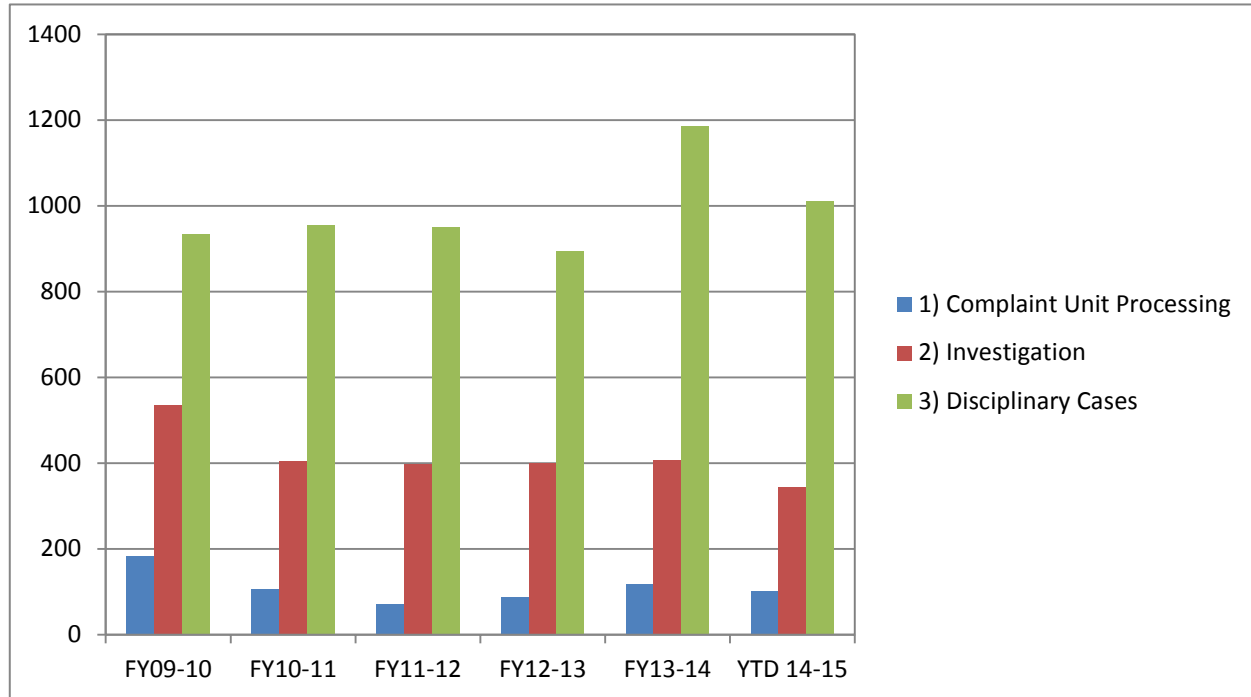


**Dental Board of California  
Chart 1**

STATISTICAL DESCRIPTION	FY 09-10	FY 10-11	FY 11-12	FY 12-13	FY 13-14	FY 2014-15				
						Jul-Sep	Oct - Dec	Jan - Mar	Apr - Jun	Total
<b>COMPLAINT UNIT</b>										
Complaints Received	3013	3046	2813	2874	3021	964				964
Convictions/Arrests Received	177	674	750	1083	650	156				156
Total Intake Received	3190	3720	3563	3957	3671	1120				1120
Total Complaints Closed	3249	2863	2404	2911	2855	822				822
Pending at end of period	1072	472	738	1072	1022	947				
<b>INVESTIGATIONS</b>										
Cases Opened	769	1241	916	719	659	294				659
Cases Closed	651	997	1094	813	955	298				298
Referred to AG	138	144	174	85	71	29				71
Referred for Criminal	11	8	12	19	28	7				7
Pending at end of period	779	995	1025	767	809	811				
Citations Issued	48	42	15	27	83	12				12
<b>ATTORNEY GENERAL'S OFFICE</b>										
Cases Pending at AG	191	199	229	183	172	171				
<b>Administrative Actions:</b>										
Accusation	97	90	99	52	71	15				15
Statement of Issues	27	23	41	9	18	2				2
Petition to Revoke Probation	5	5	9	4	8	0				0
<b>Licensee Disciplinary Actions:</b>										
Revocation	39	24	30	27	33	5				5
Probation	66	65	68	51	54	15				15
Suspension/Probation	0	0	2	0	0	0				0
License Surrendered	9	10	6	10	15	4				4
Public Reprimand	8	9	13	11	12	1				1
Other Action (e.g. exam required, education course, etc.)	10	11	8	7	3	5				5
Accusation Withdrawn	8	9	8	10	1	1				1
Accusation Declined	6	6	1	2	0	1				1
Accusation Dismissed	5	0	0	2	1	0				0
Total, Licensee Discipline	151	134	136	120	119	32				32
<b>Other Legal Actions:</b>										
Interim Suspension Order Issued	1	1	6	5	0	0				0
PC 23 Order Issued	0	0	1	2	2	1				1

**Dental Board of California  
Chart 2**

Average Days to Close	FY09-10	FY10-11	FY11-12	FY12-13	FY13-14	YTD 14-15
<b>1) Complaint Unit Processing</b>	183	106	72	88	117	102
<b>2) Investigation</b>	534	404	397	400	407	345
<b>3) Disciplinary Cases</b>	933	954	950	893	1185	1010



**Dental Board of California  
Chart 3**

Allegations						2014-15					
	2009-10	2010-11	2011-12	2012-13	2013-2014	Jul-Sep	Oct - Dec	Jan - Mar	Apr - Jun	Total	% of Total
Substance Abuse, Mental/Physical Impairment	10	12	4	7	17	8	1			9	0%
Drug Related Offenses	29	29	38	33	30	15	7			22	1%
Unsafe/Unsanitary Conditions	76	70	79	92	99	18	24			42	2%
Fraud	188	299	123	124	218	100	106			206	10%
Non-Jurisdictional	438	393	251	217	235	81	50			131	6%
Incompetence / Negligence	2123	2076	1540	1459	1795	529	505			1034	49%
Other	336	181	266	295	163	99	80			179	8%
Unprofessional Conduct	385	352	205	219	244	62	51			113	5%
Sexual Misconduct	21	15	13	14	16	2	0			2	0%
Discipline by Another State	15	31	25	16	10	4	2			6	0%
Unlicensed / Unregistered	119	127	111	124	201	46	40			86	4%
Criminal Charges	206	456	854	1137	650	156	124			280	13%
<b>Total</b>	<b>3946</b>	<b>4041</b>	<b>3509</b>	<b>3737</b>	<b>3678</b>	<b>1120</b>	<b>990</b>	<b>0</b>	<b>0</b>	<b>2110</b>	<b>100%</b>

Agency Statistical Profile (AR)(091)



## MEMORANDUM

<b>DATE</b>	February 5, 2015
<b>TO</b>	Dental Board Members
<b>FROM</b>	Theresa Lane, Enforcement Chief
<b>SUBJECT</b>	<b>ENF 5 – First and Second Quarter Performance Measures from the Department of Consumer Affairs</b>

Performance measures are linked directly to an agency's mission, vision and strategic objectives/initiatives. In some cases, each Board, Bureau, and program was allowed to set their individual performance targets, or specific levels of performance against which actual achievement would be compared. In other cases, some standards were established by DCA. As an example, a target of an average of 540 days for the cycle time of formal discipline cases was set by the previous Director. Data is collected quarterly and reported on the Department's website at: [http://www.dca.ca.gov/about\\_dca/cpei/index.shtml](http://www.dca.ca.gov/about_dca/cpei/index.shtml)

### Volume:

Number of complaints and convictions received per quarter

#### Q1 (July-September 2014)

**PM1 - Volume: 1,101** Total (946 Consumer complaints, 155 Conviction reports)

#### Q2 (October-December 2014)

**PM1 - Volume: 990** Total (866 Consumer complaints, 124 Conviction reports)

### Cycle Time:

- **PM2 Intake - Target: 10 Days**

**Q1 Average: 8 Days**

**Q2 Average: 7 Days**

Average cycle time from complaint receipt, to the date the complaint was acknowledged and assigned to an analyst in the Complaint Unit for processing (This 10 day time frame is mandated by Business and Professions Code section 129 (b));

- **PM3 Intake & Investigation - Target: 270 Days**

**Q1 Average: 176 Days**

**Q2 Average: 157 Days**

Average time from complaint receipt to closure of the investigation process (does not include cases sent to the Attorney General (AG) or other forms of formal discipline);

- **PM4 Formal Discipline - Target: 540 Days**

**Q1 Average: 1,067 Days**

**Q2 Average: 906 Days**

Average number of days to complete the entire enforcement process for cases resulting in formal discipline (Includes intake and investigation by the Board, and prosecution by the AG);

A number of factors (both internally and externally) can contribute to case aging at the Attorney General's office. Board actions which may extend case aging include when additional investigations are combined with a pending accusation and can set back the overall time to resolve. Amending an accusation or requesting additional expert opinions can also cause delays in case adjudication. Other matters are outside the control of the Board and include: availability of hearing dates, continuance of hearing dates, changes to opposing party counsel, and requests for a change of venue.

- **PM 7 Probation Intake – Target: 10 Days**

**Q1 Average: 17 Days**

**Q2 Average: 2 Days**

Average number of days from monitor assignment, to the date the monitor makes first contact with the probationer; and

Probation Intake measures the time between when the probation monitor is assigned the case file and the date they meet with their assigned probationer to review monitoring terms and conditions. The Board's probation monitors are assigned a case file within a few days of the probationary order being signed. Monitors attempt to schedule their initial meeting on or soon after the effective date of the decision; thereby resulting in a 10 – 20 day intake average. It should also be noted that in some cases, probation monitoring may not take place until an applicant has completed all their licensing requirements, or returned to California (if the applicant is out-of-state). These exceptions may skew this average.

- **PM 8 Probation Violation Response – Target: 10 Days**

**Q1 Average: 82 days**

**Q2 Average: None**

Average number of days from the date a violation of probation is reported, to the date the assigned monitor initiates appropriate action.

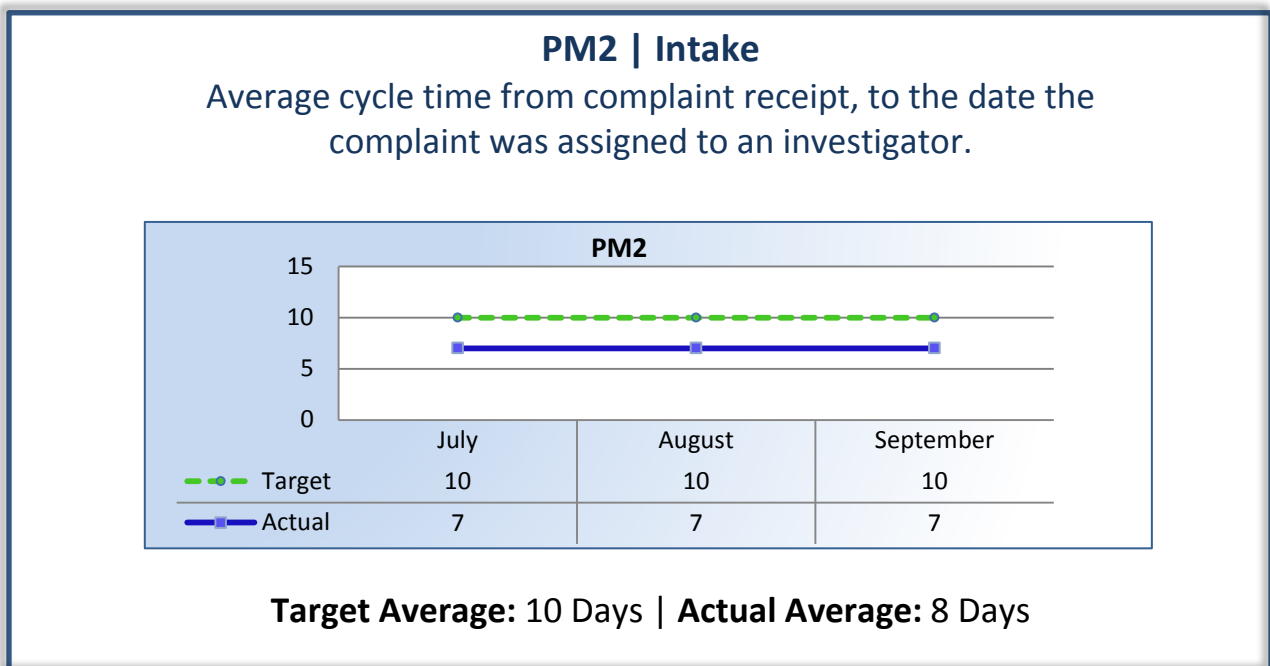
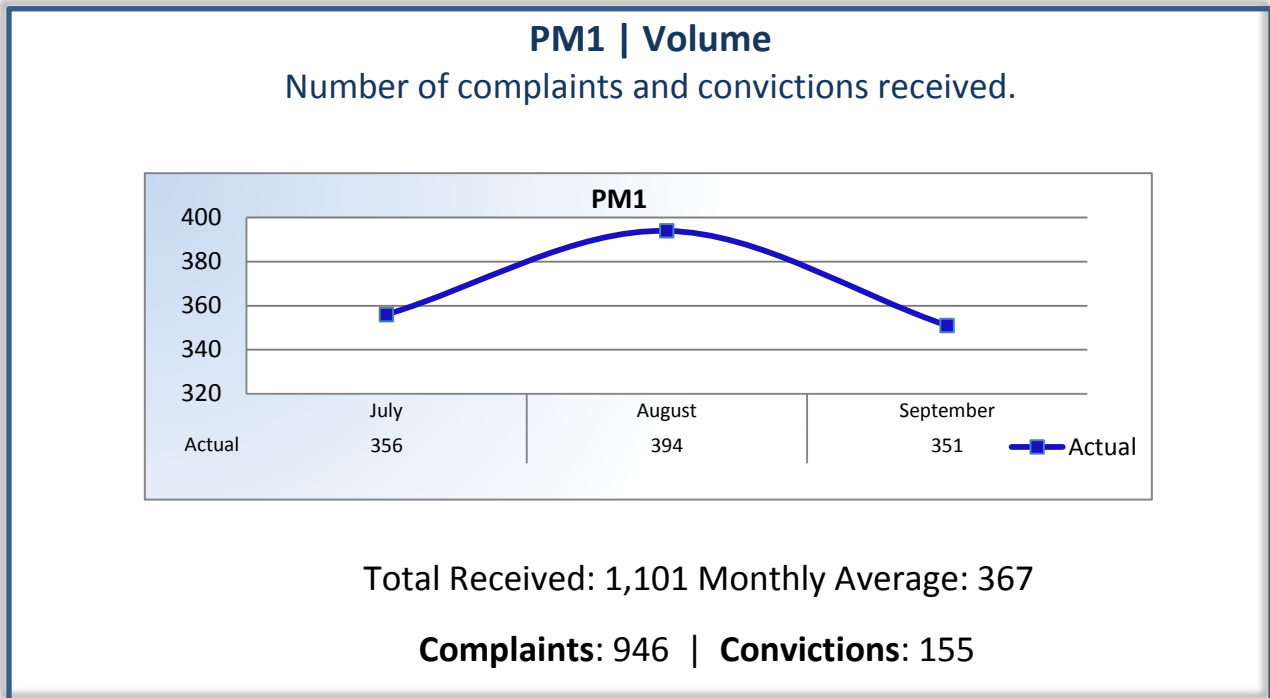
In general, once a violation is discovered, the decision to take action is made immediately. However, the monitor must collect any supporting evidence (arrest/conviction records, positive drug test results) and write a report documenting the event. Once the report is referred for discipline, "appropriate action" has been initiated and the clock stops. Factors which may affect the turnaround time on this measure include how the violation is reported; (incoming complaints or arrest/conviction reports from the Department of Justice may take several days to be processed) and how quickly the monitor can write up and file the violation.

# Dental Board of California

## Performance Measures

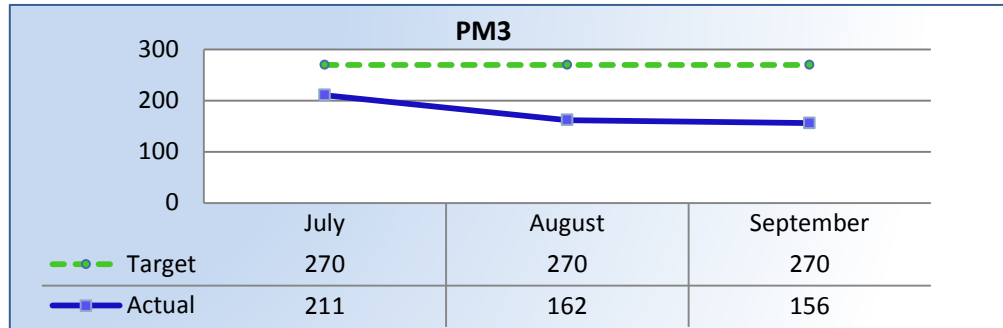
### Q1 Report (July - September 2014)

To ensure stakeholders can review the Board's progress toward meeting its enforcement goals and targets, we have developed a transparent system of performance measurement. These measures will be posted publicly on a quarterly basis.



### PM3 | Intake & Investigation

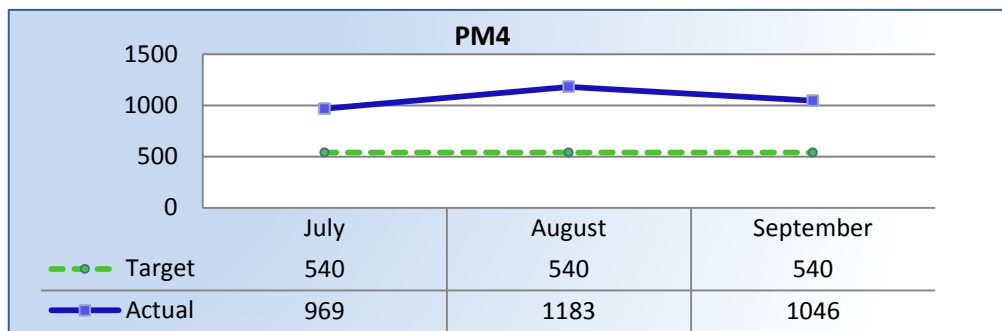
Average cycle time from complaint receipt to closure of the investigation process. Does not include cases sent to the Attorney General or other forms of formal discipline.



**Target Average: 270 Days | Actual Average: 176 Days**

### PM4 | Formal Discipline

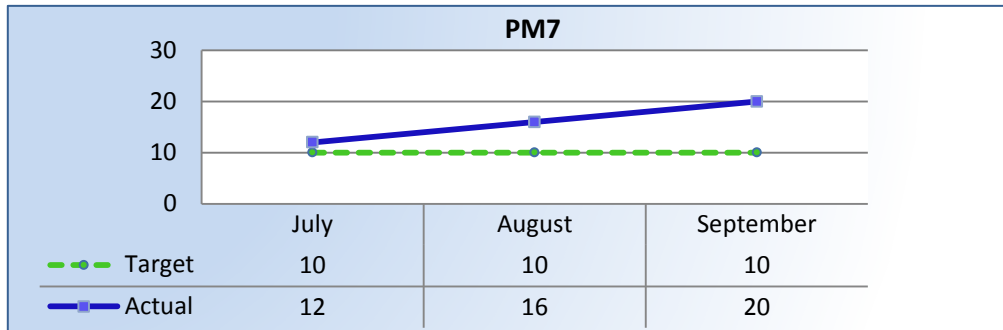
Average number of days to complete the entire enforcement process for cases resulting in formal discipline. (Includes intake and investigation by the Board and prosecution by the AG).



**Target Average: 540 Days | Actual Average: 1,067 Days**

### PM7 | Probation Intake

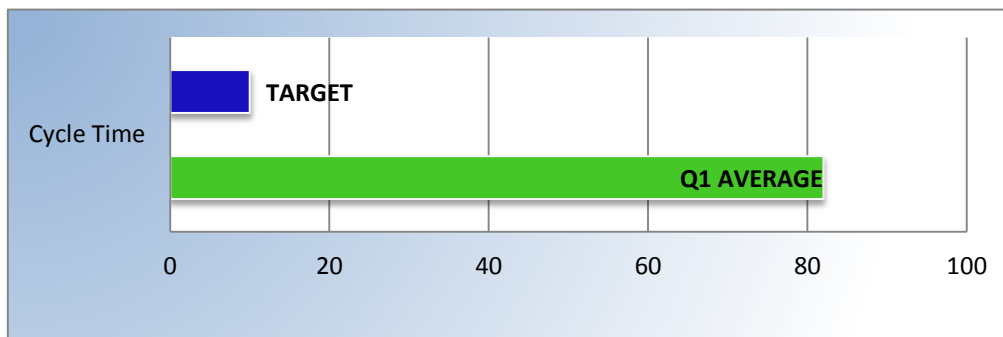
Average number of days from monitor assignment, to the date the monitor makes first contact with the probationer.



**Target Average: 10 Days | Actual Average: 17 Days**

### PM8 | Probation Violation Response

Average number of days from the date a violation of probation is reported, to the date the assigned monitor initiates appropriate action.



**Target Average: 15 Days | Actual Average: 82 Days**

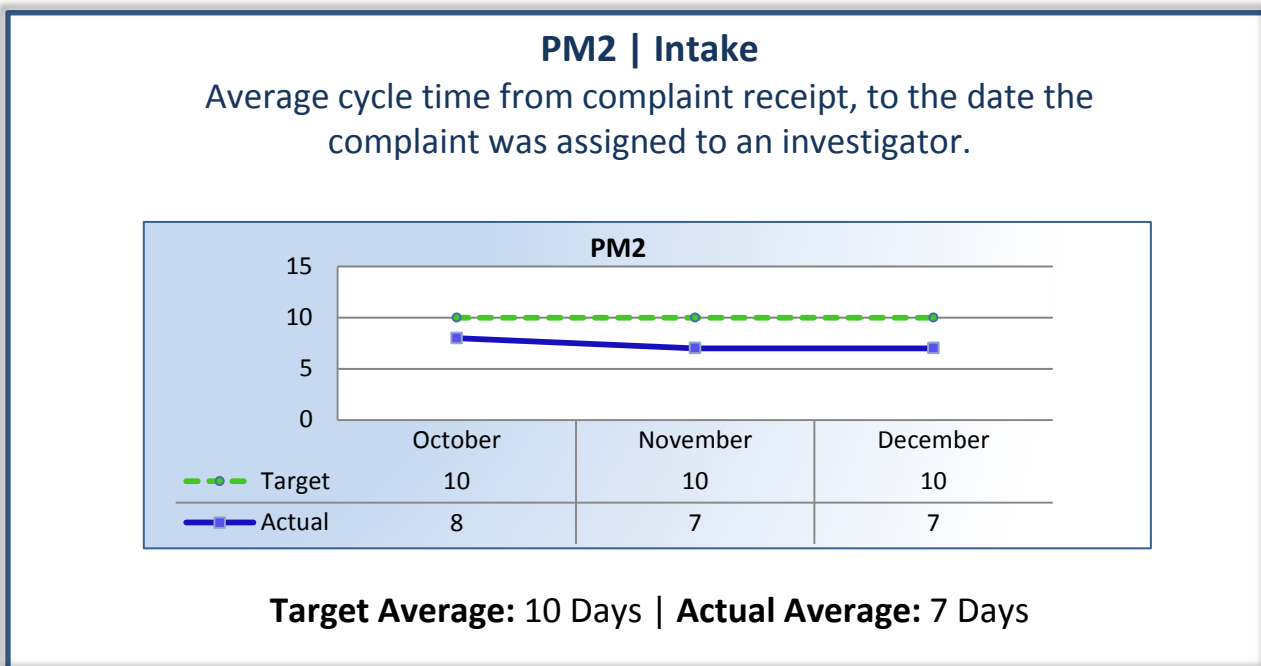
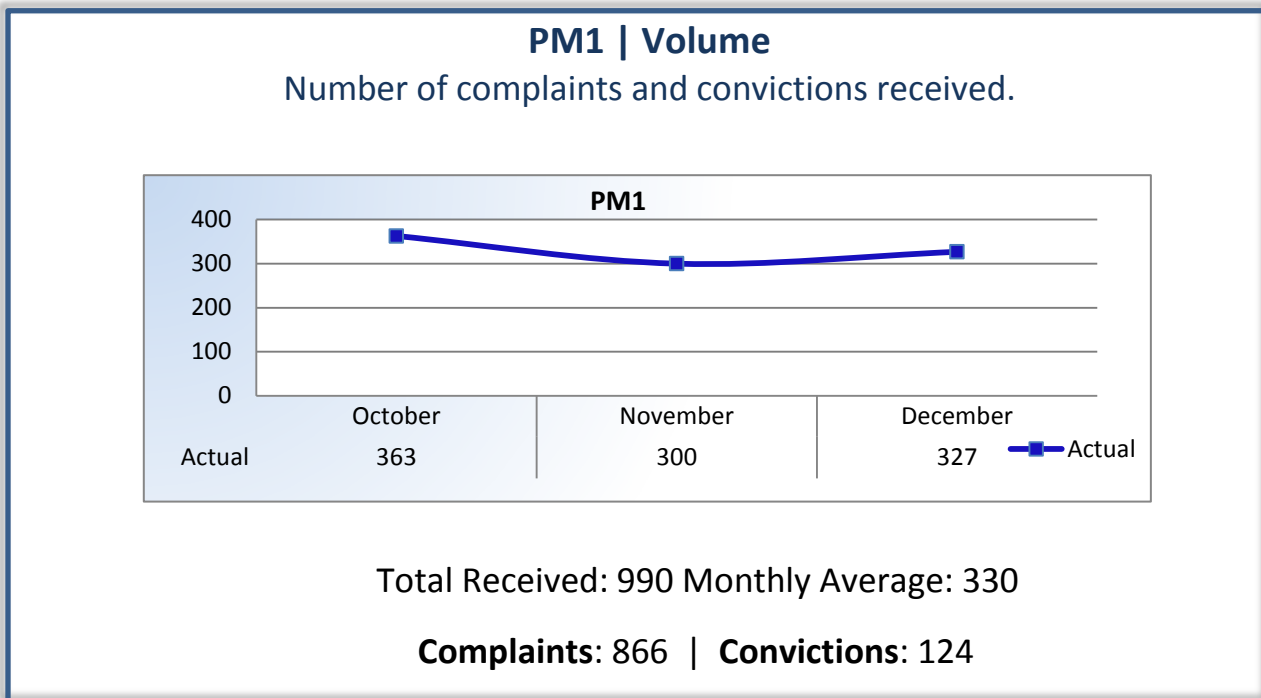


# Dental Board of California

## Performance Measures

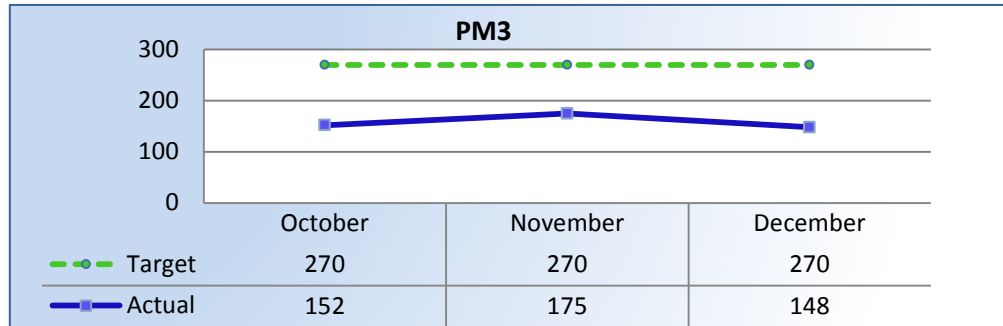
### Q2 Report (October - December 2014)

To ensure stakeholders can review the Board's progress toward meeting its enforcement goals and targets, we have developed a transparent system of performance measurement. These measures will be posted publicly on a quarterly basis.



### PM3 | Intake & Investigation

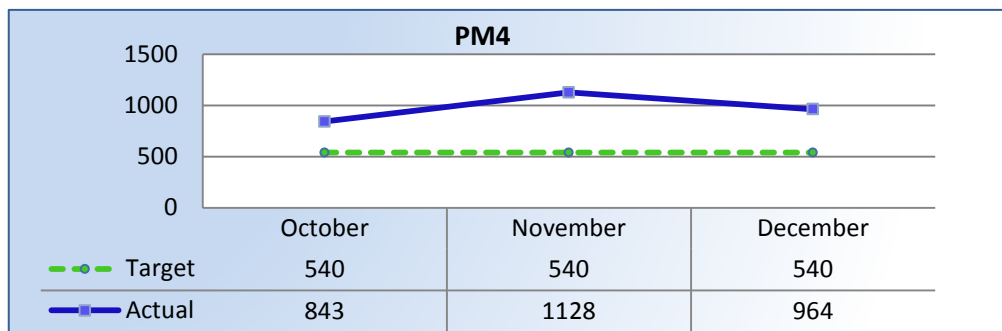
Average cycle time from complaint receipt to closure of the investigation process. Does not include cases sent to the Attorney General or other forms of formal discipline.



**Target Average: 270 Days | Actual Average: 157 Days**

### PM4 | Formal Discipline

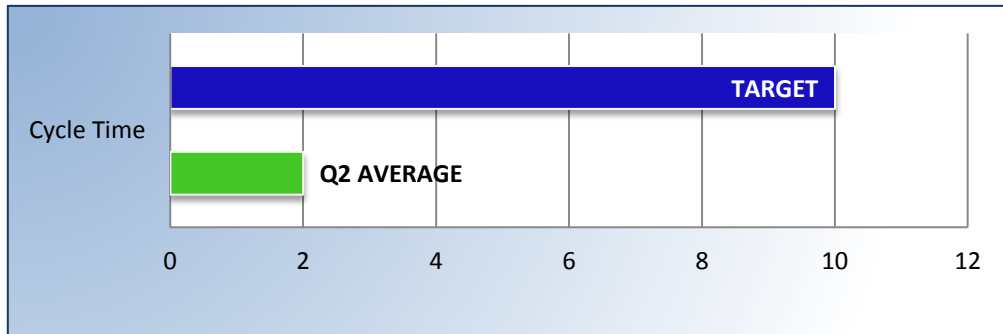
Average number of days to complete the entire enforcement process for cases resulting in formal discipline. (Includes intake and investigation by the Board and prosecution by the AG).



**Target Average: 540 Days | Actual Average: 906 Days**

### PM7 | Probation Intake

Average number of days from monitor assignment, to the date the monitor makes first contact with the probationer.



**Target Average: 10 Days | Actual Average: 2 Days**

### PM8 | Probation Violation Response

Average number of days from the date a violation of probation is reported, to the date the assigned monitor initiates appropriate action.

*The Board did not have any probation violations this quarter.*

**Target Average: 15 Days | Actual Average: N/A**



# MEMORANDUM

<b>DATE</b>	February 10, 2015
<b>TO</b>	Enforcement Committee Members
<b>FROM</b>	April Alameda, Manager
<b>SUBJECT</b>	<b>ENF 6 : Diversion Statistics</b>

The Diversion Evaluation Committee (DEC) program statistics for the last two quarters ending September 30, 2014, and December 31, 2014, are provided below. These statistics reflect the participant activity in the Diversion (Recovery) Program and are presented for information purposes only.

These statistics are derived from the MAXIMUS monthly reports.

<b>Intake Referrals</b>	<b>July</b>	<b>Aug</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>FY Total</b>
<b>Self-Referral</b>	0	0	0	0	0	0	0
Enforcement Referral	1	1	0	1	0	0	3
Probation Referral	0	0	0	0	0	0	0
<b>Closed Cases</b>	0	0	0	4	0	2	6
<b>Active Participants</b>	32	33	33	34	30	28	

The Board continues recruitment for the following positions:

Southern DEC – one (1) Public Member and one (1) Dentist

The next DEC meeting is scheduled for March 5, 2015, in Northern California.

**ACTION REQUESTED:**

No action requested.

**LEGISLATIVE AND  
REGULATORY  
COMMITTEE**



## **LEGISLATIVE AND REGULATORY COMMITTEE MEETING MINUTES**

**Monday, August 25, 2014**

Courtyard by Marriott Cal Expo

1782 Tribute Road, Sacramento, CA 95815

**DRAFT**

### **MEMBERS PRESENT**

Chair – Fran Burton, MSW, Public Member  
Vice Chair – Thomas Stewart, DDS  
Huong Le, DDS, MA  
Meredith McKenzie, Public Member  
Steven Morrow, DDS, MS

### **MEMBERS ABSENT**

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

Fran Burton, Chair, called the meeting to order at 8:50 a.m. Roll was called and a quorum established.

#### **2. Approval of the May 29, 2014 Legislative and Regulatory Committee Meeting Minutes**

M/S/C (Le/Morrow) to approve the May 29, 2014 Legislative and Regulatory Committee meeting minutes. The motion passed unanimously.

#### **3. 2014 Tentative Legislative Calendar – Information Only**

Sarah Wallace, Assistant Executive Officer, introduced Michael Placencia as the new Legislative and Regulatory Analyst for the Dental Board. Ms. Burton mentioned that the end of session was August 31, 2014.

#### **4. Discussion and Possible Action on the Following Legislation:**

Sarah Wallace, Assistant Executive Officer, and Michael Placencia, Legislative and Regulatory Analyst gave an overview of the bills that the Dental Board has been following. There were no changes to the Board's position on any of the bills.

#### **5. Update on Pending Regulatory Packages**

Michael Placencia, Legislative and Regulatory Analyst gave an overview of the information provided.

#### **6. Discussion of Prospective Legislative Proposals**

Dr. Whitcher requested that the Board look at Business and Professions Code Section 1626 regarding exemptions for clinicians operating as faculty. He stated that the Dental Board is relying on the Schools to verify that these clinicians' licenses are in good standing. He would like to require some type of registration process that would include a requirement for a Law and Ethics exam and continuing education. He suggested a "Dental Educator Permit" which would also include a background check.

7. **Public Comment of Items Not on the Agenda**

Gayle Mathe, California Dental Association, asked about AB 836, Continuing Education requirements as it pertains to retired dentists. Ms. Wallace stated that the Board will be discussing that during its regulatory priorities discussion.

8. **Future Agenda Items**

There were no future agenda item requests.

9. **Committee Member Comments for Items Not on the Agenda**

There were no committee member comments.

10. **Adjournment**

Fran Burton, Chair, adjourned the committee meeting at 9:07a.m.

DRAFT



## MEMORANDUM

<b>DATE</b>	February 18, 2015
<b>TO</b>	Legislative and Regulatory Committee, Dental Board of California
<b>FROM</b>	Michael Placencia, Legislative and Regulatory Analyst Dental Board of California
<b>SUBJECT</b>	<b>LEG 3:</b> 2015 Tentative Legislative Calendar; Report on Legislative Committee Assignments for the 2015-16 Legislative Session

The 2015 Tentative Legislative Calendar is enclosed following the report on the Assembly Business, Professions & Consumer Protection Split and the Senate Standing Committee on Business, Professions and Economic Development.

The California Legislature reconvened the 2015-2016 Legislative Session on Monday, January 5<sup>th</sup>, 2015. Shortly thereafter, the Speaker of the Assembly, Toni G. Atkins announced Assembly Committee assignments. A full list of the Assembly Committee assignments may be found on the Assembly's web site at:

<http://assembly.ca.gov/committees>. A full list of the Senate Committee assignments may be found on the Senate's web site at: <http://senate.ca.gov/committees>.

Historically, the Assembly Committee on Business, Professions & Consumer protection heard bills pertaining to the Department of Consumer Affairs, healing arts boards and bureaus, professional licensing, and consumer protection. At the beginning of the 2015 - 2016 Legislative Session, this committee was split into two standing committees:

- Assembly Committee on Business and Professions
- Assembly Committee on Privacy and Consumer Protection

For the Dental Board's purposes, the Assembly Committee on Business and Professions will have primary jurisdiction over any bills pertaining to the practice of dentistry.

A full list of the above referenced committees is as follows:

LEG 3 2015 Tentative Legislative Calendar;  
Assembly Business, Professions & Consumer Protection Split;  
Senate Business, Professions and Economic Development



**Assembly Committee on Business and Professions**

Susan Bonilla (Chair)  
Brian W. Jones (Vice Chair)  
Catharine B. Baker  
Richard Bloom  
Nora Campos  
Ling Ling Chang  
Bill Dodd  
Susan Talamantes Eggman  
Mike Gatto  
Chris R. Holden  
Kevin Mullin  
Philip Y. Ting  
Scott Wilk  
Jim Wood

**Assembly Committee on Privacy and Consumer Protection**

Mike Gatto (Chair)  
Scott Wilk (Vice Chair)  
Catharine B. Baker  
Ian C. Calderon  
Ling Ling Chang  
Ed Chau  
Jim Cooper  
Matthew Dabaneh  
Brian Dahle  
Richard S. Gordon  
Evan Low

On the other side of the house, the Senate Standing Committee on Business, Professions and Economic Development hears bills relating to business and professional practices and regulations other than bills relating to horseracing, alcoholic beverages, oil, mining, geothermal, or forestry industries.

A full list of the above referenced committee is as follows:

**Senate Standing Committee on Business, Professions and Economic Development**

Jerry Hill (Chair)  
Patricia C. Bates (Vice Chair)  
Tom Berryhill  
Marty Block  
Cathleen Galgiani  
Ed Hernandez  
Hannah-Beth Jackson  
Tony Mendoza  
Bob Wieckowski

For the Dental Board's purposes, the Senate Standing Committee on Business, Professions and Economic Development will have primary jurisdiction over any bills pertaining to the practice of dentistry.

Staff will be ordering copies of the 2015 Pocket Directory of the California Legislature for Board Members when they become available for purchase in March. This directory includes information regarding each member of the California Legislature and further Committee Assignments.

**Action Requested:**

No action necessary, information purposes only.

# 2015 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised 10-21-14

## DEADLINES

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

FEBRUARY							
	S	M	T	W	TH	F	S
Wk. 1	1	2	3	4	5	6	7
Wk. 2	8	9	10	11	12	13	14
Wk. 3	15	16	17	18	19	20	21
Wk. 4	22	23	24	25	26	27	28

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

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

MAY							
	S	M	T	W	TH	F	S
Wk. 4						1	2
Wk. 1	3	4	5	6	7	8	9
Wk. 2	10	11	12	13	14	15	16
Wk. 3	17	18	19	20	21	22	23
Wk. 4	24	25	26	27	28	29	30
No hrs.	31						

- Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 5** Legislature reconvenes (J.R. 51(a)(1)).
- Jan. 10** Budget Bill must be submitted by Governor (Art. IV, Sec. 12 (a)).
- Jan. 19** Martin Luther King, Jr. Day observed.
- Jan. 30** Last day to submit **bill requests** to the Office of Legislative Counsel.

- Feb. 16** Presidents' Day observed.
- Feb. 27** Last day for bills to be **introduced** (J.R. 61(a)(1), J.R. 54(a)).

- Mar. 26** **Spring Recess** begins upon adjournment (J.R. 51(a)(2)).
- Mar. 30** Cesar Chavez Day observed.

- Apr. 6** Legislature reconvenes from Spring Recess (J.R. 51(a)(2)).

- May 1** Last day for **policy committees** to hear and report **fiscal bills** for referral to fiscal committees (J.R. 61(a)(2)).
- May 15** Last day for **policy committees** to hear and report to the Floor **nonfiscal bills** (J.R. 61(a)(3)).
- May 22** Last day for **policy committees** to meet prior to June 8 (J.R. 61(a)(4)).
- May 25** Memorial Day observed.
- May 29** Last day for **fiscal committees** to hear and report bills to the Floor (J.R. 61(a)(5)). Last day for **fiscal committees** to meet prior to June 8 (J.R. 61(a)(6)).

\*Holiday schedule subject to final approval by Rules Committee.

## 2015 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised 10-21-14

JUNE							
	S	M	T	W	TH	F	S
No Hrgs.		1	2	3	4	5	6
Wk. 1	7	8	9	10	11	12	13
Wk. 2	14	15	16	17	18	19	20
Wk. 3	21	22	23	24	25	26	27
Wk. 4	28	29	30				

**June 1-5 Floor Session only.** No committee may meet for any purpose (J.R. 61(a)(7)).

**June 5 Last day to pass bills** out of house of origin (J.R. 61(a)(8)).

**June 8** Committee meetings may resume (J.R. 61(a)(9)).

**June 15** Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)(3)).

JULY							
	S	M	T	W	TH	F	S
Wk. 4				1	2	3	4
Wk. 1	5	6	7	8	9	10	11
Wk. 2	12	13	14	15	16	17	18
Summer Recess	19	20	21	22	23	24	25
Summer Recess	26	27	28	29	30	31	

**July 3** Independence Day observed.

**July 17** Last day for **policy committees** to meet and report bills (J.R. 61(a)(10)). **Summer Recess** begins upon adjournment, provided Budget Bill has been passed (J.R. 51(a)(3)).

AUGUST							
	S	M	T	W	TH	F	S
Summer Recess							1
Summer Recess	2	3	4	5	6	7	8
Summer Recess	9	10	11	12	13	14	15
Wk. 3	16	17	18	19	20	21	22
Wk. 4	23	24	25	26	27	28	29
No Hrgs.	30	31					

**Aug. 17** Legislature reconvenes from Summer Recess (J.R. 51(a)(3)).

**Aug. 28** Last day for **fiscal committees** to meet and report bills to the Floor (J.R. 61(a)(11)).

**Aug. 31 – Sept. 11 Floor Session only.** No committee may meet for any purpose except for Rules Committee and Conference Committees (J.R. 61(a)(12)).

SEPTEMBER							
	S	M	T	W	TH	F	S
No Hrgs.			1	2	3	4	5
No Hrgs.	6	7	8	9	10	11	12
Interim Recess	13	14	15	16	17	18	19
Interim Recess	20	21	22	23	24	25	26
Interim Recess	27	28	29	30			

**Sept. 4** Last day to **amend** on the Floor (J.R. 61(a)(13), A.R. 69(e)).

**Sept. 7** Labor Day observed.

**Sept. 11** Last day for any bill to be passed (J.R. 61(a)(14)). **Interim Study Recess** begins upon adjournment (J.R. 51(a)(4)).

### IMPORTANT DATES OCCURRING DURING INTERIM RECESS

#### **2015**

Oct. 11 Last day for Governor to sign or veto bills passed by the Legislature on or before Sept. 11 and in the Governor's possession after Sept. 11 (Art. IV, Sec.10(b)(1)).

#### **2016**

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 4 Legislature reconvenes (J.R. 51(a)(4)).



## MEMORANDUM

<b>DATE</b>	February 18, 2015
<b>TO</b>	Legislative and Regulatory Committee, Dental Board of California
<b>FROM</b>	Michael Placencia, Legislative and Regulatory Analyst Dental Board of California
<b>SUBJECT</b>	<b>LEG 4:</b> Discussion and Possible Action on Legislation

### **Background:**

Board staff is currently tracking five (5) bills, pertaining to health care coverage, regulations, Dental Board of California Sunset Review, controlled substances, and higher education. Currently, the only bills that will most likely impact the Dental Practice Act are as follows:

Staff will be presenting the following bills to the Committee for review and consideration:

AB 179 Assm. B&P Dentistry [Dental Board Sunset Review Bill]

SB 52 Walters Regulatory Boards: Healing Arts

Staff has provided a matrix of the tracked legislation disclosing information regarding each bill's status and location. Staff has also provided copies of each bill, in its most recent version, accompanied by staff analyses.

### **Healing Arts Omnibus Bill**

On December 29, 2014, Board staff submitted proposed amendments to be included in the Healing Arts Omnibus bill to the Senate Business, Professions & Economic Development Committee (Committee), at the direction of the Board, to amend several business and profession code sections that referenced The Board of Dental Examiners and replace it with the Dental Board of California. These amendments were non-substantive, technical changes to statute and were approved by the Committee as well as the Senate Republican Caucus.

As of the date of this memo, the healing arts omnibus bill has yet to be introduced and the following includes the language provided by the Board for inclusion in the healing arts omnibus bill:

**§500:** Whenever the register or book of registration of the Medical Board of California, the ~~Board of Dental Examiners~~ Dental Board of California, or the Board of Pharmacy is destroyed by fire or other public calamity, the board, whose duty it is to keep the register or book, may reproduce it so that there may be shown as nearly as possible the record existing in the original at the time of destruction.

**§650.2:** Notwithstanding Section 650 or any other provision of law, it shall not be unlawful for a person licensed pursuant to Chapter 4 (commencing with Section 1600) of Division 2 or any other person, to participate in or operate a group advertising and referral service for dentists if all of the following conditions are met:

(a) The patient referrals by the service result from patient-initiated responses to service advertising.

(b) The service advertises, if at all, in conformity with Section 651 and subdivisions (i) and (l) of Section 1680.

(c) The service does not employ a solicitor within the meaning of subdivision (j) of Section 1680.

(d) The service does not impose a fee on the member dentists dependent upon the number of referrals or amount of professional fees paid by the patient to the dentist.

(e) Participating dentists charge no more than their usual and customary fees to any patient referred.

(f) The service registers with the ~~Board of Dental Examiners~~ Dental Board of California, providing its name and address.

(g) The service files with the ~~Board of Dental Examiners~~ Dental Board of California a copy of the standard form contract that regulates its relationship with member dentists, which contract shall be confidential and not open to public inspection.

(h) If more than 50 percent of its referrals are made to one individual, association, partnership, corporation, or group of three or more dentists, the service discloses that fact in all public communications, including, but not limited to, communication by means of television, radio, motion picture, newspaper, book, or list or directory of healing arts practitioners.

(i) When member dentists pay any fee to the service, any advertisement by the service shall clearly and conspicuously disclose that fact by including a statement as follows: "Paid for by participating dentists." In print advertisements, the required statement shall be in at least 9-point type. In radio advertisements, the required statement shall be articulated so as to be clearly audible and understandable by the radio audience. In television advertisements, the required statement shall be either clearly audible and understandable to the television audience, or displayed in a written form that remains clearly visible for at least five seconds to the television audience. This subdivision shall be operative on and after July 1, 1994.

The ~~Board of Dental Examiners~~ Dental Board of California may adopt regulations necessary to enforce and administer this section.

The ~~Board of Dental Examiners~~ Dental Board of California may suspend or revoke the registration of any service that fails to comply with the requirements of subdivision (i). No service may reregister with the board if it has a registration that is currently under suspension for a violation of subdivision (i), nor may a service reregister with the board if it had a registration revoked by the board for a violation of subdivision (i) less than one year after that revocation.

The ~~Board of Dental Examiners~~ Dental Board of California may petition the superior court of any county for the issuance of an injunction restraining any conduct which constitutes a violation of this section.

It is unlawful and shall constitute a misdemeanor for a person to operate a group advertising and referral service for dentists without providing its name and address to the ~~Board of Dental Examiners~~ Dental Board of California.

It is the intent of the Legislature in enacting this section not to otherwise affect the prohibitions provided in Section 650. The Legislature intends to allow the pooling of resources by dentists for the purposes of advertising.

This section shall not be construed in any manner which would authorize a referral service to engage in the practice of dentistry.

**§1603a:** A member of the ~~Board of Dental Examiners~~ Dental Board of California who has served two terms shall not be eligible for reappointment to the board. In computing two terms hereunder, that portion of an unexpired term which a member fills as a result of a vacancy shall be excluded.

**§1618.5:**(a) The board shall provide to the Director of the Department of Managed Health Care a copy of any accusation filed with the Office of Administrative Hearings pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, when the accusation is filed, for a violation of this chapter relating to the quality of care of any dental provider of a health care service plan, as defined in Section 1345 of the Health and Safety Code. There shall be no liability on the part of, and no cause of action shall arise against, the State of California, the ~~Board of Dental Examiners~~ Dental Board of California, the Department of Managed Health Care, the director of that department, or any officer, agent, employee, consultant, or contractor of the state or the board or the department for the release of any false or unauthorized information pursuant to this section, unless the release is made with knowledge and malice.

(b) The board and its executive officer and staff shall maintain the confidentiality of any nonpublic reports provided by the Director of the Department of Managed Health Care pursuant to subdivision (i) of Section 1380 of the Health and Safety Code.

**§1640.1:** As used in this article, the following definitions shall apply:

(a) "Specialty" means an area of dental practice approved by the American Dental Association and recognized by the board.

(b) "Discipline" means an advanced dental educational program in an area of dental practice not approved as a specialty by the American Dental Association; but offered from a dental college approved by the board.

(c) "Dental college approved by the board" means a dental school or college that is approved by the Commission on Dental Accreditation of the American Dental Association, that is accredited by a body that has a reciprocal accreditation agreement with that commission, or that has been approved by the ~~Board of Dental Examiners~~ Dental Board of California through its own approval process.

**1648.10:**(a) The ~~Board of Dental Examiners~~ Dental Board of California shall develop and distribute a fact sheet describing and comparing the risks and efficacy of the various types of dental restorative materials that may be used to repair a dental patient's oral condition or defect. The fact sheet shall include:

(1) A description of the groups of materials that are available to the profession for restoration of an oral condition or defect.

(2) A comparison of the relative benefits and detriments of each group of materials.

(3) A comparison of the cost considerations associated with each group of materials.

(4) A reference to encourage discussion between patient and dentist regarding materials and to inform the patient of his or her options.

(b) The fact sheet shall be made available by the ~~Board of Dental Examiners~~ Dental Board of California to all licensed dentists.

(c) The ~~Board of Dental Examiners~~ Dental Board of California shall update the fact sheet described in subdivision (a) as determined necessary by the board.

**§1650:** Every person who is now or hereafter licensed to practice dentistry in this state shall register on forms prescribed by the board, his or her place of practice with the Executive Officer of the ~~State Board of Dental Examiners~~ Dental Board of California, or, if he or she has more than one place of practice, all of the places of practice, or, if he or she has no place of practice, to so notify the executive officer of the board. A person licensed by the board shall register with the executive officer within 30 days after the date of his or her license.

**§1695:** It is the intent of the Legislature that the ~~Board of Dental Examiners~~ Dental Board of California seek ways and means to identify and rehabilitate licentiates whose competency may be impaired due to abuse of dangerous drugs or alcohol, so that licentiates so afflicted may be treated and returned to the practice of dentistry in a manner which will not endanger the public health and safety. It is also the intent of the Legislature that the ~~Board of Dental Examiners~~ Dental Board of California shall implement this legislation in part by establishing a diversion program as a voluntary alternative approach to traditional disciplinary actions.

**§1695.1:** As used in this article:

(a) "Board" means the ~~Board of Dental Examiners~~ Dental Board of California.

(b) "Committee" means a diversion evaluation committee created by this article.

(c) "Program manager" means the staff manager of the diversion program, as designated by the executive officer of the board. The program manager shall have background experience in dealing with substance abuse issues.

### **Dental Hygiene Committee of California (DHCC) Legislative Proposal**

Board staff learned at the DHCC's December 2014 meeting that the DHCC will be seeking a legislative proposal during the 2015-16 legislative session. Staff will continue to monitor bills as they are introduced and notify the Board once a bill comes forward.

### **Action Requested:**

The Legislative and Regulatory Committee may recommend the Board take one of the following actions regarding each bill:

Support

Support if Amended

Oppose  
Watch  
Neutral  
No Action



DENTAL BOARD OF CALIFORNIA TRACKED BILLS  
2015/2016 LEGISLATIVE SESSION

Bill Number	Author	Title	Date Introduced	Date Last Amended	Status	Location	Board Position
<b>Assembly Bills</b>							
AB 179	Assembly Committee on Business Professions	Dentistry	1/26/2015		02/02/2015 - Referred to Committee on Business and Professions	Assembly Business and Professions Committee	
<b>Senate Bills</b>							
SB 52	Walters	Regulatory Boards: Healing Arts	12/19/2014		01/15/2015 Referred to Committee on Rules	Senate	

**ASSEMBLY BILL**

**No. 179**

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**Introduced by Committee on Business and Professions (Assembly Members Bonilla (Chair), Bloom, Dodd, Gatto, Holden, Mullin, Ting, and Wood)**

January 26, 2015

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An act to amend Sections 1601.1 and 1616.5 of the Business and Professions Code, relating to dentistry.

LEGISLATIVE COUNSEL'S DIGEST

AB 179, as introduced, Committee on Business and Professions. Dentistry.

Existing law provides for the Dental Board of California within the Department of Consumer Affairs, which consists of 8 practicing dentists, a registered dental hygienist, a registered dental assistant, and 5 public members, and authorizes the board to appoint an executive officer to exercise powers and perform duties delegated by the board to him or her. These provisions are in effect only until January 1, 2016, and upon repeal of those provisions the board will be subject to review by the appropriate policy committees of the Legislature.

This bill would extend those provisions until January 1, 2020.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 1601.1 of the Business and Professions
- 2 Code is amended to read:

1 1601.1. (a) There shall be in the Department of Consumer  
 2 Affairs the Dental Board of California in which the administration  
 3 of this chapter is vested. The board shall consist of eight practicing  
 4 dentists, one registered dental hygienist, one registered dental  
 5 assistant, and five public members. Of the eight practicing dentists,  
 6 one shall be a member of a faculty of any California dental college,  
 7 and one shall be a dentist practicing in a nonprofit community  
 8 clinic. The appointing powers, described in Section 1603, may  
 9 appoint to the board a person who was a member of the prior board.  
 10 The board shall be organized into standing committees dealing  
 11 with examinations, enforcement, and other subjects as the board  
 12 deems appropriate.

13 (b) For purposes of this chapter, any reference in this chapter  
 14 to the Board of Dental Examiners shall be deemed to refer to the  
 15 Dental Board of California.

16 (c) The board shall have all authority previously vested in the  
 17 existing board under this chapter. The board may enforce all  
 18 disciplinary actions undertaken by the previous board.

19 (d) This section shall remain in effect only until January 1, ~~2016~~,  
 20 2020, and as of that date is repealed, unless a later enacted statute,  
 21 that is enacted before January 1, ~~2016~~, 2020, deletes or extends  
 22 that date. Notwithstanding any other ~~provision of~~ law, the repeal  
 23 of this section renders the board subject to review by the  
 24 appropriate policy committees of the Legislature.

25 SEC. 2. Section 1616.5 of the Business and Professions Code  
 26 is amended to read:

27 1616.5. (a) The board, by and with the approval of the director,  
 28 may appoint a person exempt from civil service who shall be  
 29 designated as an executive officer and who shall exercise the  
 30 powers and perform the duties delegated by the board and vested  
 31 in him or her by this chapter.

32 (b) This section shall remain in effect only until January 1, ~~2016~~,  
 33 2020, and as of that date is repealed, unless a later enacted statute,  
 34 that is enacted before January 1, ~~2016~~, 2020, deletes or extends  
 35 that date.

**DENTAL BOARD OF CALIFORNIA  
BILL ANALYSIS  
FEBRUARY 26 – FEBRUARY 27, 2015 BOARD MEETING**

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**BILL NUMBER:** Assembly Bill 179

**AUTHOR:** Committee on Business and Professions (Assembly Members Bonilla (Chair), Bloom, Dodd, Gatto, Holden, Mullin, Ting, and Wood)

**SPONSOR:**

**VERSION:** Introduced 01/26/2015

**INTRODUCED:** 01/26/2015

**BILL STATUS:** 02/02/2015 Assembly Committee on Business and Professions

**BILL LOCATION:** Assembly Committee on Business and Professions

**SUBJECT:** Dentistry

**RELATED  
BILLS:**

**SUMMARY**

Existing law establishes the Dental Board of California under the Department of Consumer Affairs professional healing arts licensing boards. Currently, the composition of the Dental Board is eight (8) practicing dentists, a registered dental hygienist, a registered dental assistant, and five (5) public members. Current provisions are in effect until January 1, 2016 unless extended by the appropriate policy committees of the California Legislature. This bill would extend the sunset date of the Board to January 1, 2020.

**ANALYSIS**

This is the Dental Board of California's Sunset bill. This bill proposes amendments to section 1601.1 and 1616.5 of the Business and Professions Code as they relate to the practice of Dentistry. The date of January 1, 2016 will be replaced with January 1, 2020. This bill would have a major impact on the board if the sunset date is not extended to January 1<sup>st</sup>, 2020 ultimately creating a deregulation of the board.

**REGISTERED SUPPORT/OPPOSITION**

To date, there is no registered support or opposition on file.

**BOARD POSITION**

The Board has not taken a position on the bill. The Committee may consider recommending the Board take one of the following actions regarding this bill:

- Support
- Support if Amended
- Oppose
- Watch
- Neutral
- No Action

**Introduced by Senator Walters**

December 19, 2014

An act to amend Section 104 of the Business and Professions Code, relating to regulatory boards.

LEGISLATIVE COUNSEL’S DIGEST

SB 52, as introduced, Walters. Regulatory boards: healing arts.

Existing law creates various regulatory boards within the Department of Consumer Affairs. Existing law authorizes health-related boards to adopt regulations requiring a licensee to display his or her license or registration in the locality in which he or she is treating patients and to make specified disclosures to patients.

This bill would make technical changes to that provision.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 104 of the Business and Professions Code  
2 is amended to read:  
3 104. All boards or other regulatory entities within the  
4 department’s jurisdiction that the department determines to be  
5 ~~health-related~~ *health related* may adopt regulations to require  
6 ~~licensees a licensee~~ to display ~~their licenses or registrations~~ *his or*  
7 *her license or registration* in the locality in which ~~they are~~ *he or*  
8 *she is* treating patients, and to inform patients as to the identity of  
9 the regulatory agency they may contact if they have any questions  
10 or complaints regarding the licensee. In complying with this  
11 requirement, ~~those~~ *these* boards may take into consideration the

- 1 particular settings in which ~~licensees practice a licensee practices,~~
- 2 or other circumstances ~~which~~ *that* may make the displaying or
- 3 providing ~~of~~ information to the consumer extremely difficult for
- 4 the licensee in ~~their~~ *his or her* particular type of practice.







## MEMORANDUM

<b>DATE</b>	February 17, 2015
<b>TO</b>	Legislative and Regulatory Committee, Dental Board of California
<b>FROM</b>	Michael Placencia, Legislative and Regulatory Analyst
<b>SUBJECT</b>	<b>LEG 5:</b> Update on Pending Regulatory Packages

### **A. Abandonment of Applications (California Code of Regulations, Title 16, §1004):**

At its May 18, 2012 meeting, the Board discussed and approved proposed regulatory language relative to the abandonment of applications. Board staff anticipates the initial rulemaking file will be submitted to the Office of Administrative Law (OAL) and the proposal will be published in the California Regulatory Notice Register shortly after this meeting.

### **B. Licensure by Credential Application Requirements**

The Board added this rulemaking file to its list of priorities for Fiscal Year 2014 – 2015. At this time, pending direction from the Board, staff will be requesting clarification regarding whether to pursue clarification of the Licensure by Credential Application requirements by statute, regulations, or both during this meeting.

### **C. Delegation of Authority to the Executive Officer**

At its May 29, 2014 meeting, the Board discussed and approved proposed regulatory language relative to delegation of authority to the Board's Executive Officer for stipulated settlements to revoke or surrender a license. Board staff filed the initial rulemaking documents with OAL on February 10, 2015. It will be published in the California Regulatory Notice on February 20, 2015 and mailed to interested parties. The 45-day public comment period will close on April 6, 2015 and a regulatory hearing will be held on April 7, 2015 in Sacramento.

### **D. Dental Assisting Educational Program and Course Requirements (California Code of Regulations, Title 16, Division 10, Chapter 3, Article 2)**

The Dental Assisting Council (Council) held its first regulatory development workshop on December 12, 2013. On December 15<sup>th</sup>, 2014 the Council held an additional workshop to discuss the Commission on Dental Accreditation's (CODA) accreditation standards for dental assisting education programs in relation to the Board's dental assisting educational program requirements. The council appointed a subcommittee to review the CODA standards, definitions, and intent against California's Code of Regulations Title 16, §1070, 1070.1, and 1070.2 via a comprehensive comparison. This report will be presented to the

Board at this meeting and will provide a pivotal point in the development of this regulatory package.

It is anticipated that this rulemaking package will be comprehensive and will consist of:

- Educational Program/Course Requirements
- Examination Requirements
- Licensure Requirements

This rulemaking package will be extensive and Board Staff anticipates that the initial rulemaking file will be presented to the Board at a future meeting.

#### **E. Mobile and Portable Dental Units (Cal. Code of Regs., Title 16, Sections 1049)**

Senate Bill 562 (Galgiani Chapter 562, Statutes of 2013) eliminated the one mobile dental clinic or unit limit and required a mobile dental unit or a dental practice that routinely uses portable dental units, as defined, to be registered and operated in accordance with the regulations of the Board. The bill required any regulations adopted by the board pertaining to these matters to require the registrant to identify a licensed dentist responsible for the mobile dental unit or portable practice, and to include requirements for availability of follow-up and emergency care, maintenance and availability of provider and patient records, and treatment information to be provided to patients and other appropriate parties. At its November 2014 meeting, the Board directed staff to add Mobile and Portable Dental Units to its list of regulatory priorities. Board staff anticipates proposed language will be presented to the Board in the near future.

#### **F. Elective Facial Cosmetic Surgery Permit Application Requirements and Renewal**

Regulations are necessary to interpret and specify the provisions contained in Business and Professions Code Section 1638.1 relating to the application and approval process requirements for the issuance of an Elective Facial Cosmetic Surgery permit. Board staff anticipates proposed language will be considered by the Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee and then the Board at an upcoming meeting.

#### **G. Continuing Education Requirements (Cal. Code of Regs., Title 16, Sections 1016 – 1017)**

**AB 836 (Skinner, Chapter 299, statutes of 2013) reduced the continuing education requirement hours for active-retired dentists who provide only uncompensated care at a maximum of 60% of that required for non-retired active dentists. The bill also created an opportunity for the Board to update Continuing Education Requirements for dentists as well as Basic Life Support Equivalency Standards and Courses simultaneously. Proposed language will be presented to the Board at a future meeting.**

#### **Action Requested:**

No action necessary.



## MEMORANDUM

<b>DATE</b>	January 23, 2015
<b>TO</b>	Dental Board of California
<b>FROM</b>	Michael Placencia, Legislative and Regulatory Analyst Dental Board of California
<b>SUBJECT</b>	<b>LEG 6:</b> Discussion of Prospective Legislative Proposals

Stakeholders are encouraged to submit proposals in writing to the Board before or during the meeting for possible consideration by the Board at a future Board meeting.