

**DENTAL BOARD OF CALIFORNIA
DENTAL ASSISTING COUNCIL**

**NOTICE OF MEETING
November 6, 2025**

Council Members

De'Andra Epps-Robbins, RDA, Chair
Jeri Fowler, RDAEF, OA, Vice Chair
Jessica Gerlach, RDA, OA
Lilia Larin, DDS
Cara Miyasaki, RDA, RDHEF, MS
Rosalinda Olague, RDA, PhD(c)
Carie Smith, RDAEF, OA

**Action may be taken on any
item listed on the agenda.**

The Dental Assisting Council (Council) of the Dental Board of California (Board) will meet in person in accordance with Government Code section 11122.5, subdivision (a), at 8:30 a.m., on Thursday, November 6, 2025, at:

Department of Consumer Affairs
1625 N. Market Blvd., Hearing Room #102
Sacramento, CA 95834

This meeting also will be held via WebEx Events for public participation. Instructions to connect to the meeting can be found [HERE](#).

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Event number: 2495 434 2247

Event password: DBC116 (322116 from phones)

Due to potential technical difficulties, please consider submitting written comments by October 28, 2025, to dentalboard@dca.ca.gov for consideration.

AGENDA

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

2. Public Comment on Items Not on the Agenda **[4]**
Note: The Council may not discuss or take action on any matter raised during this Public Comment section, except to decide whether to place the matter on the agenda of a future meeting. (Government Code Sections 11125 and 11125.7(a).)
3. Discussion and Possible Action on August 14, 2025 Meeting Minutes **[5-18]**
4. Council Chair Report **[19]**
5. Interim Executive Officer Report **[20]**
6. Update on Dental Assisting Examination Statistics **[21-24]**
 - a. Registered Dental Assistant General Written and Law and Ethics Examinations
 - b. Registered Dental Assistant in Extended Functions General Written Examination
 - c. Orthodontic Assistant Written Examination
 - d. Dental Sedation Assistant Written Examination
7. Update on Dental Assisting Licensing Statistics **[25-36]**
 - a. Registered Dental Assistant License
 - b. Registered Dental Assistant in Extended Functions License
 - c. Orthodontic Assistant Permit
 - d. Dental Sedation Assistant Permit
 - e. Abandoned Dental Assisting Applications
8. Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations **[37-42]**
9. Update and Discussion on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1741, 1750, 1750.2, 1750.4, 1752.1, 1752.6, 1753, 1753.51, 1754.5, 1755, and 1777, and Add Sections 1752.1, 1754.5, 1755, and 1778 Relating to Board Approval of Dental Assistant Educational Programs and Courses **[43-75]**
10. Update, Discussion, and Possible Recommendation to the Board on Proposed Regulations **[76]**
 - a. Status Update on Pending Regulations
 - i. Update on Rulemaking to Amend California Code of Regulations, Title 16, Section 1005 Regarding Minimum Standards for Infection Control
11. Election of 2026 Council Chair and Vice Chair **[77]**
12. Adjournment

Information regarding the meeting is available by contacting the Board at (916) 263-2300 or (877) 729-7789, email: DentalBoard@dca.ca.gov, or send a written request to

the Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815. This agenda can be found on the Dental Board of California website at dbc.ca.gov. The time and order of agenda items are subject to change at the discretion of the Council Chair and may be taken out of order. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Council are open to the public.

The meeting will be webcast, provided there are no unforeseen technical difficulties or limitations. To view the webcast, please visit thedcapage.wordpress.com/webcasts/. The meeting will not be cancelled if webcast is not available. Meeting adjournment may not be webcast if it is the only item that occurs after a closed session. Members of the public may, but are not obligated to, provide their names or personal information as a condition of observing or participating in the meeting. (Government Code section 11124.)

Government Code section 11125.7 provides the opportunity for the public to address each agenda item during discussion or consideration by the Council prior to the Council taking any action on said item. Members of the public will be provided appropriate opportunities to comment on any issue before the Council, but the Council Chair may, at their discretion, apportion available time among those who wish to speak. Individuals may appear before the Council to discuss items not on the agenda; however, the Council can neither discuss nor take official action on these items at the time of the same meeting (Government Code sections 11125, 11125.7(a)).

This meeting is being held in person and via teleconference through WebEx Events for public participation. The meeting location is accessible to the physically disabled. A person who needs disability-related accommodations or modifications to participate in the meeting may make a request by contacting Christy Bell, Interim Executive Officer, at Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five (5) business days prior to the meeting will help ensure availability of the requested accommodations. TDD Line: (877) 729-7789

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

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MEMORANDUM

DATE	October 13, 2025
TO	Members of the Dental Assisting Council
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 2.: Public Comment on Items Not on the Agenda

Notes



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DENTAL BOARD OF CALIFORNIA DENTAL ASSISTING COUNCIL MEETING MINUTES August 14, 2025

Pursuant to Government Code section 11122.5, subdivision (a), the Dental Assisting Council (Council) of the Dental Board of California (Board) met in-person with additional public participation available by teleconference/WebEx Events on Thursday, August 14, 2025, with the following location available for Council and public member participation:

Department of Consumer Affairs
1625 N. Market Blvd., Hearing Room #102
Sacramento, CA 95834

Members Present:

De'Andra Epps-Robbins, RDA, Chair
Jeri Fowler, RDAEF, OA, Vice Chair
Jessica Gerlach, RDA, OA
Lilia Larin, DDS
Cara Miyasaki, RDA, RDHEF, MS
Rosalinda Olague, RDA, PhD(c)
Carie Smith, RDAEF, OA

Staff Present:

Christy Bell, Interim Executive Officer
Ryan Blonien, Enforcement Chief
Jodi Ortiz, Chief of Licensing and Examination Division
Paige Ragali, Chief of Administration and Compliance
Tina Vallery, Chief of License and Program Compliance and Dental Assisting
Jessica Olney, Anesthesia Unit Manager
Wilbert Rumbaoa, Administrative Services Unit Manager
Brant Nelson, Legislative and Regulatory Specialist
Paul Corbin, Investigator
Jerry Fuhrman, Investigator
Ashley Grey, Discipline Coordinator
Mirela Taran, Administrative Analyst
Joseph Tippins, Investigator
Judie Bucciarelli, Staff Services Manager I, Specialist (Retired Annuitant), Board and Bureau Relations, Department of Consumer Affairs (DCA)
Ann Fisher, Facilitator and Strategic Planner, Strategic Organizational Leadership and Individual Development (SOLID), DCA
Kristy Schieldge, Regulations Counsel, Attorney IV, Legal Affairs Division, DCA
Cesar Victoria, Television Specialist, Office of Public Affairs, DCA

DRAFT - Dental Assisting Council
August 14, 2025 Meeting Minutes

Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division, DCA

Agenda Item 1: Call to Order/Roll Call/Establishment of a Quorum

Council Chair, Ms. De'Andra Epps-Robbins, called the meeting to order at 8:36 a.m.; seven members of the Council were present, and a quorum was established.

Agenda Item 2: Public Comment on Items Not on the Agenda

There were no public comments made on this item.

Agenda Item 3: Discussion and Possible Action on May 14, 2025 Meeting Minutes

Motion/Second/Call the Question (M/S/C) (Larin/Fowler) to approve the May 14, 2025 Meeting Minutes.

Chair Epps-Robbins requested public comment before the Council acted on the motion. There were no public comments made on the motion.

Chair Epps-Robbins called for the vote on the motion. Ms. Mirela Taran took a roll call vote on the motion.

Ayes: Epps-Robbins, Fowler, Gerlach, Larin, Miyasaki, Olague, Smith.

Nays: None.

Abstentions: None.

Absent: None.

Recusals: None.

The motion passed and the Minutes were approved.

Agenda Item 4: Interim Executive Officer Report

Christy Bell reported that the return to office order that was set to go into effect July 1, 2025, has been delayed to July 1, 2026, and Board staff are continuing their current telework schedules. She stated the Board currently has five vacant positions for which Board staff are actively recruiting to fill. Additionally, as discussed at previous meetings, the Board is currently undergoing the process to prepare for a new strategic plan. The external stakeholder survey closed on June 23, 2025, totaling 996 responses. Board members and Board management were interviewed, and a survey went out to all staff; these responses totaled 56. Ms. Bell noted that SOLID is currently drafting the environmental scan, which consists of summaries of individual responses to the questions. The Board members should expect to receive this report mid-October before the November 5, 2025 strategic planning session. In September, SOLID will work with Board management in a pre-strategic planning session to review the environmental scan and do some of the pre-work before the November Board meeting. Ms. Bell added that two working groups will be created and the Council Chair will assign the members. One working group will review the statutes and regulations related to the duties of registered dental assistants (RDAs) and the other working group will review the RDA statutes.

DRAFT - Dental Assisting Council
August 14, 2025 Meeting Minutes

Chair Epps-Robbins requested public comment on this item. There were no public comments made on this item.

Agenda Item 5: Update on Dental Assisting Examination Statistics

Tina Vallery provided the report, which is available in the meeting materials. Ms. Vallery pointed out that Board staff have included new information in the memorandum in response to a request by Council Member Lilia Larin at the last Council meeting. She voiced that Council Member Larin requested to see the number of RDA applications the Board receives by available pathway. Therefore, Board staff have provided the responsive data on page 27 of the meeting materials that shows the number of applications received each year through the Education, Work Experience, and Mixed Education and Experience pathways in the years 2020-2024.

Council Member Larin thanked Ms. Vallery for that new information and noted that it would also be informative to find out the pass rate for the RDA exam on each of these pathways. Ms. Vallery responded that the Board does have the statistics by pathway on its website, on the *Educators* tab; the Board typically posts, at least for each quarter, each school that had students test and Work Experience and Mixed Education pathway statistics.

Chair Epps-Robbins requested public comment on this item. There were no public comments made on this item.

Agenda Item 6: Update on Dental Assisting Licensing Statistics

Ms. Vallery provided the report, which is available in the meeting materials.

Council Member Cara Miyasaki asked for the normal turn turnaround rate for applications once they are received. Ms. Vallery responded that currently all of her staff process applications within 24 to 48 hours. She added that they do have cashiering time, which typically is about a week, and then once it goes to the analysts for processing, it is typically within 24 to 48 hours that they are processed.

Chair Epps-Robbins requested public comment on this item. There were no public comments made on this item.

Agenda Item 7: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Ms. Vallery provided the report, which is available in the meeting materials.

Chair Epps-Robbins requested public comment on this item. The Council received public comment.

Shari Becker, representing the California Association of Dental Assisting Teachers, noted the meeting memo indicated the number of [Board approval] withdrawals was really high due to a failure [by the course] to meet the timing for their re-evaluation and application. She asked that for those programs that withdrew because of a timing issue, should the timing be reassessed or looked at for the turnaround time to be a little more gracious to those programs. Regarding the statistic of the approvals withdrawn, especially for the pit and fissure sealant courses being so high with the total of 44, she wondered that if they withdrew their application, did they then want to turn around and need to reapply as a new provider for those courses.

Ms. Vallery responded that regarding the time frames, the Board gives a standard amount of time for response, but anybody who has requested an extension, the Board has granted extensions as long as it is for a legitimate reason. She added that for any that have been withdrawn, Board staff have heard nothing from them. Regarding the pit and fissure sealant courses, she indicated that if they were withdrawn and they were interested in reapplying, they can definitely do that; some courses had, and some had not.

Chair Epps-Robbins asked what the timeline is like on the extension. Ms. Vallery responded that the Board does not have a specific timeline; as long as it is a reasonable request, Board staff have granted them.

Chair Epps-Robbins asked whether this is a resubmission process and if so, if they were to resubmit, how many times could they go back and forth on this issue to get their programs up to par in order to pass this portion of not being withdrawn. Ms. Vallery responded that they have two opportunities to respond.

Agenda Item 8.: Update and Discussion on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1741, 1750, 1750.2, 1750.4, 1752.1, 1752.6, 1753, 1753.51, 1754.5, 1755, and 1777, and Add Sections 1752.1, 1754.5, 1755, and 1778 Relating to Board Approval of Dental Assistant Educational Programs and Courses

Council Vice Chair Jeri Fowler and Council Member Miyasaki provided the report, which is available in the meeting materials.

Chair Epps-Robbins requested public comment on this item. The Council received public comment.

Melodi Randolph, representing the Dental Assisting Alliance, voiced that the Alliance is made out of three different organizations, which include the California Association of Dental Assisting Teachers, the Extended Functions Association, and the California Dental Assistants Association. She conveyed that the Alliance is deeply concerned by this proposal as they have identified numerous significant issues that it presents. She noted that they are particularly surprised that the only con acknowledged by the Board on page 53 of the meeting materials is that providers who are not accredited or

approved by one of the listed entities would need to apply for and receive approval. Ms. Randolph stated that this alone could pose a significant or substantial barrier to dental assisting education and training. However, there are many other critical concerns not addressed, including an elimination of any mandatory hands-on training and inconsistencies among the proposed accrediting and approval agencies. She noted that most of the agencies that are listed there as options have nothing to do with dentistry and have no dental specific curriculum and educational requirements. Therefore, that would lead to varied and potentially inadequate programs and courses. Ms. Randolph stated these issues are likely to result in continued and escalating staff shortages, closure of dental assisting programs, and reduced protections for patients. Ultimately, they strongly believe this proposal would have a detrimental effect on the vast majority of dental practices across California. Fragmentation in the education and training of dental assistants, the largest segment of the dental workforce, would increase, compromising both workforce readiness and public safety. She noted that they do believe that the answer to this is increasing fees so that the Board can do what they are already mandated to do.

Tooka Zokaie, representing the California Dental Association (CDA), communicated that CDA has some concerns primarily rooted in ensuring that the dental assisting education and certification process remains accessible and affordable, especially with severe workforce shortages. She noted that as they want to maintain patient safety and the process, they are concerned about some of the proposals and how they can create new barriers. They already know that many infection control courses hold accreditations recognized under the proposal and are embedded within full RDA educational programs. Therefore, this would make them inaccessible as standalone options for unlicensed dental assistants due to cost, time, commitment, and admission requirements. Ms. Zokaie conveyed that CDA encourages the Board to recognize Dental Board permitted continuing education providers alongside the American Dental Association's Continuing Education Recognition Program (CERP) and Academy of General Dentistry's Program Approval for Continuing Education (PACE) accredited entities to maintain affordable local training options as it looks at the proposal. She expressed that they also recommend that if the Board considers CERP and PACE oversight acceptable, to urge the Council to evaluate how Board permitted course providers could also be similarly recognized. Ms. Zokaie voiced that they recommend a couple acceptance of external accreditation with retention of existing statutory curriculum requirements for certified dental assisting courses. But in light of recent fee increases, they also urge the Board to assess the financial and operational impacts of shifting oversight, especially since CDA does not want to see closure of existing programs. They understand that the workload will significantly decrease since many programs are already externally accredited.

Ms. Becker voiced that she is a currently working chairside dental assistant and also currently serving as President of the California Association of Dental Assisting Teachers. She noted that as a stakeholder, they look forward to the working group meetings to give input and insight and affirmed that she agrees with the Alliance

comments from Ms. Randolph. Ms. Becker verbalized that it is hard to predict the short and the long-term results of this proposal and what the impact will be for the overall profession. She added that regarding the recommendation for possibly eliminating hours on some required courses, she would suggest that there be a minimum hour requirement as opposed to a strictly defined hour requirement.

Ms. Vallery expressed that this legislative proposal is merely a first draft and is intended to spark conversation with the dental assisting community. For the stakeholder meetings, she has tried to get the word out that the Board is encouraging participation from all aspects of dentistry, including dental hygienists, dentists, and dental assistants as they understand this is a new way of doing business. She reiterated that Board staff do not have the education to approve dental assisting courses. Therefore, the Board needs to shift this to people who have the expertise in this area. Ms. Vallery added that Board staff are open to ideas, and she is encouraged and hopeful that at these stakeholder meetings there will be participation and ideas that come forward. She is looking at this as the opportunity to bring dental assisting into this century and get it operating in a way to help address the workforce shortages and access to care issues.

Joan Greenfield, representing the California Extended Functions Association, voiced that they agree with everything that has been said by Ms. Randolph and Ms. Becker, and they look forward to these stakeholder meetings so that they can start looking at other options. She noted that she agrees that going to many of these other outside agencies is not a good option.

Ariane Terlet, previous Board member and also the Dental Director for a Federally Qualified Health Center (FQHC) as well as her own private practice, voiced that she is wanting that at the stakeholder meetings, it is seriously being considered the unintended consequences of these decisions and how to make corrections so that does not happen. Regarding Ms. Vallery's comment about whether the Board ever had the skill set to do the exams, Ms. Terlet noted that they did and added that when California had its own exam and exam unit, dental assisting was in there and it was very robust. However, when the exam went to the Western Regional Examining Board (WREB), everyone forgot about dental assisting. Ms. Terlet conveyed that she believes that these are the end results of not supporting the internal dental exam process; although she supports changes, they have to work for everybody.

Council Member Miyasaki asked whether the Council Members would be comfortable with having a candidate take a dental assisting national board exam, no hands-on training for radiation safety, infection control, coronal polishing, and fluoride, and being able to be certified in that, which was contemplated in the proposal.

In response to Council Member Fowler's inquiry on subsequent Council review of the proposal following stakeholder meetings, Ms. Bell stated the work that will be done leading up to the Council November meeting is intended to bring information and the

proposal back to the Council for discussion and comment. As much time as needed will be taken to address the concerns so the Council can make an informed decision.

Council Member Rosalinda Olague expressed that she would like to thoroughly go through all the stakeholders and the discovery. She stated that before the Council has conversation today, they take that information, take the time to reflect on it, and come into November's Council meeting and have a robust conversation as a Council. She supported Ms. Vallery's comment on reimagining the dental assisting profession.

Chair Epps-Robbins voiced that this is something that the Council has to brainstorm, put their minds together collectively, and collaborate on their decisions of what they discuss and bring back to stakeholders. She agreed dental assisting needs to be revamped and noted the strong concerns from the public and Council Members that this is something that needs to be addressed.

Council Member Miyasaki commented that one of the things that was coming up in a discussion in the working group meeting was that the staff were re-evaluating and auditing, for example pit and fissure sealant courses, and a lot of the courses were not following the criteria and were being either shut down or they withdrew their applications. She stated that one of the things in the conversations with Board staff is that these people that have been taking these courses at programs that just got shut down, they have been able to get their RDA license. She wonders whether it is okay to give that responsibility to some other agency, or maybe the way that they are being evaluated is not the right way and they were actually doing everything that they needed to do for their applicants to pass the RDA. Council Member Miyasaki conveyed that is something to think about and consider as well.

Agenda Item 8.a.: Presentation on Dental Assistant Examinations – *Dental Assisting National Board*

Ms. Katherine Landsberg, Dental Assisting National Board (DANB) Government Relations Director, and Dr. Johnna Gueorguieva, Senior Psychometrician and Director of Assessments, provided a presentation on DANB.

Council Member Larin asked what the pass rate is for the Certified Dental Assistant exam. Ms. Landsberg responded the Certified Dental Assistant exam is made up of three components. Therefore, she is not able to provide the pass rate for the certification because if someone takes one of the components, DANB does not know if their intention is to earn the dental assistant certification or merely take that exam because it is required in their state.

Council Member Larin asked for clarification whether there are no hands-on exam. Ms. Landsberg responded that the exams are not hands-on exams and are written multiple choice tests. She added that the content is developed based on information about what dental assistants are actually performing in their clinical settings.

Council Member Larin asked for clarification whether there are no prerequisites for any of the exams and asked how that would fit into California's requirement for hands-on training versus educational programs. Ms. Vallery responded that DANB was asked to present because the certifications and exams are something to talk about in consideration of accepting DANB examinations as an option. The DANB examinations are included in the legislative proposal as a pathway to licensure. Currently, the Board does not [accept] DANB radiation health and safety or infection control examinations. However, based on the information that the Board has received, Board staff believe it is definitely something to start considering. Ms. Vallery indicated that it would be up to the Council and the Board to decide if a written exam is enough for California.

Council Member Larin asked whether the Board would still require the educational background training or the hands-on. Ms. Vallery responded that it is being proposed that candidates could do either – they could take a course, which is what the Board currently requires, or they could take the DANB exam. She added that it would be what DANB requires; at this time, DANB has no [educational] prerequisites.

Council Member Jessica Gerlach asked what the renewal process for renewing the license of the DANB is. Ms. Landsberg responded that the certificates earned are not a license and added that each of those four exams leads to a certificate of knowledge-based competence, which does not expire. The only expiration associated with it is if they want to use the results of those exams towards a certification, then they have to pass all the exams that are required for that certification within a 5-year period. With regard to what California would accept, Ms. Landsberg voiced that those certificates do not have any renewal associated with them.

Council Member Gerlach asked whether once they receive all five certifications they are a certified dental assistant after that. Ms. Landsberg responded that in order to be a certified dental assistant, they have to pass the Radiation Health and Safety (RHS) exam, the Infection Control Exam (ICE), and the General Chairside Assisting (GC) exam. She stated that the GC exam does have eligibility prerequisites associated with it.

Council Member Gerlach asked if the DANB gets adopted in California, whether assistants would be certified dental assistants instead of RDAs. Ms. Vallery responded that what is in current law is anyone who currently holds a dental assistant certification from DANB can apply for licensure as an RDA. The registered dental assistant applicant would use their DANB dental assistant certification as their pathway, but the applicant would then have to show proof of graduating from a course in California for coronal polishing, radiation safety, infection control, and pit and fissure sealants. Even though the applicant has already taken the RHS exam and ICE from DANB, the Board does not currently accept completion of those exams. Therefore, the applicant has to then pay to take another course in California, and the Board would accept those. Ms. Vallery expressed that Board staff is proposing to accept these component exams. She added

that if the applicant has already taken the DANB component exams, the Board would accept those as [completion of the course] requirements to get licensed as an RDA.

Tara Welch inquired whether DANB has any data on how the exam candidates prepare for the exams. She wondered if a large percentage of the DANB exam candidates utilize hands-on training to prepare for the exams or if the candidates are learning through reading. Ms. Landsberg responded that because none of those exams have prerequisites, DANB does not ask the exam candidates for that information on the exam application. She noted that in some states, the radiography requirements require a course and an exam. Therefore, it can be assumed the candidate took that course and then took the exam. In those states, that requirement helps DANB understand what was the preparation to take the DANB exam.

Dr. Gueorguieva added that it has not been required that the candidates provide what education they may have taken in advance of taking the RHS exam. If the candidate applied for the dental assistant certification, then DANB would know if the candidate attended a Commission on Dental Accreditation (CODA) program, and the candidate may have also provided if they attended a non-CODA dental assisting program. She has some data on that she can share.

Council Member Carie Smith voiced that it sounds to her like they would have to double do all of these courses to get the RDA license. If they went through what DANB needed to get the dental assistant certification, California is still saying that they have to take infection control, radiation safety, coronal polishing, and sealants prior to getting the RDA license.

Ms. Vallery responded that Board staff proposed and got in the Board's Sunset bill acceptance of the DANB certified dental assistant pathway and added that anyone who has the dental assistant certification has already taken DANB's RHS exam and ICE. She confirmed the RDA license applicant would have to take additional courses. Ms. Vallery conveyed that Board staff is proposing to resolve this issue so the RDA license candidate who completed DANB's exams could use those exams to satisfy the course requirements. She added that Board staff is also hoping that this proposal would open options and accessibility to people who are in rural areas who cannot get to these courses because they are far away from their locations.

Council Member Olague stated that as a PDS dental health assistant, she has the opportunity to work with dental assistants in California and in 24 other states. From that perspective, she has insight on how DANB exams can be leveraged in California. Right now, it is double dipping, and license candidates have to take two exams. But for the future of dental assisting in California, the proposal would recognize DANB as the exam to satisfy stand-alone course requirements, which would help with access to care. So an on-the-job trained dental assistant could use either the in-person stand-alone courses or DANB exams for RDA licensure.

Chair Epps-Robbins asked for an explanation of the pathways for the accredited courses. Ms. Landsberg responded that DANB does not offer courses and that there are exam preparation courses offered through the DALE Foundation. She noted that the DANB exams are standardized tests that would validate the candidate's knowledge and give candidates the option of taking whatever course is available to them or choosing their own preparation method.

Chair Epps-Robbins asked how those courses are being validated for them to take this exam. Ms. Landsberg responded that if they get a passing score on the exam, then their knowledge is validated, and they demonstrate that they have the minimum required knowledge to perform those functions that are tested on the exam.

Ms. Vallery added that the Board staff proposal is to accept DANB examinations, and there is no course requirement in relation to the DANB examinations. She noted that there are other states that have course requirements to take the tests, but DANB does not. If the DANB exams are accepted in California, there would not be a requirement to take a course prior to the exam. The Board would not have a standard for how they take the examination.

Ms. Welch clarified that the proposal would move Board approval to other accrediting agencies, and the Board would no longer be approving the courses. For example, if an individual took a specific course through a CODA-accredited program, the individual could use successful completion of that course to apply for the RDA license or whatever permit or additional duty the individual is seeking. The proposal is not intended to require the individual to take a course, then take the DANB exam; rather, the proposal would allow the individual to take a course or complete the DANB exam.

Council Vice Chair Fowler asked for clarification whether a dental assistant in California who took the coronal polishing and sealant course would be able to perform those duties before getting an RDA license. Ms. Vallery responded that coronal polishing is an allowable duty for unlicensed dental assistants; if this proposal went through and DANB examinations are recognized, the dental assistant could do coronal polishing upon passing that DANB examination. However, a dental assistant cannot perform pit and fissure sealants without having an RDA license.

Council Vice Chair Fowler asked whether the 33,000 DANB certifications is for the Certified Dental Assistant, the Certified Orthodontic Assistant (COA), or whether that number also includes the stand-alone examinations, like the radiation safety and infection control. Ms. Landsberg responded that number reflects individuals who hold certifications, which have to be renewed every year. That number does not include people who previously earned, but have not maintained, the certification. That number also does not include people who have only completed the stand alone exams.

Council Member Miyasaki asked whether there are state statistics where a course is required before the exam. Ms. Landsberg responded that some states have an either/or

– either take a course or an exam. In some states, as long as the candidate passed the exam, the state does not look into how candidates prepared for the exam; only exam passage is required. In other states, the candidate has to take a course and pass an exam. She can put that information together and provide to the Council.

Council Member Miyasaki asked Members to consider whether a dental assistant could take the coronal polishing exam and start performing coronal polishing without having any infection control training. Council Member Gerlach agreed.

Ms. Welch noted that one of the arguments in favor of changing the infection control requirements last year is that the dental assistants are supervised by the dentist. If there is any concern as to the competency of the dental professional providing the services, the dentist is responsible for that. The Board keeps hearing that it is difficult to get access to courses and get licensure, so Board staff is trying to find appropriate ways to increase those numbers so that there is more dental staff and then that staff is working under the supervising dentist. Ultimately, the dentist needs to ensure that the individual is safe to practice on patients.

Council Member Gerlach asked if she were a new dental assistant, would she be able to take the DANB exam tomorrow and get her X-ray certification or whether there is experience required prior to taking that exam. Ms. Landsberg responded DANB does not have any eligibility prerequisites to take the radiography exam; and the candidate would be able to study and take the test whenever they felt ready.

Ms. Vallery added that currently unlicensed dental assistants can do radiation safety – there is no requirement for them to have a certain number of months in practice before they can take the course. She pointed out that although the intention of the law was for dental assistants to have clinical practice experience in the educational setting, the majority of the students taking those courses are sent back to their dental offices and being supervised by their dentist. She urged the Council and stakeholders to review this issue with open eyes. While Board staff is stating they would like the DANB examination to be an option for California, the dental assistant still would be supervised by a dentist, which is ultimately what the course does.

Council Member Larin asked whether the DANB certification exam is going to replace the RDA eventually. Ms. Vallery responded that the proposal is merely to recognize those four DANB examinations that were presented at this meeting, and license applicants would still be required to apply for the RDA license and pass the Board's examination.

Council Member Miyasaki asked whether they could do the online testing at home. Ms. Landsberg responded that testing can be done at home if the test taker has a space at home that meets the requirements and the internet connection is good enough. If they do not have an acceptable space, they might have to go do it at in their dental office in a room that is more conducive to that or in another place where they might be able to do

it. Dr. Gueorguieva added that if there is an unforeseen disruption in the test, the exam would be stopped and DANB provides another opportunity at a reduced fee to reapply and take that exam. She expressed that DANB keeps note of it, and if they have a second incident, then they may not be allowed to test for a period of time.

Chair Epps-Robbins requested public comment on this item. The Council received public comment.

Ms. Becker wondered how other states are compensating for the lack of hands-on training with the DANB exams and from the perspective of patient and public safety and protection, wondered how the public would feel about somebody taking, for example, the radiation safety exam with no hands-on training. She knows that dentists are responsible for their staff; however, to say that the dentists are directly supervising their staff is a little bit confusing and maybe not as true as some people would consider. Therefore, she wondered how the public would feel about knowing that somebody just took a written exam and is now ready to start taking X-rays, for example, on a patient without any formal hands-on training.

Karen Okicich, DCA, Office of Professional Examination Services (OPES) representative, expressed that if the Council was considering this potentially as an eventual pathway toward the RDA license, their office would need to be involved in assessing these examinations. Whether or not Business and Professions Code (BPC) section 139 is in play here, they do get a little bit nervous anytime there is talk about formal assessments and ensuring validity. Ms. Okicich reminded the Council that the requirement is there and that OPES is here to help the Council in this process as they are beginning these conversations and starting to talk about whether or not to accept these examinations.

Dr. Lori Gagliardi, registered dental hygienist (RDH) and RDA retired educator, expressed that back in the 1970s, individuals had to take a state exam that was issued by the state prior to being able to expose X-rays. Then, they could learn how to take X-rays. She encouraged stakeholders to look closely at the availability of all the DANB exams for minimal competency to employment as a dental assistant or RDA. Dr. Gagliardi noted that when looking at public protection, there is a wide opinion on the minimal requirements for education, experience, and combined pathways that would be needed to ensure minimal competency has been met. The onus then falls on the Board to ensure course providers meet certain requirements for compliance, which based on the data presented today, is not always the case. However, these exams are specific to dental assisting tasks. They are vetted through the numerous processes, updated, and widely accepted. So, the exam pathways put the individual responsible for preparing by education and experience to successfully pass the exam. Dr. Gagliardi voiced that it is difficult to try to pass that exam without some sort of clinical skill to be able to know how to correct faulty radiographs.

Ms. Terlet, Chief Dental Officer for a FQHC, noted that this is for exam purposes and not for course certification. Therefore, it is no different than what was done with WREB for dental licensing or now currently American Board of Dental Examiners (ADEX) is being accepted as the test that everyone has to take. She noted that the courses that get to that point are not part of this, and the testing agency tests these skill sets. Thus, from the perspective of applicants and chief complaints that they cannot get an exam or the exams are far away, this takes that away from the Board. Ms. Terlet stated that many individuals who move to California because they are transferred due to spouses that choose not to go into the dental assisting profession because they have been practicing 10 years and have to jump through so many hoops by retaking all of these courses that they are clinically proficient at. Therefore, she highly encourages using the DANB exams as pathways for people who already know how to do these things and have been practicing and not make them retake and spend thousands of dollars for what they already know.

Agenda Item 9.: Update on Registered Dental Assistant General Written Law and Ethics Examination

Ms. Bell provided the report, which is available in the meeting materials.

Chair Epps-Robbins requested public comment on this item. The Council received public comment.

Ms. Okicich, OPES representative, clarified the number of scorable items has been reduced to 100, and there will still also be 25 pre-test items. She added that this will be in the candidate bulletin, and every candidate moving forward will have that information.

Agenda Item 10: Update, Discussion, and Possible Recommendation to the Board on Pending Legislation

Agenda Item 10.a.: Assembly Bill (AB) 873 (Alanis, 2025) Dentistry: Dental Assistants
Brant Nelson provided the report, which is available in the meeting materials.

Council Member Miyasaki voiced that she noticed in the meeting memo it states the author pulled the bill from the hearing and asked if they give a reason as to why they pulled the bill or if Board staff knows the reasons why the bill was pulled. Mr. Nelson responded that he does not know the reasons why it was pulled and that, at times, that information can be garnered from conversations internally with the committee staff.

Chair Epps-Robbins requested public comment on this item. The Council received public comment.

Ms. Zokaie, CDA representative, noted that the Senate Business, Professions and Economic Development Committee (Committee) did indicate that course fees largely need to have their own bill. CDA urged the Council to support a Board position to write a letter to the Committee and make a case that the infection control course fees should be included in AB 873 for proper implementation. While the Committee does recommend

having course fees separate from this cleanup bill for the infection control course completion, CDA does think that there is a good case for at least that course fee to still be in this bill, but the Committee does recommend that other course fees be its own bill. Ms. Zokaie verbalized that CDA is still in communication with the Committee, are open to amendments, and are going to continue to look at infection control course completion. She added that the last language that was in the July 9 version was 60 days for course completion, and CDA is open to discussions on the course completion date, especially as they continue to urge the Board to continue to prioritize the development of an online course. In the meantime, they appreciate assurance that the enforcement of this requirement does not change until the course is available online.

Agenda Item 11: Update, Discussion, and Possible Recommendations to the Board on Proposed Regulations

Agenda Item 11.a.: Status Update on Pending Regulations

Mr. Nelson provided the report, which is available in the meeting materials.

Chair Epps-Robbins requested public comment on this item.

Leslie Canham, participating through WebEx, requested to make public comment but was unable to do so due to technical difficulties.

Agenda Item 12: Adjournment

Chair Epps-Robbins adjourned the meeting at 10:42 a.m.

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

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MEMORANDUM

DATE	October 13, 2025
TO	Members of the Dental Assisting Council
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 4.: Council Chair Report

Background

Ms. De'Andra Epps-Robbins, Chair of the Dental Assisting Council, will provide an update on Council activities.

Action Requested

No action required.

DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	October 13, 2025
TO	Members of the Dental Assisting Council
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 5.: Interim Executive Officer Report

Background

Christy Bell will provide an update on Board activities.

Action Requested

No action required.

DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	October 7, 2025
TO	Members of the Dental Assisting Council
FROM	Rikki Parks, Dental Assisting Program Manager Dental Board of California
SUBJECT	Agenda Item 6.: Update on Dental Assisting Examination Statistics

Background

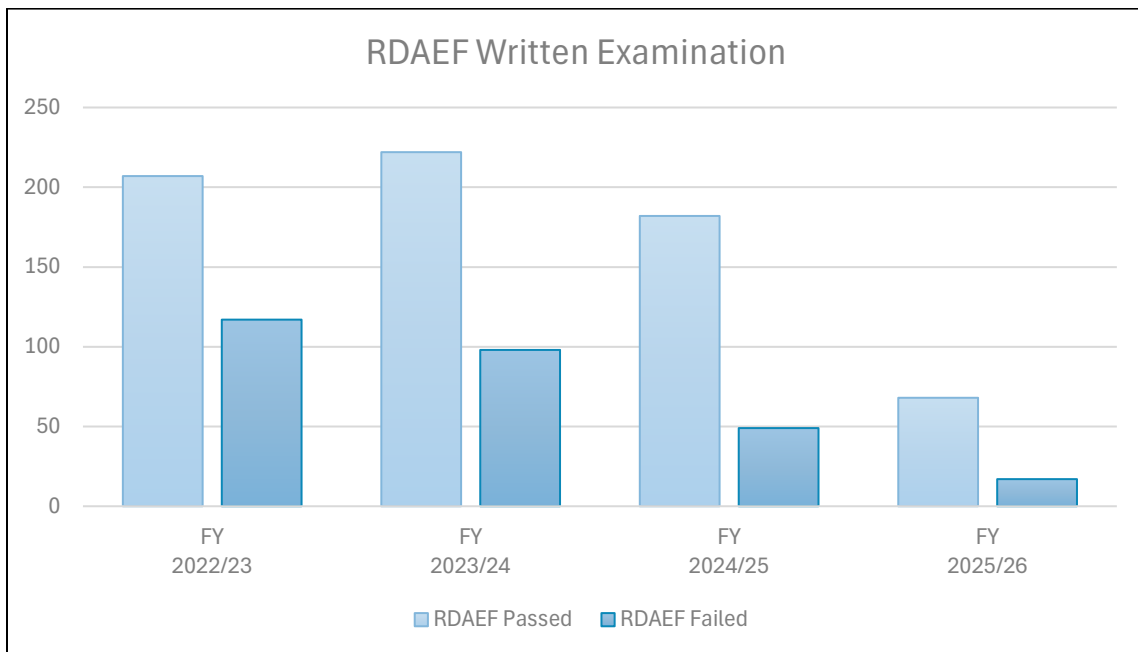
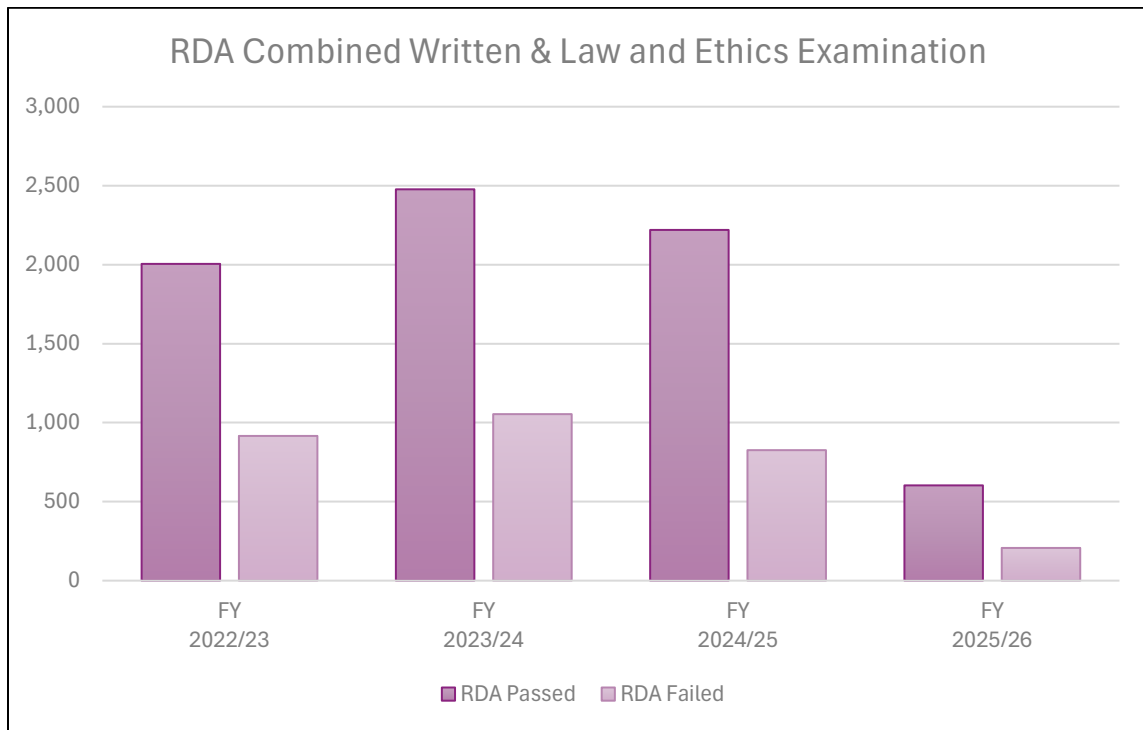
The following table provides the examination statistics for candidates who attempted dental assisting examinations in fiscal years (FY) 2022/23, 2023/24, 2024/25, and 2025/26 through September.

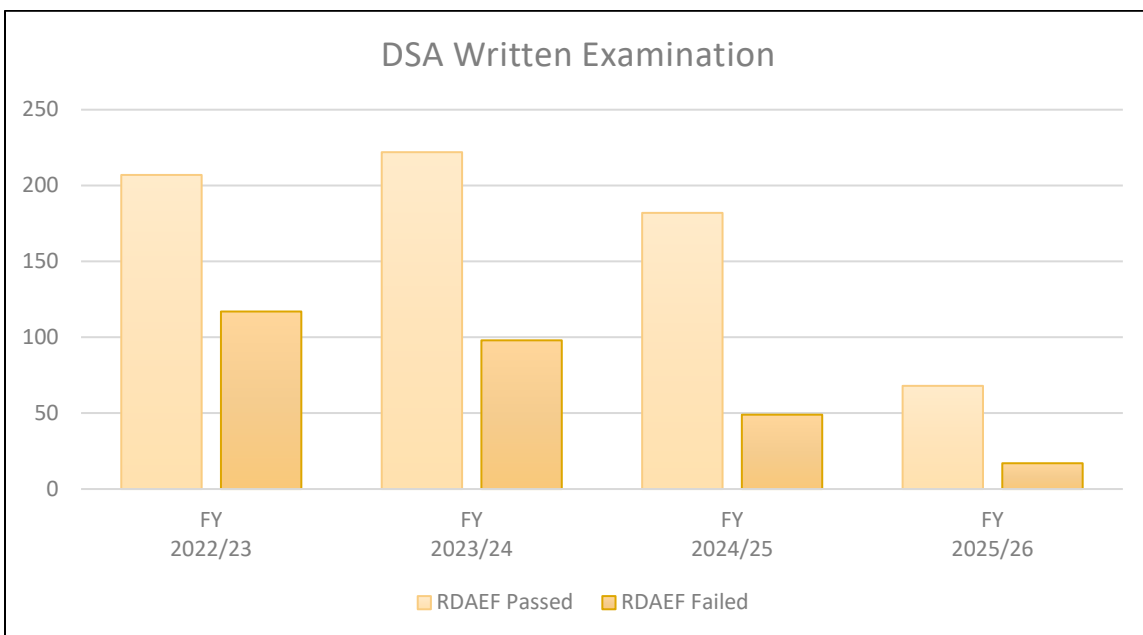
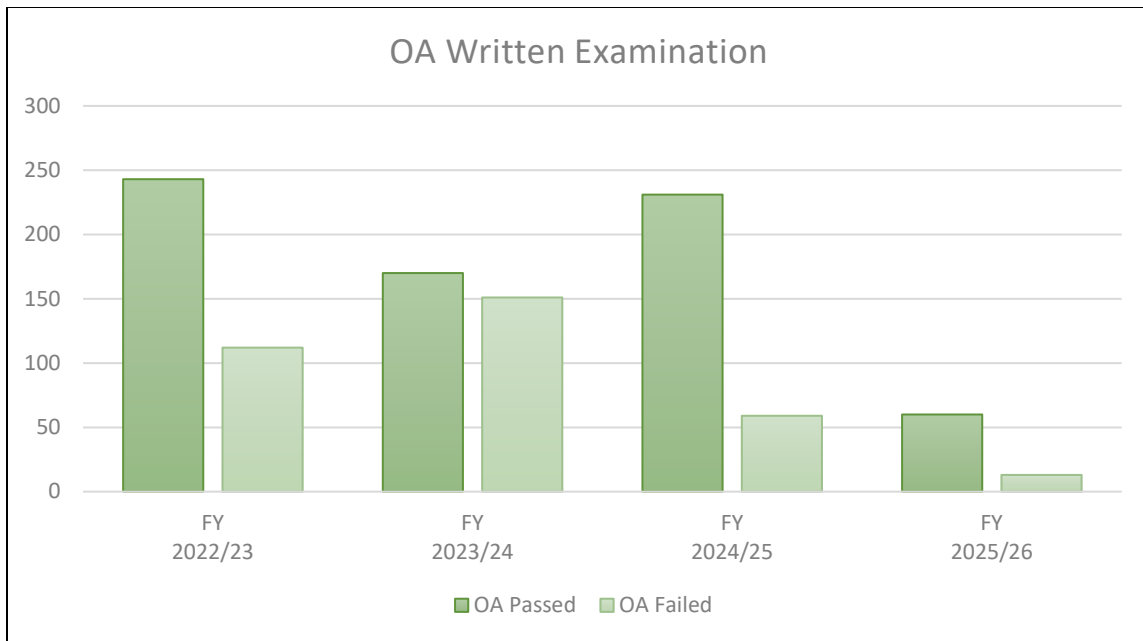
License Type		RDA	RDAEF	OA	DSA
		Written	Written	Written	Written
FY 2025/26	Total 1st Time Candidates Tested	609	68	60	1
	1st Time Candidates Pass	518	59	57	1
	1st Time Candidates Pass %	85%	87%	95%	100%
	1st Time Candidates Fail	91	9	3	0
	1st Time Candidates Fail %	15%	13%	5%	0%
	Total Repeat Candidates Tested	201	17	13	0
	Repeat Candidates Pass	85	9	3	0
	Repeat Candidates Pass %	42%	53%	23%	0%
	Repeat Candidates Fail	116	8	10	0
	Repeat Candidates Fail %	58%	47%	77%	0%
	Total Candidates Tested	810	85	73	1
	Total Candidates Passed	603	68	60	1
	Total Candidates Pass %	74%	80%	82%	100%
	Total Candidates Failed	207	17	13	0
	Total Candidates Failed %	26%	20%	18%	0%
FY 2024/25	Total 1st Time Candidates Tested	2,251	166	212	3
	1st Time Candidates Pass	1,871	148	187	3
	1st Time Candidates Pass %	83%	89%	88%	%
	1st Time Candidates Fail	380	18	25	0
	1st Time Candidates Fail %	17%	11%	18%	N/A
	Total Repeat Candidates Tested	795	65	78	2

Agenda Item 6.: Update on Dental Assisting Examination Statistics
Dental Assisting Council Meeting
November 6, 2025

Page 1 of 4

	Repeat Candidates Pass	349	34	44	1
	Repeat Candidates Pass %	44%	52%	56%	50%
	Repeat Candidates Fail	446	31	34	1
	Repeat Candidates Fail %	56%	48%	44%	50%
	Total Candidates Tested	3,046	231	290	5
	Total Candidates Passed	2,220	182	231	4
	Total Candidates Pass %	73%	79%	80%	80%
	Total Candidates Failed	826	49	59	1
	Total Candidates Failed %	27%	21%	20%	20%
FY 2023/24	Total 1st Time Candidates Tested	2,466	213	171	8
	1st Time Candidates Pass	1,973	176	123	7
	1st Time Candidates Pass %	80%	83%	72%	87.5%
	1st Time Candidates Fail	493	37	48	1
	1st Time Candidates Fail %	20%	17%	28%	12.5%
	Total Repeat Candidates Tested	1,065	107	150	1
	Repeat Candidates Pass	504	46	47	1
	Repeat Candidates Pass %	47%	43%	31%	100%
	Repeat Candidates Fail	561	61	103	0
	Repeat Candidates Fail %	53%	57%	69%	0
	Total Candidates Tested	3,531	320	321	9
	Total Candidates Passed	2,477	222	170	8
	Total Candidates Pass %	70%	69%	53%	89%
	Total Candidates Failed	1,054	98	151	1
	Total Candidates Failed %	30%	31%	47%	11%
FY 2022/23	Total 1st Time Candidates Tested	2,107	194	255	8
	1st Time Candidates Pass	1,644	155	189	7
	1st Time Candidates Pass %	78%	80%	74%	88%
	1st Time Candidates Fail	463	39	66	1
	1st Time Candidates Fail %	22%	20%	26%	12%
	Total Repeat Candidates Tested	814	130	100	3
	Repeat Candidates Pass	361	52	54	3
	Repeat Candidates Pass %	44%	40%	54%	100%
	Repeat Candidates Fail	453	78	46	0
	Repeat Candidates Fail %	56%	60%	46%	N/A
	Total Candidates Tested	2,921	324	355	11
	Total Candidates Passed	2,005	207	243	10
	Total Candidates Pass %	69%	64%	68%	91%
	Total Candidates Failed	916	117	112	1
	Total Candidates Fail %	31%	36%	32%	9%





The Office of Professional Examination Services (OPES) monitors the passing rates for the dental assistant examinations. OPES works with subject matter experts (i.e., actively practicing licensees who are in good standing) to build a bank of quality questions that adhere to professional guidelines and technical standards for use on occupational licensing examinations.

Action Requested

Informational only. No action required.

Agenda Item 6.: Update on Dental Assisting Examination Statistics
Dental Assisting Council Meeting
November 6, 2025

DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

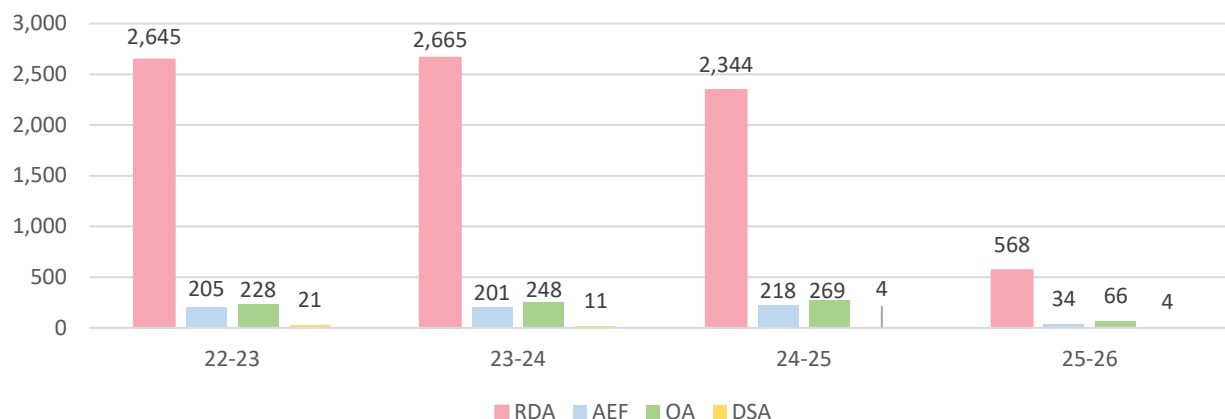
DATE	October 13, 2025
TO	Members of the Dental Assisting Council
FROM	Rikki Parks, Dental Assisting Program Manager Dental Board of California
SUBJECT	Agenda Item 7.: Update on Dental Assisting Licensing Statistics

Year Over Year Dental Assistant License Application Statistics

The following tables provide yearly dental assistant license application statistics for fiscal years (FY) 2022–2023, 2023–2024, 2024–2025, and 2025-2026 through September.

Dental Assistant Applications (1010) Received by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	2,645	2,665	2,344	568	8,222
AEF	205	201	218	34	658
OA	228	248	269	66	811
DSA	21	11	4	4	40
FY Totals	3,099	3,125	2,835	672	9,731

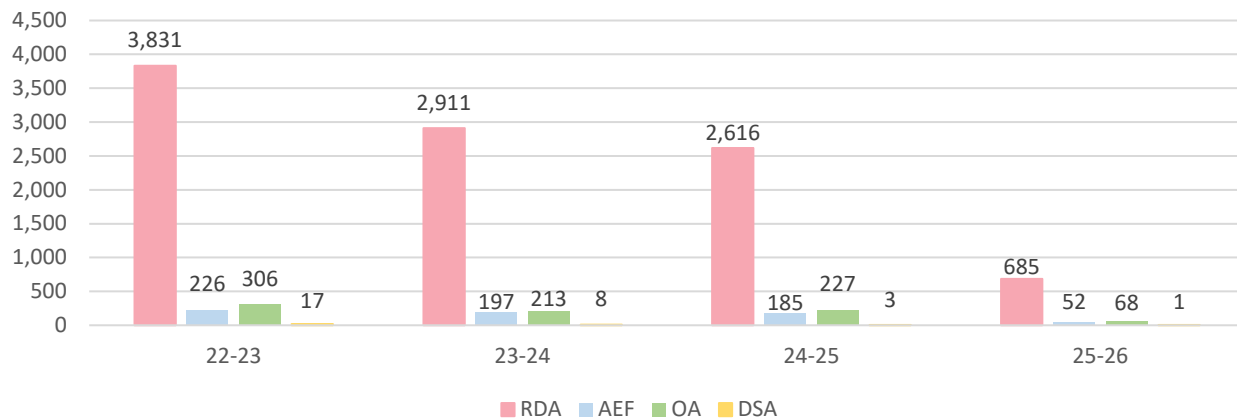
Dental Assistant Applications Received By Type Per FY



Agenda Item 7.: Update on Dental Assisting Licensing Statistics
Dental Assisting Council Meeting
November 6, 2025

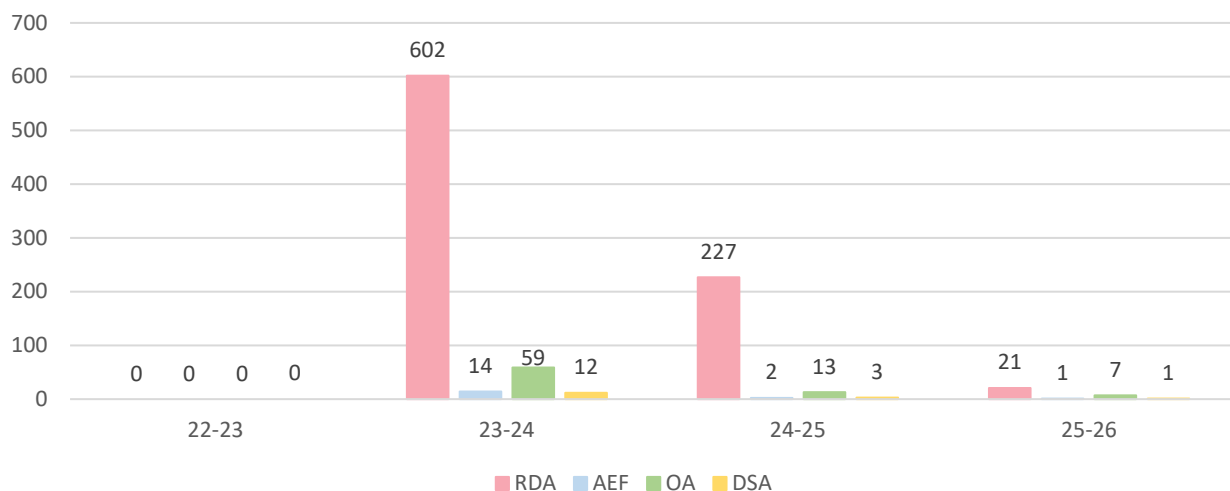
Dental Assistant Applications (1010) Approved by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	3,831	2,911	2,616	685	10,043
AEF	226	197	185	52	660
OA	306	213	227	68	814
DSA	17	8	3	1	29
FY Totals	4,380	3,329	3,031	806	11,546

Dental Assistant Applications (1010) Approved By Type Per FY



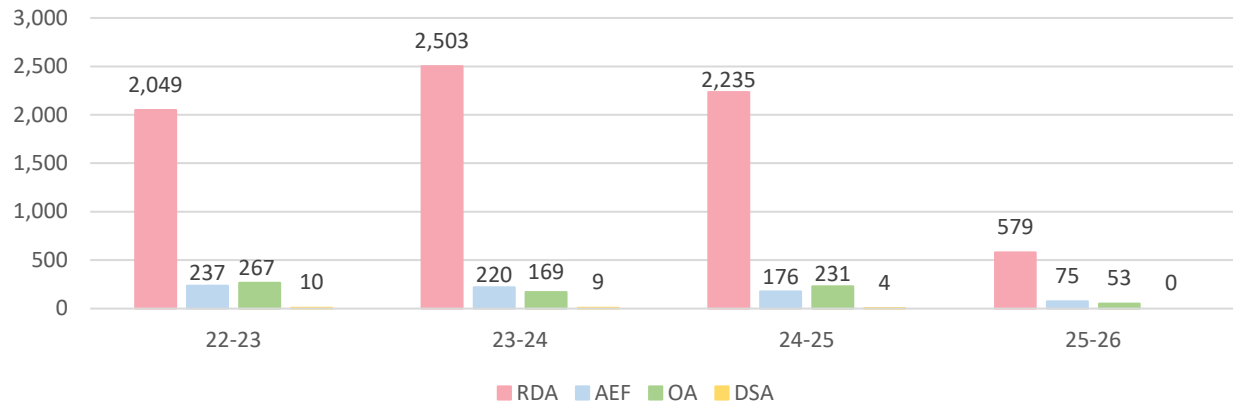
Dental Assistant Applications (1010) Abandoned by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	N/A	602	227	21	850
AEF	N/A	14	2	1	17
OA	N/A	59	13	7	79
DSA	N/A	12	3	1	16
FY Totals	0	687	245	30	962

Dental Assistant Applications Abandoned By Type Per FY



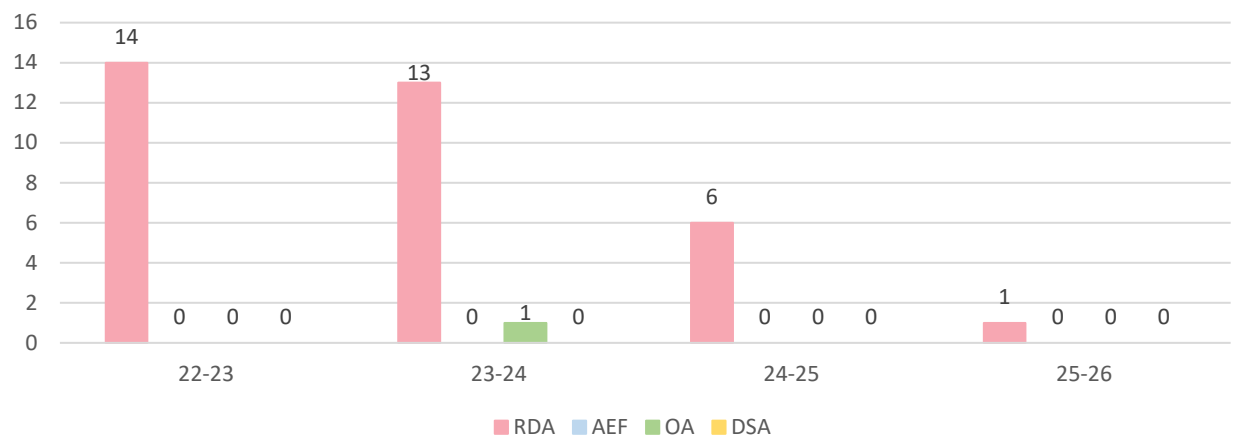
Dental Assistant Applications (1020) Approved and Licenses Issued by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	2,049	2,503	2,235	579	7,366
AEF	237	220	176	75	708
OA	267	169	231	53	720
DSA	10	9	4	0	23
FY Totals	2,563	2,901	2,646	707	8,817

Dental Assistant Applications Approved and Licenses Issued By Type Per FY

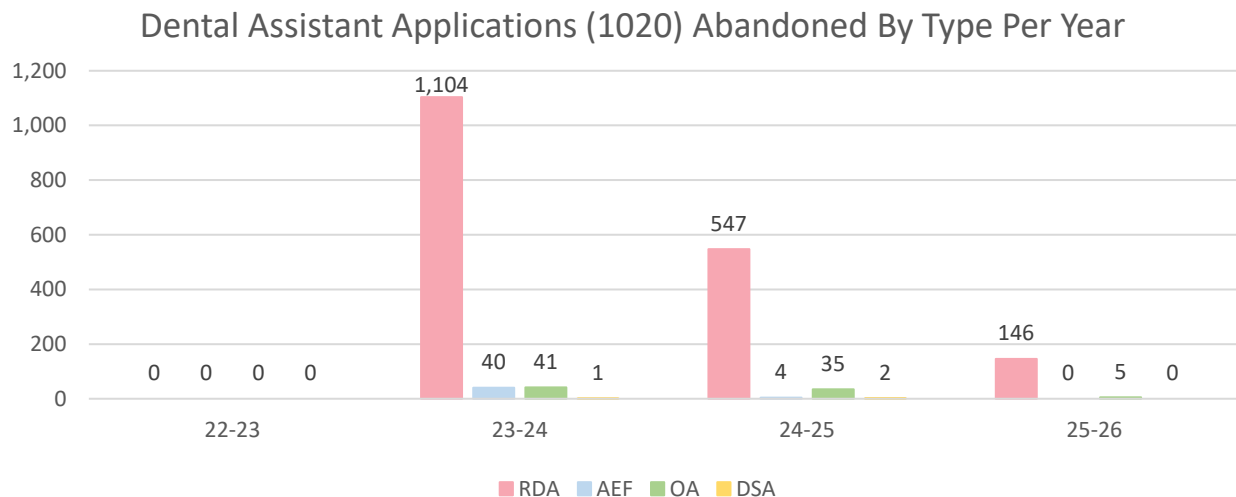


Dental Assistant Applications (1020) Denied by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	14	13	6	1	34
AEF	0	0	0	0	0
OA	0	1	0	0	1
DSA	0	0	0	0	0
FY Totals	14	14	6	1	35

Dental Assistant Applications Denied By Type Per Year



Dental Assistant Applications (1020) Abandoned by Type Per FY					
	22-23	23-24	24-25	25-26	Totals
RDA	N/A	1,104	547	146	1,797
AEF	N/A	40	4	0	44
OA	N/A	41	35	5	81
DSA	N/A	1	2	0	3
FY Totals	0	1,186	588	151	1,925



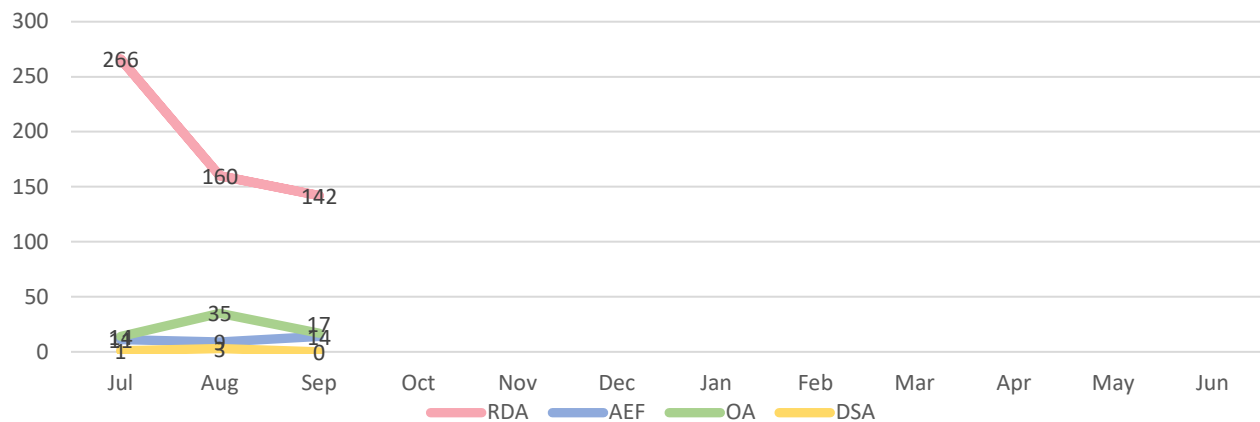
Application Definitions	
Received	Application received in paper format or electronically through BreEZe system.
Approved	Application for eligibility of licensure processed with required documentation and examination eligibility issued.
License Issued	Final application including examination results approved and license issued.
Abandoned (1010)	An applicant who fails to complete application requirements within one year after being notified by the Board of deficiencies.
Abandoned (1020)	Pursuant to CCR, title 16, section 1004, an application is considered abandoned if: 1) The applicant fails to submit the application, examination, or reexamination fee within 180 days after notification by the Board that such fee is due and unpaid. 2) The applicant fails to take the licensing examination within two years after the date their application was received by the Board. 3) ... [A]fter failing the examination, [the applicant] fails to take a reexamination within two years after the date the applicant was notified of such failure.
Denied	The Board denies an application on the grounds that the applicant has been convicted of a crime or has been subject to formal discipline; in accordance with Business and Professions Code, Division 1.5, Chapter 2, Denial of Licenses.

Monthly Dental License Application Statistic Graphs

The following graphs represent monthly Dental Assistant license application statistics by license type for fiscal year 2025-26 through September.

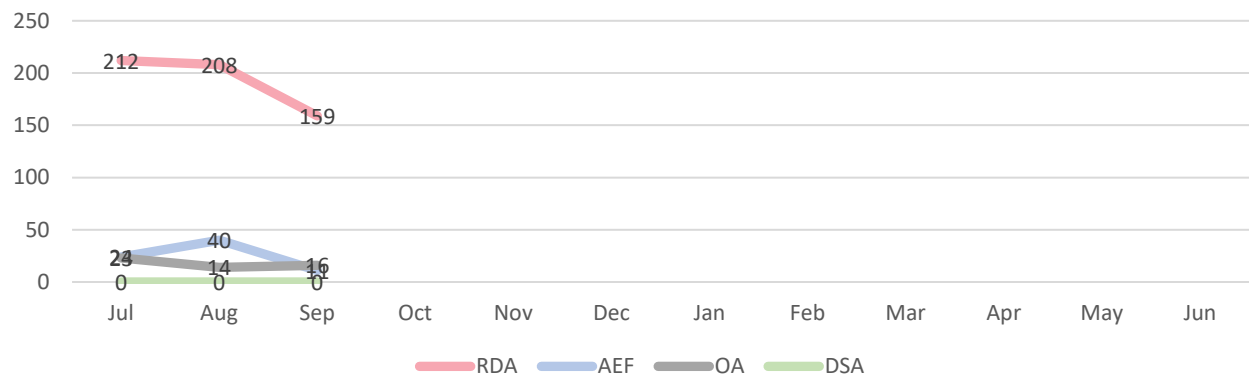
Dental Assistant Applications (1010) Received by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	266	160	142										568
AEF	11	9	14										34
OA	14	35	17										66
DSA	1	3	0										4
Totals	292	207	173	0	0	0	0	0	0	0	0	0	672

Dental Assistant Applications (1010) Received in FY 25/26



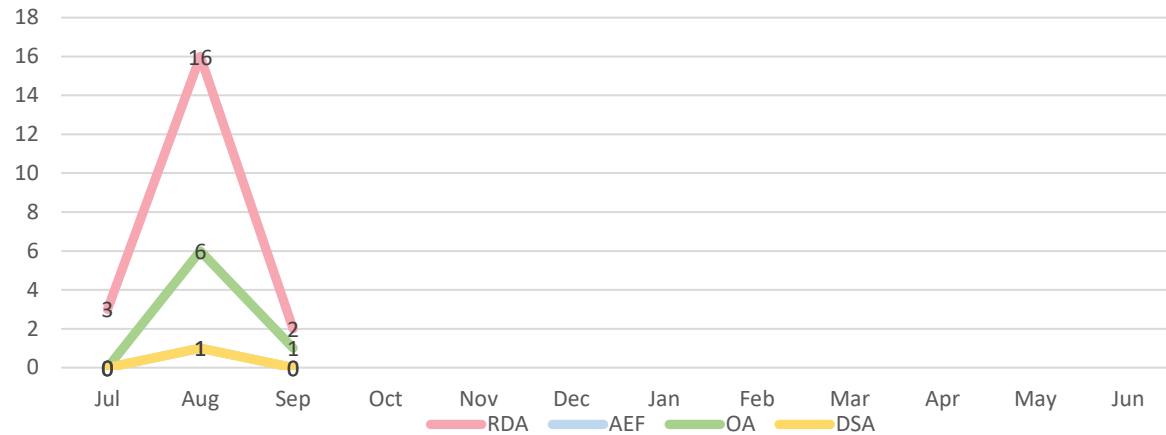
Dental Assistant Applications (1020) Approved and Licenses Issued by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	212	208	159										579
AEF	24	40	11										75
OA	23	14	16										53
DSA	0	0	0										0
Totals	259	262	186	0	0	0	0	0	0	0	0	0	707

Dental Assistant Applications Approved & Licenses Issued in FY 25/26



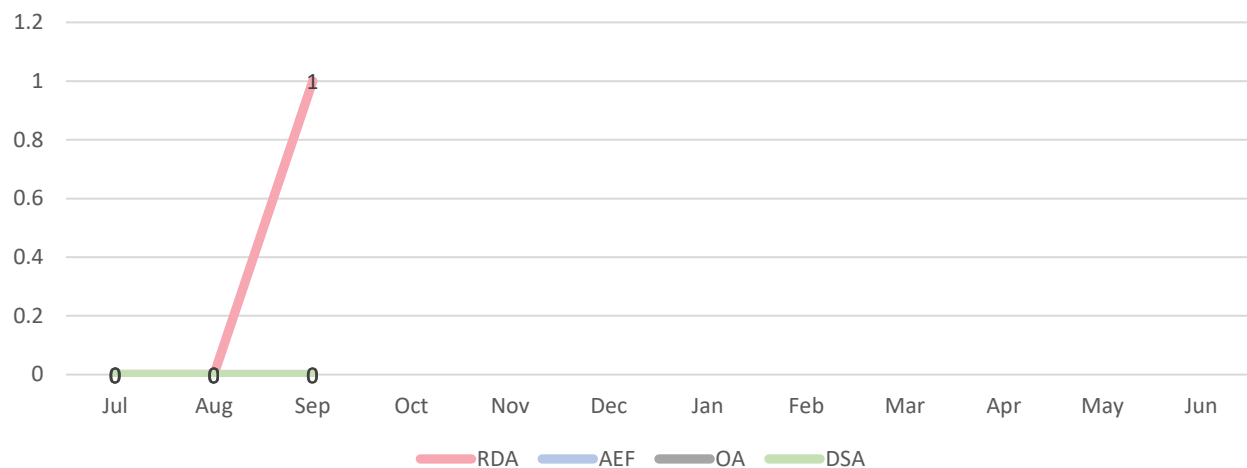
Dental Assistant Applications (1010) Abandoned by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	3	16	2										21
AEF	0	1	0										1
OA	0	6	1										7
DSA	0	1	0										1
Totals	3	24	3	0	0	0	0	0	0	0	0	0	30

Dental Assistant Applications (1010) Abandoned in FY 25/26



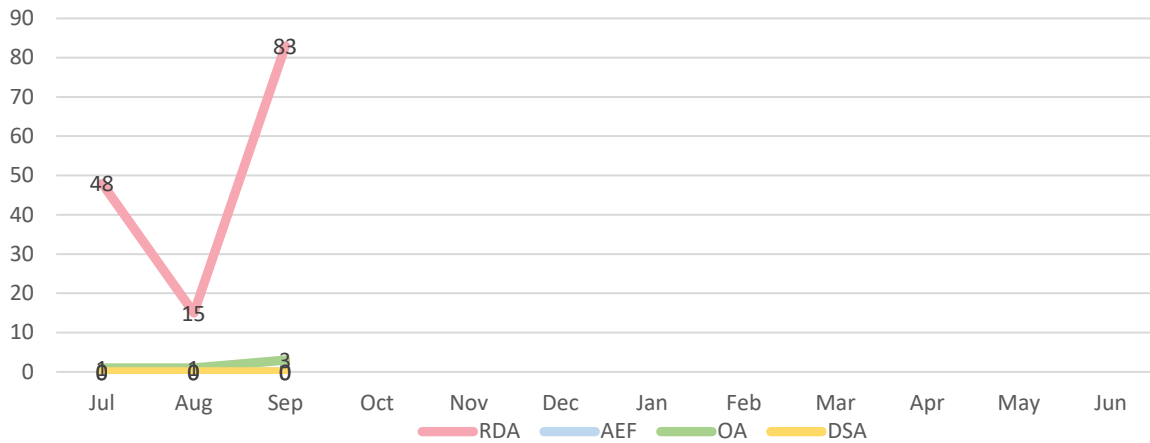
Dental Assistant Applications (1020) Denied by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	0	0	1										1
AEF	0	0	0										0
OA	0	0	0										0
DSA	0	0	0										0
Totals	0	0	1	0	0	0	0	0	0	0	0	0	1

Dental Assistant Applications (1020) Denied in FY 25/26



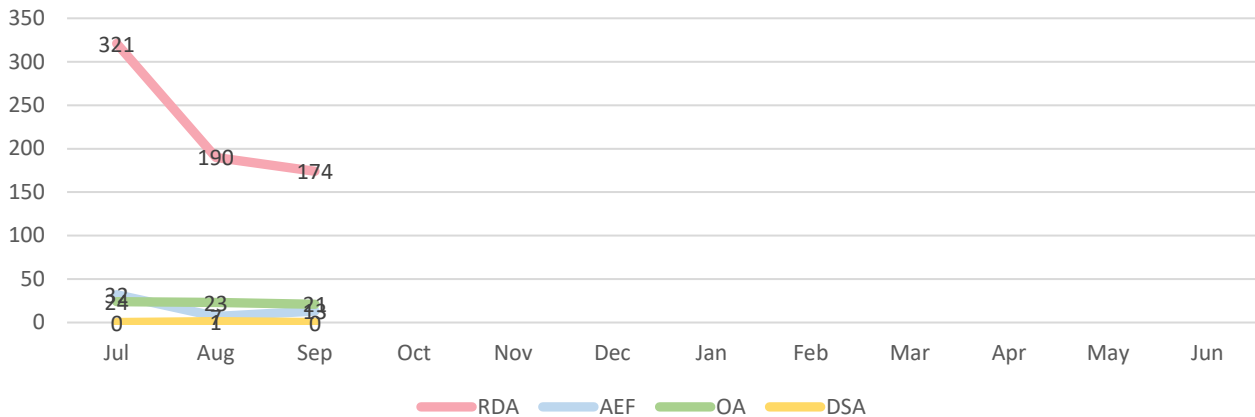
Dental Assistant Applications (1020) Abandoned by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	48	15	83										146
AEF	0	0	0										0
OA	1	1	3										5
DSA	0	0	0										0
Totals	49	16	86	0	0	0	0	0	0	0	0	0	151

Dental Assistant Applications (1020) Abandoned in FY 25/26



Dental Assistant Applications (1010) Approved by Month in FY 25/26													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
RDA	321	190	174										685
AEF	32	7	13										52
OA	24	23	21										68
DSA	0	1	0										1
Totals	377	221	208	0	0	0	0	0	0	0	0	0	806

Dental Assisting Applications (1010) Approved in FY 25/26



Application Definitions	
Received	Application received in paper format or electronically through BreEZe system.
Approved	Application for eligibility of licensure processed with required documentation and examination eligibility issued.
License Issued	Final application including examination results approved and license issued.
Abandoned (1010)	An applicant who fails to complete application requirements within one year after being notified by the Board of deficiencies.
Abandoned (1020)	Pursuant to CCR, title 16, section 1004, an application is considered abandoned if: 4) The applicant fails to submit the application, examination, or reexamination fee within 180 days after notification by the Board that such fee is due and unpaid. 5) The applicant fails to take the licensing examination within two years after the date their application was received by the Board. 6) ... [A]fter failing the examination, [the applicant] fails to take a reexamination within two years after the date the applicant was notified of such failure.
Denied	The Board denies an application on the grounds that the applicant has been convicted of a crime or has been subject to formal discipline; in accordance with Business and Professions Code, Division 1.5, Chapter 2, Denial of Licenses.

Dental Assistant License Status Statistics

The following table provides dental assistant license and permit status statistics for fiscal years 2022–23, 2023–24, 2024–25, and 2025-26 through September. Cancelled licenses indicates number of licenses/permits cancelled to date.

License Type	License Status	2022–23	2023–24	2024–25	2025–26
Registered Dental Assistant	Active	28,437	28,711	29,146	29,108
	Inactive	3,790	3,611	3,439	3,337
	Delinquent	13,543	13,696	13,668	14,015
	Cancelled	53,712	55,903	57,957	58,296
License Type	License Status	2022–23	2023–24	2024–25	2025–26
Registered Dental Assistant in ExtendedFunctions	Active	1,950	2,082	2,243	2,277
	Inactive	77	78	78	78
	Delinquent	305	352	335	351
	Cancelled	462	494	536	550
License Type	License Status	2022–23	2023–24	2024–25	2025–26
Orthodontic Assistant	Active	1,602	1,678	1,843	1,854
	Inactive	46	50	53	53
	Delinquent	333	399	419	448
	Cancelled	51	78	119	128
License Type	License Status	2022–23	2023–24	2024–25	2025–26
Dental Sedation Assistant	Active	45	52	55	54
	Inactive	4	4	3	3
	Delinquent	17	12	14	14
	Cancelled	9	15	15	16

License Status Definitions	
Active	An individual who has an active status and has completed all renewal requirements.
Inactive	An individual who has an inactive status and has paid the renewal fees, but who cannot perform the duties of the license unless the license is re-activated. Continuing education units are not required for inactive license renewal.
Delinquent	An individual who does not comply with renewal requirements. This status remains until renewal requirements are met.
Cancelled	An individual who fails to comply with renewal requirements by a set deadline.

The following table provides statistics on population, current and active Registered Dental Assistant (RDA) licenses by county, and population per RDA license by county for fiscal years 2023–24, 2024–25, and 2025-26 through September. These statistics represent the licensee’s address of record and not necessarily the licensee’s workplace address.

County	RDA 23-24	Pop. 23-24	Pop. per RDA 23-24	DDS 23-24	RDA to DDS Ratio 23-24	RDA 24-25	Pop. 24-25	Pop. per RDA 24-25	DDS 24-25	RDA to DDS Ratio 24-25	RDA 25-26	Pop. 25-26	Pop. per RDA 25-26	DDS 25-26	RDA to DDS Ratio 25-26
Alameda	1,106	1,636,194	1,479	1,472	0:1	1,117	1,641,869	1,469	1,472	0:1	1,117	1,662,482	1,488	1474	0:1
Alpine	0	1,184	0	0	0	0	1,179	0	0	0	1	1,177	1,177	0	0
Amador	52	39,837	766	23	2:1	55	39,611	720	24	2:1	54	39,563	732	24	2:1
Butte	271	205,592	758	118	2:1	262	205,928	785	116	2:1	261	207,525	795	110	2:1
Calaveras	59	44,890	760	21	2:1	59	44,842	760	17	3:1	59	44,722	758	16	3:1
Colusa	28	21,771	777	4	4:1	29	21,743	749	3	9:1	31	22,026	710	3	10:1
Contra Costa	1222	1,147,653	939	1,092	1:1	1,208	1,146,626	949	1,094	1:1	1,217	1,158,225	951	1106	1:1
Del Norte	28	26,599	949	11	2:1	30	26,345	878	14	2:1	31	26,544	856	13	2:1
El Dorado	202	189,006	935	148	1:1	196	188,583	962	142	1:1	194	190,770	983	143	1:1
Fresno	891	1,011,499	1,135	625	1:1	894	1,017,431	1,138	639	1:1	893	1,037,053	1,161	648	1:1
Glenn	50	28,636	572	7	7:1	47	28,736	611	7	6:1	49	29,369	599	7	7:1
Humboldt	161	134,047	832	66	2:1	164	133,100	811	67	2:1	169	133,817	791	67	2:1
Imperial	90	179,476	1,994	40	2:1	92	182,881	1,987	38	2:1	90	186,499	2,072	37	2:1
Inyo	7	18,896	2,699	7	1:1	6	18,856	3,142	7	0:1	6	18,800	3,133	7	0:1
Kern	624	907,476	1,454	350	1:1	666	910,300	1,366	352	1:1	666	923,961	1,387	355	1:1
Kings	155	151,018	974	58	2:1	166	152,627	919	58	2:1	166	154,015	927	60	2:1
Lake	84	66,800	795	37	1:1	86	67,001	779	41	2:1	80	67,254	840	44	1:1
Lassen	35	28,275	807	18	1:1	34	28,197	829	18	1:1	35	28,716	820	21	1:1
Los Angeles	4505	9,761,210	2,166	8,464	0:1	4,551	9,824,091	2,158	8,462	0:1	4,514	9,876,811	2,188	8509	0:1
Madera	155	158,148	1,020	47	3:1	147	159,328	1,083	55	2:1	144	162,599	1,129	51	2:1
Marin	172	252,959	1,470	279	0:1	170	252,844	1,487	266	0:1	168	254,550	1,515	265	0:1
Mariposa	9	16,935	1,881	6	1:1	8	16,966	2,120	7	1:1	8	16,917	2,114	7	1:1
Mendocino	94	89,164	948	45	1:1	100	89,476	894	48	2:1	101	89,827	889	48	2:1

County	RDA 23-24	Pop. 23-24	Pop. per RDA 23-24	DDS 23-24	RDA to DDS Ratio 23-24	RDA 24-25	Pop. 24-25	Pop. per RDA 24-25	DDS 24-25	RDA to DDS Ratio 24-25	RDA 25-26	Pop. 25-26	Pop. per RDA 25-26	DDS 25-26	RDA to DDS Ratio 25-26
Merced	264	284,338	1,077	92	2:1	233	285,337	1,224	98	2:1	244	293,080	1,201	93	2:1
Modoc	3	8,690	2,896	3	0:1	3	8,527	2,842	5	0:1	4	8,491	2,122	5	0:1
Mono	5	13,379	2,675	5	1:1	5	13,156	2,631	5	1:1	5	12,684	2,536	3	1:1
Monterey	436	433,716	994	248	1:1	370	430,368	1,163	244	1:1	377	438,831	1,164	249	1:1
Napa	141	136,179	965	110	1:1	130	134,637	1,035	106	1:1	127	136,124	1,071	99	1:1
Nevada	100	101,242	1,012	72	1:1	84	100,720	1,199	69	1:1	80	100,354	1,254	64	1:1
Orange	1814	3,162,245	1,743	4,073	0:1	1632	3,137,164	1,922	4,183	0:1	1,632	3,175,427	1,945	4243	0:1
Placer	534	409,025	765	472	0:1	469	410,305	874	482	0:1	460	421,446	916	500	0:1
Plumas	18	18,942	1,052	13	1:1	14	18,996	1,356	13	1:1	16	18,885	1,180	12	1:1
Riverside	2171	2,435,525	1,121	1,142	1:1	2019	2,439,234	1,208	1,163	1:1	2,001	2,495,640	1,247	1215	1:1
Sacramento	1887	1,576,618	835	1,176	1:1	1590	1,572,453	988	1,207	1:1	1,571	1,604,745	1,021	1227	1:1
San Benito	118	65,479	554	23	4:1	98	65,666	670	26	4:1	103	66,822	648	27	3:1
San Bernardino	1688	2,187,665	1,296	1,398	1:1	1530	2,182,056	1,426	1,403	1:1	1,563	2,207,424	1,412	1450	1:1
San Diego	2808	3,287,306	1,170	2,820	0:1	2537	3,269,755	1,288	2,853	0:1	2,566	3,330,139	1,297	2888	0:1
San Francisco	452	842,754	1,864	1,151	0:1	424	831,703	1,961	1,127	0:1	427	842,027	1,971	1137	0:1
San Joaquin	873	784,298	898	376	1:1	793	786,145	991	393	1:1	802	805,856	1,004	392	2:1
San Luis Obispo	248	280,721	1,131	210	1:1	207	278,348	1,344	217	1:1	199	279,337	1,403	214	0:1
San Mateo	572	744,662	1,301	843	0:1	533	737,644	1,383	829	0:1	541	748,337	1,383	835	0:1
Santa Barbara	399	445,164	1,115	307	1:1	355	440,557	1,241	312	1:1	346	447,132	1,292	311	1:1
Santa Clara	1662	1,894,783	1,140	2,289	0:1	1517	1,886,079	1,243	2,283	0:1	1,482	1,922,259	1,297	2308	0:1
Santa Cruz	225	266,564	1,184	168	1:1	196	262,051	1,336	171	1:1	184	263,710	1,433	167	1:1
Shasta	203	180,531	889	100	1:1	164	179,436	1,094	109	1:1	158	180,201	1,140	103	1:1
Sierra	2	3,229	1,614	0	0:1	2	3,193	1,596	0	0:1	1	3,170	3,170	0	0
Siskiyou	28	43,830	1,565	23	1:1	21	43,548	2,073	23	1:1	22	43,311	1,968	21	1:1
Solano	623	447,241	717	279	2:1	562	443,749	789	277	2:1	561	449,839	801	279	2:1
Sonoma	675	482,404	714	382	1:1	607	478,174	787	374	1:1	602	482,848	802	381	1:1

County	RDA 23-24	Pop. 23-24	Pop. per RDA 23-24	DDS 23-24	RDA to DDS Ratio 23-24	RDA 24-25	Pop. 24-25	Pop. per RDA 24-25	DDS 24-25	RDA to DDS Ratio 24-25	RDA 25-26	Pop. 25-26	Pop. per RDA 25-26	DDS 25-26	RDA to DDS Ratio 25-26
Stanislaus	665	549,466	826	274	2:1	577	545,939	946	277	2:1	550	555,765	1,010	279	1:1
Sutter	143	99,145	693	51	2:1	120	98,952	824	49	2:1	119	100,257	842	54	2:1
Tehama	95	65,052	684	31	2:1	75	64,271	856	28	2:1	79	64,827	820	28	2:1
Trinity	5	16,023	3,204	3	1:1	5	15,939	3,187	2	1:1	7	15,884	2,269	2	3:1
Tulare	491	475,014	967	217	2:1	474	475,064	1,002	218	2:1	475	487,209	1,025	225	2:1
Tuolumne	81	55,291	682	47	1:1	77	54,590	708	45	1:1	75	54,357	724	40	1:1
Ventura	590	833,652	1,412	627	0:1	512	825,653	1,612	634	0:1	520	829,005	1,594	637	0:1
Yolo	210	221,165	1,053	122	1:1	187	220,880	1,181	125	1:1	183	225,433	1,231	117	1:1
Yuba	104	82,275	791	7	13:1	97	82,677	852	10	13:1	94	85,023	904	10	9:1
TOTAL	31,499	39,185,605	66,100	32,080	N/A	28,219	38,940,231	72,942	32,298	N/A	28,230	39,529,101	75,112	32,630	0:1

*Population data obtained from Department of Finance, Demographic Research Unit.

**Ratios are rounded to the nearest whole number.

Counties with the Highest Population per RDA:	Sierra County (1:3,170)	Counties with the Lowest Population per RDA:	Glenn County (1:599)
	Inyo County (1:3,133)		San Benito County (1:648)
	Mono County (1:2,536)		Colusa County (1:710)
	Trinity County (1:2,269)		Tuolumne County (1:724)
	Los Angeles County (1:2,188)		Amador County (1:732)

Action Requested

Informational only. No action required.

MEMORANDUM

DATE	October 10, 2025
TO	Members of the Dental Assisting Council
FROM	Tina Vallery, Division Chief Dental Assisting and License and Program Compliance Dental Board of California
SUBJECT	Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

The following table provides dental assisting (DA) educational programs and courses application statistics for fiscal years 2022–23, 2023–24, 2024–2025, and 2025–26 through September 30, 2025.

RDA and RDAEF Educational Program and Course Applications Approved				
Program/Course	2022–23	2023–24	2024–25	2025–26
RDA Program	0	0	1	0
RDAEF Program	0	0	1	0
RDAEF-ITR	0	0	0	0
Radiation Safety	11	5	6	7
Coronal Polishing	9	3	4	10
Pit & Fissure Sealant	5	3	4	6
Ultrasonic Scaling	0	2	0	1
Infection Control	4	4	5	10
DSA Permit	3	0	1	0
OA Permit	19	6	4	1
Total Applications Approved	51	23	26	35
RDA and RDAEF Educational Program and Course Applications Denied				
Program/Course	2022–23	2023–24	2024–25	2025–26
RDA Program	0	1	2	0
RDAEF Program	0	1	1	1
RDAEF-ITR	0	0	0	0
Radiation Safety	0	7	11	2
Coronal Polishing	0	4	10	0

Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Dental Assisting Council Meeting

November 6, 2025

Pit & Fissure Sealant	0	0	12	1
Ultrasonic Scaling	0	1	2	1
Infection Control	1	16	12	5
DSA Permit	1	1	1	1
OA Permit	0	2	6	1
Total Applications Denied	2	33	57	12
RDA and RDAEF Educational Program and Course Applications Deficient				
Program/Course	2022–23	2023–24	2024–25	2025–26
RDA Program	0	1	0	2
RDAEF Program	0	0	0	0
RDAEF-ITR	0	0	0	0
Radiation Safety	0	2	3	6
Coronal Polishing	0	3	2	1
Pit & Fissure Sealant	0	2	3	2
Ultrasonic Scaling	0	1	0	0
Infection Control	0	3	5	0
DSA Permit	0	0	0	0
OA Permit	1	2	1	1
Total Applications Deficient	1	14	14	12
RDA and RDAEF Educational Program and Course Applications Pending				
Program/Course	2022–23	2023–24	2024–25	2025–26
RDA Program	0	0	4	2
RDAEF Program	1	0	2	2
RDAEF-ITR	0	0	0	0
Radiation Safety	0	6	11	8
Coronal Polishing	0	3	14	14
Pit & Fissure Sealant	0	3	9	7
Ultrasonic Scaling	0	1	3	3
Infection Control	0	4	19	16
DSA Permit	0	0	2	1
OA Permit	0	3	4	3
Total Applications Pending	1	20	68	56

Application Definitions	
Approved	Application for Board approval of educational program/course processed with required documentation, and approval number issued.
Denied	The Board denies an application on the grounds that the application lacks documentation that the educational program/course complies with the requirements of the Dental Practice Act or California Code of Regulations.

Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Dental Assisting Council Meeting
November 6, 2025

Deficient	Application for Board approval of educational program/course processed with submitted documentation, and additional documentation requested from applicant. For completed fiscal years, this is a snapshot of the number of deficient applications on June 30. For the current fiscal year, it is a snapshot at the end of the current quarter. Status changes weekly.
Pending	Board staff and/or contracted subject matter expert is reviewing an application for Board approval of an educational program/course with submitted documentation.

The following table provides the number of Registered Dental Assistant (RDA) and RDA in Extended Functions (RDAEF) program site visits conducted in fiscal years 2022–23, 2023–24, 2024–25, and 2025–26 through September 30, 2025.

RDA and RDAEF Educational Program Site Visits					
	RDA Programs		RDAEF Programs		Grand Total
	Provisional	Full	Provisional	Full	
2022–23	0	0	0	0	0
2023–24	1	0	0	0	1
2024–25	1	3	1	0	5
2025–26	0	0	0	0	0

The following table provides approved programs and courses by name and type of program or course for fiscal year 2025–26 through September 30, 2025.

Programs and Courses Approved 2025–26 through September 30, 2025											
Provider	Approval Date	RDA	RDAEF	EF ITR	RS	CP	PF	US	IC	DSA	OA
Valley Orthodontics	7/3/2025										x
EFDAA - Covina	7/28/2025					x					
EFDAA - Oakland	7/28/2025					x					
EFDAA - Roseville	7/28/2025					x					
EFDAA - Oakland	7/28/2025								x		
EFDAA - Covina	7/28/2025								x		
EFDAA - Roseville	7/28/2025								x		
EFDAA - Oakland	7/28/2025				x						
EFDAA - Covina	7/28/2025				x						
EFDAA - Sacramento	7/28/2025				x						

Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Dental Assisting Council Meeting
November 6, 2025

OceanPointe DAA of San Jacinto	8/15/2025						X					
Mt. Diablo Adult Education - Loma Vista	8/15/2025						X					
North-West College - Glendale	8/18/2025					X						
North-West College - Anaheim	8/18/2025					X						
North-West College – West Covina	8/18/2025					X						
North-West College - West Covina	8/18/2025								X			
North-West College - Pomona	8/18/2025								X			
North-West College - Glendale	8/18/2025								X			
UEI College - Sacramento	8/25/2025								X			
UEI College - Sacramento	8/25/2025						X					
UEI College - Sacramento	8/25/2025					X						
UEI College - Gardena	8/25/2025								X			
UEI College - Gardena	8/25/2025						X					
UEI College - Gardena	8/25/2025					X						
UEI College - Gardena	8/26/2025				X							
UEI College - Sacramento	8/26/2025				X							
California DA Academy	9/5/2025				X							
California DA Academy	9/5/2025								X			
Roseville Dental Academy	9/9/2025				X							
Roseville Dental Academy	9/9/2025								X			
Roseville Dental Academy	9/9/2025						X					
Roseville Dental Academy	9/9/2025				X							
OceanPointe DAA of San Jacinto	9/11/2025							X				
Rancho Cucamonga DA Academy	9/30/2025				X							
iEducations	9/30/2025						X					
PROGRAM/COURSE TOTALS		0	0	0	7	10	6	1	10	0	1	
TOTAL APPROVALS = 35												

The following table provides the total number of approved DA educational programs and courses in active status as of September 30, 2025.

Table 4									
Total Approved DA Educational Programs and Courses in Active Status									
RDA Program	RDAEF Program	RDAEF ITR	Radiation Safety	Coronal Polishing	Pit & Fissure Sealant	Ultrasonic Scaling	Infection Control	DSA Permit	OA Permit
70	12	3	217	137	86	36	167	39	204

Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Dental Assisting Council Meeting
November 6, 2025

Background on Re-Evaluations

DA educational programs and courses are subject to re-evaluation and inspection by the Board to review and investigate compliance with the requirements of the Dental Practice Act and California Code of Regulations (CCR), title 16, sections 1005, 1014, 1014.1, and 1070 et seq. The Board may withdraw approval at any time that it determines that a program or course is out of compliance.

The Board is mandated to re-evaluate DA educational programs and courses every seven years. In fiscal year 2024–25, the Board reinitiated mandated, standard re-evaluations (SRE). The Board prioritized Pit and Fissure Sealant Courses for re-evaluation. In addition, the Board is conducting re-evaluations based on enforcement investigations (CRE). Enforcement investigations are initiated when a possible issue of non-compliance comes to the attention of the Board.

Programs and courses receive a Notice of Re-Evaluation and are asked to submit a Re-Evaluation Application to the Board documenting compliance with regulatory requirements and to pay the applicable fee. The Re-Evaluation Application is the same application used to apply for first-time Board approval. Once the Re-Evaluation Application has been received by the Board, it is reviewed by one of the Board's Subject Matter Experts (SMEs). Once the review is completed, the program or course is notified of the continuance of their approval or of any deficiencies. If deficiencies were identified, the program or course receives a Notice of Deficiencies and is asked to provide a deficiency response.

The following table provides DA educational programs and courses re-evaluation statistics for fiscal year 2025–26 through September 30, 2025.

Program and Course Re-Evaluations 2025–26 through September 30, 2025								
Program/Course	SRE	CRE	Approval Continued	Reported Closed	Approval Withdrawn	Application Deficient	Application Pending	Awaiting Initial Response
RDA	0	0	0	0	0	5	6	0
RDAEF	0	0	0	0	0	0	1	0
RDAEF-ITR	0	0	0	0	0	0	0	0
RS	0	0	2	0	2	0	1	0
CP	0	0	1	0	1	0	1	0
PF	16	0	8	0	8	1	13	6
US	0	0	0	0	0	0	1	0
IC	0	0	1	0	0	0	3	0
DSA	0	0	0	0	0	0	0	0
OA	0	0	1	0	0	0	1	0
Totals	16	0	13	0	11	6	27	6

Agenda Item 8.: Update and Discussion on Registered Dental Assistant and Registered Dental Assistant in Extended Functions Educational Programs and Courses Application Approvals and Re-Evaluations

Dental Assisting Council Meeting
November 6, 2025

Note on Withdrawals. The table shows that approval was withdrawn from 8 Pit and Fissure Sealant courses. The most common reason for withdrawal of approval of a Pit and Fissure Sealant course was that the course failed to respond timely to the Board's Notice of Re-Evaluation. Courses whose approval is withdrawn may reapply for Board approval by submitting a new application and paying applicable fees.

Re-Evaluation Definitions	
SRE	Standard Re-Evaluation – Initiated based on 16 CCR 1070 (a)(2) which requires the Board to re-evaluate educational programs and courses approximately every seven years.
CRE	Enforcement Investigation Re-Evaluation – Initiated when a possible issue of non-compliance comes to the attention of the Board.
Approval Continued	The program or course successfully demonstrated compliance with applicable regulations during the re-evaluation process. A Notice of Continuance was issued to the re-evaluated program or course.
Reported Closed	The Board received notification of closure from the program or course in response to a Notice of Re-Evaluation.
Approval Withdrawn	The program or course was found to be out of compliance with the applicable regulations or did not respond within the required timeframes set by the Board, and a Notice of Withdrawal of Approval was issued to the program or course. The program or course was notified to cease operation.
Deficient	The program or course was issued a Notice of Deficiency indicating the areas in which their application was missing information or was not in compliance with applicable regulations. Programs and courses are given 30 days to respond. This number is a snapshot of deficient applications at the end of the current quarter. Status changes weekly.
Pending	The program or course application package is pending action by Board staff or SMEs. The pending action can be either review of program or course submissions or the drafting of notices or letters related to those submissions. This number is a snapshot of pending applications at the end of the current quarter. Status changes weekly.
Awaiting Response	The Board has issued a Notice of Re-Evaluation to a Board-approved program or course and is awaiting the response from the program or course.

Action Requested

Informational only. No action required.

DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	October 10, 2025
TO	Members of the Dental Assisting Council (Council) of the Dental Board of California (Board)
FROM	Dental Assistant Regulations Working Group (Working Group) Jeri Fowler, RDAEF, OA Cara Miyasaki, RDA, RDHEF, MS
SUBJECT	Agenda Item 9.: Update and Discussion on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1741, 1750, 1750.2, 1750.4, 1752.1, 1752.6, 1753, 1753.51, 1754.5, 1755, and 1777, and Add Sections 1752.1, 1754.5, 1755, and 1778 Relating to Board Approval of Dental Assistant Educational Programs and Courses

Introduction

As discussed during the May 14 and August 14, 2025 Council meetings ([Agenda Item 8](#); [Agenda Item 8](#), respectively), Board staff sought Council review of dental assisting education requirements to determine if legislative or regulatory amendments may improve dental assisting licensure, education, and/or licensure portability, and Board program/course approval. This memorandum provides an update on the Working Group's activities since the last Council meeting.

Background¹

To receive dentist licensure in California, the applicant, among other things, must furnish satisfactory evidence of having graduated from a dental college approved by the Board or by the Commission on Dental Accreditation (CODA) of the American Dental Association. (BPC, §§ 1628, subd. (b), 1636.4, subd. (b).) Similarly, dental hygiene licensure applicants must submit proof of graduation of an educational program for registered dental hygienists approved by the Dental Hygiene Board of California (DHBC) and accredited by CODA. (BPC, §§ 1917, subd. (a), 1917.1, subd. (a)(6).) Dental hygiene educational programs are required to meet minimum standards set by CODA or an equivalent body. (BPC, § 1941, subd. (a).)

¹ Additional Background can be found in the [May 14, 2025 Council Meeting Memorandum](#) and [August 14, 2025 Council Meeting Memorandum](#).

Agenda Item 9.: Update and Discussion on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1741, 1750, 1750.2, 1750.4, 1752.1, 1752.6, 1753, 1753.51, 1754.5, 1755, and 1777, and Add Sections 1752.1, 1754.5, 1755, and 1778 Relating to Board Approval of Dental Assistant Educational Programs and Courses
Dental Assisting Council Meeting
November 6, 2025

Currently, the Dental Practice Act and supporting regulations do not require all dental assisting educational programs and courses to be accredited by CODA for various reasons stated in the May 14, 2025 Council meeting. Therefore, registered dental assistant (RDA) educational programs and courses have traditionally been reviewed, approved, and audited by the Board, even though some educational programs and their courses also have CODA or other educational body accreditation or approval.

At the May 14 and August 14, 2025 Council meetings, Board staff presented significant non-compliance issues in the majority of courses undergoing audits. In addition, the review, audit, and approval processes are highly time and labor-intensive for Board staff, which resulted in significantly increased costs for providers submitting new courses or programs for approval. In addition, at this point in time, course providers must submit to the Board extensive applications and significant fees to apply for Board approval of an RDA educational program or course.

Board staff also have raised concern that the Board's dental assisting educational program and course regulatory requirements have not been substantively updated for over 20 years and likely do not adequately reflect current dental practice or the education necessary for that practice. In addition, during Board staff discussions on amendments to Assembly Bill 873 (Alanis, 2025), Board staff performed desk audits for reviewing the educational program and course Board approval applications and discovered that the current dental assisting educational program and course Board approval applications fees are woefully below the actual costs to the Board. Further, the Board has struggled to find subject matter experts to review the educational program and course applications, which does not bode well for the future of the Board's dental assisting education and course program.

The Working Group met several times with Board staff and Board Counsel to discuss the difficulties associated with the Board's continued review, approval, and audits of dental assistant educational programs and courses. These meetings occurred on June 9, June 16, July 7, and July 23, 2025. The Working Group, Board staff, and Board Counsel discussed adding BPC section 1778, shifting oversight of dental assistant education to recognized accrediting or approving agencies for educational institutions and programs, particularly in health, dental, technical, or continuing education fields. Following these meetings, the legislative proposal was revised to include amendments to other statutes to implement new BPC section 1778 and presented to the Council at its August 14, 2025 meeting. Board staff believe the legislative proposal would increase license reciprocity, reduce dental assisting licensure barriers, and increase license application efficiencies.

Update

On September 18, 2025, the Working Group, Board staff, and Board Counsel met virtually with stakeholders to discuss the legislative proposal. The Working Group specifically asked the stakeholders to provide comment on the following:

1. Feedback on each accrediting and approval agency listed in the Legislative Proposal.
2. If the approval process is shifted, does the Board need to include course content in regulation.
3. If the approval process is shifted, does the Board need to specify a minimum number of course hours.
4. Should completion of examinations offered by the Dental Assisting National Board (DANB) be accepted to satisfy course requirements for licensure.

A total of 173 stakeholders attended the meeting. In addition to the comments made at the meeting, Board staff have also received letters and emails from stakeholders on this topic and have attached the correspondence at the end of the memorandum.

Shifting Board Approval to Accrediting Bodies; DANB Examinations

While there were varying opinions on the proposal, there was overwhelming opposition to the idea of transferring educational program and course approval from the Board to accrediting entities. Stakeholders, including representatives from the California Dental Association (CDA), educators, course providers, dentists, and dental assisting licensees, expressed concern that doing so would weaken oversight, reduce standardization, reduce consumer protection, and drive small or unaccredited providers out of business. Many worried that removing the Board's role would worsen the dental assistant (DA) shortage, erode educational quality, and burden dentists, who often lack the time to provide effective in-office training.

Several stakeholders emphasized that accreditation is costly, time-consuming, and ill-suited to meet the needs of small programs or hands-on training environments. Others had concerns that many existing courses, especially stand-alone courses, would “fall through the cracks,” and expressed skepticism whether shifting oversight to accrediting bodies would improve training. Stakeholders emphasized the continuing need for robust on-the-job training (OJT) after formal education. Dentists were encouraged to take a more active role in education, suggesting collaboration between dental practices and training programs.

There was strong opposition to removing Board oversight of Orthodontic Assistant Permit (OAP) courses. Multiple orthodontists and professional associations stressed the importance of being able to train their own assistants in a structured, Board-approved environment. Concerns were raised that alternative oversight bodies might not require

hands-on patient training or allow in-office training. Additionally, several participants emphasized that Board-approved OAP courses allow students to train while being paid, which helps build the workforce and retain talent.

Supporters of transferring approval responsibilities argued that external accreditation can ensure quality and supported alternative pathways.

The following table summarizes the comments made regarding the advantages and disadvantages of the various accrediting bodies listed in the legislative proposal: Accrediting Bureau of Health Education Schools (ABHES); Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges (ACCJC); Accrediting Commission for Senior Colleges and Junior Colleges, Western Association of Schools and Colleges (SCJC); American Dental Association Commission on Dental Accreditation (CODA), Bureau for Private Postsecondary Education (BPPE); Council on Occupational Education (COE); United States Department of Education or State Department of Education recognized agency; American Dental Association's Continuing Education Recognition Program (CERP); and Academy of General Dentistry's Program Approval for Continuing Education (PACE). The table includes comments on the use of DANB examinations to satisfy course requirements for licensure.

Accrediting Body	Pros	Cons
ABHES	Strong institutional standards Comprehensive review process Defined core curricula Recognized by US Department of Education	Accredits institutions only, not individual programs Long (2–3 years) and costly process Inaccessible for small/unaccredited programs No specific accreditation of dental assisting programs No set hour requirements
ACCJC	Recognized by US Department of Education	Does not set minimum standards for dental assisting instruction Institution, not program, based Defers to state requirements
ACSCU	Recognized by US Department of Education	Does not set clinical/didactic hour requirements Campus based, not program specific
CODA	High credibility and rigorous standards Aligns closely with Board requirements	Expensive and time-consuming May not be feasible for smaller programs Need a CA-specific, lower-cost process

	Already used by many RDA educational programs	
BPPE	Could improve with provisional approvals or reform Would reduce costs for programs also required to receive BPPE accreditation	Long approval time (15+ months) Programs may need to shut down during review Lacks independent standards (relies on Board regulations) Financial and operational concerns
COE	Recognized by US Department of Education	
US/State Dept. of Educ.		12 month only programs Not accrediting agencies
CERP	Potential to reduce Board workload Existing provider approval systems	Approves providers, not programs No oversight of course content Not CA-specific or standardized
PACE	Application is moderately rigorous Existing provider approval systems	No direct oversight of program content
DANB Exams	Good for assessing knowledge Useful for out-of-state or returning applicants Additional language accessibility	No hands-on clinical component Concerns about patient safety Online exam risks

Course Content and Hour Requirements

Maintaining the Board's role in setting educational standards was a consistent theme during the stakeholder discussion. Stakeholders broadly agreed that the Board should continue to define course content, minimum course hours, and minimum training standards. Stakeholders argued that California's scope of practice for RDAs is the most comprehensive in the country and its oversight must remain equally rigorous.

Suggested Alternatives

Many constructive suggestions were offered. These included simplifying the application process with checklists and sample applications, allowing one application for programs with multiple sites, and raising fees to hire more staff and subject matter experts. Several stakeholders suggested developing a two-track system, one for large institutions and another for smaller providers or in-office training programs. There was support for reviving the Committee on Dental Auxiliaries (COMDA), encouraging more dental offices to

participate in on-the-job training and working with CODA to develop California-specific processes with reduced fees and shorter timelines.

Stakeholders asked whether the Board could hire full-time educators to support program review, recognizing CODA accreditation to reduce Board workload, charging fees for site visits and application reviews, and potentially partnering with an educationally focused entity or developing California-specific standards that accrediting bodies must follow.

Next Steps

After consideration of the stakeholder comments, Board staff decided to postpone continued discussion of the legislative proposal pending additional research and stakeholder consultation to ensure all implications are thoroughly evaluated.

Action Requested

No action requested.

Stakeholder Written Comment Attachments:

1. Letter from California Dental Association dated August 19, 2025
2. Letter from Lake Tahoe Community College dated September 10, 2025
3. Letter from Patti Chan dated September 11, 2025
4. Letter from California Association of Orthodontists dated September 12, 2025
5. Letter from Michael Narodovich dated September 14, 2025
6. Letter from Mary Conway dated September 15, 2025
7. Email from Catherine Draper dated September 17, 2025
8. Letter from Kristen Hoang dated September 17, 2025
9. Letter from Mariam Hashoush dated September 17, 2025
10. Letter from Renee Herold dated September 17, 2025
11. Letter from Zenaida Staana dated September 17, 2025
12. Email from Joshua Twiss dated September 18, 2025
13. Email from Melanie Parker dated September 18, 2025
14. Email from MeeYing Coffey dated September 19, 2025
15. Email from Diana Harshman dated September 22, 2025
16. Letter from California Dental Assisting Alliance dated September 24, 2025
17. Email from Maureen Titus dated October 6, 2025
18. Letter from California Association of Orthodontists dated October 9, 2025

August 19, 2025

De'Andra Epps-Robbins, RDA
Chair, Dental Assisting Council
Dental Board of California

Via E-mail

RE: Public Comment on Potential Legislative Changes to RDA Program Approval

Dear Ms. Epps-Robbins,

The California Dental Association (CDA) respectfully submits the following comments regarding the Dental Board of California's (DBC) legislative proposal to transfer oversight of dental assisting educational programs and certification courses to external accrediting or approving bodies. While we recognize the intent to streamline approval processes, reduce administrative burdens, and improve license portability, we believe certain elements of the proposal require clarification or modification to ensure fairness and preserve access.

CDA's concerns are rooted in ensuring that dental assisting education and certification remain accessible and affordable, particularly at a time when the profession is experiencing severe workforce shortages. Based on the breakdown, nearly half of all providers offering board-approved certification courses, such as radiation safety (48%) and infection control (47%), could be lost if they are unable to obtain DBC-approved accreditation under the proposal. This loss would disproportionately affect unlicensed dental assistants who rely on these stand-alone courses to enter the workforce, as well as those pursuing RDA licensure outside of formal RDA programs due to cost or lack of local program availability. The potential closure of providers offering "career-ladder" certifications, such as the Orthodontic Assistant Permit (78% of programs at risk) and Dental Sedation Assistant (97% at risk), would further limit opportunities for dental assistants to expand their scope of practice and advance within the profession, impacts that would be felt most acutely in rural and underserved areas where alternatives are scarce.

For example, many infection control courses that already hold accreditations recognized under the proposal are embedded within full RDA educational programs, making them inaccessible as stand-alone options for unlicensed dental assistants due to cost, time commitment, and admission requirements. The programs most at risk of closure disproportionately serve low-income, rural, and underserved communities. Losing these stand-alone providers would effectively cut off entry points into the profession for individuals who cannot enroll in or travel to full RDA programs.

Any reduction in the number or geographic distribution of programs, especially those with in-person clinical requirements, will almost certainly reduce access to education in remote and rural areas, either through program closures or tuition increases. In such communities, even a modest contraction in available and affordable training can translate directly into fewer trained dental assistants, decreased capacity in local dental practices, and longer wait times for patient care.

Accreditation Recognition and Parity with DBC-Permitted CE Providers

The proposal includes the ADA's Continuing Education Recognition Program (CERP) and the Academy of General Dentistry's Program Approval for Continuing Education (PACE) as qualifying accrediting entities. While these organizations do not have dental assisting-specific oversight, they do require that providers be sufficiently qualified to teach the topics they offer through strict standards, regular evaluations, and compliance monitoring. When this general oversight is coupled with the existing statutory specificity for certificated courses, such as radiation safety, coronal polishing, pit and fissure sealants, and infection control, the result could be a meaningful way to preserve access to existing programs while maintaining the curriculum standards the DBC has long deemed appropriate for these licensure-qualifying skills.

If the Board considers CERP and PACE oversight acceptable in this proposal, then DBC-permitted continuing education (CE) providers, which operate under direct Board regulation and already meet defined statutory requirements, including maintaining standards, record-keeping, and content relevance, should also be recognized. Both oversight systems ensure providers deliver legitimate, applicable education and are subject to review to protect the public, so providing parity for these providers would preserve affordable, local, and compliant options, many of which serve rural or underserved communities where access to training is already limited.

Five-Year Limit on DANB Examinations

The proposal adopts the Dental Assisting National Board (DANB) policy limiting recognition of certain examinations to five years from completion. While this aligns with DANB's internal standards, it may create unnecessary barriers for experienced dental assistants. For example, an individual who completed a radiation safety course or passed the DANB radiation health and safety exam more than five years ago, but who has maintained continuous clinical practice, should not be required to retake a one-time course or exam to demonstrate competency. We recommend allowing documented, continuous, relevant practice to satisfy the requirement in this proposal and elsewhere in the practice act, thereby balancing public protection with workforce retention.

Interaction with Recently Approved Fee Increases

At the May 2025 meeting, the Board approved significant fee increases for RDA programs and board-approved courses to address the high costs of application review and auditing. If statutory recognition of external accreditation removes the need for dual Board approval, many current providers, particularly small, community-based, or regional occupation programs, may opt out of DBC approval altogether. This could lead to significantly smaller workloads for Board-staff, making oversight more manageable while preserving the ability for smaller programs to remain open.

We appreciate the Board's commitment to improving efficiency and license portability. However, to avoid unintended consequences, particularly in the form of program closures, higher student costs, and reduced geographic access, we urge the Board to:

1. Recognize DBC-permitted CE providers alongside CERP- and PACE-accredited entities to maintain affordable, local training options.
2. Couple acceptance of external accreditation with retention of existing statutory curriculum requirements for certificated dental assisting courses.

3. Modify the proposed five-year limit on DANB examination recognition to avoid unnecessary barriers for experienced unlicensed/unpermitted dental assistants.
4. Assess the financial and operational impacts of shifting oversight in light of recent fee increases.

These steps will help maintain high-quality standards while keeping education pathways open and affordable for the next generation of dental assistants, a critical need in meeting California's ongoing oral health workforce demands. Thank you for the opportunity to comment, we look forward to working with the Board to ensure that any legislative changes protect both educational quality and access for all Californians.

Respectfully submitted,

A handwritten signature in black ink that reads "Mary McCune". The signature is written in a cursive, flowing style.

Mary McCune
Policy Director

Cc: Steven Chan, DDS, DBC President
Christy Bell, DBC Interim Executive Officer

Elizabeth Ferguson

1 College Drive

South Lake Tahoe, CA 96150

ecferguson@mail.ltcc.edu

530-541-4111 ext 1816

9/10/2025

Dental Board of California

Attention: Steven Chen

Subject: Concerns Regarding the Outsourcing of Dental Assistant Certification Programs and the Impact on the California Workforce

Dear Members of the Dental Board of California,

I am writing to you today as a concerned [Dental Assistant/Registered Dental Assistant/member of the dental community] to express my serious apprehension about the potential decision to farm out or outsource certification programs for dental assistants and registered dental assistants. This action would have a devastating and lasting negative impact on the dental workforce in our state, exacerbating the existing shortage of qualified professionals and making it financially untenable for many to pursue or maintain a career in dental assisting.

California is already grappling with a significant and well-documented shortage of both

dental assistants (DAs) and registered dental assistants (RDAs). The California Dental Association has highlighted this issue, noting that vacant positions are reducing dental practice capacity and that the demand for dental assistants is projected to increase. Rather than creating new barriers, our focus should be on making the path to certification more accessible and affordable.

Outsourcing these certification programs will almost certainly lead to an increase in fees and tuition. When certification programs are managed by third-party private entities, the costs are often passed directly to the student or professional. Given the current economic climate and the high cost of living in California, this is a burden that most dental assistants simply cannot afford. The average salary for a dental assistant in California is already a challenge to live on, with salaries often ranging from around \$41,528 to \$51,053 annually. When we factor in the exorbitant cost of housing, transportation, and daily necessities, a significant increase in certification costs could be the final barrier that prevents aspiring and current dental assistants from advancing their careers or even staying in the profession.

We must consider the economic reality for our workforce. A Registered Dental Assistant's average salary is only slightly higher, with estimates around \$53,767 per year. Adding hundreds or even thousands of dollars in fees for required certifications will make it nearly impossible for them to justify the financial investment, especially if they are already struggling to make ends meet. This will not only deter new people from entering the field, but it will also encourage experienced and dedicated professionals to leave.

By keeping these programs under the purview of the Dental Board, you ensure a level of public accountability and cost control that would be lost with outsourcing. Maintaining the integrity and accessibility of our certification process is essential to safeguarding the future of dental care in California. A move to privatized certification programs will create a greater divide, making it a profession only for those who can afford it, and will ultimately lead to a larger shortage of qualified and registered dental assistants.

I implore the Board to consider the long-term consequences of this decision. Please prioritize the health of our dental workforce and the oral health of all Californians by rejecting any proposals to farm out certification programs. Instead, let us work together to find solutions that make a career in dental assisting more accessible, affordable, and sustainable for everyone.

Thank you for your time and consideration of this critical matter.

Sincerely,

Elizabeth Ferguson

Elizabeth" Liz" Ferguson, RDA

Dental Instructor and Dental Director

Lake Tahoe Community College

South Tahoe High School

530-541-4111 Ext. 1816

Cell 530-416-2053

ecferguson@mail.ltcc.edu

eferguson@ltusd.org



Patti Chan, RDH, MS
690 Greenview Place
Los Altos, CA 94024

September 11, 2025

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

Dear Dr. Chan,

As a faculty member and program director in dental hygiene education, I am deeply concerned about the proposed legislation that would remove the requirement for Dental Board approval of dental assisting educational programs and courses.

While I recognize the intent to streamline oversight, the proposal introduces significant risks. The agencies listed vary greatly in their expertise, and many do not have dental-specific standards. This change could result in programs without minimum didactic, laboratory, or clinical hour requirements, as well as no clear expectations for faculty qualifications. Weakening educational standards threatens patient safety and undermines the quality of dental care in California.

I respectfully urge the Board to maintain direct oversight of dental assisting education to ensure consistent, rigorous standards that protect the public.

Sincerely,



Patti Chan, RDH, MS

Director, Foothill College Dental Hygiene Program

cc: Christy Bell, Interim Executive Officer, Dental Board of California (Please include my letter in the Board packet for the November Board Meeting.)



September 12, 2025

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

Subject: Comments on Proposal to Shift Oversight of Dental Assisting Education

Dear Members of the Dental Board of California:

On behalf of the **California Association of Orthodontists (CAO)**, the California component of the **American Association of Orthodontists (AAO)**, representing nearly 1,500 orthodontists across the state, we thank you for advancing this proposal to modernize oversight of dental assisting education. We recognize the significant challenges involved in reviewing, approving, and auditing programs, and we appreciate the Board's willingness to explore approaches that improve efficiency, free up staff time, and allow resources to be redirected toward enforcement and other critical functions. We also thank you for engaging stakeholders in this process and want to express our eagerness to participate constructively as the discussion continues.

Orthodontists have a long history of training orthodontic assistants directly in their practices, providing the majority of Orthodontic Assistant Permit (OAP) education in California. This model has ensured a steady and accessible workforce, particularly in areas without proximity to large institutions. While we agree it is appropriate to review existing structures, we are concerned that shifting oversight exclusively to external accrediting agencies could have unintended consequences:

Loss of In-Office Training Programs

Orthodontic specialists have long been recognized as qualified educators of orthodontic assistants. Requiring accreditation through costly external agencies would put in-office programs at serious risk. Most small and mid-sized practices would not be able to absorb those costs, jeopardizing the primary pipeline of orthodontic assistants in California.

Barriers to Workforce Development

Accreditation fees and compliance requirements would disproportionately burden smaller providers. According to Board staff's own analysis, approximately 78% of current orthodontic assistant programs could be forced to close. At a time when practices are already struggling with workforce shortages, this would undermine progress made through reforms such as SB 1453 and exacerbate a critical shortage in OAs.

Reduced Access and Higher Costs for Patients

Limiting orthodontists' ability to train assistants directly would reduce the availability of qualified staff, drive up practice costs, and ultimately increase costs for patients. Rural and underserved communities—where alternatives are limited—would be hardest hit.

Reversal of Prior Legislative Progress

Recognition of Registered Orthodontic Assistants was achieved through hard-fought collaboration among CAO, CDA, and other stakeholders despite strong opposition from educators seeking exclusive control. This proposal risks reopening that debate and undoing decades of carefully balanced progress.

Proposed Alternatives and Questions

We appreciate the Board's focus on efficiency and portability, and we are eager to help identify solutions that maintain high standards without cutting off access. We suggest exploring:

- Whether CAO could serve as an umbrella accrediting body, providing oversight for orthodontist-led OAP programs.
- Reduced-fee or exempt pathways for small practices that provide OAP training.
- Whether national exams or existing standardized testing frameworks could be integrated without imposing prohibitive accreditation costs and restrictive timelines.
- Recognition of DBC-permitted continuing education providers alongside CERP- and PACE-accredited entities to preserve affordable, local options, as suggested by the California Dental Association (CDA).
- Creating a mentorship pathway to certification, similar to the RDA, that would involve testing through a national exam.

Conclusion

CAO believes it is both timely and appropriate to review these structures, and we commend the Board for initiating this important conversation. At the same time, we urge careful consideration of how proposed changes will affect the orthodontic workforce, patient access, and affordability of care. We are grateful for your willingness to engage stakeholders, and we look forward to participating fully in the process to ensure reforms strike the right balance between efficiency, quality, and access.

Thank you again for your leadership and for the opportunity to comment. We look forward to a robust discussion on September 18th.

Sincerely,



Dr. Mark Rashidi, DDS, AEODO, MBO, MBA
President
California Association of Orthodontists



To Whom It May Concern at the Dental Board of California,

This is the first time I have written to the Dental Board or any governmental body, and I do so with a heavy heart. I am deeply concerned and disappointed by the recent approval of an online, eight-hour infection control course. This decision is a disservice to both our profession and the public we serve.

As healthcare providers, our most basic responsibility is to do no harm. Infection control education is critical to ensuring safe dental and medical care. If the public were to learn that dental assistants—who provide direct patient care and are responsible for preparing rooms, sterilizing instruments, and disinfecting surfaces—could earn certification after simply watching online videos, their trust would be shaken. As a patient, I would be alarmed.

Dentists hold ultimate responsibility, but realistically, many cannot personally oversee every sterilization procedure while also caring for other patients. In-person training has always been the gold standard because it allows students to practice under the guidance of experienced instructors—learning how to properly wash hands, put on and change PPE, clean and bag instruments, and sterilize them in an autoclave. Watching a video cannot replace this essential hands-on experience.

Arguments suggesting that rural areas need online options fall short. Remote communities deserve the same level of protection as urban ones. Traveling instructors and multiple CE providers can bridge the gap. Instead of lowering standards, the Board should focus on encouraging more education providers and simplifying the CE provider approval process.

A proposal to have the DANB serve as the curriculum for dental assistant coursework is dangerous. Imagine learning to take x-rays, place sealants and coronal polish as online courses are all you need to do is pass a test online and you have a certificate? We must protect the public and ensure that dental healthcare professionals receive hands on training and passing a course is more than answering multiple choice test. If the public knew, we would be shamed.

Currently, the application process for CE providers is confusing, overly complex, and time-consuming. A clear, standardized sample application would help education providers comply more easily, reduce deficiencies, and lessen the workload for Board staff.

As both a dentist and an educator, I am passionate about welcoming new professionals into our field. Dental auxiliaries deserve clear, structured pathways with practical, hands-on training to prepare them for their responsibilities. Shockingly, it is already easier to become a dental assistant than a cosmetologist—even though improperly sterilized instruments can transmit diseases like Hepatitis C and HIV, which are far more devastating than a bad haircut.

I strongly urge the Board to reconsider its approval of the eight-hour online infection control course. Please work with CE providers to create a streamlined, efficient application process that does not sacrifice educational quality or public safety. Reject the DANB, we need to protect the public with hands on training. By doing so, the Board will help protect patients, support dental professionals, and maintain the high standards our profession is built upon.

Respectfully,

Michael Narodovich, DMD


9/14/25



MID-PENINSULA DENTAL SOCIETY
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Menlo Park, CA 94026
650/328-2242 Fax 650/331-0541



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September 15, 2025

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

Dear Dr. Chan,

As a member of the Foothill College Dental Programs Advisory Board, I write to express concern regarding the legislative proposal to change approval requirements for dental assisting programs.

Employers rely on graduates of accredited programs to be well-prepared, competent, and safe in the delivery of patient care. Allowing approval through agencies without dental-specific standards places the profession at risk. Without consistent requirements for didactic, lab, and clinical training, California employers may face hiring graduates who are underprepared, impacting both patient safety and workforce readiness.

I urge the Board to retain its oversight to ensure educational programs meet appropriate standards and continue to produce qualified dental assistants who contribute to safe, high-quality care.

Sincerely,
Mary Conway, Executive Director
Mid-Peninsula Dental Society
exec@mpds.org

cc: Christy Bell, Interim Executive Officer, Dental Board of California (Please include my letter in the Board packet for the November Board Meeting.)
Governor Gavin Newsom



Outlook

Dental Assisting Program Oversight

From Catherine Draper <drapercatherine@fhda.edu>**Date** Wed 9/17/2025 4:52 PM**To** DentalBoard@DCA <DentalBoard@dca.ca.gov>

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Catherine K. Draper

1310 Regency Drive

San Jose, CA, 95129

Drapercatherine@fhda.edu

September 17, 2025

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

Dear Dr. Chan,

As a registered dental hygienist practicing in California, I work closely with dental assistants every day as part of the oral healthcare team. I am deeply concerned about the current legislative proposal that would remove the requirement for Board approval of dental assisting educational programs.

Dental assistants play a critical role in infection control, chairside care, and supporting safe and efficient treatment for patients. Their ability to perform these duties depends on consistent, high-quality education and training. Allowing approval through agencies with little or no dental-specific expertise risks lowering standards for didactic, laboratory, and clinical instruction. This would place both consumers as well as the dental team at risk.

I urge the Dental Board of California to maintain its oversight of dental assisting programs to safeguard patient safety, uphold the quality of care in California, and ensure that all members of the dental team are properly prepared to provide safe, effective oral health care.

Sincerely,

Catherine K. Draper, RDH, MS, FADHA

cc: Christy Bell, Interim Executive Officer, Dental Board of California (Please include my letter in the Board packet for the November Board Meeting.)

Catherine K. Draper, RDH, MS, FADHA
Associate Faculty, Foothill College
Health Sciences and Horticulture



Kristen Hoang
1353 Old Stone Pl
San Jose, CA 95132
Khoang1020@gmail.com
9/17/25

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

Dear Dr. Chan,

As a graduate of Foothill College, a Dental Board of California approved Registered Dental Assistant program, I want to express my concern about the proposal to remove the Board's oversight of program approval.

My education prepared me with the knowledge, lab experience, and clinical training I needed to be a safe, competent professional. I worry that future students may not receive the same quality preparation if approval is given to programs without dental-specific standards, lab/clinical requirements, or qualified instructors.

This would not only hurt future students but also affect patient safety and access to quality dental care across the state. Please protect the public by ensuring dental assisting programs remain held to consistent, rigorous standards under the Board's oversight.

Sincerely,
Kristen Hoang
Foothill DA Program Graduate 2025



San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

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

Dear Dr. Chan,

As a clinical site that hosts Foothill College dental assisting externs, I value the strong preparation that accredited programs provide students before they treat patients in our offices. The proposed changes to program approval jeopardize that foundation.

Externship partners like us need assurance that students entering our clinics have received proper training, including didactic, lab, and clinical practice under qualified instructors. Without consistent oversight, there is a real risk of students arriving without the essential skills required for safe patient care, creating liability concerns for practices and jeopardizing public trust.

I strongly encourage the Board to preserve its approval process to protect patients, clinics, and the integrity of dental assisting education in California.

Sincerely,

Mariam Hashoush, DDS, MPA

Dental Program Manager
San Mateo Medical Center
2710 Middlefield Rd.
Redwood City, CA 94063
Office: (650) 599-3892
Work Cell: (650) 556-6187



cc: Christy Bell, Interim Executive Officer, Dental Board of California (Please include my letter in the Board packet for the November Board Meeting.)
Governor Gavin Newsom



Renee A. Herold, RDA, CDA, CDPMA, BA

1109 Summer Avenue
Burlingame, CA 94010
herold@smccd.edu

September 17, 2025

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

Dear Dr. Chan,

As a faculty member in 3 different Dental Assisting Education programs, I am deeply saddened and concerned about the proposed legislation that would remove the requirement for Dental Board approval of dental assisting educational programs and courses.

While I recognize the intent to streamline oversight, the proposal introduces significant risks. The agencies listed vary greatly in their expertise, and many do not have dental-specific standards. This change could result in programs without minimum didactic, laboratory, or clinical hour requirements, as well as no clear expectations for faculty qualifications. Weakening educational standards threatens patient safety and undermines the quality of dental care in California.

I respectfully urge the Board to maintain direct oversight of dental assisting education to ensure consistent, rigorous standards that protect the public.

Sincerely,

Renee A. Herold, RDA, CDA, CDPMA, BA
College of San Mateo, Foothill College, & College of Alameda

cc: Christy Bell, Interim Executive Officer, Dental Board of California

Governor Gavin Newsom



September 17, 2025

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

Dear Dr. Chan,

As a faculty member in dental assisting education, I am deeply concerned about the proposed legislation that would remove the requirement for Dental Board approval of dental assisting educational programs and courses.

While I recognize the intent to streamline oversight, the proposal introduces significant risks. The agencies listed vary greatly in their expertise, and many do not have dental-specific standards. This change could result in programs without minimum didactic, laboratory, or clinical hour requirements, as well as no clear expectations for faculty qualifications. Weakening educational standards threatens patient safety and undermines the quality of dental care in California.

I respectfully urge the Board to maintain direct oversight of dental assisting education to ensure consistent, rigorous standards that protect the public.

Sincerely,

A handwritten signature in blue ink, appearing to read "Zenaida (Pia) Staana".

Zenaida (Pia) Staana, DDS
Program Director
Dental Assisting Program
Foothill College
staanapia@fhda.edu

cc: Christy Bell, Interim Executive Officer, Dental Board of California (Please include my letter in the Board packet for the November Board Meeting.)
Governor Gavin Newsom

From: Joshua Twiss <drjosh@ironhorsekids.com>
Sent: Thursday, September 18, 2025 3:10 PM
To: LPCU.DBC@DCA <LPCU.DBC@dca.ca.gov>
Subject: Josh Twiss DDS-Comments for the dental board proposal

My name is Joshua Twiss, and I am a board-certified pediatric dentist who has been practicing for 12 years.

I want to highlight a reality that many dentists across the state are living right now: it is almost impossible to hire dental assistants. Not just highly trained assistants—any assistants at all. The shortage is so severe that I was forced to hire the majority of my employees as unlicensed dental assistants and continue to support them through their passing of the RDA exam later on. Without that pathway, I simply would not have enough staff to treat the patients in my community and I know many others who share the same struggle.

That's why I am deeply concerned about the proposal to require accreditation through outside educational agencies. On paper, requiring accreditation sounds like it would save some administrative expense at the dental board—but in reality, it will dramatically shrink the pool of assistants entering the workforce. If you take away the board-approved, non-accredited pathway, you are cutting off one of the only flexible pipelines that currently exists.

Unlicensed, dental board approved certificate programs are tightly regulated, and focused on the exact skills our practices need. Eliminating this option directly reduces the number of assistants who will be able to enter the profession at all. And with fewer assistants, access to dental care for patients will suffer.

I urge the Council to maintain the current model that allows board-approved certificate providers, even if they are not accredited institutions. If the state wants to add additional pathways, that's great. But don't close off the path that is currently keeping many practices afloat. I support the CDA's public comment on the proposed legislation change.

In short, requiring outside accreditation will not solve the workforce shortage. What we need right now is flexibility, not restriction. Please keep the board-approved certificate option in place so that dentists like myself can continue to recruit, train, and employ the assistants our patients depend on.

Thank you for your time and consideration.

UPDATE:

After having listened in the meeting for 2 hours, I genuinely feel that Tina and the crew at the CA Dental Board are really searching for fresh start/best practices approach to delivering dental assistant education. For me, I was just scared when I heard the proposal, but now I feel like over time we will be able to come up with a good solution as long as there is no rush and all options are truly on the board. Let me ponder this fresh start concept and see if I can come back with some solutions instead of just criticisms.

Thanks,

Josh

Joshua R. Twiss, DDS

Board-Certified Pediatric Dentist

Office (925) 725-1232

drjosh@ironhorsekids.com

822 Hartz Way - Suite 100

Danville, CA 94526



This electronic message transmission, including any attachments, contains information from Joshua R. Twiss D.D.S., INC. The information contained in this transmission may contain privileged and confidential information, including patient information protected by federal and state privacy laws. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

From: Melanie Parker <drmelp@yahoo.com>
Sent: Thursday, September 18, 2025 1:38 PM
To: LPCU.DBC@DCA <LPCU.DBC@dca.ca.gov>
Subject: OAP course

I am an orthodontist who provides the OAP course in my office for my staff. In my area there is a shortage of qualified orthodontic assistants and those that have the OAP are rare and expensive, so I need to "grow my own" by training them here. The cost for them to go to an outside school is high in dollars and time spent out of the workplace.

In my office we have class during lunches and there is no charge. I train 1-3 per year and have since the OAP was required.

Being able to continue to train our staff in the office is a high quality low cost solution to common staffing issues.

Thank you for your consideration.

Melanie Parker , DDS

Sent from my iPhone

Attention: Christy Bell, Executive Officer, Kimberly Kircmeyer, Director
My concerns regarding possible changes from DBC to another agency are:

1. Differences in inconsistencies between the nine agencies and how they grant approval.
2. The agencies all have different approval processes which would cause workforce shortage. Presently there is a shortage of qualified dental assistants.
3. The agencies have various knowledge of dentistry, not all of these have the same dental knowledge. (Ex: WASC doesn't have any knowledge of dentistry whereas CODA is extremely knowledgeable.)
4. There are no standardized minimum didactic or lab/clinical hour requirements.
5. There are no detailed instructional standards for programs and course content and faculty qualifications.
6. This would remove lab and clinical requirements for certification courses.
7. The cost would be additional money for additional approval when the programs have been approved by DBC for many years. Could we Grandfather the programs until DBC resumes.
8. The shortage of dental assistants will intensify And access to affordable and quality dental care will be lost. We need to keep in mind to help improve patient care.

--

MeeYing Coffey, CDA, RDA, BA
Dental Assistant Program
Mt. Diablo Adult Education
1266 San Carlos Avenue
Concord, CA 94518

Letter to the Dental Board of California

Dental Board of California
Attn: Board President and Members
2005 Evergreen Street, Suite 1550
Sacramento, CA 95815

Subject: Concerns Regarding Agenda Item 8 and Proposed BPC Section 1778

Dear Dr. Steven Chan, Christy Bell, Interim Executive Officer, and Members of the Dental Board of California,

I am writing to express my deep concern regarding the Board's decision to forgo further action on Agenda Item 8: *Update, Discussion, and Possible Recommendation to the Board on Legislative Proposal to Add Business and Professions Code (BPC) Section 1778 Relating to Board Approval of Dental Assistant Educational Programs and Courses.*

The Dental Practice Act clearly establishes that the Board's highest priority is **protection of the public** (BPC §1601.2). Approval and oversight of dental assisting educational programs are central to this mission, ensuring that all dental assistants are trained to the highest standards of competency, infection control, and patient safety.

We **strongly oppose turning oversight over to the CODA (Commission on Dental Accreditation)**. CODA's national standards, while valuable, are not tailored to California's unique workforce needs, affordability challenges, or access-to-care issues. Outsourcing oversight would limit the state's ability to address local concerns and may drive up educational costs, further reducing access to training.

At a time when California faces **severe workforce shortages**, particularly in oral healthcare, we must ensure that dental assisting pathways remain accessible, affordable, and accountable. Abandoning statutory authority for program approval risks undermining workforce development and, ultimately, the affordability and quality of care for the public.

I respectfully urge the Board to revisit this issue, reject reliance on CODA, and renew support for legislation that grants the Board apparent authority to oversee and approve dental assisting educational programs in California. Doing so reinforces the Board's mission to protect the public while addressing workforce shortages and preserving access to affordable, quality oral healthcare.

Sincerely,

Diana Harshman

P.S. Please include this letter in the November board meeting Packet

September 24, 2025

De'Andra Epps-Robbins, DAC Chair
Dental Board of California
2005 Evergreen Street, Suite 1550
Sacramento, CA 95815



Dear Ms Epps-Robbins:

The Dental Assisting Alliance reaffirms the long-standing collaborative relationship between DBC staff and California's dental assisting educators. This partnership has built the most comprehensive and expansive scope of practice for dental assistants in the nation. No other state offers the same depth and breadth of licensure, a reflection of California's commitment to excellence in dental assisting education and to protecting the state's dental consumers.

We extend our appreciation to the DBC staff and the DAC special committee for organizing the September 18, 2025 stakeholder meeting. The Alliance remains deeply concerned and firmly opposed to proposals that would transfer oversight of dental assisting education programs and courses to external approving bodies. Our position is grounded in the need to safeguard access and affordability in dental assisting education—especially critical during today's significant workforce shortages—while ensuring consumer protection.

Shifting oversight away from the Dental Board threatens to destabilize long-established professional pathways. During the recent stakeholder meeting, which drew more than 125 attendees, we heard many concerns. Chief among them is the risk of program closures should oversight be handed to external entities. Arizona experienced this outcome under similar policies, resulting in a collapse of their dental assisting education system. Replicating that scenario in California would reduce access to education and, ultimately, to dental care statewide—not just in rural or underserved regions.

We welcome opportunities to discuss ways to streamline processes and reduce workload for DBC staff while preserving essential oversight. As noted during testimony, of the 71 RDA programs currently in California, 18 are CODA-approved and could be removed from duplicative DBC review. These same programs could also benefit from a simplified process for stand-alone course applications. In addition, allowing one primary application for programs operating across multiple campuses would meaningfully lessen staff workload.

Other strategies include implementing standardized certificates or automated templates to minimize errors in candidate submissions, strengthening the calibration of subject matter experts, and clarifying approval criteria to reduce ambiguity about deficiencies.

We appreciate your attention to these pressing issues and look forward to continued collaboration to ensure that dental assisting education in California remains strong, accessible, and appropriately overseen by the Dental Board of California.

Sincerely,

California Dental Assisting Alliance

California Dental Assistants Association: *Shari Becker, CDA, RDA, FADAA, AS*

California Expanded Functions Association: *Joan Greenfield, RDAEF2, OAP, MS*

California Association of Dental Assisting Teachers: *Melodi Randolph, RDAEF2, CDA, OAP, BS, MEd*

c: Christy Bell, Interim Executive Officer
Dr. Steven Chan, DBC President

September 29, 2025

Dr Chan,

As an instructor in a community college dental assisting program, I watched a recent meeting with the Dental Board of California (DBC). I am extremely surprised about the DBC staff suggesting elimination of the DBC certification/approval of long-time well-respected dental assisting educational programs in CA. These community colleges provide lower cost high quality education for those students who cannot afford private education programs.

I am very concerned about the possibility of ending the certification/approval process for dental assisting programs in CA by the DBC. The results could be devastating for educating skilled qualified applicants for the RDA licensure in CA. The DBC disbanded the practical exam several years ago and now the staff is recommending this possibility. If they feel they are overworked, perhaps the system needs to be reviewed and streamlined for improvement NOT abandonment. DBC is responsible for protecting the health and safety of dental patients/consumers in CA. This idea would be doing the complete abandonment of that responsibility by the DBC.

Very few programs are certified by CODA due to cost and lack of state specific education requirements for dental assistants. If CODA is required many programs will be eliminated in CA. Currently there is major concern regarding lack of qualified/educated/skilled RDA's in CA. Now, can you imagine what will happen if those programs are forced to close.

I would request the DBC reject this devastating suggestion and work to continue and improve and streamline the approval/certification process for the dental assisting programs in CA. CA sets high quality standards for the nation in dentistry, dental assisting and dental hygiene this is not the time to go backwards and reduce the health and safety of our patients in CA.

Thank you.

Maureen Titus, RDHAP, BS

CC: Christy Bell, Interim Executive Officer, DBC

Kimberly Kirchmeyer, Director of Department of Consumer Affairs

Please include this letter in the November, 2025 Dental Board Meeting Agenda Packet

Maureen Titus, RDHAP, BS

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October 9, 2025

Dear Christy and Tina,

On behalf of the **California Association of Orthodontists (CAO)**, I would like to thank you for convening the recent stakeholder meeting and for initiating this vital discussion. We appreciate the Board's recognition of the resource challenges inherent in reviewing and auditing dental assisting programs and courses, as well as your efforts to explore solutions through this stakeholder process.

Following review and discussion with our members, CAO has concluded that we cannot support the proposal to transfer oversight of dental assisting education to external accrediting bodies. While we understand the intent of reducing administrative burdens, we believe this approach would create unnecessary costs, reduce affordability, and restrict access to training at a time when workforce shortages are already acute.

Instead, CAO proposes a more direct solution that reduces the Board's workload while strengthening the dental workforce: **create a work experience pathway for the Orthodontic Assistant Permit (OAP), modeled on the existing RDA pathway**. Under this approach, orthodontists could train assistants directly in their practices, with assistants then demonstrating competency by passing an approved exam.

This would:

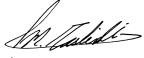
- Remove the need for every orthodontist to apply as a course provider, eliminating duplicative administrative burdens.
- Free Board staff from course-by-course approvals, significantly reducing workload.
- Expand workforce opportunities by making the pathway more affordable and accessible, while maintaining public safety through rigorous examination requirements.

We also support other measures that can reduce burden while preserving Board oversight, such as **exempting CODA-accredited programs** from duplicative approval and **streamlining applications** for multi-location providers. However, we want to be clear that our central position is that orthodontists should not be required to become accredited educational institutions in order to train OAPs.

The orthodontic profession has a long history of directly training orthodontic assistants, which has been a cornerstone of workforce development in our specialty. Any policy changes that jeopardize this pathway risk worsening existing shortages and limiting patient access to care.

We thank you again for your leadership in engaging stakeholders early in this process. CAO looks forward to continuing to work collaboratively with the Board and other partners to ensure reforms both reduce administrative burdens and expand opportunities for the workforce.

Sincerely,

A handwritten signature in black ink, appearing to read "Dr. Mark Rashidi", written in a cursive style.

Dr. Mark Rashidi
California Association of Orthodontists

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov

MEMORANDUM

DATE	October 7, 2025
TO	Members of the Dental Assisting Council
FROM	Brant Nelson, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 10.a.: Status Update on Pending Regulations

Background

This memo addresses rulemaking packages that have moved forward in the rulemaking process since the last Dental of California Board (Board) meeting. Rulemaking packages that require Board action will be presented as separate agenda items or will be presented at a future Board meeting.

Rulemaking to Amend California Code of Regulations (CCR), Title 16, Section 1005 Regarding Minimum Standards for Infection Control

Summary of Proposed Changes:

A summary of the proposed changes can be found within the [May 14-15, 2025 Board meeting materials](#).

Update:

The proposed text was approved by the Dental Board at its May 14-15, 2025, Board meeting. Board staff submitted the proposed text to the Dental Hygiene Board of California (DHBC) for review and consensus.

At its meeting on July 19, 2025, the DHBC approved the Dental Board's approved text, and thereby reached consensus with the Board. Board staff are taking the necessary steps to begin the rulemaking process including drafting the regulatory documents.

Action Requested

This item is informational only. No action is requested.

MEMORANDUM

DATE	October 13, 2025
TO	Members of the Dental Assisting Council
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 11.: Election of 2026 Council Chair and Vice Chair

Background

The Dental Board of California (Board) Dental Assisting Council (Council) members will elect a Chairperson and a Vice-Chairperson for 2026.

Roles and Responsibilities

Chair:

- Reviews agenda items with Executive Officer prior to Council or Committee meetings.
- Approves the Council or Committee agendas.
- Chairs and facilitates Council or Committee meetings.
- Calls the roll or appoints a member to call the roll for each action item.
- Reports the activities of the Council or Committee to the full Board.

Vice Chair:

- In the absence of the presiding Chair, fulfills the Chairs responsibilities.

Pursuant to the *Board, Council, and Committee Member Administrative Policy and Procedure Manual, Adopted August 2024*, the Board's Executive Officer shall conduct the election of officers and shall set the general election procedure. The Executive Officer will ask for nominations for each office. The election of the Chair will occur first, followed by the Vice-Chair.