

Testimony in Favor of Senate Bill 802
Presented by Lisa J. Rowley
Monday, April 8, 2013

Chair Monnes-Anderson and members of the committee.

For the record, my name is Lisa J. Rowley, I am a licensed dental hygienist and I reside in Portland, Oregon. I am the Program Director for the School of Dental Health Science at Pacific University. Pacific University is a private university with campuses in Forest Grove, Hillsboro and Eugene. We offer a Bachelor of Science Degree Dental Hygiene Program. Our dental hygiene program is accredited by the Commission on Dental Accreditation which operates under the auspices of the American Dental Association.

I am speaking to you today in support of Senate Bill 802. This bill would amend the Oregon Dental Practice Act so that allied dental education programs accredited by the Commission on Dental Accreditation, also known as CODA, would not be required to name an actively licensed dentist as their dental director.

I have been the Program Director for Pacific University's dental hygiene program for 7 years. Prior to coming to Pacific University, I was program director for a CODA-accredited dental assisting program and a CODA-accredited dental hygiene program in a community college setting for 9 years.

CODA-accredited allied dental education programs throughout the United States may own and operate dental clinic facilities for the primary purpose of educating their students to perform dental procedures on patients. The patients who visit these dental clinic facilities understand that their dental care is being provided by students under the supervision of faculty as part of an allied dental education program. The CODA Accreditation Standards require that allied dental education programs conduct a continuous formal system of quality assurance for their patient care program. Patient safety must be closely monitored throughout the educational process and the program must ensure that the need for students to complete specific clinical requirements does not adversely affect the health and treatment of patients. These standards also require that allied dental education programs have a mechanism in place for reviewing patient records, identifying and correcting treatment deficiencies and addressing patient complaints. Patients must be informed about the scope of services that can be provided by the program, patients must be advised of their comprehensive treatment needs, and patients must be referred for procedures that cannot be provided by the program.

It is common practice for CODA-accredited allied dental education program to have more than one clinic dentist who teaches students and supervises patient care in their dental clinic facilities. These clinic dentists may be employees of the program or they may be volunteers. It is unusual for a CODA-accredited allied dental education program to have one "dental director" or employ one full-time dentist because the costs associated with this position would be prohibitive. And many of these dental clinic facilities operate in excess of 40 hours per week, so additional clinic dentists would still be needed to staff all clinic sessions.

The CODA Accreditation Standards require that allied dental education programs identify the individuals (ie. dentists) who assume responsibility for supervisory, diagnostic, consultative and referral services and describe how these services are provided for patients. The responsibilities of our clinic dentists include most of the responsibilities which are outlined in ORS 679.020(4)(a). However, these responsibilities generally do not include the retention of patient dental records or ensuring that each patient has a dentist of record. Patient dental records are retained by the allied dental education program. The individual clinic dentists do not have direct access to patient records and they do not have the ability to provide patient records to a board of dentistry or to a patient. The CODA Accreditation Standards do require that all patients must be referred for procedures that cannot be provided by the program, but they do not specify that each patient must have a dentist of record. Many of the patients who seek dental care from an allied dental education program do so because they do not have a current dentist of record. We encourage all of our patients to secure a dentist of record outside of our program, and when they do, we forward a copy of their records to this dentist.

Senate Bill 802 does not "single out" community colleges from the other entities that may own or operate a dental office or dental clinic. This bill would apply to all CODA-accredited allied dental education programs in Oregon whether they are offered by a community college, state college or a private college like Pacific University.

Senate Bill 802 would not remove the Oregon Board of Dentistry from the process of continuing public protection. The Oregon Board of Dentistry would continue to protect the public in the same way that they did prior to 2011 when they first became aware of the provision in the Oregon Dental Practice Act which requires that CODA-accredited allied dental education programs name an actively licensed dentist as their dental director. The Oregon Board of Dentistry can request patient records and the names of the licensed dentists and dental hygienists who supervised a patient's care directly from the allied dental education program through the program director. Even if the program director is not licensed by the Oregon Board of Dentistry, the program director is still obligated to provide any information requested by the board to assist them in conducting an investigation.

In a letter dated March 26, 2013, the executive director of the Oregon Board of Dentistry (OBD) indicates that the OBD "has never opined that only one person had to be named as a dental director." This subject was discussed during three meetings that the program directors have had with the board of dentistry and at each meeting we were told that we needed to name one dental director who would be responsible for all dental care that was provided in our dental clinic facilities, even if that person did not provide that care or had never even treated patients in our facilities.

This letter further states that the "rationale for the dental director being named is so that the OBD can investigate any complaints made and patients can obtain their records with ease." I currently have 7 different clinic dentists who are each contracted to work in my dental clinic facility on a part-time basis from January through May 2013. When our spring semester ends in May, these 7 clinic dentists will no longer be employees of Pacific University. If a patient wants to "obtain their records with ease," contacting the board of dentistry to obtain these 7 names will not help the patient to obtain their records. As I mentioned previously, the individual clinic dentists who work with an allied dental education program do not have direct access to patient records and do not have the ability to provide patient records to a board of dentistry or to a patient. The OBD and the patient would need to request this information directly from the allied dental education program through the program director and the program director would be obligated to provide this information.

Thank you for the opportunity to testify before you today. I would be happy to answer any questions.