

April 14, 2025

Steven Chan, DDS President, Dental Board of California 2005 Evergreen Street, Suite 1550 Sacramento, CA 95815

Sent via e-mail

Re: AB 873 (Alanis) Virtual 8-hour infection control course concerns

Dear Dr. Chan:

The California Dental Association, representing 27,000 members throughout the state, appreciates the concern raised by dental board staff regarding CDA-sponsored bill, AB 873 (Alanis), related to patient protection in allowing unlicensed dental assistants to fulfill their 8-hour infection control course requirement virtually when applying for RDA licenses and permits. Requiring individuals who have already completed the IC course virtually to retake it in person when obtaining a license or permit is unnecessarily duplicative and does not enhance competency or patient safety for several reasons:

Identical Curriculum Across Formats: The content of the IC course remains the same whether taken virtually or in person. Both formats cover infection control principles, including sterilization, proper donning and doffing of PPE, and infection prevention protocols. Retaking the same course in a different format does not provide additional educational value but does impose significant financial and time burdens.

Additional IC Training Through Cal/OSHA Requirements: All dental assistants, licensed or unlicensed, are mandated to complete Cal/OSHA bloodborne pathogen training, which includes instruction on infection control, PPE usage, and sterilization. This training is required upon hire and annually, ensuring ongoing competency in infection prevention.

Practical Experience in Clinical Settings: Dental assistants gain hands-on infection control experience daily under the supervision of licensed dentists, who are responsible for compliance with infection control requirements. This direct application in dental practice settings reinforces their knowledge far more effectively than repeating coursework. Before becoming an RDA, dental assistants already perform many tasks that expose them to infectious materials, such as taking impressions, assisting in procedures, and handling instruments.

No Increased Exposure After Licensure: The scope of permitted duties for dental assisting does not support the argument that RDA licensees and dental assistant permitholders face significantly greater exposure to infectious materials. For example, certificated unlicensed dental assistants are now able to perform coronal polishing, a procedure that generates aerosols and involves direct exposure to saliva. The level of exposure does not substantially change when an assistant becomes licensed, making an additional in-person IC course unnecessary.

Overall, CDA believes this amendment creates an unnecessary barrier to career advancement in a profession already experiencing dire workforce shortages that, in turn, impact access to dental care. Requiring a repeat IC course creates an unnecessary obstacle to professional growth, delaying the licensing process and increasing costs without measurable improvement in competency or patient safety. Given that infection control training is already reinforced through

annual Cal/OSHA training and supervised clinical experience, this requirement only creates an additional burden to dental assistants seeking to expand their careers in dentistry rather than enhance patient protection.

Sincerely,

Mary McCune
Policy Director

Cc: Tracy Montez, Executive Officer