Thursday, August 18, 2016

1. **Call to Order/Roll Call/Establishment of Quorum.**
   Dr. Steven Morrow, President, called the meeting to order at 8:58am. In the absence of Mr. Steve Afriat, Secretary, Vice President Judith Forsythe called the roll and a quorum was established.

   The Board immediately went into Closed Session.

CLOSED SESSION – FULL BOARD

CLOSED SESSION – LICENSING, CERTIFICATION, AND PERMITS COMMITTEE

RETURN TO OPEN SESSION – FULL BOARD

2. **Licensing, Certification and Permits Committee Report on Closed Session.**
   Dr. Steve Morrow, Chair of the Licensing, Certification and Permits (LCP) Committee reported that the committee made the following recommendations:

   DDS Candidate S.B. – Approve replacement upon completion of the Law and Ethics training.
   Motioned/Seconded (M/S) (Burton/Whitcher) to accept the committee recommendations.

The motion passed.

DDS Candidate A.M. – Approve replacement upon completion of the Law and Ethics training.
M/S (Whitcher/Chappell-Ingram) to accept the committee recommendations.


The motion passed.

DDS Candidate F.Q. – Approve replacement upon completion of the Law and Ethics training.
M/S (Whitcher/Chappell-Ingram) to accept the committee recommendations.


The motion passed.

RDA Candidate G.O. – Approve replacement upon completion of the Law and Ethics training.
M/S (Whitcher/Woo) to accept the committee recommendations.


The motion passed.

RDA Candidate E.S. – Approve replacement upon completion of the Law and Ethics training.
M/S (Whitcher/Woo) to accept the committee recommendations.


The motion passed.

RDA Candidate M.S. – Approve replacement upon completion of the Law and Ethics training.
M/S (Whitcher/Woo) to accept the committee recommendations.


The motion passed.
3. **Approval of the May 11-12, 2016 Board Meeting Minutes.**
Meredith McKenzie commented that she was not absent from the May meeting as indicated by the minutes. She stated that she arrived at noon on Wednesday, May 11, 2016.

M/S (King/Woo) to accept the minutes as amended.

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

The motion passed.

4. **Welcome by Board President.**
Dr. Steven Morrow, President, introduced Dr. Jayanth Kumar the newly appointed California Dental Director.

5. **Report by Jayanth V. Kumar, DDS, MPH, California Dental Director.**
Dr. Kumar gave a presentation highlighting the Issues, Challenges, and Opportunities California’s Dental Providers encounter.

6. **Budget Report.**
Sarah Wallace, Assistant Executive Officer, gave an overview of the information provided.

7. **Discussion and Possible Action Regarding 2017 Board Meeting Dates.**
Linda Byers, Executive Assistant, gave an overview of the information provided. The Board discussed the possible dates for 2017 and agreed upon:

- February 23-24, 2017
- May 11-12, 2017
- August 10-11, 2017
- November 2-3, 2017

8. **Update on the Dental Board of California’s 2017-2020 Strategic Plan Development.**
Executive Officer, Karen Fischer, gave an overview of the information provided.

9. **Discussion and Possible Action Regarding Adoption of the Revisions to the Board Member Administrative Procedure Manual.**
Ms. Fischer gave an overview of the information provided. She recommended that the paragraph on page 11 regarding “grace period” be stricken.

M/S (Stewart/Forsythe) to remove the sentence on page 11 concerning “grace period”.

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

The motion passed.
Dr. Whitcher suggested adding the word “stipulated” before the word Surrenders, in the last bullet point in the Closed Session section of page 7.

M/S (Stewart/McKenzie) to accept the manual as amended.


The motion passed.

10. Discussion and Possible Action Regarding Withdrawal of the Appointment of Shannon Chavez, MD, to the Southern California Diversion Evaluation Committee and; Recommendations for the Appointment of a Southern California Diversion Evaluation Committee Member.
Ms. Fischer gave an overview of the information provided.

M/S (Stewart/Burton) to withdraw the appointment of Shannon Chavez to the Diversion Evaluation Committee.


The motion passed.

Dr. Stewart gave a summary of his discussion with Diversion Committee candidate Bradford.

M/S (Woo/McKenzie) to appoint John Philip Bradford, DDS as a public member of the Southern Diversion Evaluation Committee.


The motion passed.

11. Discussion and Possible Action Regarding the Draft Report to the Legislature Regarding the California Portfolio Pathway to Licensure Program in Accordance with Business and Professions Code Section 1632.6(a).
Ms. Wallace gave an overview of the draft report relating to the Portfolio Examination and requested the Board review the report pursuant to Business and Professions Code (Code) Section 1632.6 to ensure compliance with the requirements of Section 139 of the Code and certify that the Portfolio Examination meets those requirements in order to submit to the Legislature and the Department of Consumer Affairs by December 1, 2016.

M/S (Burton/King) to approve the draft report to submit to the Legislature.

12. **Examinations:**
   A. **Western Regional Examination Board (WREB) Update**
      Dr. Huong Le provided a verbal report regarding her attendance at the Dental Examination Review Board on June 24 in Austin, Texas. She also introduced Dr. Nathaniel Tippit, Committee Chair of WREB. Dr. Tippit invited Board member questions and briefly discussed current dental strategies in Texas.
   
   B. **Staff Update on Portfolio Pathway to Licensure**
      Ms. Fischer gave an overview on the information provided. Dr. Debra Woo gave a report regarding the efforts at the Arthur A. Dugoni School of Dentistry-University of the Pacific, the acceptance of the portfolio examination in Iowa, and discussions taking place with Kentucky. Dr. Morrow gave a report on the continued success of the Portfolio Pathway to Licensure spreading nationwide and some of the challenges associated.

13. **Licensing, Certifications and Permits:**
   A. **Review of Dental Licensure and Permit Statistics**
      Sarah Wallace, Assistant Executive Officer, gave an overview of the information provided.

14. **Enforcement:**
   A. **Enforcement – Statistics and Trends**
      Carlos Alvarez, Acting Enforcement Chief, gave an overview of the information provided.
   
   B. **Review of Third Quarter Performance Measures from the Department of Consumer Affairs**
      Mr. Alvarez, Acting Enforcement Chief, gave an overview of the information provided.
   
   C. **Diversion Program Report and Statistics**
      Mr. Alvarez, Acting Enforcement Chief, gave an overview of the information.

**CONVENE JOINT MEETING OF THE DENTAL BOARD AND DENTAL ASSISTING COUNCIL**

**RETURN TO FULL BOARD OPEN SESSION**

**RECESS**

**Friday August 19, 2016**

15. **Call to Order/Roll Call/Establishment of Quorum.**
    Dr. Steven Morrow, President, called the meeting to order at 9:01 a.m. Judith Forsythe, Vice President, called the roll in the absence of the Secretary and a quorum was established.

16. **Executive Officer’s Report.**
Karen Fischer, Executive Officer of the Dental Board of California reported on her activities since the last Board meeting as well as the status of each of the Dental Board’s units.

17. **Report of Dental Hygiene Committee of California (DHCC) Activities.**
Noel Kelsch, RDHAP, Dental Hygiene Committee President, gave a report on the Committee’s staffing, activities and goals.

18. **Subcommittee Report Regarding the Progress of the Pediatric Anesthesia Study Requested by Senator Jerry Hill; Review and Discussion of “Working Document”**.
Dr. Whitcher gave a presentation containing an overview of the “Working Document”. Kathleen King, Board Member, asked if Amoxicillin is still part of the preoperative treatment. Dr. Whitcher answered that it can be. She also asked if the anesthesiologist for dental treatment done in a hospital setting is a Dentist Anesthesiologist or a Medical Anesthesiologist. Dr. Whitcher answered that the person administering anesthesia in a hospital setting would have to have hospital privileges and could be either. Dr. Whitcher mentioned that insurance companies mandate a surgery center setting for patients under the age of seven needing sedation for dental procedures.

Dr. Leonard Tyko, President of the Oral and Facial Surgeons of California (OFSOC), commented that OFSOC gathered data to determine the number of dental anesthesia procedures performed each year including conducting a survey of the members of OFSOC for the number of pediatric and adult anesthesia procedures performed from 2011 to 2016. From the data it is estimated that in the five years between 2011 and 2015, California Oral and Maxillofacial Surgeons did over one million pediatric deep sedations and general anesthetics. According to the Dental Board’s working document there has only been a single death in an Oral and Maxillofacial Surgeons office which makes the risk less than one in a million. Dr. Tyko stated that OFSOC has an excellent safety record and there is no data to support changes to the Oral and Maxillofacial Surgeons model and is therefore unwarranted.

Dr. George Maranon, Chair of the OFSOC Anesthesia Committee, commented that in 2012 the American Association of Oral and Maxillofacial Surgeons established parameters of care for anesthesia in outpatient facilities and a periodic anesthesia evaluation program that is rigorous. He also commented that Auxiliaries are a key component of the team effort needed and to that end the OFSOC has established the Oral and Maxillofacial Surgery Assistant training program that allows auxiliaries to obtain certification to assist in outpatient oral surgery procedures performed under anesthesia. Dr. Maranon stated that OFSOC recommends three changes to the Dental Anesthesia Regulations:

1. Adoption of the American Association of Oral and Maxillofacial Surgeons (AAOMS) parameters of care to all dentists who practice sedation and oral anesthesia.
2. Require the presence of two trained and certified auxiliaries during outpatient moderate, deep, and general anesthesia.
3. Require Capnography monitoring during moderate, deep and general anesthesia sedation consistent with the American Society of Anesthesiologists (ASA) and AAOMS.

Kathleen King asked if the one million sedation cases per five years were adult and pediatric combined. Dr. Tyko answered that this number was pediatric only which is 21 years and younger. He commented that roughly 48% of the total number of cases are pediatric.

Dr. Lai asked if the training that OFSOC offers for auxiliaries is open to any auxiliary or do they have to be a member of OFSOC. Dr. Maranon stated that it is open to any auxiliary.

Dr. Whitcher asked if they had any recommendations that would help the Board address the pediatric age group. Dr. Tyko suggested that children seven and under be treated in a hospital setting, this is the standard insurance companies recognize.

Dr. Paul Reggiardo, California Society of Pediatric Dentists (CSPD) and American Society of Pediatric Dentistry (ASPD), commended the Board and the subcommittee on the depth, breadth and attention to detail contained in the Anesthesia Working Document. He brought a letter for distribution that requests a correction on page 26 regarding the process by which the joint American Academy of Pediatrics (AAP) and the American Academy of Pediatric Dentistry (AAPD) *Guideline for Monitoring Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures* is developed and approved by the governing bodies of both organizations. He stated that the document incorrectly states that it is unclear as to where the input is obtained. Dr. Reggiardo stated that the guidelines are developed jointly by both organizations and not merely forwarded to the AAP by the AAPD for endorsement. AAPD and CSPD look forward to the completion of the comprehensive and impartial analysis by the Dental Board of Pediatric Sedation and the Laws, Regulations and Policies which govern its administration. The organizations support and applaud the open and transparent process by which the subcommittee is moving forward to identify any necessary statutory or other changes to the administration of office-based sedation which improve the margin of safety for pediatric patients; and believe this information is essential in determining the course of action necessary to ensure the highest level of care for the patients.

Brianna Pittman, California Dental Association (CDA), commented that CDA appreciates the significant amount of work that has gone into producing this report. She thanked the Dental Board for the proactive outreach to stakeholders not to just practitioners within Dentistry but to all those who are concerned with pediatric anesthesia safety. CDA looks forward to working with all interested parties to implement the Board’s recommendations for improvements in pediatric anesthesia. CDA suggests that additional data and collection methods are needed. Dr. Whitcher commented that prevention is the first step to diminishing the need for pediatric anesthesia for dental work.
Dr. Larry Trapp, California Society of Dentist Anesthesiologists (CSDA), commented that the report is poorly paginated. He stated that the incident report that the Dental Board requires is inadequate. Dr. Trapp offered to partner with the Board along with the Department of Anesthesiology of Loma Linda University to create a more comprehensive document. He encouraged the Board to not expunge any data related to these cases.

Dr. Diana Belli, Dental Anesthesiologist, commented that she travels from office to office to provide general anesthesia and monitoring, leaving the dentist free to perform just the procedure. She commented that in a former career she specialized in data analytics and noticed that in the report there were only 11 attributes recorded. She feels that there are an additional 28 items that should be tracked. Without tracking all of these attributes an accurate assessment is not possible.

Kathleen King asked Dr. Belli about the additional attributes that she suggests. Dr. Belli listed some of her findings. Kathleen King asked for her recommendations in writing. Dr. Belli agreed to provide them.

Dr. Lai commented that in the case of a poor outcome, the dentist usually contacts their insurance carrier first, who directs them not to talk to anyone about the incident. This poses a dilemma for the dentist who wants to report the incident but has been instructed by the insurance carrier not to. Dr. Whitcher stated that any time an insurance company receives a report they open a claim which can ultimately be used to gather data from the closed claim report.

Jeffrey Poage, Specialist in Pediatric Anesthesiology, California Society of Anesthesiologists (CSA), commented that updated terminology is needed. In a previously submitted letter we recommend revision of the Business and Professions Code and all applicable regulations to reflect the current classification of states of sedation in anesthesia; minimum, moderate and deep sedation and general anesthesia, the distinction between oral and parenteral routes of administration should be abandoned and the definition of new permit categories to replace those currently in existence eliminating the term Conscious Sedation and to stratify permits by depth of sedation and pediatric and adult.

Dr. Mark Zakowski, President, California Society of Anesthesiologists (CSA), commented that he is in support of this project and hopes that the definitions of minimal sedation, moderate sedation, and deep sedation/general anesthesia that the ASA uses are adopted. He promotes one standard of care no matter the setting.

Dr. Anna Kaplan urges that there should be a separate anesthesia provider in the room monitoring the patient at all times.

Dr. Paula Whiteman, Representative of the American Academy of Pediatrics, California (AAPCA), submitted a letter previously that urges all dentists in California comply with the AAPCA and AAPD guidelines on pediatric anesthesia in dental settings. We recommend the subcommittee integrate the recommendations of the California Society of Anesthesiologists letter that was just provided dated
August 17, 2016. The California American Academy of Pediatrics requests an immediate and full moratorium on the single operator anesthesiologist model when a child is placed under moderate to deep sedation in a dental office.

Dr. Richard Stafford, Past President California Society of Dental Anesthesiologists, former faculty at University of Southern California (USC) and Loma Linda University, recommends that the person providing the anesthesia and the procedure for general anesthesia under the age of 7 be separated. This needs to start immediately.

There was a discussion regarding dental insurance premiums and liability when performing general anesthesia.

Dr. Jimmy Tom, President Elect of the American Society of Dentist Anesthesiologists, Associate Clinical Professor of Dentistry at USC, ADA representative for the ASA task force on moderate sedation provided by non-anesthesiologists, applauded the Board for its efforts so far in improving safety with regards to anesthesia for pediatric patients. He requested a reconsideration of the establishment to have a multi-disciplinary committee or group to analyze, update and possibly change, if necessary, the anesthesia regulations in regards to the California dental anesthesia provisions. The recommendation is for the panel to be comprised of oral surgeons, dentist anesthesiologists, pediatric dentists, periodontists and all others who are involved and have some stake in the provision of dental anesthesiology to patients in California. He commented that it would be nice if this group could look at updating anesthesia provisions continually instead of once every five years like other associations.

Dr. Morrow, President, called a short recess.

Karen Fischer, Executive Officer of the Dental Board of California commented that this is only the first of many discussions regarding this topic. The subcommittee continues to take comments from all interested parties and stakeholders and will incorporate them into the Working Document for review and comment at a future meeting.

19. **Legislation:**

   A. **2016 Tentative Legislative Calendar**
   Ms. Sarkisy an provided an overview of the information provided.

   Ms. Burton reminded the Board that the end of the 2016 Legislative session is approaching and it is past the time where Board members can request major changes in legislation.

   B. **Discussion and Possible Action on the Following Legislation**

      * AB 2235 (Thurmond) Board of Dentistry: Pediatric Anesthesia: Committee*

      Ms. Sarkisy an gave an overview of the proposed language of the bill and recommended that the Board maintain its support in concept position.
**AB 2331 (Dababneh) Dentistry: Applicants to Practice**

Ms. Sarkisyan gave an overview of the proposed language of the bill and recommended that the Board take a support position on AB 2331.

Dr. Whitcher asked whether the American Board of Dental Examiners (ADEX) decided which examination format would be included in the language of the bill.

Erin Levi, Capitol Partners, representing ADEX commented that the bill was in third reading and that ADEX left the decision relating to which examination format with the Board to decide is acceptable in the State of California.

(M/S/C) (Burton/Woo) moved for a support position on AB 2331.

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

Ms. Burton directed staff to submit a letter regarding the Board’s position on AB 2331 to the author’s office.

**AB 2485 (Santiago) Dental Corps Loan Repayment Program**

Ms. Sarkisyan gave an overview of the proposed language of the bill and recommended that the Board take a support position on AB 2485.

Brianna Pittman representing the California Dental Association (CDA) thanked the Board and staff for the work on the bill.

(M/S/C) (Burton/McKenzie) moved for a support position on AB 2485.

**AB 2859 (Low) Professions and vocations: retired category: licenses**

(M/S/C) (Burton/King) moved for a support position on AB 2859.

Dr. Lai requested clarification regarding the purpose of AB 2859.

Ms. Burton directed staff to contact the author’s office and thank him for taking our amendments.

Ms. Chappell-Ingram requested clarification regarding the manner in which to contact the author’s office.

Dr. Morrow requested clarification regarding whether a person
selecting a retired status would be able to regain his/her licensure should the licensee choose to return to practice.

Gayle Mathe representing the CDA requested clarification between selecting inactive and returning to practice and selecting the retired status and returning to practice.

Dr. Morrow responded to CDA’s comment by stating that life events occur that would prompt someone on retired status to return to practice, while inactive is for those who would like to maintain their license, but choose not to practice.

Ms. Chappell-Ingram requested clarification regarding whether the Board currently has a procedure established for those who would like to return to practice if a person selected the retired status.

Ms. McKenzie commented that the language of the bill proposes to provide those licensees who do not want to practice dentistry any longer an opportunity to apply for the retired status instead of electing to not renew their inactive or active license for five years in order for a licensee’s license to be cancelled.

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

❖ **SB 482 (Lara) Controlled Substances: CURES database**
Ms. Burton commented that the Board not take a position as the bill is too far in the legislative process.

❖ **SB 1155 (Morrell) Professions and Vocations: Licenses: Military Service**
Ms. Sarkisyan gave an update on the status of the bill and advised the Board not take any action as it has been placed in suspense.

❖ **SB 1348 (Cannella) Licensure Applications: Military Experience**
Ms. Sarkisyan gave an update on the status of the bill and advised the Board not to take any action as the bill is on the Governor’s desk.

❖ **SB 1444 (Hertzberg) State Government: Computerized Personal Information Security Plans**
Ms. Sarkisyan gave an update on the status of the bill and advised the Board not to take any action as the bill is on the Governor’s desk.
SB 1478 (Senate Committee Business Professions and Economic Development) Healing Arts
Ms. Sarkisyan updated the Board as to the letter submitted as a result of the May 2016 Board meeting.

C. Update on Pending Regulatory Packages
- Abandonment of Applications (Cal. Code of Regs., Title 16, Section 1004)
- Dental Assisting Comprehensive Regulatory Proposal; (Cal. Code of Regs., Title 16, Division 10, Chapter 3)
- Elective Facial Cosmetic Surgery Permit Application and Renewal Requirements (New Regulation)
- Licensure By Credential Application Requirements (New Regulation)
- Continuing Education Requirements and Basic Life Support Equivalency Standards (Cal. Code of Regs., Title 16, Sections 1016 and 1017)
- Mobile Dental Clinic and Portable Dental Unit Registration Requirements (Cal. Code of Regs., Title 16, Section 1049)
- Dental and Dental Assistant Fee Increase (Cal. Code Regs., Title 16, Sections 1021 and 1022)
- Definitions for Filing and Discovery (New Regulation)

Ms. Sarkisyan gave an overview of the information provided.

D. Discussion and Possible Action Regarding Fiscal Year 2016/17 Regulatory Priorities.
Ms. Sarkisyan and Ms. Wallace gave an overview of the information provided including staff’s recommendation.

M/S/C (Forsythe/Chappell-Ingram) to accept staff’s recommendation to maintain the same regulatory priorities it established in FY 2015-2016 and added three regulatory rulemakings for the regulatory priorities for FY 2016-2017.

E. Discussion of Prospective Legislative Proposals.
Stakeholders are encouraged to submit proposals in writing to the Board before or during the meeting for possible consideration by the Board at a future meeting.

20. Fee Increase:
A. Discussion and Possible Action Regarding Comments Received During the 45-Day Public Comment Period and During the Regulatory Hearing for the Board’s Proposed Rulemaking to Amend California Code of Regulations, Title 16, Sections 1021 and 1022 Relevant to a Fee Increase.
M/S/C (Stewart/Le) moved to accept staff’s recommendation relating to California Code of Regulations (CCR) Section 1021(n).

M/S/C (Le/Burton) moved to accept staff’s recommendation relating to CCR Section 1021.

M/S/C (King/Whitcher) to accept staff recommendation relating to CCR Section 1022.

M/S/C (Burton/Lai) moved to accept staff recommendation to modify CCR Subsection 1021(c).

M/S/C (Whitcher/Le) moved to accept staff recommendation to modify CCR Subsections 1021 (q) and (r).

B. Discussion and Possible Action Regarding Adoption of Proposed Amendments to California Code of Regulations, Title 16, Sections 1021 and 1022 Relevant to a Fee Increase.
M/S/C (Burton/Chappell-Ingram) moved to adopt the proposed amendments to CCR Sections 1021 and 1022 relevant to a Fee Increase.

Maureen Titus, California Dental Hygienist Association, provided a reminder to the Board regarding the letter submitted to the Board on April 21st regarding dental corporations specifically relating to having an agenda item to discuss dental corporations and practice of dentistry as relating to mobile dental units and the identity of the specific dentists operating such units.

Ms. Pittman, CDA, provided updates regarding upcoming CDA events: CDA Cares event on October 15th and 16th; and CDA Presents on September 8th through the 10th. Ms. Pittman also gave an overview of AB 2207 (Wood) regarding Denti-Cal and AB 2744 (Gordon) regarding groupons.

22. Board Member Comments on Items Not on the Agenda.
Dr. Lai asked whether Board staff would be able to provide an update on the registered dental assistant (RDA) practical examination manual. Dr. Morrow recalled the Executive Officer’s report, and Ms. Fischer discussed that based on the recommendations from the May 2016 Board meeting the RDA practical examination study guide was provided to the RDA candidates and programs.

23. Adjournment.
Adjourned 12:30pm.