DENTAL BOARD
OF CALIFORNIA

FULL BOARD MEETING
Thursday, December 3, 2015

Marriott Los Angeles Airport
5855 West Century Boulevard
Los Angeles, CA 90045
BOARD MEETING AGENDA
December 3, 2015
Marriott LAX
5855 West Century Blvd.
Los Angeles, CA 90045
949-892-2130 (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 9:00 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. 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, December 3, 2015

8:00 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 – LICENSING, CERTIFICATION, AND PERMITS COMMITTEE
A. 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).

B. Grant, Deny or Request Further Evaluation for Conscious Sedation Permit Onsite Inspection and Evaluation Failure, pursuant to Title 16 CCR Section 1043.6.
   The Committee will meet in closed session as authorized by Government Code Section 11126(c)(2) to deliberate whether or not to grant, deny or request further evaluation for a Conscious Sedation Permit as it Relates to an Onsite Inspection and Evaluation Failure.

RETURN TO OPEN SESSION – FULL BOARD

2. Licensing, Certification and Permits Committee Report on Closed Session
   The Board may take action on recommendations regarding applications for issuance of new license(s) to replace cancelled license(s) and whether or not to grant, deny or request further evaluation for a Conscious Sedation Permit as it Relates to an Onsite Inspection and Evaluation Failure.

3. Approval of the August 27-28, 2015 Board Meeting Minutes.

4. President’s Report.

JOINT MEETING OF THE DENTAL BOARD AND DENTAL ASSISTING COUNCIL – SEE ATTACHED AGENDA
*The purpose of this joint meeting is to allow the Board and the Dental Assisting Council to interact with each other, ask questions and participate in discussions.

RETURN TO FULL BOARD OPEN SESSION

5. Presentation of the Controlled Substance Review and Evaluation System (CURES) by the Department of Justice (DOJ).

COMMITTEE/COUNCIL MEETINGS – SEE ATTACHED AGENDAS
➢ DENTAL ASSISTING COUNCIL
   See attached Dental Assisting Council agenda.

➢ ACCESS TO CARE COMMITTEE
   See attached Access to Care Committee agenda.

➢ PRESCRIPTION DRUG ABUSE COMMITTEE
   See attached Prescription Drug Abuse Committee agenda.

RETURN TO OPEN SESSION – FULL BOARD

RECESS
CLOSED SESSION
LCP CLOSED SESSION
MEMORANDUM

<table>
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<tr>
<th>DATE</th>
<th>November 9, 2015</th>
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<tr>
<td>TO</td>
<td>Dental Board of California</td>
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<tr>
<td>FROM</td>
<td>Linda Byers, Executive Assistant</td>
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<td>SUBJECT</td>
<td>Agenda Item 2: Report from the Licensing, Certification and Permits Committee Regarding Closed Session</td>
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Dr. Whitcher, Chair of the Licensing, Certification and Permits Committee, will provide recommendations to the Board based on the outcome of the Closed Session meeting to grant a new license(s) to replace a cancelled license(s) and whether to grant, deny or request further evaluation for a Conscience Sedation Permit onsite inspection and evaluation failure.
Thursday, August 27, 2015

8:00 A.M.   FULL BOARD MEETING – OPEN SESSION

1. Call to Order/Roll Call/Establishment of Quorum
   President Fran Burton called the meeting to order at 8:06 a.m. Judith Forsythe, Secretary, called the roll and a quorum was established. The Board immediately went into Closed Session

CLOSED SESSION – FULL BOARD

CLOSED SESSION – LICENSING, CERTIFICATION, AND PERMITS COMMITTEE
RETURN TO OPEN SESSION – FULL BOARD

2. Licensing, Certification and Permits Committee Report on Closed Session
Dr. Whitcher, chair, gave a report on the results of Closed Session. The committee recommended that the Board grant a license to replace cancelled license to:

Applicant AA – RDA – after completion of the Law and Ethics Examination and the RDA written examination.

Applicant NAF – RDA – after completion of the Law and Ethics Examination and the RDA written examination.

Applicant VR – RDA – after completion of the Law and Ethics Examination.

Applicant IU – RDA – after completion of the Law and Ethics Examination.

Applicant JM – DDS – after completion of the Law and Ethics Examination.

Applicant RB – DDS – after completion of the Law and Ethics Examination.

The committee recommends denying the issuance of a General Anesthesia/Conscience Sedation permit to applicant TY for unsuccessful emergency procedures.

M/S/C (Burton/Forsythe) to accept the committee’s recommendations.


The motion passed unanimously.

3. Approval of the May 14-15, 2015 Board Meeting Minutes Minutes
Dr. Dominicis requested that agenda item 12 be amended to reflect that he is not the Dental Board’s representative to the Commission on Dental Accreditation.

M/S/C (Morrow/Le) to approve the May 14-15, 2015 Board Meeting minutes as amended.


The motion passed unanimously.

4. President’s Report
Dental Board President Fran Burton gave an overview of her Board related activities since the last meeting.
5. **Executive Officer’s Report**
Karen Fischer, Executive Officer of the Dental Board gave an overview of her activities on behalf of the Board.

6. **Update from the Dental Hygiene Committee of California (DHCC)**
No DHCC representatives were available for an update.

7. **Discussion and Possible Action Regarding 2016 Board Meeting Dates**
There was discussion regarding possible meeting dates in 2016. The consensus was:
- March 3-4
- May 11-12
- August 18-19
- December 1-2

**JOINT MEETING OF THE DENTAL BOARD AND DENTAL ASSISTING COUNCIL – SEE ATTACHED AGENDA**

**RETURN TO OPEN SESSION - FULL BOARD**

**RECESS**

**Friday, August 28, 2015**

9:00 A.M. **OPEN SESSION – FULL BOARD**

8. **Call to Order/Roll Call/Establishment of Quorum**
President Burton called the meeting to order at 9:13am. Roll was called and a quorum established.

9. **Presentation on International Accreditation Programs by Dr. Sherin Tooks, EdD, MS, Director, Commission on Dental Accreditation (CODA)**
Dr. Tooks gave a presentation on the Commission on Dental Accreditation’s (CODA) International Accreditation Program.

10. **Update Regarding the Review of the Dental School Application from the Republic of Moldova**
Dr. Morrow gave an update of the subcommittee’s (Morrow/Le) findings. Additional information has been requested from the school. There was discussion about travel to Moldova and the next steps in the process.

11. **Future Fee Increase Discussion**
Dr. Whitcher gave an overview of the information provided. There was discussion about which fees should be raised and by how much. Gayle Mathe, CDA, commented that balance is crucial. She emphasized that the key is communication. CDA members want to know what they are paying for. She also commented that if a rationale behind the decisions was provided it would help CDA promote the increases. Dr. Alan Felsenfeld commented that Dental licensing fees are very low compared to other professions. Where the money goes is irrelevant. It costs money to do business.
12. **Legislation and Regulations**

   **A. Update on 2015 Pending Regulatory Packages:**
   Ms. Wallace gave an overview of the information provided.

   **B. Discussion and Possible Action Regarding AB 880 (Ridley-Thomas)**
   **Dentistry: licensure: exemptions**
   Ms. Fischer gave an overview of the information provided.
   Motioned/Seconded/Carried (M/S/C) (Morrow/Stewart) continue to watch AB 880.

   **Support:** Burton, Whitcher, Forsythe, Casagrande, Chappell-Ingram, Dominicis, King, Lai, Le, McKenzie, Morrow, Stewart, Woo. **Oppose:** 0
   **Abstain:** 0

   The motion passed unanimously.

   **C. Discussion and Possible Action Regarding Fiscal Year 2015/16 Regulatory Priorities**
   Ms. Wallace gave an overview of the information provided including staff’s recommendation.
   M/S/C (Dominicis/Burton) to accept staff’s recommendation to maintain the same regulatory priorities it established in FY 2014-15 as the regulatory priorities for FY 2015-16 to allow the opportunity to complete what is currently pending.

   **Support:** Burton, Whitcher, Forsythe, Casagrande, Chappell-Ingram, Dominicis, King, Lai, Le, McKenzie, Morrow, Stewart, Woo. **Oppose:** 0
   **Abstain:** 0

   The motion passed unanimously.

   **D. Discussion and Possible Action to Initiate a Rulemaking to Implement, Interpret, and Make Specific California Code of Regulations, Title 16, Section 1049 Relating to Mobile and Portable Dental Unit Registration Requirements**
   This item was tabled until the December 2015 meeting.

   **E. Discussion and Possible Action on the Following Legislation:**
   Ms. Fischer reviewed the information provided.

   - **AB 85 (Wilk) Open meetings**
     No action necessary.

   - **AB 178 (Bonilla) Board of Vocational Nursing and Psychiatric Technicians of the State of California (Discussed in Joint Meeting)**
     See Joint meeting item 6.

   - **AB 179 (Bonilla) Healing Arts (Discussed in Joint Meeting)**
     See Joint meeting item 6.
• **AB 483 (Patterson) Healing arts: initial license fees: proration**
  No action necessary.

• **AB 502 (Chau) Dental Hygiene**
  Lisa Okomoto, California Dental Hygienists Association (CDHA), commented that parts of this bill might conflict with parts of Business and Professions Chapter 4, Section 1625. Gayle Mathe, CDA, commented that it is still a work in progress, still growing.

• **AB 507 (Olsen) Department of Consumer Affairs: BreEZe system: annual report**
  No action necessary.

• **AB 611 (Dahle) Controlled substances: prescriptions: reporting**
  No action necessary.

• **AB 648 (Low) Community – Based services: Virtual Dental Home Program**
  Gayle Mathe, CDA, commented that the funding contained in this bill was reduced.

• **AB 880 (Ridley-Thomas) Dentistry: licensure: exempt**
  See item 12B.

• **SB 800 (Senate Committee on Business, Professions and Economic Development) Healing Arts**
  No action necessary.

13. **Examinations**

   A. **Update on the Portfolio Pathway to Licensure Implementation**
   Karen Fischer, Executive Officer, gave an overview of the information provided. Dr. Casagrande commented that five of the six participating schools are ready to go.

   B. **Update on Western Regional Examination Board (WREB) Activities and the Possibility of Including an Indirect Restoration on the WREB Examination**
   Dr. Le gave an overview of the information provided.

14. **Enforcement**

   Teri Lane, Enforcement Chief gave an overview of the information provided.
15. Prescription Drug Abuse
Ms. Lane gave an overview of the information provided. She stated that she would try to arrange for a representative from the Department of Justice (DOJ) to give a presentation at the December Board meeting. Gayle Mathe, CDA, commented that CDA is working with the DOJ on the CURES implementation.

16. Public Comment on Items Not on the Agenda
Gayle Mathe, CDA, commented that the newly appointed State Dental Director extended an invitation to the Dental Board to send a representative when he begins creating the State Oral Health Plan.

17. Board Member Comments on Items Not on the Agenda
Dr. Dominicis requested a future agenda item addressing the limitation on the number of times a candidate can take the National Board Dental examination.

18. Adjournment
The meeting was adjourned at 3:14 p.m.
DATE | November 9, 2015
---|---
TO | Dental Board of California
FROM | Linda Byers, Executive Assistant
SUBJECT | Agenda Item 4: Presidents Report

The President of the Dental Board of California, Fran Burton, MSW, will provide a verbal report.
JOINT MEETING OF THE DENTAL BOARD AND DENTAL ASSISTING COUNCIL
JOINT MEETING OF THE DENTAL BOARD AND DENTAL ASSISTING COUNCIL

Thursday, December 3, 2015

Upon Conclusion of Dental Board Meeting Agenda Item 4

Marriott LAX
5855 West Century Blvd.
Los Angeles, CA 90045
949-892-2130 (Hotel) or 916-263-2300 (Board Office)

Members of the Board
Fran Burton, MSW, Public Member, President
*Bruce Whitcher, DDS, Vice President (Also a Council member)
*Judith Forsythe, RDA, Secretary (Also a Council member)

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

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

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JNT 1 - Call to Order/Roll Call/Establishment of Quorum
*The Board meeting is still in progress. Therefore, it is necessary to take roll call of the Dental Assisting Council members only, for the purpose of joining the Board meeting.

*The Board may take action on any Council recommendations during this joint meeting.

JNT 2 - Approval of the August 27, 2015 Joint Dental Board and Dental Assisting Council Meeting Minutes.

JNT 3 - Dental Assisting Staff Update.

JNT 4 - Discussion and Possible Action Regarding the Implementation of AB 179

JNT 5 - Presentation by the Department of Consumer Affairs (DCA) Office of Professional Examination Services (OPES) Regarding Occupational Analyses, Examination Development, and Recommendations for Dental Examinations.

JNT 6 - Public Comment on 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)).

JNT 7 - Adjourn Joint Meeting of the Dental Board and the Dental Assisting Council.
JNT 1 - Call to Order/Roll Call/Establishment of Quorum
President Fran Burton called the meeting to order at 1:50 p.m. Judith Forsythe, Board Secretary, called the roll and a quorum was established.

JNT 2 - Staff Update on:

A. The Recruitment Of Registered Dental Assistants in Extended Functions 2’s (RDAEF2) as Examiners for the RDAEF Examination
Sarah Wallace, Assistant Executive Office, discussed that we are starting the process of actively recruiting for RDAEF Examiners for upcoming examinations. Staff is preparing recruitment statement and working with legal counsel in order to post the information on the website.
B. Streamlining the Program Application Process for Registered Dental Assisting Educational Programs with Multiple Campuses
Ms. Wallace discussed that this topic has been brought up at multiple Board meetings and will be included in the comprehensive rulemaking package. The sub-committee, consisting of Emma Ramos and Pamela Davis-Washington, put together recommendations of what changes could be made on the application that staff will be reviewing on the near future.

C. Draft Regulatory Language for the Dental Assisting Comprehensive Rulemaking Package
Ms. Wallace discussed the regulatory workshop that was held on June 19, 2015 in Sacramento where the DAC and about twenty-five other stakeholders participated in the development of the Radiation Safety Course requirements. Additionally, there will be additional workshops in the future.

D. Publish RDAEF examination results by provider
Ms. Wallace discussed that staff is compiling the publication of the RDAEF examination results by the provider. Though staff has already published the examination results, they are looking at presenting the information in a different format. This should be updated in the very near future.

Public Comment:
Joan Greenfield, EF Association, asked if we would publish the results from the EF written examination. Staff acknowledged that they would be.

JNT 3 - Discussion and Possible Action Regarding the Feasibility of Having the RDAEF Examination Given at Each of the Provider’s Classroom Sites on the Last Day of the Course and for Two Consecutive Days
Jana Adams, Examination Coordinator, mentioned that this topic had been brought up at the May 2015 Board meeting and that staff has contacted all four programs (UOP, J-Production’s, EFDAA and UCLA) regarding upcoming graduation dates and sizes, contracting requirements due to liability issues and that the programs would need to be open to letting candidates from any program take the examination at their site. UOP, J-Productions, and EFDAA agreed that they would want to move forward, while UCLA had concerns about testing directly after graduation. Staff asked that the Board discuss this. In the event staff would not plan the examinations at each individual program, Ms. Adams has been contacting different sites to see where we can hold examinations. Ms. Wallace also brought up that while some of the programs were in agreement, they did mention liability issues with accommodating students from other programs.

Public Comment:
Joan Greenfield, EF Association and J-productions Program Director, mentioned that she hopes these issues can be worked through in order to hold the examination in this manner. Current locations do not have appropriate settings to accommodate each candidate’s typodont and bench mount needs. She hopes that we can try this idea.
Board Comment:
Bruce Whitcher, DAC member, mentioned that he understands this is merely a liability and contract issue and if this can be worked out and we have enough examiners, this would be a good idea to move forward with. But since staff is setting that schedule, he would have to rely on staff’s recommendations. Ms. Wallace said that though we may be able to work out logistical issues, we would need a commitment from each program that they can accommodate candidates from other programs. Ms. Greenfield mentioned that she asked that the examination be a 2-day examination to accommodate candidates that fail so they could re-take the next day. Ms. Wallace brought up that the financial concern with having candidates who failed re-take the examination the next day since staff would not know which candidates are re-taking ahead of time and would not know if the facility was needed (since we can back out of a contract within thirty days of the examination) or how many examiners and proctors are needed to be scheduled. Also, having candidates not pay ahead of time (staff has to process these fees ahead of time) could become costly to the Board. Ms. Greenfield commented back that the tradeoff could be a huge savings to the Board if we didn’t have to pay the facilities. Ms. Wallace responded with clarification that once an examination is over, staff enters in results and those that failed would need to fill out a re-examination form with a fee that needs to be processed. This could become very difficult to do in a 24-hour period. Ms. Greenfield suggested that we check with the Regional Boards on their examination process. Tamara McNealy, DAC member, asked if this is just a processing issue and said since the examination process is not listed in regulations, this is something that could easily be changed. She sees this as a benefit, especially in regards to patient safety. She mentioned and Dr. Morrow, Board member, brought up at the last Board meeting that we do not want the work on patients to be delayed. Kathleen King, Board member, asked if there are any cons to moving forward with scheduling the examination at each program. Ms. Wallace responded that cons would include that staff would need to have the appropriate contracts in place, working out the logistics of whether we can hold a re-examination on the second day and making sure the programs are in agreement with letting any candidate take the examination at their site. Ms. King clarified that she wasn’t asking about the re-examination part, but if there were any cons in changing when we hold the examination. Ms. Wallace clarified that we would just need to work out the logistics of the exact dates and the availability of the examiners and proctors availability. Teresa Lua, DAC member, asked how we would go about letting candidates re-apply for the examination on the second day. Ms. Wallace commented that those would be logistics we would have to work out. Ms. Greenfield asked that the Board vote on this today so providers could work on the issues that have been discussed and because this would be better for patients and students. Fran Burton, Board President, reminded Ms. Greenfield that this is just an update and there wouldn’t be a vote. Ms. Burton also mentioned that we would need to look into how easily we could go about having re-exams on the second day. Huong Le, Board member, commented that, though other boards may be able to hold re-examinations the next day, we would need to look at regulation processes to see if we could do this. Ms. Lua asked the question of why the DAC member cannot attend the examinations. Spencer Walker, Senior Legal Counsel, responded that since this topic is just an update, that question would need to become an agenda item at a future meeting. Karen Fischer, MPA, Executive Officer asked that Ms. Lua ask if she wants this question to be a future agenda item. Ms. Lua responded that she did.
Ms. Fischer stated that it seemed the Board and DAC had no objection to holding the examinations at the end of each program and that staff should research to see if this can work. Steven Morrow, DDS, MS, Board member, stated that he believes it's reasonable to schedule the examinations at the program sites but has concerns of having a re-examination the second day. This is because if the candidate fails the exam on the first day, how can the candidate learn the competence enough to pass twenty-four hours later. This would seem in order to pass the exam it would be luck of the draw. Ms. Greenfield disagreed with this comment.

**Action Items:**
Can DAC members attend examinations? Why or why not?

**JNT 4 - Discussion and Possible Action Regarding Registered Dental Assistants in Extended Functions (RDAEF) June 2015 Examination Results – Low Pass Rates for University of the Pacific (UOP) Students**
Ms. Adams explained the examination statistics listed from the June 13, 2005 and July 25, 2015 examination. Ms. Adams also discussed the high failure rate of UOP students compared to other students who took the examination. Most of the failure rate was due to the composite restoration and the amalgam restoration components. Staff asked that the Board discuss these results and consider if a review of UOP’s program is warranted to be sure the program is in compliance with Board requirements.

Ms. Wallace also mentioned that staff has researched past statistics from previous examinations and has noticed a downward trend in the passing rate from UOP. It seems that candidates are having the most trouble with the composite restoration component. Also, the Board is able to do program re-evaluations through site visits every seven years or as the Board deems appropriate.

**Board Comment:**
Dr. Morrow asked if the program has been notified of the outcome of their students and the deficiencies of where students are failing. Ms. Wallace responded that we would notify them after the Board’s discussion. She also mentioned that the students did receive their results and staff was contacted by UOP with concerns of the failures. Stephen Casagrande, DDS, Board member, asked what the costs of these programs are. Ms. Greenfield said that the programs range in cost from $14,000 - $25,000. Dr. Whitcher thinks we should start with a letter outlining the reasons for failures and see how that goes before we hold a program review. Ms. Lua mentioned that every program is completely different with cost and what is provided. She also asked if DAC members are able to visit the different programs. Mr. Walker asked that she let Ms. Burton and Ms. Fischer know ahead of time so they can notify the programs beforehand. Ms. McNealy asked if there have been any faculty changes from UOP that the Board has been made aware of and do these programs have to follow the same procedures of letting the Board know of these changes like the RDA programs do? Ms. Wallace responded that we would need to look into if any faculty changes have been made recently and that they do have the same procedures. Ms. Forsythe mentioned that pass rate is disturbing and would like to move forward with an evaluation of UOP.

Motion/Seconded/Carried (M/S/C) (Forsythe/Lua) to move forward with this evaluation.
Mr. Walker and Ms. Forsythe explained they need the DAC to give a recommendation and then have a vote.

Dr Whitcher mentioned that problem will most likely take care of itself once communication is started and doesn’t think a site evaluation is necessary. Ms. Greenfield says she asked for this because this has been an ongoing issue. Debra Woo, DDS, Board member, asked if there is a cost for evaluation. Ms. Wallace responded that there is a cost for the special matter experts that would be traveling.

M/S/C (Forsythe/Lua) to recommend to the Board that staff move forward with this evaluation.

Support: Forsythe, Contreras, Davis-Washington, Lua, McNealy, Oppose: Whitcher
Abstain: 0

The motion passes. Ms. King asked that at the next meeting, we break examination results down by school. Ms. Wallace responded that we would add past history trends.

M/S/C (Burton/Dominicis) to approve the DAC’s motion. Dr. Morrow agrees with Dr. Whitcher that this is premature to do an evaluation without giving them any warning. Ms. Forsythe says that the warning is the low pass rate and we should go in right away with an evaluation and take action before another exam with low pass rates occur. Dr. Woo said that we should let the school respond to a letter of the low pass rates first. Dr. Lai says we should support the DAC since UOP should be on top of this. Dr. Morrow agreed that we need to look into problem but we need to figure out how to solve it.

Public Comment:
Tammy Lane, RDA and Educator, said we should open up dialogue and that site evaluation is not punitive, but an opportunity to fix this.


The motion passed. Dr. Casagrande commented that by voting yes, he feels that this should be a staff driven event. Staff should work with the DAC to see this through.

JNT 5 - Joan Greenfield Requests
Joan Greenfield gave an overview of the information provided.

A. Change RDAEF Function from “Cord Retraction” to “Soft Tissue Management for Prosthodontics”
B. Remove Cord Retraction from RDAEF Examination as a Gradable Item
Dr. Woo stated that she has an RDAEF2 and Cord Packing should stay because it is very important. Ms. McNealy asked if patient is looked at before and after cord placement. Joan responded that they are. Dr. Whitcher stated that there would need to be a change in regulation and to add this to the list of changes that need to be done. Ms. McNealy
commented that Joan doesn’t want it removed from curriculum, just not tested on licensure examination. Joan agreed.

C. Test Anterior and Posterior Composites. Remove Amalgams from Test, Not from Curriculum
Dr. Lai mentioned that there are currently final stages of a new material being created so if there is understanding of how to condense the amalgam, the new material will act the same way. He feels that amalgam is still the most widely used material and should still be tested. Dr. Casagrande stated that the RDAEF examination is designed for mass clinic use. There is no real cause to get rid of this examination. He also explained that since they are testing for competence, they need to know how to perform with amalgam. Dr. Woo thought maybe the candidates could have a choice of what to test on just as testing is done on the portfolio process. Dr. Le stated that a good amalgam restoration is harder to do than a good looking composite restoration. She feels that amalgam should still be tested. Dr. Whitcher reminded that to move forward with any of these ideas, it would need a legislative proposal. Mr. Fischer reminded us that there is an Occupational Analysis (OA) being conducted. Ms. McNealy asked what questions are being asked in the OA. Ms. Wallace responded that staff is not in control of what questions are being asked and that OPES is in charge of that. Mr. Walker said we could table this until the OA is completed. Ms. Forsythe recommended that we do that.

D. Remove Amalgam Requirement from Restoration Performed on Patients
Dr. Morrow explained that the quality of care should not be compromised in order for students to meet their graduation requirements. Ms. Lua asked how many other programs have this problem. Joan wasn’t sure. Ms. Lua also asked why a patient is willing to submit to have these procedures done. Joan said that it is normally a friend or family member willing to do it. Ms. Lua feels that a student should be able to find a patient if they really need to. She feels it should stay a requirement. Ms. Burton stated that she wanted to bring this to an end as it is not a Board issue. Mr. Walker then explained that the Board does not select candidates and, therefore, this would be a school issue. Dr. Casagrande stated that this should stay and if it is removed, then the candidate should never be allowed to do an amalgam (removing from duties). Ms. McNealy and Ms. Davis-Washington suggested students find patients at an underprivileged school or office. Dr. Whitcher suggested we table this until the OA is done.

JNT 6 - Update Regarding Assembly Bill 178 and Assembly Bill 179 – Dental Board of California Sunset Review Legislation
Ms. Fischer gave an update on the Assembly Bills listed.

JNT 7 - Discussion and Possible Action Regarding the Registered Dental Assistant Practical Examination Results for July 2015 and August 2015
Ms. Adams gave an update on the RDA examination results listed.
Ms. Fischer discussed the information listed as to why the Joint meeting was created. She wanted to make sure there was an open dialogue to see how the DAC can further progress. Ms. Washington-Davis expressed that she likes having the joint meeting. Being the clinical RDA of the council and working more hands on, she didn’t have much background in regulations and appreciates this setting. Dr. Stewart felt the energy is positive and thinks there was good dialogue to move forward. Dr. Casagrande discussed the fact that even though the Board dynamic changed from COMDA to DAC, he feels comfortable sitting next to his RDA’s, even though there are uncomfortable discussions. He wants to keep working together. Yvette Chappell-Ingram, Board member, commented that she personally studies boards and realizes when there’s diversity you always come out with a healthy and productive board. Ms. Lua mentioned that she didn’t understand one of the memos so she called and talked to Ms. Wallace and the Board Office and thought it was very helpful and appreciated the open communication. Ms. McNealy stated that since she’s the newest DAC member, she has been asked what suggestions she has. She thought it would be great to start a mentorship program where an experienced member can work with a new member. Ms. Fischer wanted to clarify that opening this dialogue is not a personal attack on the DAC. Since the Board has taken over the DAC in 2009, there have been ongoing comments that all parties are not responsive. While Ms. Fischer doesn’t think that’s true, she feels that we are moving forward and figuring out how best to work as a team.

Is Dr. Whitcher mentioned that the last workshop had great participation and gratified that we are holding this joint meeting. Ms. Forsyth feels as if her whole family is sitting here since she is part of the DAC and the Board. This is a continuing learning process and the joint meeting has been very positive. Ms. Fischer reminded everyone that the legislature realized that learning these processes takes time and the DAC is still very new. The legislature is behind the DAC and knows that they will work hard even though stakeholders have brought their opinions forward. Ms. Burton mentioned that there has to be balance and everyone has to participate. She wants to hear all aspects from everyone. Ms. Contreras stated that she didn’t know what to expect at first, but talking with one another in this joint meeting has opened communication and is very beneficial. She feels that coming from an educator and chairside RDA aspect, this is best for the profession. Ms. Burton asked if our meeting should always be joint style meetings. Ms. Forsythe thought maybe just occasionally having a joint style meeting. For example, if there are big controversial issues. Ms. King feels that allowing joint meetings are important when issues arise for both the DAC and the Board. Dr. Woo felt that the joint style was more efficient. Ms. McNealy expressed that the joint style should be more limited and doesn’t need to be at every meeting, but this was very effective with the open dialogue and different opinions. Dr. Morrow stressed that the need to feel safe in this environment is very important so we can all express opinions. Dr. Stewart suggested that the next two meetings be a joint style meeting to keep working together. Dr. Le felt the joint meeting has allowed the communication to be open and questions to be asked in a timely manner. Ms. Fischer reminded everyone that statute allows that the DAC can meet on its own time instead of meeting in conjunction with the Board. Her recommendation is that the DAC still meets at the same time as the Board so they can experience the conversations happening. Ms. Fischer wanted to make sure the DAC felt that is was valuable that the DAC continues to have the meeting at the same time.
Ms. Lua feels that it is very valuable. Ms. Forsythe feels that having the DAC meet with the Board would be a good idea. Dr. Casagrande agrees that the next meeting should be a joint style meeting and then go from there.

**Adjournment**
Ms. Forsythe adjourned the council meeting at 3:58 p.m.

**Public Comment:**
Cara Miyasaki, RDA, RDHEF and Program Director at Foothill College, wanted clarification on what Ms. Greenfield was asking about and whether it had to do with the OA or would be incorporated in the regulatory workshops in the future. Spencer clarified that Ms. Greenfield’s comments would not be covered in the regulatory workshops. Claudia Pohl, CDAA, wanted to know when there would be another regulatory workshop scheduled. Ms. Fischer reminder her that Ms. Wallace mentioned that the key analyst that would be leading these workshops had left the department so as soon as that employee is replaced, another meeting will be scheduled. Ms. Pohl also wanted to know the protocol for publishing Board meeting dates on the website as this meeting’s location was not published until one week prior. Ms. Fischer explained that we can’t publish locations until we have executed contracts and will try to get the 2016 schedule up much earlier.

**JNT 9 - Public Comment on Items Not on the Agenda**
There was no further public comment.

**JNT 10 - Adjourn Joint Meeting of the Dental Board and the Dental Assisting Council**
Since Ms. Forsythe had already adjourned the meeting at 3:58pm, Ms. Burton recessed the meeting at 4:03pm until 9:00am on Sunday, August 28, 2015.
MEMORANDUM

DATE | November 18, 2015

TO | Members of the Dental Board of California
Members of the Dental Assisting Council

FROM | Sarah Wallace, Assistant Executive Officer

SUBJECT | JNT 3: Dental Assisting Staff Update

Sarah Wallace, Assistant Executive Officer, will provide a verbal report at the meeting on the following:

New Staff:
The Dental Assisting program has gained three new staff members in November 2015. Two of those staff will focus primarily on dental assisting educational program and course applications, curriculum review, and the development of the comprehensive dental assisting rulemaking package. The other staff member will focus primarily on review of licensure applications and the administration of examinations.

Update on the RDA/RDAEF Occupational Analysis:
The Office of Professional Examination Services (OPES) is in the process of collecting responses to its occupational survey from licensed registered dental assistants (RDA) and registered dental assistants in extended functions (RDAEF). Initially, there was a low response rate which required OPES to send out reminder postcards to survey participants as well as initiate the collection of survey results from an additional population of RDAs and RDAEFs. Board staff has also requested stakeholder organizations share information regarding the survey among their memberships in an effort to increase the response rate. This has resulted in the response rate steadily increasing to what OPES requires to continue its analysis.

Because of the low response rate to the surveys and having to solicit more participation, the December 2015 workshops have been postponed and we hope to have them rescheduled in January or February 2016. As a result, the Board and the Dental Assisting Council will most likely consider the results of the occupational analysis sometime in the spring of 2016.

2016 Examination Schedules:
The examination dates for the 2016 RDA and RDAEF examinations have been posted to the Board’s web site and are included as an attachment to this memo. As a result of
the delay of the results of the Board’s occupational analysis, the Board will definitely be administering the February 2016 RDA practical examinations. Board staff will continue to plan for the remaining examinations to take place, however they will also be prepared to cancel the examinations if the Board takes action to suspend it as a result of the occupational analysis.

November 2015 RDA Practical Examination Results:
Preliminary results of the November 2015 RDA practical examination results will be hand-carried to the meeting.

**Breeze**
The Board is scheduled to be integrated into the Department of Consumer Affairs’ BreEze system on January 19, 2016. As a result, our existing licensing systems will not be accessible the week prior.

This new system will afford applicants the opportunity to apply online and licensees to make updates and renewal payments online and be able to check the status of account actions. Board staff is going through technical training and will soon be participating in training to become familiar with the new business processes. Additional information will be shared with applicants and licensees as it becomes available.

**2016 Regulatory Development Workshops**
Staff is in the process of coordinating dates for 2016 regulatory workshops for the development of the dental assisting comprehensive rulemaking package. Dates will be made available to the public as soon as dates are solidified.
The following are the confirmed dates for the RDA Practical Examination in California for 2016. All examination dates and locations are subject to change and cancellation. Applicants may be reassigned by the Dental Board to an alternate location based on space availability. Applications will not be accepted before the filing period opens. **Applications must be postmarked no later than 5:00pm on the last day of the filing period.**

Applicants will be provided specific information regarding the content of the examination and directions for scheduling the written examinations upon being notified that their applications are deemed complete and approved.

**PLEASE NOTE: Additional 2016 examination dates may be added. Please check back frequently for information regarding examination dates, locations, and filing periods.**

<table>
<thead>
<tr>
<th>Examination Date</th>
<th>Examination Location</th>
<th>Filing Period</th>
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</thead>
<tbody>
<tr>
<td>February 13th</td>
<td>University of California, San Francisco School of Dentistry 707 Parnassus Avenue San Francisco, CA 94143</td>
<td>November 16, 2015 Until December 16, 2015</td>
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<tr>
<td>February 14th</td>
<td><strong>Due to the launch of the new Breeze program in January 2016, ALL applications must be postmarked by 5:00pm on Dec. 16th. ALL late applications will be returned (complete or not), NO EXCEPTIONS.</strong></td>
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<tr>
<td>February 27th</td>
<td>Carrington College, Pomona 901 Corporate Center Drive, Ste 300 Pomona, CA 91768</td>
<td>January 11, 2016 Until February 11, 2016</td>
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<tr>
<td>February 28th</td>
<td>University of California, San Francisco School of Dentistry 707 Parnassus Avenue San Francisco, CA 94143</td>
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<tr>
<td>April 9th</td>
<td>Carrington College, Pomona 901 Corporate Center Drive, Ste 300 Pomona, CA 91768</td>
<td>February 22, 2016 Until March 22, 2016</td>
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<td>April 10th</td>
<td><strong>San Joaquin Valley College, Inc, Fresno 295 East Sierra Fresno, CA 93710</strong></td>
<td>April 20, 2016 Until May 20, 2016</td>
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<td>Dates</td>
<td>Location</td>
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<tr>
<td>September 17th</td>
<td>University of California, San Francisco School of Dentistry, 707 Parnassus Avenue, San Francisco, CA 94143</td>
<td>June 15, 2016</td>
</tr>
<tr>
<td>September 18th</td>
<td>University of California, San Francisco School of Dentistry, 707 Parnassus Avenue, San Francisco, CA 94143</td>
<td>Until July 15, 2016</td>
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<td>September 24th</td>
<td>Carrington College, Pomona, 901 Corporate Center Drive, Ste 300, Pomona, CA 91768</td>
<td>August 5, 2016</td>
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<tr>
<td>September 25th</td>
<td>Carrington College, Pomona, 901 Corporate Center Drive, Ste 300, Pomona, CA 91768</td>
<td>Until September 6, 2016</td>
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<tr>
<td>November 5th</td>
<td>University of California, San Francisco School of Dentistry, 707 Parnassus Avenue, San Francisco, CA 94143</td>
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<td>November 6th</td>
<td>University of California, San Francisco School of Dentistry, 707 Parnassus Avenue, San Francisco, CA 94143</td>
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<tr>
<td>November 20th</td>
<td>Carrington College, Pomona, 901 Corporate Center Drive, Ste 300, Pomona, CA 91768</td>
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2016 REGISTERED DENTAL ASSISTANT IN EXTENDED FUNCTIONS (RDAEF) PRACTICAL EXAMINATION SCHEDULE

The following are the confirmed dates for the RDA Practical Examination in California for 2016. All examination dates and locations are subject to change and cancellation. Applicants may be reassigned by the Dental Board to an alternate location based on space availability. Applications will not be accepted before the filing period opens. ***Applications must be postmarked no later than 5:00pm on the last day of the filing period.***

Applicants will be provided specific information regarding the content of the examination and directions for scheduling the written examinations upon being notified that their applications are deemed complete and approved.

***PLEASE NOTE: Additional 2016 examination dates may be added. Please check back frequently for information regarding examination dates, locations, and filing periods.***

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<tr>
<th>Examination Date</th>
<th>Examination Location</th>
<th>Filing Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 23rd</td>
<td>University of the Pacific, San Francisco School of Dentistry 155 5th Street San Francisco, CA 94103</td>
<td>November 16, 2016 Until December 16, 2016 <em><strong>Due to the launch of the new Breeze program in January 2016, ALL applications must be postmarked by 5:00pm on Dec. 16th. ALL late applications will be returned (complete or not), NO EXCEPTIONS.</strong></em></td>
</tr>
<tr>
<td>May 7th</td>
<td>University of California, Los Angeles School of Dentistry 10833 Le Conte Avenue Los Angeles, CA 90095</td>
<td>February 8, 2016 Until March 8, 2016</td>
</tr>
<tr>
<td>October 8th</td>
<td>University of California, Los Angeles School of Dentistry 10833 Le Conte Avenue Los Angeles, CA 90095</td>
<td>July 8, 2016 Until August 8, 2016</td>
</tr>
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On October 6, 2015, Governor Brown signed into law Assembly Bill 179 (Chapter 510, Statutes of 2015), authored by Assembly Member Susan Bonilla, which extends the licensing, regulatory, and enforcement authority of the Dental Board of California (Board) until January 1, 2020. This bill also makes several amendments to the provisions of the Dental Practice Act including but not limited to: increases in the statutorily authorized fee maximums relating to dentist and dental assistant licensure and permitting, authorizes the Board to collect email addresses, adds a provision limiting the terms of a Dental Assisting Council member to no more than two full four-year terms, and provides that it is not professional misconduct if a healing arts licensee engages in consensual sexual conduct with his or her spouse when that licensee provides medical treatment. The legislation will take effect January 1, 2016.

The signing of this legislation brings to a close a very long and arduous journey by the Board and staff through the Sunset Review process.

Following is a brief summary of the Sunset Review process; an overview of the provisions of AB 179; and an action plan for implementation of this important legislation.

SUMMARY OF THE SUNSET REVIEW PROCESS:
The Board was first notified March 20, 2014 by the Senate Committee on Business, Professions and Economic Development (Senate Committee) that the Board would begin its sunset review process in the fall of 2014. Board staff organized into workgroups to gather background information relating to all aspects of the Board’s regulatory program including its history and function, budget and staff, licensing requirements, and licensing, complaint and compliance, and enforcement programs and statistics. The research conducted by staff was culminated into a comprehensive report that was later presented to the Board for review and finalization. On October 17, 2014, the Board reviewed and discussed the draft version of the 2014 Sunset Review report in its entirety, addressed the Legislature’s questions, and made additional corrections and additions before approving for final submittal to the Legislature. The 2014 Sunset Review was submitted to the Legislature on October 29, 2014.
The Senate Committee and the Assembly Committee on Business and Professions (Assembly Committee) published its background paper for the Board ten days prior to the oversight hearing which took place on March, 23, 2015. Throughout the 18 month process, members of the Board and staff worked closely with the Assembly Committee staff consultant, Eunie Linden, via in-person meetings, telephone calls, and emails to clarify information relating to the Board and to answer any questions that arose during the process.

On April 27, 2015, AB 179 was amended to include the Senate and Assembly Committees’ recommendations. The bill progressed through both the Senate and Assembly and was amended a number of times before reaching the Governor’s desk.

OVERVIEW OF THE PROVISIONS OF AB 179:
Specifically, Assembly Bill 179 (Chapter 510, Statutes of 2015), made the following changes to the Dental Practice Act:

- Expands the exception to all hearing arts licensees that it is not unprofessional conduct for a healing arts licensee to engage in consensual sexual conduct with his or her spouse or person in an equivalent domestic relationship when that licensee provides medical treatment, other than psychotherapeutic treatment, for that person. (Business and Professions Code (BPC) 726)

- Extends the operations of the Dental Board until January 1, 2020. (BPC 1601.1)

- Extends the provisions relative to the Board’s appointment of an Executive Officer until January 1, 2020. (BPC 1616.5)

- Makes changes to the provision that applies to the payment of the portfolio examination fee by stating that an applicant shall pay the required fee to the board. (BPC 1632)

- Makes changes to the provision that applies to the payment of fees for the oral and maxillofacial surgery permit. (BPC 1638)

- Makes changes to the provisions that apply to the payment of fees for new two year permits and renewal of two year permits to perform elective facial cosmetic surgery as prescribed in Section 1724. (BPC 1638.1)

- Makes changes to the provision that applies to the payment of fees for the renewal of oral and maxillofacial surgery permits as prescribed in Section 1724. (BPC 1638.3)

- Makes changes to the provisions that apply to the payment of fees for a permit or renewal of a permit and to the payment of fees for an onsite inspection as prescribed
in Section 1724 in order to cover administration and enforcement costs incurred by the board in carrying out this article. (BPC 1646.6)

- Makes changes to the provisions that apply to the payment of fees for a permit or renewal of a permit and payment of fees for an onsite inspection as prescribed in Section 1724 in order for the board to hire sufficient staff to administer the program and cover the administration and enforcement costs incurred by the board in carrying out this article. (BPC 1647.8)

- Adds the provision that requires every applicant and licensee who has an electronic mail address to report to the DBC that electronic mail address no later than July 1, 2016. The electronic mail address shall be considered confidential and not subject to public disclosure. (BPC 1650.1)

- Requires the board to update the electronic addresses provided by annually sending an electronic notice to each applicant and licensee. (BPC 1650.1)

- Consolidates references to fees in the general fee provisions section and increases fee amounts to be paid by a dentist, a dental assistant, or certain educational programs. Requires the establishing of the charges and fees for licensure for the purpose of carrying out its responsibilities under the Act, subject to statutory fee caps. (BPC 1724)

The following fees were changed, added, or updated:
- Applications qualifying pursuant to paragraph (1) of subdivision (c) of Section 1632 not to exceed $1,500; and applications qualifying pursuant to paragraph (2) of subdivision (c) of Section 1632 not to exceed $1,000.
- Applications qualifying under Section 1634.1 and 1635.5 must not exceed $1,000.
- After January 1, 2016, initial license and renewal of a license fee must not exceed $650; and after January 1, 2018, initial license and renewal of a license fee must not exceed $800.
- New special permit must not exceed $1,000 and the renewal fee of such a permit must not exceed $600.
- Delinquency fee is 50% of the renewal fee of the respective license or permit.
- Application for an additional office permit must not exceed $750 and the renewal of an additional office permit must not exceed $375.
- Issuance of a replacement license must not exceed $125.
- Provider of continuing education fee not to exceed $500 per year.
- Application for an elective facial cosmetic surgery permit must not exceed $4,000 and its renewal fee must not exceed $800.
- Application for an oral and maxillofacial surgery permit fee must not exceed $1,000 and the renewal of such a permit must not exceed $1,200.
Applications for general anesthesia, conscious sedation, and oral conscious sedation permits must not exceed $1,000 and its respective renewal permit must not exceed $600.

Onsite inspection and evaluation related to general anesthesia or conscious sedation permit must not exceed $4,500.

Certification of licensure must not exceed $125.

Application for the law and ethics examination must not exceed $250.

- Makes changes to the provisions that apply to the payment of fees that relate to the licensing and permitting of dental assistants, curriculum review, site evaluation, and reevaluation of educational programs not accredited by a board-approved agency, and requires that fees for written examinations not exceed the actual cost of the examination. (BPC 1725)

- Adds the provision limiting the term of a member of the Dental Assisting Council to no more than two full four year terms. (BPC 1742)

- Requires the board to work with Office of Professional Examination Services (OPES) to conduct a review and determination of whether a practical examination is necessary to demonstrate competency of registered dental assistants before July 1, 2017. If it is deemed that the practical examination is unnecessary or does not accurately measure competence, then the board may vote to suspend the practical examination. (BPC 1752.1)

**ACTION PLAN:**

Board staff will be formulating action plans to implement the following provisions of AB 179:

- Board to prioritize the initiation of a rulemaking package to address fee increases relating to the licensing and permitting of dentists and dental assistants.

- Staff will work with Office of Professional Examination Services (OPES) to ensure that the necessary steps are taken in order to determine whether a practical examination is necessary to demonstrate competency of registered dental assistants.

- Collection of applicant and licensee email addresses by July 1, 2016.

- Implementation includes staff training, newsletter articles, and update of the Board’s website.
In the bill text the following have special meaning:

**green underline denotes added text**

**dark red struck out text denotes deleted text**

**Bill:** 2015 CA A 179

**Version:** Chaptered

**Version date:** 10/06/2015

Assembly Bill No. 179

CHAPTER 510

An act to amend Sections 726, 1601.1, 1616.5, 1632, 1638, 1638.1, 1646.6, 1647.8, 1724, 1725, 1742, 1752.1, 2841, 4501, and 4503 of, to amend, repeal, and add Sections 205, 2894, and 4547 of, the Business and Professions Code, relating to healing arts.

[Approved by Governor October 06, 2015. Filed with Secretary of State October 06, 2015.]

LEGISLATIVE COUNSEL'S DIGEST

AB 179, Bonilla. Healing arts.

(1) Under existing law, the commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer is unprofessional conduct, except that it is not unprofessional conduct when sexual contact is between a physician and surgeon and his or her spouse or person in an equivalent domestic relationship, as specified.

This bill would expand the exception by providing that it would not be unprofessional conduct when consensual sexual contact is between a licensee and his or her spouse or person in an equivalent domestic relationship, as specified.

(2) Existing law, the Dental Practice Act, provides for the licensure and regulation of dentists and dental assistants by the Dental Board of California 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. The act prescribes various fees that are required to be paid by dentists and dental assistants for, among other things, an initial license and the renewal of that license.

This bill would extend the provisions relating to the Dental Board of California and the executive officer to January 1, 2020. The bill would also change various fees that would be required to be paid by a dentist, a dental assistant, or certain educational programs, as specified. The bill would, on and after January 1, 2016, require that an initial license for a dentist be no greater than $650 and would require the fee for the renewal of that license be no greater than $650. The bill would, on and after January 1, 2018, require that an initial license be no greater than $800 and would require the fee for a renewal of that license be no greater than $800. The bill would also require, by July 1, 2016, every applicant and licensee under the act to report to the board his or her electronic mail address, and would require the board to annually send an electronic notice to each applicant and licensee that requests confirmation of the applicant's or licensee's electronic mail address.

The act authorizes the board to license a person as a registered dental assistant if he or she meets certain requirements, including a written and practical examination.

This bill would require the Dental Board of California, in consultation with the Office of Professional Examination Services, to conduct a review to determine on or before July 1, 2017, whether a practical examination is necessary to demonstrate the competency of registered dental assistants and to submit that determination to the appropriate policy committees of the Legislature by that date, as specified. The bill would authorize the board
to vote to suspend the practical examination if the review concludes that the practical examination is unnecessary or does not accurately measure the competency of registered dental assistants. The bill would provide that the suspension of the practical examination commences on the date the board votes to suspend the practical examination and would continue being suspended until July 1, 2017. The bill would require the board to post a notice on its Internet Web site if it suspends the practical examination.

Existing law creates the Dental Assisting Council of the Dental Board of California, which considers all matters relating to California dental assistants and is composed of members who serve terms, as specified. Existing law requires the board to make all the initial appointments of members by May 1, 2012.

This bill would prohibit a member from serving more than two full terms. The bill would remove the requirement for the board to make all initial appointments by May 1, 2012.

(3) Existing law provides for the licensure and regulation of vocational nurses under the Vocational Nursing Practice Act, and psychiatric technicians under the Psychiatric Technicians Law, by the Board of Vocational Nursing and Psychiatric Technicians of the State of California, and requires the board to, among other things, appoint an executive officer, who is required to be a licensed vocational nurse, registered nurse, or psychiatric technician. Existing law repeals these provisions on January 1, 2016.

This bill would remove the requirement that the executive officer be a vocational nurse, registered nurse, or psychiatric technician, and would extend the repeal date of the provisions relating to the board to January 1, 2018.

(4) Existing law establishes the Vocational Nursing and Psychiatric Technicians Fund in the State Treasury, and establishes the Vocational Nurses Account and the Psychiatric Technician Examiners Account within the fund. Existing law authorizes the Board of Vocational Nursing and Psychiatric Technicians of the State of California to collect specified fees and fines related to the board's licensure and regulation of vocational nurses and psychiatric technicians, and prohibits the board from charging expenses for these respective activities against funds received from any other source.

This bill, beginning July 1, 2016, would remove that prohibition, abolish the Vocational Nurses Account and the Psychiatric Technician Examiners Account, and specify that all money in the Vocational Nursing and Psychiatric Technicians Fund shall be used to carry out the Vocational Nursing Practice Act and the Psychiatric Technicians Law.

(5) Existing law authorizes the Director of Consumer Affairs to investigate the work of the boards within the Department of Consumer Affairs, obtain a copy of the records of official matters in possession of the boards, and require reports from the boards as the director deems reasonably necessary. Existing law requires the director to provide certain reports to the Legislature, including, but not limited to, a copy of an independent review of the Bureau for Private Postsecondary Education's staffing resources needs and requirements.

This bill would require the director to appoint an administrative and enforcement program monitor no later than March 1, 2016, and would require the monitor to monitor and evaluate the administrative process and disciplinary system and procedures of the Board of Vocational Nursing and Psychiatric Technicians of the State of California for a period of no more than 2 years, as specified. The bill would require the monitor to submit a report of his or her findings and conclusions to the Legislature, the department, and the board by July 1, 2016, subsequent reports by November 1, 2016, and February 1, 2017, and a final report before January 1, 2018. The bill would require the board and its staff to cooperate with the program monitor. The bill would also require the department's internal audit unit to review the board's financial needs, fee structure, budget, and expenditures, and require the director to provide the Legislature with a copy of the review no later than October 1, 2016. The bill would repeal these provisions on January 1, 2018.

(6) This bill would incorporate additional changes in Section 205 of the Business and Professions Code, proposed by AB 177 and AB 180 that would become operative only if this bill and either or both of those bills are chaptered and become effective January 1, 2016, and this bill is chaptered last.
(7) This bill would incorporate additional changes in Section 1724 of the Business and Professions Code, proposed by AB 483, that would become operative only if this bill and AB 483 are chaptered and become effective January 1, 2016, and this bill is chaptered last.

Vote Required: MAJORITY Appropriation: NO Fiscal Committee: YES Local Program: NO Immediate Effect NO Urgency: NO Tax Levy: NO Election: NO Usual Current Expenses: NO Budget Bill: NO Prop 25 Trailer Bill: NO

The people of the State of California do enact as follows:

SECTION 1. Section 205 of the Business and Professions Code is amended to read:

205. (a) There is in the State Treasury the Professions and Vocations Fund. The fund shall consist of the following special funds:

(1) Accountancy Fund.
(2) California Architects Board Fund.
(3) Athletic Commission Fund.
(4) Barbering and Cosmetology Contingent Fund.
(5) Cemetery Fund.
(6) Contractors' License Fund.
(7) State Dentistry Fund.
(8) State Funeral Directors and Embalmers Fund.
(9) Guide Dogs for the Blind Fund.
(10) Home Furnishings and Thermal Insulation Fund.
(11) California Architects Board-Landscape Architects Fund.
(12) Contingent Fund of the Medical Board of California.
(13) Optometry Fund.
(14) Pharmacy Board Contingent Fund.
(15) Physical Therapy Fund.
(16) Private Investigator Fund.
(17) Professional Engineer's and Land Surveyor's Fund.
(18) Consumer Affairs Fund.
(19) Behavioral Sciences Fund.
(20) Licensed Midwifery Fund.
(21) Court Reporters' Fund.
(22) Veterinary Medical Board Contingent Fund.
(23) Vocational Nurses Account of the Vocational Nursing and Psychiatric Technicians Fund.
(24) Electronic and Appliance Repair Fund.
(25) Geology and Geophysics Account of the Professional Engineer's and Land Surveyor's Fund.

(26) Dispensing Opticians Fund.

(27) Acupuncture Fund.

(28) Physician Assistant Fund.

(29) Board of Podiatric Medicine Fund.

(30) Psychology Fund.

(31) Respiratory Care Fund.

(32) Speech-Language Pathology and Audiology and Hearing Aid Dispensers Fund.

(33) Board of Registered Nursing Fund.

(34) Psychiatric Technician Examiners Account of the Vocational Nursing and Psychiatric Technicians Fund.

(35) Animal Health Technician Examining Committee Fund.

(36) State Dental Hygiene Fund.

(37) State Dental Assistant Fund.

(38) Structural Pest Control Fund.

(39) Structural Pest Control Eradication and Enforcement Fund.

(40) Structural Pest Control Research Fund.

(b) For accounting and recordkeeping purposes, the Professions and Vocations Fund shall be deemed to be a single special fund, and each of the several special funds therein shall constitute and be deemed to be a separate account in the Professions and Vocations Fund. Each account or fund shall be available for expenditure only for the purposes as are now or may hereafter be provided by law.

(c) This section shall remain in effect only until July 1, 2016, and as of that date is repealed, unless a later enacted statute, that is enacted before July 1, 2016, deletes or extends that date.

SEC. 2. Section 205 is added to the Business and Professions Code, to read:

205. (a) There is in the State Treasury the Professions and Vocations Fund. The fund shall consist of the following special funds:

(1) Accountancy Fund.

(2) California Architects Board Fund.

(3) Athletic Commission Fund.

(4) Barbering and Cosmetology Contingent Fund.

(5) Cemetery Fund.

(6) Contractors' License Fund.

(7) State Dentistry Fund.
(8) State Funeral Directors and Embalmers Fund.
(9) Guide Dogs for the Blind Fund.
(10) Home Furnishings and Thermal Insulation Fund.
(11) California Architects Board-Landscape Architects Fund.
(12) Contingent Fund of the Medical Board of California.
(13) Optometry Fund.
(14) Pharmacy Board Contingent Fund.
(15) Physical Therapy Fund.
(16) Private Investigator Fund.
(17) Professional Engineer's and Land Surveyor's Fund.
(18) Consumer Affairs Fund.
(19) Behavioral Sciences Fund.
(20) Licensed Midwifery Fund.
(21) Court Reporters' Fund.
(22) Veterinary Medical Board Contingent Fund.
(23) Vocational Nursing and Psychiatric Technicians Fund.
(24) Electronic and Appliance Repair Fund.
(25) Geology and Geophysics Account of the Professional Engineer's and Land Surveyor's Fund.
(26) Dispensing Opticians Fund.
(27) Acupuncture Fund.
(28) Physician Assistant Fund.
(29) Board of Podiatric Medicine Fund.
(30) Psychology Fund.
(31) Respiratory Care Fund.
(32) Speech-Language Pathology and Audiology and Hearing Aid Dispensers Fund.
(33) Board of Registered Nursing Fund.
(34) Animal Health Technician Examining Committee Fund.
(35) State Dental Hygiene Fund.
(36) State Dental Assistant Fund.
(37) Structural Pest Control Fund.
(38) Structural Pest Control Eradication and Enforcement Fund.
(39) Structural Pest Control Research Fund.
(b) For accounting and recordkeeping purposes, the Professions and Vocations Fund shall be deemed to be a single special fund, and each of the several special funds therein shall constitute and be deemed to be a separate account in the Professions and Vocations Fund. Each account or fund shall be available for expenditure only for the purposes as are now or may hereafter be provided by law.

(c) This section shall become operative on July 1, 2016.

SEC. 2.1. Section 205 is added to the Business and Professions Code, to read:

205. (a) There is in the State Treasury the Professions and Vocations Fund. The fund shall consist of the following special funds:

(1) Accountancy Fund.

(2) California Architects Board Fund.

(3) Athletic Commission Fund.

(4) Barbering and Cosmetology Contingent Fund.

(5) Cemetery Fund.

(6) Contractors' License Fund.

(7) State Dentistry Fund.

(8) State Funeral Directors and Embalmers Fund.

(9) Guide Dogs for the Blind Fund.

(10) Home Furnishings and Thermal Insulation Fund.

(11) California Architects Board-Landscape Architects Fund.

(12) Contingent Fund of the Medical Board of California.

(13) Optometry Fund.

(14) Pharmacy Board Contingent Fund.

(15) Physical Therapy Fund.

(16) Private Investigator Fund.

(17) Professional Engineer's, Land Surveyor's, and Geologist's Fund.

(18) Consumer Affairs Fund.

(19) Behavioral Sciences Fund.

(20) Licensed Midwifery Fund.

(21) Court Reporters' Fund.

(22) Veterinary Medical Board Contingent Fund.

(23) Vocational Nursing and Psychiatric Technicians Fund.

(24) Electronic and Appliance Repair Fund.

(25) Dispensing Opticians Fund.
(26) Acupuncture Fund.

(27) Physician Assistant Fund.

(28) Board of Podiatric Medicine Fund.

(29) Psychology Fund.

(30) Respiratory Care Fund.

(31) Speech-Language Pathology and Audiology and Hearing Aid Dispensers Fund.

(32) Board of Registered Nursing Fund.

(33) Animal Health Technician Examining Committee Fund.

(34) State Dental Hygiene Fund.

(35) State Dental Assistant Fund.

(36) Structural Pest Control Fund.

(37) Structural Pest Control Eradication and Enforcement Fund.

(38) Structural Pest Control Research Fund.

(b) For accounting and recordkeeping purposes, the Professions and Vocations Fund shall be deemed to be a single special fund, and each of the several special funds therein shall constitute and be deemed to be a separate account in the Professions and Vocations Fund. Each account or fund shall be available for expenditure only for the purposes as are now or may hereafter be provided by law.

c) This section shall become operative on July 1, 2016.

SEC. 2.2. Section 205 is added to the Business and Professions Code, to read:

205. (a) There is in the State Treasury the Professions and Vocations Fund. The fund shall consist of the following special funds:

(1) Accountancy Fund.

(2) California Architects Board Fund.

(3) Athletic Commission Fund.

(4) Barbering and Cosmetology Contingent Fund.

(5) Cemetery and Funeral Fund.

(6) Contractors' License Fund.

(7) State Dentistry Fund.


(9) Home Furnishings and Thermal Insulation Fund.

(10) California Architects Board-Landscape Architects Fund.

(11) Contingent Fund of the Medical Board of California.

(12) Optometry Fund.
(13) Pharmacy Board Contingent Fund.
(14) Physical Therapy Fund.
(15) Private Investigator Fund.
(16) Professional Engineer's and Land Surveyor's Fund.
(17) Consumer Affairs Fund.
(18) Behavioral Sciences Fund.
(19) Licensed Midwifery Fund.
(20) Court Reporters' Fund.
(21) Veterinary Medical Board Contingent Fund.
(22) Vocational Nursing and Psychiatric Technicians Fund.
(23) Electronic and Appliance Repair Fund.
(24) Geology and Geophysics Account of the Professional Engineer's and Land Surveyor's Fund.
(25) Dispensing Opticians Fund.
(26) Acupuncture Fund.
(27) Physician Assistant Fund.
(28) Board of Podiatric Medicine Fund.
(29) Psychology Fund.
(30) Respiratory Care Fund.
(31) Speech-Language Pathology and Audiology and Hearing Aid Dispensers Fund.
(32) Board of Registered Nursing Fund.
(33) Animal Health Technician Examining Committee Fund.
(34) State Dental Hygiene Fund.
(35) State Dental Assistant Fund.
(36) Structural Pest Control Fund.
(37) Structural Pest Control Eradication and Enforcement Fund.
(38) Structural Pest Control Research Fund.

(b) For accounting and recordkeeping purposes, the Professions and Vocations Fund shall be deemed to be a single special fund, and each of the several special funds therein shall constitute and be deemed to be a separate account in the Professions and Vocations Fund. Each account or fund shall be available for expenditure only for the purposes as are now or may hereafter be provided by law.

(c) This section shall become operative on July 1, 2016.

SEC. 2.3. Section 205 is added to the Business and Professions Code, to read:
There is in the State Treasury the Professions and Vocations Fund. The fund shall consist of the following special funds:

1. Accountancy Fund.
2. California Architects Board Fund.
3. Athletic Commission Fund.
5. Cemetery and Funeral Fund.
6. Contractors' License Fund.
7. State Dentistry Fund.
11. Contingent Fund of the Medical Board of California.
12. Optometry Fund.
13. Pharmacy Board Contingent Fund.
15. Private Investigator Fund.
16. Professional Engineer's, Land Surveyor's, and Geologist's Fund.
17. Consumer Affairs Fund.
20. Court Reporters' Fund.
21. Veterinary Medical Board Contingent Fund.
22. Vocational Nursing and Psychiatric Technicians Fund.
23. Electronic and Appliance Repair Fund.
24. Dispensing Opticians Fund.
27. Board of Podiatric Medicine Fund.
28. Psychology Fund.
29. Respiratory Care Fund.
30. Speech-Language Pathology and Audiology and Hearing Aid Dispensers Fund.
(31) Board of Registered Nursing Fund.

(32) Animal Health Technician Examining Committee Fund.

(33) State Dental Hygiene Fund.

(34) State Dental Assistant Fund.

(35) Structural Pest Control Fund.

(36) Structural Pest Control Eradication and Enforcement Fund.

(37) Structural Pest Control Research Fund.

(b) For accounting and recordkeeping purposes, the Professions and Vocations Fund shall be deemed to be a single special fund, and each of the several special funds therein shall constitute and be deemed to be a separate account in the Professions and Vocations Fund. Each account or fund shall be available for expenditure only for the purposes as are now or may hereafter be provided by law.

(c) This section shall become operative on July 1, 2016.

SEC. 3. Section 726 of the Business and Professions Code is amended to read:

726. (a) The commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer constitutes unprofessional conduct and grounds for disciplinary action for any person licensed under this division or under any initiative act referred to in this division.

(b) This section shall not apply to consensual sexual contact between a licensee and his or her spouse or person in an equivalent domestic relationship when that licensee provides medical treatment, other than psychotherapeutic treatment, to his or her spouse or person in an equivalent domestic relationship.

SEC. 4. Section 1601.1 of the Business and Professions Code is amended to read:

1601.1. (a) There shall be in the Department of Consumer Affairs the Dental Board of California in which the administration of this chapter is vested. The board shall consist of eight practicing dentists, one registered dental hygienist, one registered dental assistant, and five public members. Of the eight practicing dentists, one shall be a member of a faculty of any California dental college, and one shall be a dentist practicing in a nonprofit community clinic. The appointing powers, described in Section 1603, may appoint to the board a person who was a member of the prior board. The board shall be organized into standing committees dealing with examinations, enforcement, and other subjects as the board deems appropriate.

(b) For purposes of this chapter, any reference in this chapter to the Board of Dental Examiners shall be deemed to refer to the Dental Board of California.

(c) The board shall have all authority previously vested in the existing board under this chapter. The board may enforce all disciplinary actions undertaken by the previous board.

(d) This section shall remain in effect only until January 1, 2020, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2020, deletes or extends that date. Notwithstanding any other law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature.

SEC. 5. Section 1616.5 of the Business and Professions Code is amended to read:

1616.5. (a) The board, by and with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter.
(b) This section shall remain in effect only until January 1, 2020, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2020, deletes or extends that date.

SEC. 6. Section 1632 of the Business and Professions Code is amended to read:

1632. (a) The board shall require each applicant to successfully complete the Part I and Part II written examinations of the National Board Dental Examination of the Joint Commission on National Dental Examinations.

(b) The board shall require each applicant to successfully complete an examination in California law and ethics developed and administered by the board. The board shall provide a separate application for this examination. The board shall ensure that the law and ethics examination reflects current law and regulations, and ensure that the examinations are randomized. Applicants shall submit this application and required fee to the board in order to take this examination. In addition to the aforementioned application, the only other requirement for taking this examination shall be certification from the dean of the qualifying dental school attended by the applicant that the applicant has graduated, or will graduate, or is expected to graduate. Applicants who submit completed applications and certification from the dean at least 15 days prior to a scheduled examination shall be scheduled to take the examination. Successful results of the examination shall, as established by board regulation, remain valid for two years from the date that the applicant is notified of having passed the examination.

(c) Except as otherwise provided in Section 1632.5, the board shall require each applicant to have taken and received a passing score on one of the following:

(1) A portfolio examination of the applicant's competence to enter the practice of dentistry. This examination shall be conducted while the applicant is enrolled in a dental school program at a board-approved school located in California. This examination shall utilize uniform standards of clinical experiences and competencies, as approved by the board pursuant to Section 1632.1. The applicant shall pass a final assessment of the submitted portfolio at the end of his or her dental school program. Before any portfolio assessment may be submitted to the board, the applicant shall remit the required fee to the board to be deposited into the State Dentistry Fund, and a letter of good standing signed by the dean of his or her dental school or his or her delegate stating that the applicant has graduated or will graduate with no pending ethical issues.

(A) The portfolio examination shall not be conducted until the board adopts regulations to carry out this paragraph. The board shall post notice on its Internet Web site when these regulations have been adopted.

(B) The board shall also provide written notice to the Legislature and the Legislative Counsel when these regulations have been adopted.

(2) A clinical and written examination administered by the Western Regional Examining Board, which board shall determine the passing score for that examination.

(d) Notwithstanding subdivision (b) of Section 1628, the board is authorized to do either of the following:

(1) Approve an application for examination from, and to examine an applicant who is enrolled in, but has not yet graduated from, a reputable dental school approved by the board.

(2) Accept the results of an examination described in paragraph (2) of subdivision (c) submitted by an applicant who was enrolled in, but had not graduated from, a reputable dental school approved by the board at the time the examination was administered.

In either case, the board shall require the dean of that school or his or her delegate to furnish satisfactory proof that the applicant will graduate within one year of the date the examination was administered or as provided in paragraph (1) of subdivision (c).
SEC. 7. Section 1638 of the Business and Professions Code is amended to read:

1638. (a) For purposes of this article, "oral and maxillofacial surgery" means the diagnosis and surgical and adjunctive treatment of diseases, injuries, and defects which involve both functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

(b) Any person licensed under the Medical Practice Act (Chapter 5 (commencing with Section 2000)) as a physician and surgeon who possesses, or possessed, a license to practice dentistry in another state, but is not licensed to practice dentistry under this chapter may apply to the board on a form prescribed by the board for an oral and maxillofacial surgery permit.

(c) The board may issue an oral and maxillofacial surgery permit to an applicant who has furnished evidence satisfactory to the board that he or she is currently certified or eligible for certification in oral and maxillofacial surgery by a specialty board recognized by the Commission on Accreditation of the American Dental Association and holds a current license in good standing to practice medicine in the state.

(d) An application shall be accompanied by an application fee required by the board and two classifiable sets of fingerprints on forms provided by the board.

SEC. 8. Section 1638.1 of the Business and Professions Code is amended to read:

1638.1. (a) (1) A person licensed pursuant to Section 1634 who wishes to perform elective facial cosmetic surgery shall first apply for and receive a permit to perform elective facial cosmetic surgery from the board.

(2) A permit issued pursuant to this section shall be valid for a period of two years and must be renewed by the permitholder at the time his or her license is renewed. Every six years, prior to renewal of the permitholder's license and permit, the permitholder shall submit evidence acceptable to the credentialing committee that he or she has maintained continued competence to perform the procedures authorized by the permit. The credentialing committee may limit a permit consistent with paragraph (1) of subdivision (e) if it is not satisfied that the permitholder has established continued competence.

(b) The board may adopt regulations for the issuance of the permit that it deems necessary to protect the health, safety, and welfare of the public.

(c) A licensee may obtain a permit to perform elective facial cosmetic surgery by furnishing all of the following information on an application form approved by the board:

(1) Proof of successful completion of an oral and maxillofacial surgery residency program accredited by the Commission on Dental Accreditation of the American Dental Association.

(2) Proof that the applicant has satisfied the criteria specified in either subparagraph (A) or (B):

(A) (i) Is certified, or is a candidate for certification, by the American Board of Oral and Maxillofacial Surgery.

(ii) Submits to the board a letter from the program director of the accredited residency program, or from the director of a postresidency fellowship program accredited by the Commission on Dental Accreditation of the American Dental Association, stating that the licensee has the education, training, and competence necessary to perform the surgical procedures that the licensee has notified the board he or she intends to perform.

(iii) Submits documentation to the board of at least 10 operative reports from residency training or proctored procedures that are representative of procedures that the licensee intends to perform from both of the following categories:

(I) Cosmetic contouring of the osteocartilaginous facial structure, which may include, but is not limited to, rhinoplasty and otoplasty.
(II) Cosmetic soft tissue contouring or rejuvenation, which may include, but is not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation.

(iv) Submits documentation to the board showing the surgical privileges the applicant possesses at any licensed general acute care hospital and any licensed outpatient surgical facility in this state.

(B) (i) Has been granted privileges by the medical staff at a licensed general acute care hospital to perform the surgical procedures set forth in paragraph (A) at that hospital.

(ii) Submits to the board the documentation described in clause (iii) of subparagraph (A).

(3) Proof that the applicant is on active status on the staff of a general acute care hospital and maintains the necessary privileges based on the bylaws of the hospital to maintain that status.

(d) The application shall be accompanied by an application fee required by the board for an initial permit. The fee to renew a permit shall not exceed the maximum amount prescribed in Section 1724.

(e) (1) The board shall appoint a credentialing committee to review the qualifications of each applicant for a permit. Upon completion of the review of an applicant, the committee shall make a recommendation to the board on whether to issue or not issue a permit to the applicant. The permit may be unqualified, entitling the permitholder to perform any facial cosmetic surgical procedure authorized by this section, or it may contain limitations if the credentialing committee is not satisfied that the applicant has the training or competence to perform certain classes of procedures, or if the applicant has not requested to be permitted for all procedures authorized by this section.

(2) The credentialing committee shall be comprised of five members, as follows:

(A) A physician and surgeon with a specialty in plastic and reconstructive surgery who maintains active status on the staff of a licensed general acute care hospital in this state.

(B) A physician and surgeon with a specialty in otolaryngology who maintains active status on the staff of a licensed general acute care hospital in this state.

(C) Three oral and maxillofacial surgeons licensed by the board who are board certified by the American Board of Oral and Maxillofacial Surgeons, and who maintain active status on the staff of a licensed general acute care hospital in this state, at least one of whom shall be licensed as a physician and surgeon in this state. Two years after the effective date of this section, any oral and maxillofacial surgeon appointed to the committee who is not licensed as a physician and surgeon shall hold a permit pursuant to this section.

(3) The board shall solicit from the following organizations input and recommendations regarding members to be appointed to the credentialing committee:

(A) The Medical Board of California.

(B) The California Dental Association.

(C) The California Association of Oral and Maxillofacial Surgeons.

(D) The California Medical Association.

(E) The California Society of Plastic Surgeons.

(F) Any other source that the board deems appropriate.

(4) The credentialing committee shall meet at a time and place directed by the board to evaluate applicants for permits. A quorum of three members shall be required for the committee to consider applicants and make recommendations to the board.
(f) A licensee may not perform any elective, facial cosmetic surgical procedure except at
a general acute care hospital, a licensed outpatient surgical facility, or an outpatient
surgical facility accredited by the Joint Commission on Accreditation of Healthcare
Organizations (JCAHO), the American Association for Ambulatory Health Care (AAAHC), the
Medicare program, or an accreditation agency approved by the Medical Board of California
pursuant to subdivision (g) of Section 1248.1 of the Health and Safety Code.

(g) For purposes of this section, the following terms shall have the following meanings:

(1) "Elective cosmetic surgery" means any procedure defined as cosmetic surgery in
subdivision (d) of Section 1367.63 of the Health and Safety Code, and excludes any procedure
that constitutes reconstructive surgery, as defined in subdivision (c) of Section 1367.63

(2) "Facial" means those regions of the human body described in Section 1625 and in any
regulations adopted pursuant to that section by the board.

(h) A holder of a permit issued pursuant to this section shall not perform elective facial
cosmetic surgical procedures unless he or she has malpractice insurance or other financial
security protection that would satisfy the requirements of Section 2216.2 and any
regulations adopted thereunder.

(i) A holder of a permit shall comply with the requirements of subparagraph (D) of paragraph
(2) of subdivision (a) of Section 1248.15 of the Health and Safety Code, and the reporting
requirements specified in Section 2240, with respect to any surgical procedure authorized
by this section, in the same manner as a physician and surgeon.

(j) Any violation of this section constitutes unprofessional conduct and is grounds for
the revocation or suspension of the person's permit, license, or both, or the person may be
reprimanded or placed on probation. Proceedings initiated by the board under this section
shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part
1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers
granted therein.

(k) On or before January 1, 2009, and every four years thereafter, the board shall report
to the Joint Committee on Boards, Commissions and Consumer Protection on all of the
following:

(1) The number of persons licensed pursuant to Section 1634 who apply to receive a permit
to perform elective facial cosmetic surgery from the board pursuant to subdivision (a).

(2) The recommendations of the credentialing committee to the board.

(3) The board's action on recommendations received by the credentialing committee.

(4) The number of persons receiving a permit from the board to perform elective facial
cosmetic surgery.

(5) The number of complaints filed by or on behalf of patients who have received elective
facial cosmetic surgery by persons who have received a permit from the board to perform
elective facial cosmetic surgery.

(6) Action taken by the board resulting from complaints filed by or on behalf of patients
who have received elective facial cosmetic surgery by persons who have received a permit
from the board to perform elective facial cosmetic surgery.

SEC. 9. Section 1638.3 of the Business and Professions Code is amended to read:

1638.3. (a) The fee to renew an oral and maxillofacial surgery permit shall be the amount
prescribed in Section 1724.

(b) Every provision of this chapter applicable to a person licensed to practice dentistry
shall apply to a person to whom a special permit is issued under this article.

SEC. 10. Section 1646.6 of the Business and Professions Code is amended to read:

1646.6. (a) The application fee for a permit or renewal under this article shall not exceed the amount prescribed in Section 1724.

(b) The fee for an onsite inspection shall not exceed the amount prescribed in Section 1724.

(c) It is the intent of the Legislature that fees established pursuant to this section be equivalent to administration and enforcement costs incurred by the board in carrying out this article.

(d) At the discretion of the board, the fee for onsite inspection may be collected and retained by a contractor engaged pursuant to subdivision (b) of Section 1646.4.

SEC. 11. Section 1647.8 of the Business and Professions Code is amended to read:

1647.8. (a) The application fee for a permit or renewal under this article shall not exceed the amount prescribed in Section 1724.

(b) The fee for an onsite inspection shall not exceed the amount prescribed in Section 1724.

(c) It is the intent of the Legislature that the board hire sufficient staff to administer the program and that the fees established pursuant to this section be equivalent to administration and enforcement costs incurred by the board in carrying out this article.

SEC. 12. Section 1650.1 is added to the Business and Professions Code, to read:

1650.1. (a) Every applicant and licensee who has an electronic mail address shall report to the board that electronic mail address no later than July 1, 2016. The electronic mail address shall be considered confidential and not subject to public disclosure.

(b) The board shall annually send an electronic notice to each applicant and licensee that requests confirmation from the applicant or licensee that his or her electronic mail address is current.

SEC. 13. Section 1724 of the Business and Professions Code is amended to read:

1724. The amount of charges and fees for dentists licensed pursuant to this chapter shall be established by the board as is necessary for the purpose of carrying out the responsibilities required by this chapter as it relates to dentists, subject to the following limitations:

(a) The fee for an application for licensure qualifying pursuant to paragraph (1) of subdivision (c) of Section 1632 shall not exceed one thousand five hundred dollars ($1,500). The fee for an application for licensure qualifying pursuant to paragraph (2) of subdivision (c) of Section 1632 shall not exceed one thousand dollars ($1,000).

(b) The fee for an application for licensure qualifying pursuant to Section 1634.1 shall not exceed one thousand dollars ($1,000).

(c) The fee for an application for licensure qualifying pursuant to Section 1635.5 shall not exceed one thousand dollars ($1,000).

(d) The fee for an initial license and for the renewal of a license is five hundred twenty-five dollars ($525). On and after January 1, 2016, the fee for an initial license shall not exceed six hundred fifty dollars ($650), and the fee for the renewal of a license shall not exceed six hundred fifty dollars ($650). On and after January 1, 2018, the fee for an initial license shall not exceed eight hundred dollars ($800), and the fee for the renewal of a license shall not exceed eight hundred dollars ($800).

(e) The fee for an application for a special permit shall not exceed one thousand dollars
($1,000), and the renewal fee for a special permit shall not exceed six hundred dollars ($600).

(f) The delinquency fee shall be 50 percent of the renewal fee for such a license or permit in effect on the date of the renewal of the license or permit.

(g) The penalty for late registration of change of place of practice shall not exceed seventy-five dollars ($75).

(h) The fee for an application for an additional office permit shall not exceed seven hundred fifty dollars ($750), and the fee for the renewal of an additional office permit shall not exceed three hundred seventy-five dollars ($375).

(i) The fee for issuance of a replacement pocket license, replacement wall certificate, or replacement engraved certificate shall not exceed one hundred twenty-five dollars ($125).

(j) The fee for a provider of continuing education shall not exceed five hundred dollars ($500) per year.

(k) The fee for application for a referral service permit and for renewal of that permit shall not exceed twenty-five dollars ($25).

(l) The fee for application for an extramural facility permit and for the renewal of a permit shall not exceed twenty-five dollars ($25).

(m) The fee for an application for an elective facial cosmetic surgery permit shall not exceed four thousand dollars ($4,000), and the fee for the renewal of an elective facial cosmetic surgery permit shall not exceed eight hundred dollars ($800).

(n) The fee for an application for an oral and maxillofacial surgery permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of an oral and maxillofacial surgery permit shall not exceed one thousand two hundred dollars ($1,200).

(o) The fee for an application for a general anesthesia permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of a general anesthesia permit shall not exceed six hundred dollars ($600).

(p) The fee for an onsite inspection and evaluation related to a general anesthesia or conscious sedation permit shall not exceed four thousand five hundred dollars ($4,500).

(q) The fee for an application for a conscious sedation permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of a conscious sedation permit shall not exceed six hundred dollars ($600).

(r) The fee for an application for an oral conscious sedation permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of an oral conscious sedation permit shall not exceed six hundred dollars ($600).

(s) The fee for a certification of licensure shall not exceed one hundred twenty-five dollars ($125).

(t) The fee for an application for the law and ethics examination shall not exceed two hundred fifty dollars ($250).

The board shall report to the appropriate fiscal committees of each house of the Legislature whenever the board increases any fee pursuant to this section and shall specify the rationale and justification for that increase.

SEC. 13.5. Section 1724 of the Business and Professions Code is amended to read:

1724. The amount of charges and fees for dentists licensed pursuant to this chapter shall be established by the board as is necessary for the purpose of carrying out the responsibilities required by this chapter as it relates to dentists, subject to the following
limitations:

(a) The fee for an application for licensure qualifying pursuant to paragraph (1) of subdivision (c) of Section 1632 shall not exceed one thousand five hundred dollars ($1,500). The fee for an application for licensure qualifying pursuant to paragraph (2) of subdivision (c) of Section 1632 shall not exceed one thousand dollars ($1,000).

(b) The fee for an application for licensure qualifying pursuant to Section 1634.1 shall not exceed one thousand dollars ($1,000).

(c) The fee for an application for licensure qualifying pursuant to Section 1635.5 shall not exceed one thousand dollars ($1,000).

(d) The fee for an initial license and for the renewal of a license is five hundred twenty-five dollars ($525). On and after January 1, 2016, the fee for an initial license shall not exceed six hundred fifty dollars ($650), and the fee for the renewal of a license shall not exceed six hundred fifty dollars ($650). On and after January 1, 2018, the fee for an initial license shall not exceed eight hundred dollars ($800), and the fee for the renewal of a license shall not exceed eight hundred dollars ($800). Commencing July 1, 2017, the fee for an initial license shall be prorated on a monthly basis.

(e) The fee for an application for a special permit shall not exceed one thousand dollars ($1,000), and the renewal fee for a special permit shall not exceed six hundred dollars ($600).

(f) The delinquency fee shall be 50 percent of the renewal fee for such a license or permit in effect on the date of the renewal of the license or permit.

(g) The penalty for late registration of change of place of practice shall not exceed seventy-five dollars ($75).

(h) The fee for an application for an additional office permit shall not exceed seven hundred fifty dollars ($750), and the fee for the renewal of an additional office permit shall not exceed three hundred seventy-five dollars ($375).

(i) The fee for issuance of a replacement pocket license, replacement wall certificate, or replacement engraved certificate shall not exceed one hundred twenty-five dollars ($125).

(j) The fee for a provider of continuing education shall not exceed five hundred dollars ($500) per year.

(k) The fee for application for a referral service permit and for renewal of that permit shall not exceed twenty-five dollars ($25).

(l) The fee for application for an extramural facility permit and for the renewal of a permit shall not exceed twenty-five dollars ($25).

(m) The fee for an application for an elective facial cosmetic surgery permit shall not exceed four thousand dollars ($4,000), and the fee for the renewal of an elective facial cosmetic surgery permit shall not exceed eight hundred dollars ($800).

(n) The fee for an application for an oral and maxillofacial surgery permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of an oral and maxillofacial surgery permit shall not exceed one thousand two hundred dollars ($1,200).

(o) The fee for an application for a general anesthesia permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of a general anesthesia permit shall not exceed six hundred dollars ($600).

(p) The fee for an onsite inspection and evaluation related to a general anesthesia or conscious sedation permit shall not exceed four thousand five hundred dollars ($4,500).

(q) The fee for an application for a conscious sedation permit shall not exceed one thousand
dollars ($1,000), and the fee for the renewal of a conscious sedation permit shall not exceed six hundred dollars ($600).

(r) The fee for an application for an oral conscious sedation permit shall not exceed one thousand dollars ($1,000), and the fee for the renewal of an oral conscious sedation permit shall not exceed six hundred dollars ($600).

(s) The fee for a certification of licensure shall not exceed one hundred twenty-five dollars ($125).

(t) The fee for an application for the law and ethics examination shall not exceed two hundred fifty dollars ($250).

The board shall report to the appropriate fiscal committees of each house of the Legislature whenever the board increases any fee pursuant to this section and shall specify the rationale and justification for that increase.

SEC. 14. Section 1725 of the Business and Professions Code is amended to read:

1725. The amount of the fees prescribed by this chapter that relate to the licensing and permitting of dental assistants shall be established by regulation and subject to the following limitations:

(a) The application fee for an original license shall not exceed two hundred dollars ($200).

(b) The fee for examination for licensure as a registered dental assistant shall not exceed the actual cost of the practical examination.

(c) The fee for application and for the issuance of an orthodontic assistant permit or a dental sedation assistant permit shall not exceed two hundred dollars ($200).

(d) The fee for the written examination for an orthodontic assistant permit or a dental sedation assistant permit shall not exceed the actual cost of the examination.

(e) The fee for the written examination for a registered dental assistant shall not exceed the actual cost of the examination.

(f) The fee for the written examination in law and ethics for a registered dental assistant shall not exceed the actual cost of the examination.

(g) The fee for examination for licensure as a registered dental assistant in extended functions shall not exceed the actual cost of the examination.

(h) The fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.

(i) For third- and fourth-year dental students, the fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.

(j) The fee for examination for licensure as a registered dental hygienist in extended functions shall not exceed the actual cost of the examination.

(k) The board shall establish the fee at an amount not to exceed the actual cost for licensure as a registered dental hygienist in alternative practice.

(l) The biennial renewal fee for a registered dental assistant license, registered dental assistant in extended functions license, dental sedation assistant permit, or orthodontic assistant permit shall not exceed two hundred dollars ($200).

(m) The delinquency fee shall be 50 percent of the renewal fee for the license or permit in effect on the date of the renewal of the license or permit.

(n) The fee for issuance of a duplicate registration, license, permit, or certificate to
replace one that is lost or destroyed, or in the event of a name change, shall not exceed one hundred dollars ($100).

(o) The fee for each curriculum review and site evaluation for educational programs for registered dental assistants that are not accredited by a board-approved agency, or the Chancellor's office of the California Community Colleges shall not exceed seven thousand five hundred dollars ($7,500).

(p) The fee for review of each approval application or reevaluation for a course that is not accredited by a board-approved agency or the Chancellor's office of the California Community Colleges shall not exceed two thousand dollars ($2,000).

(q) Fees collected pursuant to this section shall be deposited in the State Dental Assistant Fund.

SEC. 15. Section 1742 of the Business and Professions Code is amended to read:

1742. (a) There is hereby created a Dental Assisting Council of the Dental Board of California, which shall consider all matters relating to dental assistants in this state, on its own initiative or upon the request of the board, and make appropriate recommendations to the board and the standing committees of the board, including, but not limited to, the following areas:

(1) Requirements for dental assistant examination, licensure, permitting, and renewal.

(2) Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.

(3) Allowable dental assistant duties, settings, and supervision levels.

(4) Appropriate standards of conduct and enforcement for dental assistants.

(5) Requirements regarding infection control.

(b) (1) The members of the council shall be 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, representing as broad a range of dental assisting experience and education as possible, who meet the requirements of paragraph (2).

(2) The board shall consider, in its appointments of the five registered dental assistant members, recommendations submitted by any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state. Two 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 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 of those 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.

(c) No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. 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.

(d) A vacancy occurring during a term shall be filled by appointment by the board for the unexpired term, according to the criteria applicable to the vacancy within 90 days after it occurs.

(e) Each member shall comply with conflict of interest requirements that apply to board members.
(f) The council shall meet in conjunction with other board committees, and at other times as deemed necessary.

(g) Each member shall serve for a term of four years, except that, of the initial appointments of the nonboard members, one of the members shall serve a term of one year, one member shall serve a term of two years, two members shall serve a term of three years, and one member shall serve a term of four years, as determined by the board. No member shall serve more than two full terms.

(h) Recommendations by the council pursuant to this section shall be approved, modified, or rejected by the board within 120 days of submission of the recommendation to the board. If the board rejects or significantly modifies the intent or scope of the recommendation, the council may request that the board provide its reasons in writing for rejecting or significantly modifying the recommendation, which shall be provided by the board within 30 days of the request.

(i) The council shall select a chair who shall establish the agendas of the council and shall serve as the council’s liaison to the board, including the reporting of the council's recommendations to the board.

SEC. 16. Section 1752.1 of the Business and Professions Code is amended to read:

1752.1. (a) The board may license as a registered dental assistant a person who files an application and submits written evidence, satisfactory to the board, of one of the following eligibility requirements:

(1) Graduation from an educational program in registered dental assisting approved by the board, and satisfactory performance on a written and practical examination administered by the board.

(2) For individuals applying prior to January 1, 2010, evidence of completion of satisfactory work experience of at least 12 months as a dental assistant in California or another state and satisfactory performance on a written and practical examination administered by the board.

(3) For individuals applying on or after January 1, 2010, evidence of completion of satisfactory work experience of at least 15 months as a dental assistant in California or another state and satisfactory performance on a written and practical examination administered by the board.

(b) For purposes of this section, "satisfactory work experience" means performance of the duties specified in Section 1750.1 in a competent manner as determined by the employing dentist, who shall certify to such satisfactory work experience in the application.

(c) The board shall give credit toward the work experience referred to in this section to persons who have graduated from a dental assisting program in a postsecondary institution approved by the Department of Education or in a secondary institution, regional occupational center, or regional occupational program, that are not, however, approved by the board pursuant to subdivision (a). The credit shall equal the total weeks spent in classroom training and internship on a week-for-week basis. The board, in cooperation with the Superintendent of Public Instruction, shall establish the minimum criteria for the curriculum of nonboard-approved programs. Additionally, the board shall notify those programs only if the program's curriculum does not meet established minimum criteria, as established for board-approved registered dental assistant programs, except any requirement that the program be given in a postsecondary institution. Graduates of programs not meeting established minimum criteria shall not qualify for satisfactory work experience as defined by this section.

(d) In addition to the requirements specified in subdivision (a), each applicant for registered dental assistant licensure on or after July 1, 2002, shall provide evidence of having successfully completed board-approved courses in radiation safety and coronal polishing as a condition of licensure. The length and content of the courses shall be governed
by applicable board regulations.

(e) In addition to the requirements specified in subdivisions (a) and (d), individuals applying for registered dental assistant licensure on or after January 1, 2010, shall demonstrate satisfactory performance on a written examination in law and ethics administered by the board and shall provide written evidence of successful completion within five years prior to application of all of the following:

(1) A board-approved course in the Dental Practice Act.

(2) A board-approved course in infection control.

(3) A course in basic life support offered by an instructor approved by the American Red Cross or the American Heart Association, or any other course approved by the board as equivalent.

(f) A registered dental assistant may apply for an orthodontic assistant permit or a dental sedation assistant permit, or both, by submitting written evidence of the following:

(1) Successful completion of a board-approved orthodontic assistant or dental sedation assistant course, as applicable.

(2) Passage of a written examination administered by the board that shall encompass the knowledge, skills, and abilities necessary to competently perform the duties of the particular permit.

(g) A registered dental assistant with permits in either orthodontic assisting or dental sedation assisting shall be referred to as an "RDA with orthodontic assistant permit," or "RDA with dental sedation assistant permit," as applicable. These terms shall be used for reference purposes only and do not create additional categories of licensure.

(h) Completion of the continuing education requirements established by the board pursuant to Section 1645 by a registered dental assistant who also holds a permit as an orthodontic assistant or dental sedation assistant shall fulfill the continuing education requirements for the permit or permits.

(i) The board shall, in consultation with the Office of Professional Examination Services, conduct a review to determine whether a practical examination is necessary to demonstrate competency of registered dental assistants, and if so, how this examination should be developed and administered. The board shall submit its review and determination to the appropriate policy committees of the Legislature on or before July 1, 2017.

(j) Notwithstanding any other law, if the review conducted by the Office of Professional Examination Services pursuant to subdivision (i) concludes that the practical examination is unnecessary or does not accurately measure the competency of registered dental assistants, the board may vote to suspend the practical examination. The suspension of the practical examination shall commence on the date the board votes to suspend the practical examination and shall remain suspended until July 1, 2017, at which date the practical examination shall be reinstated. If the board votes to suspend the practical examination, the board shall post a notice on its Internet Web site stating that the practical examination has been suspended, until July 1, 2017.

SEC. 17. Section 2841 of the Business and Professions Code is amended to read:

2841. (a) There is in the Department of Consumer Affairs a Board of Vocational Nursing and Psychiatric Technicians of the State of California, consisting of 11 members.

(b) Within the meaning of this chapter, "board," or "the board," refers to the Board of Vocational Nursing and Psychiatric Technicians of the State of California.

(c) This section shall remain in effect only until January 1, 2018, and as of that date is repealed. Notwithstanding any other law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature.
SEC. 18. Section 2847.1 is added to the Business and Professions Code, to read:

2847.1. (a) The board shall select an executive officer who shall perform duties as are delegated by the board and who shall be responsible to it for the accomplishment of those duties. The executive officer shall not be a member of the board.

(b) With the approval of the Director of Finance, the board shall fix the salary of the executive officer.

(c) The executive officer shall be entitled to traveling and other necessary expenses in the performance of his or her duties. He or she shall make a statement, certified before a duly authorized person, that the expenses have been actually incurred.

(d) This section shall remain in effect only until January 1, 2018, and as of that date is repealed.

SEC. 19. Section 2847.5 is added to the Business and Professions Code, to read:

2847.5. (a) (1) The director shall appoint an administrative and enforcement program monitor no later than March 1, 2016. The director may retain a person for this position by a personal services contract. In this connection, the Legislature finds, pursuant to Section 19130 of the Government Code, that this is a new state function.

(2) The director shall supervise the administrative and enforcement program monitor and may terminate or dismiss him or her from this position. If the monitor is terminated or dismissed, the director shall appoint a replacement monitor within two months.

(3) The monitoring duty shall be on a continuing basis for a period of no more than two years from the date of the initial administrative and enforcement program monitor’s appointment.

(b) (1) The administrative and enforcement program monitor shall monitor and evaluate the following:

(A) The board’s administrative process, with specific concentration on the management of staff, assistance of board members, and working relationship with the Legislature, including the following:

(i) Staff hiring and training procedures.

(ii) Oversight of staff work.

(iii) Evaluation of staff performance.

(iv) Training of board members.

(v) Dissemination of information to board members.

(vi) Assistance of board members in performing their duties.

(vii) Communication with legislators and legislative staff.

(viii) Representation of the board at legislative meetings and hearings.

(B) The board’s disciplinary system and procedures, with specific concentration on improving the overall efficiency and consistency of the enforcement program, including the following:

(i) The quality and consistency of complaint processing and investigation.

(ii) Consistency in the application of sanctions or discipline imposed on licensees.

(iii) The accurate and consistent implementation of the laws and rules affecting discipline,
including adherence to the "Complaint Prioritization Guidelines for Health Care Agencies" established by the Consumer Protection Enforcement Initiative of 2010.

(iv) Staff concerns regarding disciplinary matters or procedures.

(v) The appropriate use of licensed professionals to investigate complaints.

(vi) The board's cooperation with other governmental entities charged with enforcing related laws and regulations regarding vocational nurses and psychiatric technicians.

(2) The administrative and enforcement program monitor shall exercise no authority over the board's management or staff; however, the board and its staff shall cooperate with the monitor, and shall provide data, information, and files as requested by the monitor to perform all of his or her duties.

(3) The director shall assist the administrative and enforcement program monitor in the performance of his or her duties, and the monitor shall have the same investigative authority as the director.

(4) The director shall specify further duties of the administrative and program enforcement monitor.

(c) (1) The administrative and enforcement program monitor shall submit to the department, the board, and the Legislature an initial written report of his or her findings and conclusions no later than July 1, 2016, and subsequent written reports no later than November 1, 2016, and February 1, 2017, and shall be available to make oral reports to each entity if requested to do so. The monitor may also provide additional information to either the department or the Legislature at his or her discretion or at the request of either the department or the Legislature. The monitor shall make his or her reports available to the public or the media. The monitor shall make every effort to provide the board with an opportunity to reply to any facts, findings, issues, or conclusions in his or her reports with which the board may disagree.

(2) The administrative and enforcement program monitor shall issue a final report before January 1, 2018. The final report shall include final findings and conclusions on the topics addressed in the initial report submitted by the monitor pursuant to paragraph (1).

(d) The board shall pay for all of the costs associated with the employment of the administrative and enforcement program monitor.

(e) This section shall remain in effect only until March 1, 2018, and as of that date is repealed.

SEC. 20. Section 2858.5 is added to the Business and Professions Code, to read:

2858.5. (a) The department's internal audit unit shall review the board's financial needs, fee structure, budget, and expenditures, including the estimated costs of meeting staffing and other requirements to implement this chapter and Chapter 10 (commencing with Section 4500) of Division 2. The director shall provide to the Legislature a copy of the review, no later than October 1, 2016.

(b) This section shall remain in effect only until January 1, 2018, and as of that date is repealed.

SEC. 21. Section 2894 of the Business and Professions Code is amended to read:

2894. (a) All money in the Vocational Nursing and Psychiatric Technicians Fund shall be used to carry out the provisions of this chapter, including the promotion of nursing education in this state, and for the refund, in accordance with law, of license fees or other moneys paid into the Vocational Nursing and Psychiatric Technicians Fund under the provisions of this chapter.

(b) Claims against the Vocational Nursing and Psychiatric Technicians Fund shall be audited
by the Controller, and shall be paid by the Treasurer upon warrants drawn by the Controller.

(c) This section shall remain in effect only until July 1, 2016, and as of that date is repealed.

SEC. 22. Section 2894 is added to the Business and Professions Code, to read:

2894. (a) All money in the Vocational Nursing and Psychiatric Technicians Fund shall be used to carry out this chapter, including the promotion of nursing education in this state, and Chapter 10 (commencing with Section 4500), and for the refund, in accordance with law, of license fees or other moneys paid into the Vocational Nursing and Psychiatric Technicians Fund under the provisions of this chapter and Chapter 10 (commencing with Section 4500).

(b) Claims against the Vocational Nursing and Psychiatric Technicians Fund shall be audited by the Controller, and shall be paid by the Treasurer upon warrants drawn by the Controller.

(c) This section shall become operative on July 1, 2016.

SEC. 23. Section 4501 of the Business and Professions Code is amended to read:

4501. (a) "Board," as used in this chapter, means the Board of Vocational Nursing and Psychiatric Technicians of the State of California.

(b) This section shall remain in effect only until January 1, 2018, and as of that date is repealed.

SEC. 24. Section 4503 of the Business and Professions Code is amended to read:

4503. (a) The board shall administer and enforce this chapter.

(b) This section shall remain in effect only until January 1, 2018, and as of that date is repealed.

SEC. 25. Section 4547 of the Business and Professions Code is amended to read:

4547. (a) All expenses incurred in the operation of this chapter shall be paid out of the Vocational Nursing and Psychiatric Technicians Fund from the revenue received by the board under this chapter and deposited in the Vocational Nursing and Psychiatric Technicians Fund. No part of the expenses shall be charged against any funds which are derived from any functions of the board provided for in other chapters of this code.

(b) This section shall remain in effect only until July 1, 2016, and as of that date is repealed.

SEC. 26. Section 4547 is added to the Business and Professions Code, to read:

4547. (a) All expenses incurred in the operation of this chapter or Chapter 6.5 (commencing with Section 2840) shall be paid out of the Vocational Nursing and Psychiatric Technicians Fund from the revenue received by the board under this chapter or Chapter 6.5 (commencing with Section 2840) and deposited in the Vocational Nursing and Psychiatric Technicians Fund.

(b) This section shall become operative on July 1, 2016.

SEC. 27. (a) Section 2.1 of this bill incorporates changes to Section 205 of the Business and Professions Code proposed by both this bill and Assembly Bill 177. It shall only become operative if (1) both bills are enacted and become effective on or before January 1, 2016, (2) each bill amends Section 205 of the Business and Professions Code, and (3) Assembly Bill 180 is not enacted or as enacted does not amend that section, and (4) this bill is enacted after Assembly Bill 177, in which case Sections 2, 2.2, and 2.3 of this bill shall not become operative.

(b) Section 2.2 of this bill incorporates changes to Section 205 of the Business and Professions Code proposed by both this bill and Assembly Bill 180. It shall only become
operative if (1) both bills are enacted and become effective on or before January 1, 2016, (2) each bill amends Section 205 of the Business and Professions Code, (3) Assembly Bill 177 is not enacted or as enacted does not amend that section, and (4) this bill is enacted after Assembly Bill 180 in which case Sections 2, 2.1, and 2.3 of this bill shall not become operative.

(c) Section 2.3 of this bill incorporates changes to Section 205 of the Business and Professions Code proposed by this bill, Assembly Bill 177, and Assembly Bill 180. It shall only become operative if (1) all three bills are enacted and become effective on or before January 1, 2016, (2) all three bills amend Section 205 of the Business and Professions Code, and (3) this bill is enacted after Assembly Bill 177 and Assembly 180, in which case Sections 2, 2.1, and 2.2 of this bill shall not become operative.

SEC. 28. Section 13.5 of this bill incorporates amendments to Section 1724 of the Business and Professions Code proposed by both this bill and Assembly Bill 483. It shall only become operative if (1) both bills are enacted and become effective on or before January 1, 2016, (2) each bill amends Section 1724 of the Business and Professions Code, and (3) this bill is enacted after Assembly Bill 483, in which case Section 13 of this bill shall not become operative.

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MEMORANDUM

DATE | November 16, 2015

TO | Dental Board of California

FROM | Staff

SUBJECT | JNT 5: Presentation by the Department of Consumer Affairs (DCA) Office of Professional Examination Services (OPES) Regarding Occupational Analyses, Examination Development, and Recommendations for Dental Examinations.

In 1999 the Legislature enacted Business & Professions Code Section 139 requiring the Department of Consumer Affairs to develop a policy for examination development and validation, and occupational analysis. The Legislature believed that occupational analyses and examination validation studies are fundamental components of licensure programs.

Heidi Lincer-Hill, Ph.D - Chief of the Office of Professional Examination Services will give a power point presentation about the requirements for compliance with Section 139; which will include an overview of occupational analyses and examination development. Additionally, she will update the Board and Council on the status of the occupational analysis that currently is being conducted for registered dental assistants (RDA); she will discuss the RDA practical examination; and will have recommendations for the Board’s other examinations.
Purpose

An occupational analysis (or job analysis) defines a profession in terms of the actual tasks that new licensees must be able to perform safely and competently at the time of licensure. In order to develop a licensing examination that is fair, job-related, and legally defensible, it must be based solidly upon what licensees actually do on the job. The occupational analysis should be reviewed routinely every five to seven years to verify that it accurately describes current practice.

Process

Typically, the process begins by selecting and interviewing a sample of licensees who accurately represent the geographic, ethnic, gender, experience, and practice specialty mix of the profession. During the interview, they identify the tasks that they perform within major categories of their profession and the knowledge required to perform those tasks. A committee of subject matter experts meets to finalize the task and knowledge statements, and develop a questionnaire. The questionnaire is sent to a representative sample of licensed practitioners. The data are analyzed, and the results are used to update the description of practice and/or develop a content outline.

Content Outline

The content outline specifies the tasks and knowledge that a newly licensed practitioner is expected to master by the time of licensure, and identifies the relative weight or percentage of each major subject area to be assessed in an examination. The content outline is used to develop questions for and validate new examinations.

Content Validation Strategy

In order for an examination to be valid, it must be empirically linked to the content outline of a recent occupational analysis. The Office of Professional Examination Services recommends that occupational analyses be validated no less than every five to seven years.

Legal Standards and Guidelines

Purpose

The purpose of licensing examinations is to protect consumers by verifying that new licensees possess the minimally acceptable knowledge and experience necessary to perform tasks on the job safely and competently.

Process

A valid occupational analysis (OA) and content outline is required to begin the examination development process. The content outline provides the specifications for the examination.

Examination development is a group process, conducted in structured workshops comprised of subject matter experts (SMEs). Each SME provides a different perspective of the profession that would not otherwise be objectively considered by individuals working alone. To ensure that the description of the profession represents the job tasks of practitioners entering the profession, each workshop always includes a number of newly licensed practitioners. While there may be several workshops to develop an examination, it is recommended that each be scheduled for a minimum of two days to obtain optimum results.

The types of workshops required may include such tasks as re-linking old items (questions) to a new OA content outline; writing new items linked to the outline; reviewing and revising new or poorly functioning items; constructing a new examination version; and determining a passing score.

During each workshop SMEs are trained in the technical, professional, and legal standards that serve as specific guidelines for the development of examinations. For multiple-choice examinations, incorrect options (distracters) in multiple-choice items should be plausible so that an unprepared candidate will seriously consider them with the correct answer (key). For performance examinations, the activities should be sufficiently complex that an examiner can thoroughly assess a candidate’s competence to perform actual job-related tasks.

Validation

In order for an examination to be valid, it must be empirically linked to the content outline of a recent occupational analysis. See Informational Series No. 1, “Occupational Analysis” for more information.
Purpose

The Office of Professional Examination Services (OPES) recommends a criterion-referenced passing score, which applies standards for competent practice to all candidates regardless of the form of the examination administered. A criterion-referenced passing score increases the likelihood that candidates who pass the licensure examination have sufficient knowledge and experience to practice safely and competently.

Process

OPES follows a criterion-referenced methodology called the “modified Angoff technique” for determining licensure examination passing scores. Standard setting is a group process. The group is composed of licensed practitioners representing all aspects of practice or profession and a test development specialist. The process should always include a number of newly licensed practitioners to ensure participation from entry-level licensees.

Criterion-referenced standard setting begins with the establishment of a minimally acceptable level of competence for safe practice that candidates must possess in order to pass the examination. The group develops common definitions of different levels of candidate performance by identifying critical work behaviors that contrast the highly competent, the minimally competent, and the incompetent candidate.

Advantages

Because licensing examinations are known to vary in difficulty from one examination form to another, a fixed passing score or percentage such as 70% does not represent the minimally acceptable competence for all administrations of an examination. Therefore, arbitrary passing scores are not considered legally defensible.

By applying a criterion-referenced methodology, a passing score is lowered for an examination containing a large number of difficult items (questions) and raised for an examination containing a small number of difficult items. Candidates who take a more difficult test would be placed at a disadvantage unless a criterion-referenced passing score is established. Thus, the passing score provides safeguards to both the candidate and the consumer affected by the particular profession.

Another advantage of using criterion-referenced methodology is that the passing score is independent of the performance of other candidates who take the examination at the same time. The passing score is not based on performance with respect to the group. Rather, the passing score is based upon the difficulty of the items within the examination.
In licensure examination development work, expert consultants are referred to as subject matter experts (SMEs). Their participation is essential to the development of licensure exams, and ensures that the exams accurately assess whether candidates possess the minimally acceptable knowledge, skills, and abilities necessary to perform tasks on the job safely and competently.

The selection of expert consultants/SMEs by boards, bureaus, and committees of the Department of Consumer Affairs (DCA) critically affects the quality and defensibility of their licensure exams, and is based on the following minimum criteria:

• Reflect the profession in specialty, practice setting, geographic location, ethnicity, and gender.
• Represent the current pool of practitioners.
• Possess current skills and a valid license in good standing.
• Articulate specialized technical knowledge related to a profession.

In addition, several of the six to ten expert consultants/SMEs in each workshop should be licensed five years or less to ensure an entry-level perspective is represented.

Due to potential conflict of interest, undue influence, and/or security considerations, board members, committee members, and instructors shall not serve as expert consultants/SMEs for, nor participate in, any aspect of licensure exam development or administration, pursuant to DCA Policy OPES 11-01.

OPES exam development workshops bring together the professional knowledge and experience of expert consultants/SMEs, and the expertise of OPES exam development specialists. Separate workshops are conducted for:

- **Occupational analysis**: Identifying critical job tasks and required knowledge.
- **Item linking**: Linking old exam items (questions) to an updated exam outline.
- **Item writing**: Creating new items.
- **Item review**: Revising new or poorly functioning items.
- **Exam construction**: Selecting items to construct a new exam version.
- **Setting a passing score**: Determining the passing score of an exam.

OPES exam development specialists begin each workshop by training expert consultants/SMEs in the required concepts, standards, and techniques. The exam development specialist serves as a facilitator, guide, and coach. Workshops are typically conducted on two consecutive eight-hour days at the OPES offices in Sacramento.

(Continued on back)
Security

OPES has implemented a variety of controls to ensure the integrity, security and appropriate level of confidentiality of licensure exam programs. These controls vary according to the sensitivity of the information, and will include restricting and/or prohibiting certain items, such as electronic devices, when conducting exam-related workshops.

Expert consultants/SMEs are required to provide valid identification, allow for personal belongings to be secured during workshops, and sign one or more agreements accepting responsibility for maintaining strict confidentiality of licensing exam material and information to which they have access.

Any person who fails to comply with OPES’ security requirements will not be allowed to participate in licensure exam workshops. In addition, any person who subverts or attempts to subvert any licensing exam will face serious consequences which may include loss of licensure and/or criminal charges.

Authority

California Business and Professions Code section 123
RETURN TO OPEN SESSION
MEMORANDUM

<table>
<thead>
<tr>
<th>DATE</th>
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<tbody>
<tr>
<td>TO</td>
<td>Dental Board of California</td>
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<tr>
<td>FROM</td>
<td>Linda Byers, Executive Assistant</td>
</tr>
<tr>
<td>SUBJECT</td>
<td><strong>Agenda Item 5:</strong> Presentation of the Controlled Substance Review and Evaluation System (CURES) by the Department of Justice (DOJ)</td>
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Ms. Tina Farales will give a presentation about the CURES 2.0 prescriber registration process and use of the system.
DENTAL ASSISTING COUNCIL
NOTICE OF DENTAL ASSISTING COUNCIL MEETING AGENDA

Thursday, December 3, 2015

Upon Conclusion of the Joint Meeting of the
Dental Board and the Dental Assisting Council

Marriott LAX
5855 West Century Blvd.
Los Angeles, CA 90045
949-892-2130 (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. 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 May 14, 2015 Dental Assisting Council Meeting Minutes.

4. 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)).

5. 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)).

6. Future Agenda Items. 
   Stakeholders are encouraged to propose items for possible consideration by the 
   Council at a future meeting.

7. Adjournment
DENTAL ASSISTING COUNCIL MEETING MINUTES
Thursday, May 14, 2015
Crowne Plaza San Francisco Airport
1177 Airport Blvd., Burlingame, CA 94010
DRAFT

Members Present
Chair - Judith Forsythe, RDA
Pamela Davis-Washington, RDA
Teresa Lua, RDAEF
Tamara McNealy, RDA
Emma Ramos, RDA
Bruce Whitcher, DDS

Members Absent
Vice Chair - Anne Contreras, RDA

1. Call to Order/Roll Call/Establishment of Quorum
   Judith Forsythe, Chair of the Dental Assisting Council called the meeting to order
   at 4:20 p.m. Roll was called and a quorum established.

2. Approval of the February 26, 2015 Dental Assisting Council Meeting Minutes
   The minutes were tabled for further review.

3. Dental Assisting Program Licensure and Permit Statistics
   Jana Adams, RDA Examination Coordinator, gave an overview of the statistics
   provided.

4. Update Regarding Dental Board Sunset Review
   Sarah Wallace, Assistant Executive Officer, gave an overview of the information
   provided.

5. Discussion and Possible Action Regarding Students of Registered Dental
   Assisting Educational Programs that Close and Whether Other Board-
   Approved Registered Dental Assisting Educational Programs May Integrate
   those Students into their Curriculum
   Ms. Wallace gave an overview of the information provided. Dr. Lori Gagliardi,
   CADAT, suggested a “Frequently Asked Questions” section on the Dental
   Assisting web page, and a newsletter to educators.

6. Discussion and Possible Action Regarding the Side-by-Side Comparison of
   the Commission on Dental Accreditation (CODA) Accreditation Standards for
   Dental Assisting Educational Programs and the California Code of
   Regulations, Title 16, Division 10, Chapter 3, Article 2, Regarding Dental
   Assisting Educational Programs
Ms. Wallace gave an overview of the information provided. Tamara McNealy gave an overview of the subcommittee’s findings. M/S/C (Whitcher/McNealy) to accept staff’s recommendation to include amended application, site visit, and re-evaluation processes for CODA-accredited dental assisting schools in California via the regulatory process.

**Support:** Forsythe, Davis-Washington, Lua, McNealy, Ramos, Whitcher **Oppose:** 0 **Abstain:** 0

The motion passed unanimously. Dr. Gagliardi commented that since staff has determined that the American Dental Association’s Commission on Dental Accreditation, Standards for Dental Assisting Education Programs and Evaluation and Operational Policies and Procedures are equitable to California Code of Regulations, Title 16, Code Sections 1070, 1070.1, and 1070.2., does the Board need to vote on moving forward to accept the CODA findings in lieu of conducting its own investigation. Legal counsel indicated that he would review her inquiry and would report back at a future meeting.

7. **Discussion and Possible Action Regarding Streamlining the Program Application Process for Registered Dental Assisting Educational Programs with Multiple Campuses**

Ms. Adams gave an overview of the information provided. Ms. Forsythe appointed Pamela Davis-Washington and Emma Ramos as the subcommittee to research this issue. Ms. McNealy suggested that numbers 3, 8, 11, 14, 15, 16, 32, 34, 35, 36, 37, and 38 on the agenda item memo could be merged to avoid duplication.

8. **Discussion and Possible Action Regarding Ultrasonic Scaling Requirements and the Orthodontic Assistant Permit Course Requirements**

Ms. Wallace gave an overview of the information provided. There was discussion regarding the number of hours required for different courses that include ultrasonic scaling. M/S/C (McNealy/Davis-Washington) to accept staff’s recommendation to add ultrasonic curriculum content to the Orthodontic Assistant Permit course requirements via the regulatory process.

**Support:** Forsythe, Davis-Washington, Lua, McNealy, Ramos, Whitcher **Oppose:** 0 **Abstain:** 0

The motion passed unanimously.


Ms. Wallace gave an overview of the information provided.

10. **Update on the Dental Assisting Program Re-Evaluations and Site Visits**

Ms. Adams gave an overview of the information provided.
11. **Discussion and Possible Action Regarding the Issuance of Course Completion Certificates to Students Who Fail to Graduate from a Board-Approved Registered Dental Assistant Program that Does Not Have Stand-Alone Course Approval**

Ms. Wallace gave an overview of the information provided. Ms. McNealy commented on the positive aspects of issuing certificates for individual courses that have been completed prior to graduation from the entire program. Dr. Gagliardi also commented on the benefits of certificates for individual courses that have been completed prior to graduation. Dr. Shanel thanked the Board for this discussion on behalf of her former students. M/S/C (Lua/Whitcher) to accept staff’s recommendation for the issuance and acceptance of individual course certificates to students who fail to graduate from a Board-approved RDA program that does not have stand-alone course approval. Council’s recommendation will be incorporated into the comprehensive dental assisting regulatory package draft language.

**Support:** Forsythe, Lua, McNealy, Whitcher  
**Oppose:** 0  
**Abstain:** 0

The motion passed unanimously.

12. **Discussion and Possible Action Regarding the Implementation of AB 1174 (Bocanegra, Chapter 662, Statutes of 2014)**

Ms. Adams gave an overview of the information provided. Ms. McNealy commented that only one hour of methodology is being required for faculty which is inconsistent with the current RDA program requirement of two hours. Gayle Mathe, CDA, commented that this bill only applies to Registered Dental Assistants in Extended Functions (RDAEF), Registered Dental Hygienists (RDH) and Registered Dental Hygienists in Alternate Practice (RDHAP) not RDA’s.

13. **Discussion and Possible Action Regarding the Applicability of: Health and Safety Code, Division 104, Part 1, Chapter 4, Article 5 Regarding Radiologic Technologists, California Code of Regulations, Title 17, Division 1, Chapter 5, Subchapter 4, Group 3, Article 4Relating to Special Requirements for the Use of X-Ray in the Healing Arts, California Code of Regulations, Title 16, Sections 1014 and 1014.1Relating to Radiation Safety Course Requirements for the Dental Board of California**

Ms. Wallace gave an overview of the information provided. Ms. McNealy commented that she found some additional sections that she would like to see included: Sections 30305, 30305.1, 30306, 30309, 30311, and 30311.1. Dr. Whitcher commented that Section 106975 provides an exemption under which the Board functions. Most programs function under “general supervision” guidelines.

14. **Public Comment for Items Not on the Agenda**

There were no further public comments.
15. **Council Member Comments for Items Not on the Agenda**
   There were no Council Member comments.

16. **Adjournment**
    The meeting adjourned at 5:36pm.
MEMORANDUM

DATE  |  November 4, 2015
TO  |  Dental Assisting Council, Dental Board of California
FROM |  Linda Byers, Executive Assistant
SUBJECT |  DAC 3: Dental Assisting Council Officer Elections

The Dental Assisting Council members will elect a Chairperson and a Vice-Chairperson for 2016.

Roles and Responsibilities

Chair

- In consultation with the Executive Officer and the Board President, develops the Dental Assisting Council agenda.
- Calls the Council meeting to order, takes roll and establishes a quorum.
- Facilitates Council meetings.
- Recommends to the Board President, Council subcommittees to work on issues as appropriate.
- Reports activities of the Council to the full Board.

Vice-Chair

- In the absence of the presiding Chair, fulfills the Chairs responsibilities.
ACCESS TO CARE COMMITTEE
NOTICE OF ACCESS TO CARE COMMITTEE MEETING
Thursday, December 3, 2015
Upon Conclusion of the Dental Assisting Council Meeting
Marriott LAX
5855 West Century Blvd.
Los Angeles, CA 90045
949-892-2130 (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

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. 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, 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 February 26, 2015 Access to Care Committee Meeting Minutes.


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  
Doubletree by Hilton  
1646 Front Street, San Diego, CA 92101  
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 of the Access to Care Committee, called the meeting to order at 4:15pm. Roll was called and a quorum established.

2. **Approval of the November 6, 2014 Access to Care Committee Meeting Minutes**  
M/S/C (Burton/King) to approve the November 6, 2014 Access to Care Committee meeting minutes. There was no public comment.

   **Support:** Le, McKenzie, Burton, Dawson, King, Stewart. **Oppose:** 0 **Abstain:** 0

   The motion passed unanimously.

3. **Update on Workforce Statistics by Conrado Barzaga, MD, Executive Director of the Center for Oral Health**  
Ms. Jennifer Pilapil and Dr. Beth Mertz, from the Center for Oral Health gave a presentation on the analysis of the workforce statistics information. Dr. Guy Acheson, California Academy of General Dentistry, commented about a similar study that was done three years ago by OSHPD and the discrepancies in defining full time dental personnel for statistical purposes.

4. **Discussion and Possible Action Regarding the Dental Board’s Loan Repayment Program**  
Ms. Fischer gave an overview of the information provided. Dr. Le requested staff research other programs for comparison. There was discussion regarding the pros and cons of the loan repayment program.

5. **Public Comment of Items Not on the Agenda**  
There was no public comment.

6. **Future Agenda Items**  
There were no future agenda item requests.
7. Committee Member Comments for Items Not on the Agenda
   There were no committee member comments.

8. Adjournment
   Dr. Le adjourned the committee at 5:09pm.
**MEMORANDUM**

<table>
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<th>DATE</th>
<th>November 16, 2015</th>
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| TO         | Access to Care Committee  
Dental Board of California |
| FROM       | Huong Le, DDS |
| SUBJECT    | ATC 3: Report on the California Dental Director’s Oral Health Program Advisory Committee |

On September 18, 2015, Board President Ms. Fran Burton received an email from the newly appointed California State Dental Director, Jayanth Kumar, DDS, MPH, introducing himself and inviting her and/or a representative of the Board to serve on the Oral Health Program Advisory Committee. As Dental Director, Dr. Kumar will be developing a comprehensive state oral health plan and he is enlisting the assistance of dental providers and advocates of oral health to participate in workgroups that will develop a common agenda and a roadmap for action. President Burton appointed herself and Huong Le, DDS, MA to participate in the workgroups. The first Oral Health Program Advisory Committee meeting took place on October 5, 2015.

The following report is a summary of the presentations and discussions at this meeting as reported by the meeting organizer.

- Many of the data that are available at this time are quite old, ten years or so, and may not be as relevant. Current data is needed.
- California is behind the national average and goals proposed for Healthy People 2020.
- There are marked oral health disparities based on race.
- Socioeconomic factors are also related to disparities.
- California residents have less oral cancer but higher mortality rates than the national average. These vary geographically. Oral cancer experience (stage at diagnosis and treatment) varies by race and ethnicity.
- Pregnant women in California often have oral health problems but not treatment. Income and private-insurance status affect this. If medical providers suggest it, women are more likely to get dental care. Barriers to care include lack of private insurance; being Latina, African-American, or other/nonwhite; and having a low income. Younger women and women with lower educational levels are also associated with a lack of care. Geography also affects care.
- Fluoridation is considered one of the ten great achievements in public health. It doesn’t depend on behavioral change or require access to care. It saves money.
California has a lot of people served, but it’s still 34th in proportion of the overall population served.

- Dental problems cause a lot of missed school days. This costs school districts money. Children reporting tooth pain get lower GPAs and may have less earning ability in the future.
- The supply, geographic distribution, and utilization of dental providers affect Californians’ access to care. Some counties don’t have enough providers. Many of the dentists live in the same five counties. There is a similar trend for dental hygienists. California has dental health provider shortage areas (DHPSAs), mostly in Northern California.
- Failing to get dental care results in emergency department visits. Preventable emergencies cost three times as much as getting preventative treatment.
- Innovative models of care can help with this, such as incentives to providers and virtual dental homes. Governor Brown signed legislation to expand virtual dental homes.

The members were assigned to three different committees: Access, Communication and Education, and Community Prevention. The committees met and came up with some proposed strategies that will be reviewed in the future.

The next meeting will be held at the California Dental Association on December 8, 2015.
MEMORANDUM

DATE November 16, 2015

TO Access to Care Committee
Dental Board of California

FROM Karen Fischer, Executive Officer

SUBJECT ATC 4: Discussion and Possible Action Regarding the California Dental Corps Loan Repayment Program of 2002

BACKGROUND
The California Dental Corps Loan Repayment Program, administered by the Dental Board of California (Board), was created in 2002 (AB 982, Chapter 1131, Statutes of 2002) to increase the number of dentists who practice in historically underserved areas by providing grants to help pay for the high cost of attending dental school. The Board selects participants who practice in underserved areas and in practice settings with a majority of underserved patients; and gives priority consideration to applicants who are best suited to the cultural and linguistic needs of those populations and meet other related criteria. Participants are required to serve in the underserved area for three years and after each consecutive year of service completed, participants will receive money for loan repayment (up to $25,000 for the first year, $35,000 for the second year, and $45,000 for the third year). The law states each participant may receive no more than $105,000 over three years; and will not receive payment in excess of the loan balance.

In the initial implementation of this legislation, statute authorized $3,000,000 to be appropriated to the Board’s Dentally Underserved Account. The appropriation came in one million dollar increments for fiscal years 2003-04, 2004-05, and 2005-06. When the Board went through the sunset review process in 2011, the Legislature extended the program until the Board distributes all the funds in the account (Senate Bill 540 (Price) – Chapter 384, Statutes of 20011). To date, at the end of fiscal year 2014-15, there remains $1,689,000 in the fund.

During the early years of program implementation there were a number of applications received. In the first cycle, January 2004, a total of 24 applications were received and nine (9) were approved. Similarly, in July 2006, the Board received 21 applications and 6 applicants were approved. There appears to have been a break in applications received after July 2006 until September 2010 when one application was received and approved. In 2012, three applications were received and all were approved. These three
participants recently received disbursements for completing their final year of service. Currently, there is one application under consideration.

CURRENT ISSUES & POSSIBLE REMEDIES

Board staff was asked to identify issues that might be contributing to the decrease in the submission of applications for the Loan Repayment Program. Staff reviewed the material on the Board’s website and determined the following:

1. The application process is difficult to understand and there is no instruction sheet for the applicants.

   Statute outlines basic requirements for participants of the loan repayment program and required the Board to develop guidelines for selection and placement of applicants, giving priority consideration to applicants who are best suited to meet the cultural and linguistic needs and demands of the dentally underserved population. The original application incorporates not only the basic requirements, but also includes criteria outlined in the guidelines.

   Though there are requirements and guidelines in place, there are no instructions on how to complete the application and therefore, without a clear understanding of the requirements and the selection process, an applicant, after reading the questions, might assume they are not eligible for the program. For example, the application includes the following questions:

   “Do you speak a Medi-Cal threshold language?”
   “Do you come from an economically disadvantaged background?”
   “Have you received significant training in cultural and linguistically appropriate service delivery?”
   “Have you worked with dentally underserved communities for the last three years?”

   These questions represent criteria used by the Board to give priority consideration to applicants. If an applicant answers “No” to any of these questions, the application may assume he/she does not qualify. However, in actuality, the Board will still consider the applicant for this program.

   PROPOSED REMEDY

   Develop clear instructions and revise the application to be user friendly. Since the application is incorporated by reference in regulation, the Board’s regulations would need to be modified.

2. Rumored lack of adequate number of facilities within designated underserved areas in which to secure a three year contract*

   Business and Professions Code (BPC) Section 1972(d) “Program participants shall commit to a minimum of three years of service in a dentally underserved area.”
The application process is defined in regulations, *California Code of Regulations (CCR) Section 1042.2(a)(8)* to require a certification, signed by the practice setting that the facility has entered into an agreement with the applicant for a minimum of three years.

*It is important for the Board to recognize that the practice setting is defined in statute and means either of the following:

(1) A *community clinic*, as defined in subdivision (a) of Section 1204 and subdivision (c) of Section 1206 of the Health and Safety Code, a clinic owned or operated by a public hospital and health system, or a clinic owned and operated by a hospital that maintains the primary contract with a county government to fulfill the county’s role pursuant to Section 17000 of the Welfare and Institutions Code, which is located in a dentally underserved area and at least 50 percent of whose patients are from a dentally underserved population.

(2) A *dental practice or dental corporation*, as defined in Section 1800 of this code, located in a dentally underserved area and at least 50 percent of whose patients are from a dentally underserved population.

**PROPOSED REMEDY**
If there is a shortage of places to work within the underserved designation, the Board could consider amending regulations to allow more flexibility for participants to secure contracts for a number of part time positions at multiple locations; or three consecutive one-year contracts at various locations.

3. **Currently the payment participants receive is taxable because the payment is made directly to the participant rather than the lender.**

**PROPOSED REMEDY**
Amend statute and regulations to authorize the Board to pay the lender directly thereby alleviating additional tax burden to the participant [ref: *BPC 1975(a-c); CCR 1042.4(b)*].

4. **Payment is made after each year of service thereby delaying paying down the loan.**

**PROPOSED REMEDY**
Amend statute and regulations to authorize annual payment in advance. [ref: *BPC 1975 (a-c); CCR 1042.4(b)*].

5. **The Loan Repayment Program is not well known**

**PROPOSED REMEDY**
Update the brochure and distribute with license application. Continue to provide outreach to dental schools and enhance the Board’s website to provide clearly stated information about the program.
Staff met with California Dental Association (CDA) representatives to discuss collaborating on solutions to the issues that have been identified above. CDA has a Loan Repayment Program with many requirements similar to the Board’s program. Each year CDA receives approximately fifteen applications and only issues an award to one candidate annually.

The three prominent differences are:

1. The applicant can secure contracts in multiple locations;
2. The payment is made at the beginning of each contract year; and
3. The payments are made directly to the lender.

**STAFF RECOMMENDATION:**
Move forward with an action plan to amend statute and regulations, where necessary, in order to increase participation in the loan repayment program.
PRESCRIPTION DRUG ABUSE COMMITTEE
NOTICE OF PRESCRIPTION DRUG ABUSE COMMITTEE MEETING
December 3, 2015
Upon Conclusion of the Access to Care Committee Meeting
Marriott LAX
5855 West Century Blvd.
Los Angeles, CA 90045
949-892-2130 (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

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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 February 26, 2015 Prescription Drug Abuse Committee Meeting Minutes
3. Subcommittee Update on Opioid Prescription Abuse and Misuse
4. 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)).

5. Future Agenda Items
   Stakeholders are encouraged to propose items for possible consideration by the Committee at a future meeting.

6. 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)).

7. Adjournment
PDA minutes – February 26, 2015                                                                                          Page 1 of 2

PRESCRIPTION DRUG ABUSE COMMITTEE MEETING MINUTES
February 26, 2015
Doubletree by Hilton
1646 Front Street, San Diego, CA 92101
DRAFT

MEMBERS PRESENT    MEMBERS ABSENT
Chair – Thomas Stewart, DDS
Vice Chair – Fran Burton
Huong Le, DDS, MA
Steven Morrow, DDS
Bruce Whitcher, DDS
Debra Woo, DDS, MA

1. **Call to Order/Roll Call/Establishment of Quorum**
   Dr. Stewart, Chair, called the meeting to order at 5:11pm. Roll was called and a quorum established.

2. **Approval of the November 6, 2014 Prescription Drug Abuse Committee Meeting Minutes**
   M/S/C (Burton/Morrow) to approve the November 6, 2014 Prescription Drug Abuse Committee minutes. There was no public comment.

   **Support:** Stewart, Burton, Le, Morrow, Whitcher, Woo **Oppose:** 0 **Abstain:** 0

   The motion passed unanimously.

3. **Staff Update on Opioid Prescription Misuse and Overdose Workgroup Meetings**
   Teri Lane, Enforcement Chief, gave an overview of the information provided. There was no public comment.

4. **Staff Update on California’s Controlled Substance Review and Evaluation System (CURES)**
   Ms. Lane gave an overview of the information provided. There was discussion about the difficulties with the system. Gayle Mathe, California Dental Association (CDA), commented that dentists can call CDA for help accessing and learning the system. She mentioned that CDA does provide classes as well.
5. **Discussion and Possible Action Regarding the Medical Board of California’s Prescription Guidelines.**
Ms. Lane gave an overview of the information provided. M/S/C (Morrow/Whitcher) to appoint a subcommittee to work with staff to develop DRAFT guidelines for Dental Practitioners. Gayle Mathe, CDA commented that CDA would be happy to support the Dental Board in this matter.

**Support:** Stewart, Burton, Le, Morrow, Whitcher, Woo **Oppose:** 0 **Abstain:** 0

The motion passed unanimously.

6. **Public Comment of Items Not on the Agenda**
There was no further public comment.

7. **Future Agenda Items**
There were no future agenda item requests.

8. **Committee Member Comments for Items Not on the Agenda**
There were no committee member comments.

9. **Adjournment**
Dr. Stewart adjourned the committee meeting at 5:41pm.
MEMORANDUM

DATE November 18, 2015

TO Prescription Drug Abuse Committee Members
Dental Board of California

FROM Theresa Lane, Enforcement Chief

SUBJECT PDA 3: Subcommittee Update on Opioid Prescription Abuse and Misuse

The Chair of the Prescription Drug Abuse Committee and Board President appointed fellow committee members Thomas Stewart, DDS and Huong Le, DDS to a Subcommittee to work with staff to develop a recommendation on drafting possible Prescription Guidelines for Dental Practitioners.

The subcommittee met on Friday, October 23, 2015 to discuss the ideas moving forward for the education of our practitioners about the devastating impact that prescription drug abuse is having in our communities, and how dispensing practices along with accessibility has contributed to this epidemic.

Present in the meeting were Prescription Subcommittee members, Thomas Stewart, DDS, Huong Le, DDS and California Dental Association (CDA) representative, Gayle Mathe and myself. We met at the Contractor State License Board conference room in the City of Fresno.

The following items were discussed and are summarized below:

Webpage

The proposal is to have a webpage on the Board’s website dedicated to prescription drug resources. The idea behind the webpage is to not only provide the dentist with the information regarding the epidemic but provide resources to the dispensing practitioners to educate them on the new paradigm and hopefully cut down on the dispensing of opioid prescriptions. The practitioner is the ultimate decision maker in determining the best course of pain management treatment for his/her patient, however, we need to educate them in the public health trends and how this may impact the way they prescribe. Practitioners need to be aware that they are not just addressing the problem but they need to look at the whole patient and not just the pain.
The webpage can be continually updated when new material is available making it a valuable contemporary resource for our practitioners.

It was suggested that we create an opening paragraph educating dentists about the prescription drug abuse epidemic. This website will also provide the practitioners with links to the Medical Board, Pharmacy Board prescription guidelines and the Drug Enforcement Administration (DEA). These guidelines 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.

It was also discussed that many practitioners may not recognize the red flags of substance abuse or know what to do. Experts in substance abuse as well as other support services (such as local Mental Health counselors/public health officials) can provide places to refer the patients who are in need of services. Having a link to these local resources may be of a great benefit to the practitioner.

In addition to the above resources, CDA has published numerous articles that are current and relevant to the dental practitioners in this area. A great number of the articles and publications are available to the public and non-members. A link to those documents will also provide great resources for our dental practitioners.

The other resources that the subcommittee proposed were links to the American Dental Association and articles specifically relating to prescription drugs as well as the American Association of Oral and Maxillofacial Surgeons article on Prescription Drug Abuse and Prevention.

CURES/PDMP

The California Prescription Drug Monitoring Program (PDMP) also known as CURES has a mission to reduce pharmaceutical drug diversion while promoting legitimate medical and patient care. The PDMP collects Schedule II through IV controlled substance prescription and dispensation information for facilitating diversion awareness and intervention.

The proposal is to have the webpage contain detailed educational information about the CURES system, including the mandatory effective date of registration for all California-licensed dentists authorized to prescribe, order, administer, furnish, or dispense controlled substances. Providing an explanation as well as a link to the registration will allow access to the dentist to look up a patient’s controlled substance usage and history before prescribing controlled substances.
Social Media

One of the ways to communicate with our licentiates and the public is through the Board’s ability to send web blasts and the potential use of social media. The Department of Consumer Affairs currently uses Facebook and Twitter to get information out to the public on a variety of consumer related topics.

Once the webpage is created it was proposed that we use social media, such as Facebook or Twitter to send out updated information out to the licentiates and the public. The information that can be sent via social media could be a link to a new regulation, a reminder of the mandatory CURES registration, news of the Board’s up and coming meeting, or an updated topic on the Prescription Drug webpage tab.

Research is currently being done by staff to see how the Board can maintain their own Facebook or Twitter account.

Continuing Education (CE) Requirements

It was suggested that the initial dental school education may be inadequate to address pain management or recognize drug-seeking behavior within the growing problem of opioid addiction in our society. One of the proposals would be to work with the CE providers who currently teach the Dental Practice Act. The possibility of adding in a segment into the current curriculum on prescription drugs, guidelines and misuse and the current overdose problem as well as the responsibility of the practitioner may be a good place to start.

The other proposal that the committee may want to discuss is adopting a CE requirement that addresses pain management and substance abuse may contribute to the reduction of overprescribing and the misuse of prescription drugs.
RETURN TO OPEN SESSION
RECESS