

House Bills:

HB 2996

This bill would prohibit OBD from requiring assistant to take radiological exams to determine proficiency.

HB 3223

Prohibits OBD from using a written exam to determine assisting proficiency. It ALSO sets forth a rule that the OBD must come up with other ways to determine proficiency.

Start Reading Here:

Chair Patterson, Vice Chair Hayden, and Members of the Committee:

For the record, my name is Teresa Dean from Grants Pass, Oregon.

I am an office manager, who started as a dental assistant. I have over 40 years' experience working for both private practice and multi-site practice facilities. I have also taught at Rogue Community College in the dental assisting program for 13 and a half years. I taught Clinical Radiology, Oregon Basic Dental Assisting curriculum, and Expanded Function Dental Assistant classes. These classes prepared students mentally and technically for the rigor of the profession.

This brings me to my first point:

1. Current Methods of Examination are better than adequate.

Exams, properly administered, and effectively prepared, are the most equitable determinants of technical knowledge. Properly administered means they are graded with blind results. If instead, the technical knowledge of the assistant is left up to the training dentist, unfair biases will be rampant. Effectively prepared means that the tests are written to the most current standards of care in the dental industry. DANB reviews and updates exam content to reflect current practice.

Secondly,

2. Emotional strain on assistants is already obscenely high.

When a student signs up for a dental assisting course they are introduced to healthcare as a profession. Dentistry specifically, and regrettably, comes as the only place people feel free to say openly, "I hate coming here, sometimes as a joke and most times, through veiled hostility."

Healthcare services in general are the most emotionally draining and stressful careers.

Appropriate milestones to measure individual basic technical skill bestow the confidence and knowledge that empowers the student to keep going on bad days, communicate better with team members, and lay aside fears to assist with highly technical procedures. They also must have a remarkably clear knowledge of infection control, blood borne pathogens, HIPAA policies and OSHA regulations. Who has time to teach this in their office? As my doctor would say, "Ain't nobody got time for that!"

If we removed these introductory foundations of dentistry from these students, we effectively are putting them in battle without the proper equipment. Is that equitable? Is that fair? The emotional toll in healthcare is already a problem. We talk about "burnout" all the time.

Without equipping the dental assistants appropriately they are getting burned out quickly and leaving the profession.

Lastly:

3. The cost to replace assistants that leave an office is staggering.

Consider this, when an assistant leaves an office, it takes away from the total amount the doctor can produce per month which is the main revenue source for the practice. Usually that number falls between 25-30% of total production. In our office that equates to roughly \$30,000 dollars

per month of lost revenue. This doesn't take into account the cost of recruiting and training the assistant in the systems unique to that office. In the Rogue Valley there is a critical shortage, meaning it's taking longer than 6 months to find and hire dental assistants.

This creates immense emotional stress, and sometimes physical stress from being overworked.

The entire dental team suffers from this, assistants, hygienists, administrators, and dentists.

Finally, dentistry is a highly rewarding profession, my Doctor loves it, and I love it, it has been my life for over 40 years. I was that dental assistant that was trained on the job. I received my radiology license through a dentist that taught a class and I was sponsored by my employer. I worked in the field with no other certificates for almost 10 years. Then I went to work for a pediatric dentist and had to get my EFDA certificate. I studied on my own to achieve that goal. In 2005 I started teaching dental assisting at our local community college in their Allied Health program. The first year I taught, I learned so much more than when I studied for my exams on my own. I learned the in depth part of dental assisting that does not get taught while on the job training. Anatomy, different tooth numbering systems, infection control, different instruments, all aspects of dental assisting that can be taken any where I go. These are all vital parts of dental assisting. It gave me the tools to better communicate, have empathy, be more ethical. Written exams are a vital part of understanding what we learned. A foundation to build on. We are perfectionists, not mediocre-ists, nor "good-enough-ists." We literally improve people's lives every day. Some bills help the profession; however, these bills are a giant leap backward. Please vote to oppose this bill and let it end here. Thank you.