DHBC
Dental Hygiene
Board of California

Friday, November 13, 2026

Dental Hygiene Board of California

Education Committee Agenda Item 6.

Discussion and Possible Action Regarding the Dental Hygiene Educational Program Site Visit Report.

(a) Pasadena City College
(b) Taft College
(c) Diablo Valley College
(d) Cabrillo College
(e) Carrington College – San Jose
(f) Foothill College

Dental Hygiene Educational Program Site Visit Schedule

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

MEMORANDUM

DATE	November 13, 2026
TO	Education Committee Dental Hygiene Board of California
FROM	Adina A. Pineschi-Petty DDS Education, Legislative, and Regulatory Specialist
SUBJECT	**EDU 6: Discussion and Possible Action Regarding the Dental Hygiene Educational Program Site Visit Report.**

1. Pasadena City College (PCC)

a. Site visit generated due to a change in administration for PCC, as well as a part of the Dental Hygiene Board of California's (DHBC, Board) oversite goals to monitor all dental hygiene educational programs (DHEPs) in California.

b. On October 12, 2022, a site visit was conducted at the PCC campus.

c. At the July 20, 2024, Full Board meeting, the Board voted to issue a citation and placed PCC on probation for two (2) years with quarterly reporting requirements.

d. PCC requested an Informal Conference with the DHBC's Executive Officer (EO) pursuant to California Code of Regulations (CCR), Title 16, section 1104.3(b)(5)(B) regarding their citation and probationary status.

e. On September 17, 2024, EO Lum held PCC's Informal Conference where he dismissed the citation but maintained the Board's action of placing PCC on probation for two (2) years with reporting requirements from the date of notification (August 16, 2024).

f. On July 18, 2026, the Board extended PCC's probationary period for an additional two (2) years due to violations discovered during Board staff's site visit on January 28, 2026, as probation was dependent upon full compliance of Board requirements.

   i. See current quarterly reports.

g. A compliance site visit was completed on October 6, 2026.

h. Current Status:

   i. In temporary compliance.

   ii. See current site visit compliance report.

2. **Taft College (Taft)**

   a. Site Visit was generated due to a CODA Self Study review, as well as a part of the DHBC oversite goals to monitor all DHEPs in California.

   b. On February 20-21, 2024, a site visit was conducted at the Taft campus.

   c. At the July 20, 2024, Full Board meeting, the Board voted to issue a citation and fine of $2,000 ($1,000 each for 2022 & 2023 students who graduated without fulfilling Taft's established requirements to graduate from the Taft dental hygiene program) and placed Taft on probation for three (3) years with quarterly reporting requirements.

   d. Taft requested an Informal Conference with the DHBC's Executive Officer pursuant to 16 CCR section 1104.3(b)(5)(B) regarding their citation, fine, and probationary status.

   e. On September 19, 2024, EO Lum held Taft's Informal Conference where he affirmed the Board's decision (as detailed above) where the Board issued Taft a citation and fine ($2,000) and placed Taft on probation for three (3) years from the date of notification (August 15, 2024). Taft College paid the fine and is currently on probation for three (3) years from the August 2024 date.

   f. Current Status:

      i. In compliance.

      ii. See current quarterly report.

3. **Diablo Valley College (DVC)**

   a. Site visit generated due to a CODA Self Study review as well as a part of the DHBC oversite goals to monitor all DHEPs in California.

   b. On October 14, 2025, a site visit was conducted at the DVC campus.

   c. On October 31, 2025, December 5, 2025, December 19, 2025, January 23, 2026, February 25, 2026, and April 2, 2026, DVC provided responses to the violations discovered by the Board. On April 2, 2026, DVC requested reconsideration and dismissal of "Violation 1: Student Clinical Direct Patient Care Hours" and "Violation 2: Program Director Assignment Compliance."

   d. On July 18, 2026, the Board upheld "Violations 1 and 2," and required DVC to remedy the violations by August 21, 2026.

   e. Current Status:

      i. In compliance.

      ii. See current determination report.

4. **Cabrillo College (Cabrillo)**

    a. On February 12, 2026, an unannounced site visit was conducted due to complaints received by the Board, as well as due to appointment of a new program director.

    b. On March 28, 2026, the Full Board voted to require the Cabrillo College Dental Hygiene Educational Program's Class of 2026 to complete all deficient clinical hours, requirements, and competencies prior to graduation of the class, issued a citation and the fine of $5,000, and placed Cabrillo on a 3-year probation period with quarterly reporting requirements (the first quarterly report due on August 1, 2026) identifying corrective measures where the program will be reassessed.

    c. Current Status:

        i. In compliance.

        ii. See Cabrillo reports. (August 1 and November 1)

5. **Carrington College-San Jose (Carrington-SJ)**

    a. Site visit generated due to documentation concerns as well as due to appointment of a new interim program director.

    b. On October 7, 2026, a site visit was conducted at the Carrington-SJ campus.

    c. Current Status:

        i. Not in compliance.

        ii. See site visit report.

6. **Foothill College (Foothill)**

    a. Site visit generated due to a CODA Self Study review as well as due to appointment of a new program director.

    b. On November 5, 2026, a site visit was conducted at the Foothill campus.

    c. Current Status: Verbal update with full report to be provided at the Match 2027 DHBC Meeting.

DHBC DHEP SITE VISIT SCHEDULE

RDH Educational Program	CODA Visit Previous/Next Scheduled	DHBC Visit(s) Previous/Next Scheduled
Cabrillo College	2019 / 2027	November 7, 2019 April 9, 2024 August 8, 2024 October 8, 2024 (Complaint) February 12, 2026 [Complaint and new Program Director (PD)] May 7, 2026 (Unannounced)
Carrington College (formerly San Joaquin Valley College) - Ontario	2022 / 2029	June 24, 2021
Carrington College - Sacramento	2021 / 2028	February 10, 2021 March 8, 2023 (Limited) February 12, 2024 (Complaint) May 29, 2024 (Complaint) September 30, 2024 (New PD) TBD (New PD)
Carrington College - San Jose	2021 / 2028	October 25, 2017 November 16, 2020 March 1, 2023 (Limited) February 12, 2025 October 7, 2026 (Unannounced)
Carrington College (formerly San Joaquin Valley College) - Visalia	2019 / August 31, 2027-September 1, 2027	November 14, 2019 TBD (Self Study)
Cerritos College	2016 / 2031	February 15, 2017 December 2, 2024
Chabot College	2023 / 2030	September 8, 2021 May 2, 2023
Concorde Career College-Garden Grove	2019 / June 8-9, 2027	June 28, 2016 August 10, 2016 December 7, 2016 January 18, 2018 June 29, 2022 (Limited) December 3, 2024 June 28, 2027 (Self Study and new PD)
Concorde Career College-San Bernardino	2026/2033	December 20, 2016 January 19, 2018 June 28, 2022 (Limited) February 24, 2025 (Complaint)
Concorde Career College-San Diego	2021/ 2028	December 19, 2016 May 27, 2021 October 15, 2024
Cypress College	2015 / 2030	March 3, 2020

RDH Educational Program	CODA Visit Previous/Next Scheduled	DHBC Visit(s) Previous/Next Scheduled
		October 12, 2023
Diablo Valley College	2017 / 2032	February 26, 2019 October 14, 2025 (Self Study)
Foothill College	2018 / June 9-11, 2026	October 18, 2018 November 5, 2026 (Self Study and new PD)
Fresno City College	2021 / 2028	October 27, 2021 TBD 2028 (Self Study)
Loma Linda University	2016 / 2031	October 13, 2022 October 10, 2023
Moreno Valley College	2019 / February 24-25, 2027	May 30, 2017 October 11, 2023 March 3, 2027 (Self Study)
Oxnard College	2021 / 2028	November 4, 2021
Pasadena City College	2016 / 2031	October 12, 2022 January 28, 2026
Sacramento City College	2018 / December 1-3, 2026	December 7, 2018 January 25, 2027(Self Study)
Santa Rosa Junior College	2023 / 2030	September 16, 2021
Shasta College	2023 / 2030	March 12, 2018 March 23, 2021
Southwestern College	2023 / 2030	September 22, 2021
Taft College	2016 / 2031	May 8, 2017(Complaint) May 15, 2017 June 9, 2017 July 24, 2017 February 20-21, 2024 May 13-14, 2024
University of the Pacific	2022 / 2029	February 13, 2020
West Coast University	2017 / 2032	September 15, 2022 September 29, 2025 (Self Study)
West Los Angeles College	2017 / 2032	October 30, 2018 February 25, 2025 (Self Study)

DHBC Dental Hygiene Board of California

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October 8, 2026

José A. Gómez, Ph.D.
President
Pasadena City College
1570 E. Colorado Blvd., W204
Pasadena, CA 91106

Dear Dr. Gómez,

The Dental Hygiene Board of California (DHBC) conducted a site visit at the Pasadena City College Dental Hygiene Educational Program (PCC) on October 6, 2026, to review the progress on the temporary clinical and radiology facilities addressing Violation 1 of the January 28, 2026, site visit report.

Pursuant to California Code of Regulations (CCR), Title 16, section 1104(b)(5), continuation of approval of all educational programs shall be contingent upon compliance with the requirements described in Title 16, Division 11, Article 3 of the California Code of Regulations.

The progress thus far is satisfactory. PCC shall continue to provide adequate clinical and radiology facilities pursuant to Business and Professions Code section 1941(a), 16 CCR Section 1105(i), and Commission on Dental Accreditation of the American Dental Association (CODA) Standards 2-5. 4-1, and 4-2, and shall provide evidence of the final remodel status by ***March 1, 2027***.

The priority of the DHBC is consumer protection. To ensure consumer protection and the public's right to receive quality dental hygiene care, the DHBC has a responsibility to ensure that all dental hygiene programs within the state meet the same educational standards in preparing their graduates for the profession. If you have any questions regarding this report, please feel free to contact me at adina.petty@dca.ca.gov.

Sincerely,

Adina A. Pineschi-Petty DDS

Education, Legislative and Regulatory Specialist
Dental Hygiene Board of California

Cc: Anthony Lum, Executive Officer, Dental Hygiene Board of California

Laura M. Ramirez, Ed.D., Assistant Superintendent/Vice President, Instruction, Pasadena City College

Micah Young, M.D., Dean, Health Sciences, Pasadena City College

Adrine Reganian, RDHAP, BSDH, MSHS, Program Director, Dental Hygiene, Pasadena City College

PASADENA CITY COLLEGE

Health Sciences Division

October 1, 2026

Adina Pineschi-Petty, DDS
Education, legislative and regulatory Specialist
DHBC

Dear Dr. Pineschi-Petty.

Please accept this letter as PCC DH Program's Quarterly report.
At this time there are no changes to report from last submitted Quarterly Report in July.

Please do not hesitate to contact me if any additional information is necessary.

Sincerely,

Adrine Reganian

Adrine Reganian, RDHAP, BSDH, MSHS-HPE
Dental Hygiene Program Director
aareganian@pasadena.edu
(626) 585 7545

ecc: Anthony Lum, Executive Officer, Dental Hygiene Board of California
Jose A. Gomez, Superintendent-President
Laura M. Ramirez, Ed.D, Assistant Superintendent, VP of Instruction
Micah Young, MD, Dean, Health Sciences

PASADENA CITY COLLEGE

Health Sciences Division

August 21, 2026

Adina Pineschi-Petty, DDS
Education, legislative and regulatory Specialist
DHBC

Dear Dr. Pineschi-Petty.

Please accept PCC DH Program's Quarterly report.

1. **Phase I** of the clinic renovations, which addresses the sterilization area, is under way and will be concluded by Monday, August 24th. Doors will be installed to enclose the sterilization area to ensure patient safety. You can find photographs of the near-completed area in the attached documents. Additionally, we have reduced the number of dental chairs within the clinic to better comply with spacing requirements needed for patient care.

2. Additionally, please find student information as requested in the correspondence from DHBC dated July 7, 2026 in the attached documents. All enrolled students, incoming class and faculty have been provided with the copy of DHBC's Probationary Order, as directed.

Please do not hesitate to contact me if any additional information is necessary.

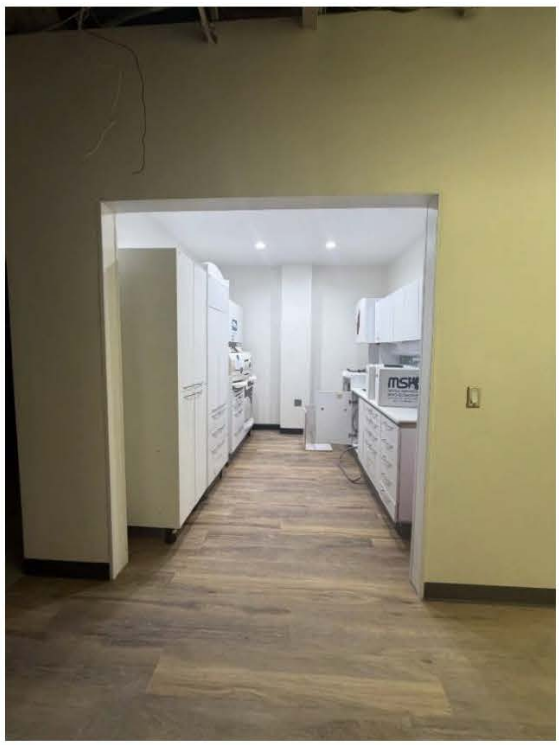
Sincerely,

Adrine Reganian

Adrine Reganian, RDHAP, BSDH, MSHS-HPE
Dental Hygiene Program Director
aareganian@pasadena.edu
(626) 585 7545

ecc: Anthony Lum, Executive Officer, Dental Hygiene Board of California
Jose A. Gomez, Superintendent-President
Laura M. Ramirez, Ed.D, Assistant Superintendent, VP of Instruction
Micah Young, MD, Dean, Health Sciences

Completed Sterilization Area









TAFTCOLLEGE

DENTAL HYGIENE PROGRAM

Oct 1, 2026

Dental Hygiene Board of California
2005 Evergreen St, Suite 1350
Sacramento, CA 95815

RE: **Taft College Dental Hygiene Probation**

1. Handling Deficiencies (None to Report):
There are no new deficiencies to report this quarter. The program continues to monitor student progress and clinical requirements to maintain compliance.

2. Ensuring Competency Requirements Are Met:
Taft College continues to closely monitor student progress to ensure clinical competencies and program requirements are being met. Faculty use Ascend Academic to track competencies, monitor student performance, and identify students who may need additional support. The Program Director and course leads regularly review student progress to ensure competency requirements are being met throughout each semester.

- **Second-Year Students:**
  The Class of 2027 is currently completing its third semester of the program. All students are meeting their clinical benchmarks and progressing as expected. Faculty continue to monitor individual progress through Ascend Academic and provide feedback and support as students work toward completing their semester requirements.
- **First-Year Students:**
  The Class of 2028 began the program in August with 20 students, all of whom remain enrolled. Students are currently developing foundational preclinical skills and completing their initial competencies in preparation for patient care. Faculty continue to monitor their progress and provide feedback to ensure students demonstrate the required skills before advancing to patient care next semester.

3. Reporting to the Dental Hygiene Board of California (DHBC):
As previously reported, Taft College appointed a new Superintendent/President effective July 1, 2026.

The program has since hired two new adjunct faculty members and a Program Technician. Both faculty members' biosketches have been completed and are maintained on file with the program. The Program Technician has also begun working in the department.

There are no additional changes requiring notification to DHBC or CODA this quarter.

4. Concerns or Challenges in Maintaining Compliance:
There are no new compliance concerns to report this quarter. Faculty and administration continue to regularly review student progress, clinical documentation, and program practices to identify and address potential concerns as they arise.

Sincerely,

Gina Johnson

Gina Johnson, RDH, MEd
Director, Dental Hygiene
gjohnson@taftcollege.edu
661-763-7752

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS
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September 28, 2026

Dr. Monica Chahal
President
Diablo Valley College
321 Golf Club Road
Pleasant Hill, CA 94523

Dear Dr. Chahal,

The Dental Hygiene Board of California (Board) conducted a site visit at the Diablo Valley College Dental Hygiene Educational Program (DVC) on October 14, 2025. This site visit was generated due to the submission of DVC's Commission on Dental Accreditation (CODA) Self Study as well as to the Board's oversite goals to review all Dental Hygiene Educational Programs (DHEPs) in California. Evidence of program compliance with the ***minimum*** DHEP standards set by the Business and Professions Code (BPC), the California Code of Regulations (CCR), and CODA was deficient. On October 31, 2025, December 5, 2025, December 19, 2025, January 23, 2026, February 25, 2026, and April 2, 2026, DVC provided responses to the violations discovered by the Board.

At the July 17 – 18, 2026, Full Board meeting, the Board upheld DVC's "Violation 1" and "Violation 2" and required DVC to 1) require each student to meet the minimum of at least eight to twelve hours of direct patient care per week in the dental hygiene clinic as the first-year students begin providing dental hygiene services for patients; 2) require the weekly direct patient care hours for each student meets the minimum of at least twelve to sixteen hours of direct patient care per week in the dental hygiene clinic in the final prelicensure year of the curriculum; 3) require DVC's director to be directly responsible for oversight of the program at all times the program is in session, regardless the types of courses; and 4)to increase the Director of Dental Hygiene reassigned time to greater than 50% and to explicitly state in the program director reassignment agreement and yearly assignment contract, and to enforce, that responsibility for oversight of the program extends throughout any period in which classes are in session, including the summer term.

On August 20, 2026, August 24, 2026, and August 27, 2026, DVC provided supporting documentation for "Violation 1" and "Violation 2." Additionally, on August 31, 2026, Dr Charles Ramos confirmed that "Professor Steeb will be directly responsible for oversight of the program at all times the program is in session, including the summer term."

As such, the Board has determined that "Violation 1" and "Violation 2" are now in compliance.

Pursuant to 16 CCR section 1104(b)(5), continuation of approval of all educational programs shall be contingent upon compliance with the requirements described in Title 16, Division 11, Article 3 of the CCR. As DVC is operating outside the structured parameters of California law and CODA Standards with these violations, DVC is therefore putting students, faculty, and the public at risk. ***Please note:*** 16 CCR section 1104(e) states: "*A material misrepresentation of fact by a new educational program or an approved educational program in any information required to be submitted to the Dental Hygiene Board is grounds for denial of approval or revocation of the program's approval.*"

The priority of the DHBC is consumer protection. To ensure consumer protection and the public's right to receive quality dental hygiene care, the DHBC has a responsibility to ensure that all dental hygiene educational programs within the state meet the same educational standards in preparing their graduates for the profession. Please remember that California law and the CODA Standards are the required ***minimum*** levels California DHEPs shall operate at to continue approval and may exceed those levels, as several programs do at their discretion. If you have any questions regarding this report, please feel free to contact me at adina.petty@dca.ca.gov.

Sincerely,

Adina A. Pineschi-Petty DDS

Education, Legislative and Regulatory Specialist
Dental Hygiene Board of California

Cc: Anthony Lum, Executive Officer, Dental Hygiene Board of California
Joseph Gorga, Vice President, Equity and Instruction, Diablo Valley College
Charles Ramos, Dean Biological and Physical Sciences, Diablo Valley College
Tonette Steeb, CDA, RDH, MSEd

From: Ramos, Charles
To: Petty, Adina@DCA
Cc: Lum, Anthony@DCA; Moore, Tifany@DCA; Steeb, Tonette; Gorga, Joseph; Chahal, Monica
Subject: Re: DVC Violations
Date: Monday, August 31, 2026 1:52:02 PM
Attachments: image001.png
image002.png
image003.png
image004.png
image.png
image.png

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Report Suspicious

Good afternoon, Dr. Petty. Yes, I can confirm that Professor Steeb will be directly responsible for oversight of the program at all times the program is in session, including the summer term.

I can also confirm the faculty-to-student ratio of one (1) faculty member to five (5) students during all preclinical and clinical sessions. This ratio includes all students participating in the clinical session, regardless of whether they are providing direct patient care or are assigned to other clinical duties, including screening, clinic assistant, and radiology assignments.

Thank you.

Kind regards,

CR

Dr. Charles J. Ramos, DHSc, ATC, CSCS
Dean, Biological & Physical Sciences
Physical Science, PS-263

DVC
DIABLO VALLEY COLLEGE

321 Golf Club Rd.
Pleasant Hill, CA 94523
[redacted]

From: Petty, Adina@DCA [redacted]
Sent: Thursday, August 27, 2026 8:20 AM
To: [redacted]

Cc: Lum, Anthony@DCA [redacted]; Moore, Tifany@DCA [redacted]>; Steeb, Tonette [redacted]; Gorga, Joseph [redacted]; Chahal, Monica [redacted]
Subject: RE: DVC Violations

CAUTION: This email originated from outside our system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Dr. Ramos,

The "Agreement for Reassignment" only includes Fall and Spring.

④ Project Name/Description: Director of Dental Hygiene

⑤ Semester(s) of reassignment: ■ FA 2026 Year 19.25 Hrs/Week=Amount of Load to be reassigned: 55

Semester(s) of reassignment: ■ SP 2027 Year 19.25 Hrs/Week=Amount of Load to be reassigned: 55

Reassignment that is to exceed the academic year requires a new form each year

⑥

As I stated before, "The Board's intention is for DVC's director to be directly responsible for oversight of the program at all times the program is in session, regardless the types of courses. Therefore, DVC shall increase the Director of Dental Hygiene reassigned time to greater than 50% and to explicitly state in the program director reassignment agreement and yearly assignment contract, and to enforce, that responsibility for oversight of the program extends throughout any period in which classes are in session, including the summer term."

As the documents you sent are unclear, please confirm Ms. Steeb will be directly responsible for oversight of the program at all times the program is in session, and that that responsibility for oversight of the program extends throughout any period in which classes are in session, including the summer term.

Additionally, please confirm that that the faculty to student ratio will be at one (1) faculty member per five (5) students in all preclinical and clinical sessions regardless of if the student is assigned a patient or if they have other duty assignments in the clinic including, but not limited to, screener/clinical assistant, screener, and radiology.

Please respond to the above by **September 4, 2026.**

If I may be of further assistance, please feel free to contact me.

Sincerely,
Adina A. Pineschi-Petty, DDS
Education, Legislative, and Regulatory Specialist

DHBC
Dental Hygiene
Board of California
2005 Evergreen Street, Suite 1350
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From: Ramos, Charles [redacted]
Sent: Monday, August 24, 2026 5:29 PM
To: Petty, Adina@DCA [redacted]
Cc: Lum, Anthony@DCA [redacted] Moore, Tifany@DCA [redacted]; Steeb, Tonette [redacted]; Gorga, Joseph [redacted]
Subject: Re: DVC Violations

Good afernoon, Dr. Petty. Here are the updated reassignment forms with signatures. Thank you.

Kind regards,

CR

Dr. Charles J. Ramos, DHSc, ATC, CSCS
Dean, Biological & Physical Sciences
Physical Science, PS-263

DVC
DIABLO VALLEY COLLEGE

321 Golf Club Rd.
Pleasant Hill, CA 94523
[redacted]

[redacted]

From: Petty, Adina@DCA [redacted]
Sent: Friday, August 21, 2026 7:21 AM
To: Ramos, Charles [redacted]
Cc: Lum, Anthony@DCA [redacted] Moore, Tifany@DCA [redacted]; Steeb, Tonette [redacted] Gorga, Joseph [redacted]

Subject: RE: DVC Violations

CAUTION: This email originated from outside our system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Dr. Ramos,

Regarding "Violation 1" I stated on July 24, 2026:
DVC may adjust the clinic assistant rotation "so that there are two clinic assistants each session; one at the beginning of the session for 45 minutes gaining experience in beginning day sterilization procedures, and another clinic assistant at the end of the session gaining experience in end of day procedures. Each clinic assistant would also engage in direct patient care with staggered screening or radiology appointments" provided: 1) each student meets the minimum of at least eight to twelve hours of direct patient care per week in the dental hygiene clinic as the first-year students begin providing dental hygiene services for patients; and 2) the weekly direct patient care hours for each student meets the minimum of at least twelve to sixteen hours of direct patient care per week in the dental hygiene clinic in the final prelicensure year of the curriculum.

There are four (4) in each session, so I am unsure as to why. Additionally, with four each session, they are doing a clinical assistant assignment every week and limited in gaining experience with their own patients. Please have Ms. Steeb correct the rotation schedule to two clinic assistants each session: one (1) at the beginning of the session for 45 minutes and one(1) clinic assistant at the end of the session.

Please provide a copy of the corrected rotation schedule **by August 24, 2026.**

Regarding "Violation 2":

Both the "SP 26-27 TSteeb agreement for Reassignment Form (3)" and "LTA_DENHY_Final" are preliminary and not "final" as "SP 26-27 TSteeb agreement for Reassignment Form (3)"and "LTA_DENHY_Final" are only signed by Ms. Steeb (on February 14, 2026, and March 13, 2026, respectively) and do not have the Dean's, Vice President's, Academic Senate President's, or DVC President's signature.

Please provide a copy of the final executed documents with all required signatures **by September 1, 2026.**

If I may be of further assistance, please feel free to contact me.

Thank You,
Adina

Adina A. Pineschi-Petty, DDS
Education, Legislative, and Regulatory Specialist
DHBC
Dental Hygiene
Board of California
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Sacramento, CA 95815
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From: Ramos, Charles [redacted]
Sent: Thursday, August 20, 2026 6:01 PM
To: Petty, Adina@DCA [redacted]
Cc: Lum, Anthony@DCA [redacted] Moore, Tifany@DCA [redacted]; Steeb, Tonette [redacted]; Gorga, Joseph [redacted]
Subject: Re: DVC Violations

Good evening, Dr. Petty. Attached are the supporting documents addressing the updates made in response to both violations noted below.

Please let me know if there is anything else that is needed to address this matter. Thank you.

Kind regards,

CR

Dr. Charles J. Ramos, DHSc, ATC, CSCS
Dean, Biological & Physical Sciences
Physical Science, PS-263

DVC
DIABLO VALLEY COLLEGE

321 Golf Club Rd.
Pleasant Hill, CA 94523
[redacted]

[redacted]

From: Petty, Adina@DCA [redacted]>
Sent: Friday, July 24, 2026 7:46 AM
To: Ramos, Charles [redacted]
Cc: Lum, Anthony@DCA [redacted]; Moore, Tifany@DCA [redacted]; Steeb, Tonette [redacted]
Subject: RE: DVC Violations

⚠ CAUTION: This email originated from outside our system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Dr. Ramos,

Regarding "Violation 1":

DVC may adjust the clinic assistant rotation "so that there are two clinic assistants each session; one at the beginning of the session for 45 minutes gaining experience in beginning day sterilization procedures, and another clinic assistant at the end of the session gaining experience in end of day procedures. Each clinic assistant would also engage in direct patient care with staggered screening or radiology appointments" ***provided***: 1) each student meets the minimum of at least eight to twelve hours of direct patient care per week in the dental hygiene clinic as the first-year students begin providing dental hygiene services for patients; and 2) the weekly direct patient care hours for each student meets the minimum of at least twelve to sixteen hours of direct patient care per week in the dental hygiene clinic in the final prelicensure year of the curriculum.

Regarding "Violation 2":

The Board's intention is for DVC's director to be ***directly responsible for oversight of the program at all times the program is in session***, regardless the types of courses. Therefore, DVC shall increase the Director of Dental Hygiene reassigned time to greater than 50% and to explicitly state in the program director reassignment agreement ***and*** yearly assignment contract, and to enforce, that responsibility for oversight of the program extends throughout any period in which classes are in session, including the summer term.

Please provide this information **by August 21, 2026.**

If I may be of further assistance, please feel free to contact me.

Sincerely,
Adina A. Pineschi-Petty, DDS
Education, Legislative, and Regulatory Specialist
DHBC
Dental Hygiene
Board of California

2005 Evergreen Street, Suite 1350
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From: Ramos, Charles [redacted]>
Sent: Thursday, July 23, 2026 11:53 AM
To: Petty, Adina@DCA [redacted]; Lum, Anthony@DCA [redacted]
Cc: Steeb, Tonette [redacted]
Subject: DVC Violations

Good morning, Dr. Petty and Mr. Lum,

Thank you for your continued guidance regarding the findings discussed at the July 17 Board meeting.

As we work to address the two violations that were upheld, Professor Steeb and I would appreciate clarification regarding our understanding of the corrective actions needed.

Regarding Violation 1: Student Clinical Direct Patient Care Hours, our understanding is that the adjustments to clinical and patient care hours outlined in our June 30 response would constitute an acceptable correction to this violation.

Regarding Violation 2: Program Director Assignment Compliance, our understanding is that one appropriate corrective action would be to increase the Director of Dental Hygiene reassigned time to greater than 50%. We also believe it would be beneficial to explicitly state in the program director reassignment agreement that responsibility for oversight of the program extends throughout any period in which classes are in session, including the summer term.

Could you please confirm whether our understanding of these corrective actions is consistent with the Board's discussion and expectations as presented during the July 17 meeting?

If a conversation would be helpful, I would be happy to arrange a phone call or Zoom meeting at your convenience. If our proposed corrections are aligned with the Board's expectations, Professor Steeb and I will proceed with implementing the changes and providing documentation demonstrating compliance.

Thank you for your time, guidance, and assistance. We appreciate your partnership as we work to ensure full compliance with Board requirements.

Kind regards,

CR

Dr. Charles J. Ramos, DHSc, ATC, CSCS
Dean, Biological & Physical Sciences
Physical Science, PS-263

DVC
DIABLO VALLEY COLLEGE

321 Golf Club Rd.
Pleasant Hill, CA 94523
[redacted]

[redacted]

Cabrillo College
Dental Hygiene Program
Quarterly Compliance Report
Reporting Period: August 3rd 2026
Submitted to: Dental Hygiene Board of California

Program Status

The Cabrillo College Dental Hygiene Program remains in compliance with all corrective actions identified during the Dental Hygiene Board of California site visit. All previously identified violations have been corrected and remain in compliance.

Personnel Updates

- **Program Faculty:** Tara Lee Lachica has been hired as a permanent full-time Dental Hygiene faculty member and will begin her appointment with the Fall 2026 semester (August 17th 2026).
- **Interim Dean, Health & Public Services:** Jennifer Holm.
- **Interim Vice President of Instruction:** Robin McFarland.

The appointments of Jennifer Holm and Robin McFarland are included on the College Board agenda and are expected to receive formal Board approval.

Additional Changes

There have been no additional changes to the Dental Hygiene Program since the Board's review.

Respectfully submitted,

Faye Khoury, RDHAP, MA
Program Director
Dental Hygiene Program
Cabrillo College

Cabrillo College
Dental Hygiene Program

Quarterly Compliance Report

Report Date: October 28, 2026
Update Since: August 3, 2026
Prepared for: Dental Hygiene Board of California

Program Status

On September 9, 2026, the Dental Hygiene Board of California (DHBC) issued Violation Determination **4**, finding the program's final remaining violation, Violation 5, Faculty Support, in compliance following the permanent full-time faculty appointment. There are no new violations to report as of October 28, 2026.

Personnel Updates

- **Program Faculty:** Tara Lee Lachica was appointed as a permanent full-time Dental Hygiene faculty member effective August 17, 2026. Her DHBC Biosketch was submitted on August 31, 2026.
- **Interim Dean, School of Health and Public Service:** Jennifer Holm.
- **Interim Vice President of Instruction:** Robin McFarland.

Kathie Welch's interim dean assignment for Dental Hygiene has been extended through December 2026, and she will continue supporting Interim Dean Jennifer Holm with the program.

Additional Updates

Front Office Specialist: The previous Front Office Specialist resigned in September 2026. The hiring process for a full-time replacement is scheduled to begin November 19, 2026, with an anticipated hire in December 2026.

Instructional Technician: The Instructional Technician is retiring, with the last day scheduled for December 11, 2026. The full-time classified replacement position has been approved and posted on the College website. The position is anticipated to be filled before the next semester begins.

Respectfully submitted,

Faye Khoury, RDHAP, MA
Program Director
Dental Hygiene Program
Cabrillo College

From:	Petty, Adina@DCA
To:	Faye Khoury
Cc:	Kathleen Welch; Jennifer Holm; Lum, Anthony@DCA; Moore, Tifany@DCA
Subject:	RE: Cabrillo College Dental Hygiene Quarterly Report – November 2026
Date:	Thursday, October 29, 2026 1:43:10 PM
Attachments:	image001.png
Importance:	High

Good afternoon, Ms. Khoury,

Regarding your report:

First, as the Front Office Specialist resigned in *September 2026*, the Cabrillo College Dental Hygiene Educational Program (Cabrillo DHEP) is in ***violation*** of California Code of Regulations (CCR), Title 16, section 1105.3(a)(2)(D) which states:

(a) Each dental hygiene program holding a certificate of approval shall:
(2) Notify the Dental Hygiene Board within ten (10) days of any:
(D) Programmatic reduction in program faculty or support staff of more than 10%.

As Cabrillo only employs three staff persons to support the DHEP, this results in a reduction of 33%. Therefore, Cabrillo shall provide a ***temporary replacement immediately*** and until a full-time replacement is hired.

Second, as the Instructional Technician is retiring (last day scheduled for December 11, 2026), Cabrillo shall provide a ***temporary replacement beginning on December 12, 2026,*** and until a full-time replacement is hired.

Please provide documentation regarding the Front Office temporary replacement ***by November 6, 2026***, and the Instructional Technician temporary replacement ***by December 11, 2026.***

If I may be of further assistance, please feel free to contact me.

Sincerely,

Adina A. Pineschi-Petty, DDS
Education, Legislative, and Regulatory Specialist
DHBC
Dental Hygiene
Board of California
2005 Evergreen Street, Suite 1350
Sacramento, CA 95815
916.576.5002
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destroy all copies of the communication.

From: Faye Khoury [redacted]
Sent: Thursday, October 29, 2026 12:24 PM
To: Petty, Adina@DCA <Adina.Petty@dca.ca.gov>
Cc: Kathleen Welch [redacted] Jennifer Holm [redacted]
Subject: Cabrillo College Dental Hygiene Quarterly Report – November 2026

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Report Suspicious

Hello Dr. Petty

Attached is Cabrillo College's Dental Hygiene quarterly report, providing an update on the resolution of the final violation, staffing changes, and continued administrative support for the program.

Please let me know if you need any additional information. Thank you for your continued guidance and support.

--

Faye Khoury
Program Director, Dental Hygiene
Cabrillo College
[redacted]

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

October 8, 2026

Davina Wong
Campus President
Carrington College – San Jose
5883 Rue Ferrari, Suite 125
San Jose, CA 95138

Dear President Wong,

The Dental Hygiene Board of California (DHBC, Board) conducted a site visit at the Carrington College – San Jose Dental Hygiene Educational Program (Carrington-SJ) on October 7, 2026. This site visit was generated due to the appointment of a new interim program director, as well as to the Board's oversite goals to review all Dental Hygiene Educational Programs (DHEPs) in California. Evidence of program compliance with the minimum DHEP standards set by the Business and Professions Code (BPC), the California Code of Regulations (CCR), and the Commission on Dental Accreditation of the American Dental Association (CODA) was deficient.

The results of the site visit are as follows:

I. Violation 1: Interim Program Director Assignment.

1. [Violation of BPC Section 1941(a), 16 CCR Section 1104(e), 16 CCR Section 1105(j), 16 CCR Section1105.1(a), 16 CCR Section 1105.3(a)(2)(B), 16 CCR Section 1105.3(b)(3), and CODA Standard 3-2.]

B. Background:

1. On July 15, 2026, Carrington-SJ advised the DHBC of the resignation of the previous program director, Dr. Reolina Muskat, on July 6, 2026, and the subsequent appointment of a full-time, interim program director, Dr. Nisha Shukla.

2. On July 15, 2026, July 30, 2026, and August 20, 2026, Carrington-SJ provided supporting documentation for Dr. Shukla's appointment including an appointment letter, signed contract, job description/duties assignment, and weekly assignment schedule which provided the following:

WEEKLY ASSIGNMENT SCHEDULE

Monday	8:00am-10:00am 10:00am-12:00pm 1:00pm-5:00pm	Office Hours Administrative Time Faculty Support Clinical Lab
Tuesday	8:00am-10:00am 10:00am-12:00pm 1:00pm-5:00pm	Student Advising Administrative Time Administrative Time
Wednesday	8:00am-10:00am 10:00am-12:00pm 1:00pm-3:00pm 3:00pm-5:00pm	Office Hours Administrative Time Office Hours and Student Support Administrative time
Thursday	8:00am-12:00pm 1:00pm-5:00pm	Clinical lab Administrative Time
Friday	8:00am-12:00pm 1:00pm-5:00pm	Faculty Development/Meetings/Student support Administrative Time

3. On September 30, 2026, The DHBC was notified that a full-time faculty member, Mr. Kevin Dizon, was appointed as an "Assistant Program Director."

C. Site Visit:

1. DHBC staff arrived at the Carrington-SJ campus at 8:00 a.m., to discover Dr. Shukla was not on campus per her schedule, and requested for her to be called to the campus.

2. Upon discussions with Dr. Shukla and Mr. Dizon, the following information was provided to the DHBC staff:

   a. Dr. Shukla stated she was informed by her dean that her weekly assignment schedule was only for the first two weeks of her assignment and was advised she could reduce her assignment to limited hours on Mondays and Thursdays. Additionally, she did not notify the DHBC or CODA of the schedule change.

   b. Dr. Shukla stated she was not notified of the intensive job description and was informed those duties would be performed by Mr. Dizon who was appointed as an "Assistant Program Director."

   c. Mr. Dizon stated that he did not possess a master's degree or higher pursuant to 16 CCR Section1105.1(a).

   d. Mr. Dizon stated that he was not given any "release" time and was to accommodate the extra duties during his teaching assignment time that should be devoted to student support and class preparation.

D. DHBC Review:

1. DHBC staff identified that Carrington-SJ provided intentional inaccurate documentation to the DHBC regarding the Interim Program Director's assignment in violation of 16 CCR Section 1104(e).

2. DHBC staff identified that the Carrington-SJ does not have an appointed Interim Program Director pursuant to 16 CCR Section1105.1(a).

3. Neither DHBC laws and regulations, nor CODA Standards, recognize an "Assistant Program Director" position.

E. Refer to:

1. BPC Section 1941(a):

   The dental hygiene board shall grant or renew approval of only those educational programs for RDHs that continuously maintain a high-quality standard of instruction and, where appropriate, meet the minimum standards set by the Commission on Dental Accreditation of the American Dental Association or an equivalent body, as determined by the dental hygiene board.

2. 16 CCR Section 1104(e):

   A material misrepresentation of fact by a new educational program or an approved educational program in any information required to be submitted to the Dental Hygiene Board is grounds for denial of approval or revocation of the program's approval.

3. 16 CCR Section 1105(j):

   The educational program director shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.

4. 16 CCR Section1105.1(a):

   "Program Director" or "Interim Program Director" means a registered dental hygienist or dentist who has the authority and responsibility to administer the educational program in accordance with approved accreditation standards referenced in subsection (c) of section 1103 of this article. The educational program may have an Interim Program Director for a maximum of twelve (12) months. The director shall have a full-time appointment as defined by the institution, whose primary responsibility is for the operation, supervision, evaluation and revision of the program. The program director shall meet the following minimum qualifications:

(1) Possess an active, current dental or dental hygiene license issued by the Dental Hygiene Board or the Dental Board of California (DBC), with no disciplinary actions;
(2) Possess a master's or higher degree from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation;
(3) Documentation of two (2) years' experience teaching in pre- or post-licensure registered dental hygiene or dental programs. This requirement may be waived for an Interim Program Director; and
(4) Documentation of a minimum of 2,000 hours in direct patient care as a registered dental hygienist, or working with a registered dental hygienist.

5. 16 CCR Section 1105.3(a)(2)(B):

(a) Each dental hygiene program holding a certificate of approval shall:
(2) Notify the Dental Hygiene Board within ten (10) days of any:
(B) Change in the organizational structure, administrative responsibility, or accountability in the dental hygiene program, the institution of higher education in which the dental hygiene program is located or with which it is affiliated that will affect the dental hygiene program.

6. 16 CCR Section 1105.3(b)(3):

(b) An approved dental hygiene program shall not make a substantive change without prior Dental Hygiene Board approval. These changes include:
(3) Any changes that require a report to the Commission on Dental Accreditation or equivalent accrediting body shall require approval from the Dental Hygiene Board.

7. CODA Standard 3-2:

The dental hygiene program administrator must have a full-time appointment as defined by the institution, whose primary responsibility is for operation, supervision, evaluation and revision of the program.

F. Determination:

1. **Not in compliance.**

2. Carrington-SJ is in violation of BPC Section 1941(a), 16 CCR Section 1104(e), 16 CCR Section 1105(j), 16 CCR Section1105.1(a), 16 CCR Section 1105.3(a)(2)(B), 16 CCR Section 1105.3(b)(3), and CODA Standard 3-2.

3. Carrington-SJ shall require and provide evidence of a program director meeting DHBC and CODA requirements pursuant to BPC Section 1941(a),

16 CCR Section 1104(e), 16 CCR Section 1105(j), 16 CCR Section1105.1(a), 16 CCR Section 1105.3(a)(2)(B), 16 CCR Section 1105.3(b)(3), and CODA Standard 3-2 by ***October 23, 2026.***

II. Violation 2: Student Graduation Requirements.
[Violation of BPC Section 1941(a), 16 CCR Section 1105(c), 16 CCR Section 1105(d), 16 CCR Section 1105.2(f), and CODA Standards 2-6 and 2-12.]

A. Site Visit:

1. DHBC staff identified three recent graduates (Cohort 30) where the documentation of their completed requirements could not be verified.

B. Refer to:

1. BPC Section 1941(a):

   The dental hygiene board shall grant or renew approval of only those educational programs for RDHs that continuously maintain a high-quality standard of instruction and, where appropriate, meet the minimum standards set by the Commission on Dental Accreditation of the American Dental Association or an equivalent body, as determined by the dental hygiene board.

2. 16 CCR Section 1105(c):

   Standards of Competency. Each educational program shall establish and maintain standards of competency. Such standards shall be available to each student, and shall be used to measure periodic progress or achievement in the curriculum.

3. 16 CCR Section 1105(d):

   The policies and procedures by which the educational program is administered shall be in writing, shall reflect the mission and goals of the program, and shall be available to all students.

4. 16 CCR Section 1105.2(f):

   An educational program shall provide for breadth of experience and student competency in providing patient experiences in dental hygiene care for the child, adolescent, adult, geriatric, and special needs patients.

5. CODA Standard 2-6:

   The dental hygiene program must: 1) define and list the overall graduation competencies that describe the levels of knowledge, skills and values

expected of graduates. 2) employ student evaluation methods that measure all defined graduation competencies. 3) document and communicate these competencies and evaluation methods to the enrolled students.

6. CODA Standard 2-12:

   Graduates must be competent in providing dental hygiene care for all patient populations including: 1) child 2) adolescent 3) adult 4) geriatric 5) special needs.

C. Determination:

1. **Not in compliance.**

2. Carrington-SJ is in violation of BPC Section 1941(a), 16 CCR Section 1105(c), 16 CCR Section 1105(d), 16 CCR Section 1105.2(f), and CODA Standards 2-6 and 2-12.]

3. Carrington-SJ shall require and provide evidence of student requirement completion pursuant to BPC Section 1941(a), 16 CCR Section 1105(c), 16 CCR Section 1105(d), 16 CCR Section 1105.2(f), and CODA Standards 2-6 and 2-12 by ***November 6, 2026.***

Carrington-SJ shall provide evidence of compliance to the above deficiencies ***by the aforementioned dates***.

This report will be presented to the Board at their November 13 – 14, 2026, Education Committee and Full Board meetings. Carrington-SJ is welcome to attend to answer any questions the Board members may have. The in-person meeting location will be:

DHBC Headquarters Building
2005 Evergreen Street
1st Floor Hearing Room
Sacramento, CA 95815

There will be a teleconference option. If you would like to attend virtually, please contact me by November 6, 2026, so I may provide the WebEx information.

Pursuant to 16 CCR section 1104(b)(5), continuation of approval of all educational programs shall be contingent upon compliance with the requirements described in Title 16, Division 11, Article 3 of the CCR. As Carrington-SJ is operating outside the structured parameters of California law and CODA Standards with these violations, Carrington-SJ is therefore putting students, faculty, and the public at risk. ***Please note:*** 16 CCR section 1104(e) states: "A material misrepresentation of fact by a new educational program or an approved educational program in any information

required to be submitted to the Dental Hygiene Board is grounds for denial of approval or revocation of the program's approval."

The priority of the DHBC is consumer protection. To ensure consumer protection and the public's right to receive quality dental hygiene care, the DHBC has a responsibility to ensure that all DHEPs within the state meet the same educational requirements in preparing their graduates for the profession. Please remember that California law and the CODA Standards are the required ***minimum*** levels California DHEPs shall operate at to continue approval and may exceed those levels, as several programs do at their discretion. If you have any questions regarding this report, please feel free to contact me at adina.petty@dca.ca.gov.

Sincerely,

Adina A. Pineschi-Petty DDS

Education, Legislative and Regulatory Specialist
Dental Hygiene Board of California

cc: Anthony Lum, Executive Officer, Dental Hygiene Board of California
Dr. Nisha Shukla, Dental Hygiene Interim Program Director, Carrington College – San Jose



Friday, November 13, 2026

Dental Hygiene Board of California

Education Committee Agenda Item 7.

Discussion and Possible Action to Approve the July 17, 2026, Education Committee Meeting Minutes.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

Dental Hygiene Board of California
Education Committee
Meeting Minutes

DRAFT

Friday, July 17, 2026

DHBC Headquarters Building
2005 Evergreen Street
1st Floor Hearing Room
Sacramento, CA 95815

Education Committee Members Present:

Chair – Joanne Pacheco, Registered Dental Hygienist (RDH) Educator Member
Committee Member – Michael Long, Registered Dental Hygienist in Alternative Practice (RDHAP)
Committee Member – Sonia "Pat" Hansen, RDH Member
Committee Member – Dr. Sridevi Ponnala, Public Health Dentist Member
Committee Member – Dr. Julie Elginer, Public Member

DHBC Staff Present:

Anthony Lum, Executive Officer
Adina A. Pineschi-Petty, Doctor of Dental Surgery (DDS), Education, Legislative, and Regulatory Specialist
Crystal Yuyama, Administrative Analyst
Yuping Lin, Department of Consumer Affairs (DCA) Legal Counsel

1. EDU Committee Agenda Item 1: Roll Call and Establishment of a Quorum.

Joanne Pacheco, Education Committee Chair, called the Education Committee meeting to order at **9:21 a.m.** A quorum was established with five (5) members present.

2. EDU Committee Agenda Item 2: Public Comment for Items Not on the Agenda.

Committee Member comment: None.

Public comment: None.

3. EDU Committee Agenda Item 3: Discussion and Possible Action to Approve a New Dental Hygiene Educational Program by Stanbridge University.

Dr. Adina Petty presented Stanbridge University's request to establish a new dental hygiene educational program. She reported that Stanbridge submitted its initial letter of intent on April 2, 2025, proposing a Riverside-based program. An updated letter of intent submitted on March 13, 2026, identified San Diego as the program's planned location. The updated letter of intent can be found on page 97 of the July 17-18, 2026, meeting materials.

In May 2026, Stanbridge submitted its feasibility study for Board review. Board staff have completed their evaluation, with the feasibility study review located on pages 28 – 96 and the full feasibility study on pages 98 – 503. Staff recommended that the Education Committee review the results and, if the Board's parameters are met, recommend that the full Board consider conditional approval of Stanbridge University's proposed new Dental Hygiene Educational Program (DHEP).

Representatives from Stanbridge University introduced themselves and provided background information. Amber Davis, founding program director, described her nine years of experience in dental hygiene education, including more than four years as a program director. Gary Lopez, Director of Accreditation for Stanbridge University and campus director for the Los Angeles campus, outlined his extensive experience in proprietary education and accreditation compliance.

Motion: Member Long move for the Education Committee to recommend to the full Board to conditionally approve the new Dental Hygiene Educational Program offered by Stanbridge University. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort.)

Second: Elginer.

Committee Member discussion: Committee members thanked Stanbridge University representatives for their thorough feasibility study and asked several questions regarding faculty resources, campus selection, cohort management, curriculum delivery, program costs, and student support. Stanbridge representatives explained that the university maintains a dedicated recruitment department for faculty and administrators, along with an established faculty development department for training and ongoing professional development. They emphasized that strong faculty support, mentoring, and retention structures are central to their program design.

Member Elginer inquired about the significant shift from Riverside to San Diego as the proposed program location. Stanbridge reported that updated workforce analyses revealed a greater need for dental hygienists in San Diego County compared to Riverside. They also noted that San Diego offered more adequate institutional space and resources for the planned onsite dental hygiene clinic, which would not have been feasible at the Riverside

location. Revised feasibility study materials were submitted reflecting the San Diego campus.

Questions were raised about cohort sizes and scheduling. The Stanbridge University representatives clarified that the feasibility study reflects a cohort size of 24 students despite the initial letter of intent listing 30; all financial and scheduling models were based on 24 students. The members encouraged submitting revised documentation to avoid inconsistencies. Regarding overlapping cohorts and frequent start dates, representatives acknowledged the administrative complexity and stated that Stanbridge's experience with rolling start dates in other programs prepared them to manage multiple cohorts effectively.

Members examined the proposed hybrid instructional model and asked for clarity regarding synchronous versus asynchronous components. Stanbridge University clarified that all labs and clinics would be conducted fully in person, and that asynchronous delivery would apply only to didactic portions. The members recommended revising charts in the materials to reflect this distinction.

The Committee expressed concern about tuition cost relative to similar programs and the ability of underserved populations to access a program priced at approximately $95,000. The representatives explained that onsite clinical operations add significant overhead costs not present in their other programs, and that they intend to provide free clinical services to the community. Questions were raised about financial aid availability, and the university stated that financial aid support, scholarships, and work-study opportunities are available, though detailed information was not provided at the meeting.

Additional questions addressed student attrition, program feasibility, and student support structures. The representatives described their extensive student services department, academic support systems, mentorship models, and efforts to ensure retention and ethical, competent graduates. They acknowledged previous challenges in their vocational nursing program but reported improvements and stated that quality assurance had been incorporated into the dental hygiene program design.

Member Elginer asked whether the program director would be onsite in San Diego, and Stanbridge University representatives confirmed that Amber Davis would serve as the onsite program director. Concerns were raised regarding the administrative burden of frequent program starts, overlapping cohorts, and maintaining program quality; they affirmed their institutional capacity to manage these operations.

The members also discussed internal staffing capacity to oversee a new program. Executive Officer Anthony Lum stated that the Board's approval decision should not be influenced by internal resource considerations, as it is the responsibility of the Executive Officer to secure adequate staffing for oversight.

Public comment: JoAnn Galliano, Educational Consultant to the DHBC, stated two key concerns regarding Stanbridge University's proposal. First, the admissions materials did not clearly outline transfer admission requirements, such as minimum grades, repeatability

of courses, or policies for applicants entering with prior coursework. Second, based on attrition rates in some of Stanbridge's other programs, the commenter recommended that the Committee consider limiting the new program to one cohort every eight to nine months initially, rather than allowing starts every five to six months, until the program demonstrates successful completion rates. Ms. Galliano also explained that high tuition costs are typical for proprietary programs due to the expense of operating onsite dental clinics.

Susan McLearan expressed concerns about potential oversaturation of the workforce in San Diego and recommended including additional data on graduates within a 100-mile radius and dentist-to-hygienist ratios. Ms. McLearan also noted that the high cost of living in the area could pose challenges for applicants.

EO Lum reminded the Committee that tuition levels or regional cost-of-living considerations are not permissible grounds for denying approval of an educational program under current statutes.

After committee member discussion and public comment, the original motion maker, Member Long amended the motion to include additional conditions. The original seconder, Member Elginer agreed with the amended motion. Stanbridge representatives also commented that a seven-to-nine-month range would align better with clinic scheduling and cohort coordination.

The revised motion was read into the record as follows:

Amended Motion: Member Long move for the Education Committee to recommend to the full Board to conditionally approve the new Dental Hygiene Educational Program offered by Stanbridge University. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort. And during the conditional period. The campus will enroll students every 7-9 months until the first cohort graduates.)

Amended Second: Member Elginer.

Vote: Motion for the Education Committee to recommend to the full Board to conditionally approve the new Dental Hygiene Educational Program offered by Stanbridge University. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort. And during the conditional period. The campus will enroll students every 7-9 months until the first cohort graduates.) Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair	X		

Name	Aye	Nay	Abstain/Absent
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Michael Long	X		
Sridevi Ponnala	X		

4. EDU Committee Agenda Item 4: Discussion and Possible Action Regarding the Diablo Valley College Dental Hygiene Educational Program's Violations and Request for Support to Offer a Bachelor of Science degree in Dental Hygiene.

Dr. Petty reported that the Dental Hygiene Board of California (DHBC) conducted a site visit at Diablo Valley College (DVC) on October 14, 2025, following DVC's submission of its Commission on Dental Accreditation (CODA) self-study and as part of the Board's oversight of all dental hygiene programs in the state. Dr. Petty stated that two violations were identified, and DVC has not brought the program into compliance since the 2025 visit. The violations involve (1) insufficient student direct patient care hours, and (2) non-compliance with program director assignment requirements. On April 2, 2026, DVC submitted a request for reconsideration and dismissal of both violations. Additionally, DVC requested that the Board issue a letter of support for its proposal to offer a Bachelor of Science degree in dental hygiene.

Staff recommended that the Education Committee review the provided documentation, consider DVC's request to dismiss both violations, and evaluate the request for a support letter for the proposed bachelor's degree program.

DVC representatives in attendance included Tonette Steeb, Program Director, and Charles Ramos, Dean of Biological and Physical Sciences.

Information on EDU agenda item 4 can be found on pages 504 – 527 of the July 17-18, 2026, Board meeting materials.

Motion: Member Long moved for the Education Committee to review DVC's request for dismissal of "Violation 1: Student Clinical Direct Patient Care Hours" and "Violation 2: Program Director Assignment Compliance" and move to dismiss Violation 1 and dismiss Violation 2 against the DVC DHEP. Additionally, I move for the Educational Committee to recommend to the full Board to dismiss Violation 1 and dismiss Violation 2 against the DVC DHEP.

Second: Member Ponnala.

Committee Member discussion: Board Member Long expressed concern regarding DVC's request for dismissal of both violations, stating that program requirements have not been met and the violations should remain. Member Long emphasized that direct patient

care hours, as determined by the Board, must be maintained and that the program director must be on-site whenever the program is in session. Although Member Long made a procedural motion, he clarified he would not support dismissal of the violations.

Member Elginer addressed Violation 2, stating concerns regarding the absence of an on-site program director during summer courses. She acknowledged faculty workload considerations but stated it is unfair to students for program-specific summer courses to proceed without on-site director oversight. She inquired whether an associate program director could serve in this capacity; staff confirmed that regulations do not permit an assistant or associate program director.

Further discussion occurred regarding Violation 1 and CODA standards for required direct patient care hours. Members sought clarification regarding discrepancies in reported contact hours and raised concerns about the deficit reflected in course schedules. Staff explained issues related to contact-hour calculations, passing periods, and regulatory definitions.

Members also asked DVC about their administrative oversight, faculty availability, contract obligations, program evaluation cycles, and support provided to the program director. DVC confirmed that awareness of violations began after the October 2025 site visit and explained contractual reassignment time and summer availability requirements.

Committee members reiterated that existing violations should stand. They noted that DVC may adjust direct patient care hours, revise program director contractual obligations, and subsequently request reconsideration once full compliance is achieved.

Public comment: None.

Vote: Motion for the Education Committee to review DVC's request for dismissal of "Violation 1: Student Clinical Direct Patient Care Hours" and "Violation 2: Program Director Assignment Compliance" and move to dismiss Violation 1 and dismiss Violation 2 against the DVC DHEP. Additionally, move for the Educational Committee to recommend to the full Board to dismiss Violation 1 and dismiss Violation 2 against the DVC DHEP.) Failed 0:5:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair		X	
Julie Elginer		X	
Sonia "Pat" Hansen		X	
Michael Long			
Sridevi Ponnala		X	

Then, a motion was made, and discussion took place regarding board staff's second recommendation on drafting a support letter for DVC's proposed bachelor's degree program.

Motion: Member Long move for the Education Committee to approve DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. Additionally, I move for the Educational Committee to recommend to the full Board to approve DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. If the full Board approves the request, direct staff to draft and provide the "Letter of Support" to DVC.

Second: Vice President Hansen.

Committee Member discussion: Member Long stated due to the ongoing violations and the Board's decision to uphold them, he does not support issuing a letter of support for DVC's proposed Bachelor of Science in Dental Hygiene program until the violations are fully remedied.

Member Elginer asked what a letter of support entails. DVC explained that such letters strengthen the needs assessment required by the State Chancellor's Office, demonstrating external support for establishing a bachelor's program. Although DVC plans to move forward with its proposal regardless, a Board letter would enhance its submission.

Member Elginer asked whether DVC could remedy the violations before the Board's next meeting in November. DVC indicated that Violation 1 could be corrected before the fall term, and that there is a strong likelihood Violation 2 could also be addressed, pending consultation with senior leadership.

Dr. Petty commented that other community college programs have resolved similar program director availability issues by implementing 11- or 12-month contracts, suggesting that such arrangements are feasible.

Vice President Hansen underscored the Board's commitment to academic excellence and stated that resolving the deficiencies will strengthen DVC's program and better serve its students. She emphasized that administrative support is essential for the program director to meet requirements and successfully remedy the violations.

Public comment: None.

Vote: Motion for the Education Committee to approve DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. Additionally, I move for the Educational Committee to recommend to the full Board to approve DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. If the full Board approves the request, direct staff to draft and provide the "Letter of Support" to DVC. Failed 0:5:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair		X	
Julie Elginer		X	
Sonia "Pat" Hansen		X	
Michael Long			
Sridevi Ponnala		X	

5. **EDU Committee Agenda Item 5: Dental Hygiene Educational Program Site Visit Update and Schedule.** (Informational Only).

Dr. Adina Petty reported on the current status of the following DHEPs at Pasadena City College (PCC), Taft College (Taft), Cerritos College (Cerritos), Diablo Valley College (DVC), and Cabrillo College (Cabrillo).

Dr. Petty also shared the upcoming Dental Hygiene Educational Program (DHEP) site visit schedule.

Information regarding EDU Agenda Item 5 can be found pages 528 – 592 of the July 17-18, 2026, Board meeting materials.

Committee Member comment: President Pacheco proposed making a motion to extend Pasadena City College's probation period as they are not currently in compliance.

Member Elginer asked for clarification regarding the length and terms of the proposed probation extension for Pasadena City College. Staff explained that an extension would allow time to ensure the clinic is functioning appropriately and to address concerns regarding the program director's assignment and faculty shortages. Due to ongoing delays in clinic renovations and the program director's 30 percent overload, staff recommended a two-year extension to allow adequate time for the program to demonstrate progress.

Motion: President Pacheco moved for the Education Committee to recommend to the full Board to extend Pasadena's City College's probation for two years.

Second: Elginer.

Committee Member discussion: None.

Public comment: None.

Vote: Motion for the Education Committee to recommend to the full Board to extend Pasadena's City College's probation for two years. Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair	X		
Julie Elginer	X		
Sonia "Pat" Hansen			
Michael Long	X		
Sridevi Ponnala	X		

The Chair asked for any committee and public comments regarding any of the information presented in EDU agenda item 5.

Committee Member comment: Board members asked how noncompliant programs such as Cabrillo College, Diablo Valley College, and Pasadena City College would be monitored. Staff explained that formal follow-up would be conducted, including written notices of Board decisions, required corrective actions, and ongoing site visits. Deadlines for corrections were noted, including Cabrillo College's upcoming compliance date and continued oversight at Pasadena City College.

Board members discussed the correspondence from the Monterey Bay Dental Hygienists Association requesting additional oversight measures for Cabrillo College. Members noted that the letter did not specify what additional measures were being requested. Executive Officer Lum clarified that Board actions must remain within California law and regulatory standards; without specific requests, no additional measures could be taken. Stakeholders were encouraged to contact the Board directly for clarification.

Public Comment: JoAnn Galliano, Subject Matter Expert to the DHBC, expressed concern about recent public statements and media articles by Cabrillo College's president that criticized the Board and site visit process. Ms. Galliano stated that the article contained inaccuracies and implied misconduct, causing reputational harm. They requested that the Board consider issuing a written response addressing the inappropriate nature of the statements. Counsel advised that further review would be required to determine how and whether the Board could formally respond. EO Lum reported that he had already spoken with Cabrillo College leadership regarding the matter, though this occurred prior to publication of the article.

6. **EDU Committee Agenda Item 6: Discussion and Possible Action Regarding Gurnick Academy of Medical Arts' Request for Withdrawal of Provisional Approval to offer a New Dental Hygiene Educational Program in Modesto, California.**

Dr. Petty reported that on March 28, 2026, the Board provisionally approved a prospective dental hygiene educational program proposed by Gurnick Academy of Medical Arts in Modesto, California. On June 12, 2026, the Gurnick Academy submitted a formal request for withdrawal of provisional approval, stating that after considerable deliberation, it had decided not to proceed with the development and launch of the program. Staff recommended that the Education Committee approve the withdrawal request.

Information regarding EDU Agenda Item 6 can be found on pages 594 – 595 of the July 17-18, 2026, Board meeting materials.

Motion: Member Elginer moved for the Education Committee to approve the withdrawal request and recommend to the Full Board to approve the withdrawal request of Gurnick Academy of Medical Arts to offer a new dental hygiene educational program in Modesto, California.

Second: Member Ponnala.

Committee Member discussion: None.

Public comment: None.

Vote: Motion for the Education Committee to approve the withdrawal request and recommend to the Full Board to approve the withdrawal request of Gurnick Academy of Medical Arts to offer a new dental hygiene educational program in Modesto, California. Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Michael Long	X		
Sridevi Ponnala	X		

7. **EDU Committee Agenda Item 7: Discussion and Possible Action on Concorde Career College-Garden Grove Campus Expansion and Increase in Enrollment.**

Dr. Petty presented the request from Concord Career College (CCC) Garden Grove to expand its existing dental hygiene program by establishing a new major site at CCC's Burbank campus and increasing enrollment by 50 students. The proposed Burbank campus, currently operating in North Hollywood and scheduled to relocate to a new facility in April 2027, would operate under Garden Grove's oversight, with the first cohort expected in November 2027. Students at both locations would follow the same curriculum, policies, and program requirements.

Motion: Member Elginer moved for the Education Committee to recommend to the Full Board to conditionally approve CCCGG's request to add a new major site located at CCCGG's Burbank campus, as well as to an increase in enrollment of 50 students to be educated at the Burbank campus every eight (8) to nine (9) months. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort.)

Second: Member Ponnala.

Committee Member discussion: Member Long asked CCCGG's representative about his background and experience as a program director. The representative stated he is a dentist, has been with CCC for nearly five years, and has served as interim program director a couple of times, though this would be his first appointment as full program director.

Board members sought clarification regarding Concorde's prior 2025 request to establish a new dental hygiene program and the subsequent shift to an expansion model. CCCGG's representatives explained that the submissions to the Board and to CODA initially differed, but over time the institution determined that aligning both processes under an expansion model seemed more appropriate.

Board members expressed significant concern about the feasibility of having a single program director oversee two campuses located nearly two hours apart. Members reiterated that the Board's long-standing practice requires one program director per program, physically onsite. Concerns included clinical supervision, faculty-to-student ratios, administrative workload, and the ability to respond promptly to campus needs or compliance issues. Members also noted inconsistencies with CCCGG's other programs, which each maintain separate program directors for separate campuses.

The Board recommended that CCCGG reevaluate its proposed structure and consider separate programs with separate program directors.

Public comment: JoAnn Galliano, Educational Consultant for the DHBC, provided comments regarding CCCGG's request, stating that the materials submitted indicate the creation of two separate programs rather than an expansion of the existing Garden Grove program. Ms. Galliano stated that administrative oversight, faculty structure, and educational delivery appear divided between two distinct campuses, which would typically

require separate program directors and separate administrative staff. The commenter emphasized that an expansion normally involves increasing enrollment or adding clinical sites under a single program, whereas the current proposal reflects two independent educational programs.

Amber Davis, Stanbridge University program director and former CCCGG program director, expressed support for the development of a dental hygiene program in the Burbank area, stating the community need and the benefit to students who currently travel long distances for educational opportunities. They stated support for the Board's decision regardless of the final structure.

Vote: Motion for the Education Committee to recommend to the Full Board to conditionally approve CCCGG's request to add a new major site located at CCCGG's Burbank campus, as well as to an increase in enrollment of 50 students to be educated at the Burbank campus every eight (8) to nine (9) months. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort.) Failed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair		X	
Julie Elginer		X	
Sonia "Pat" Hansen		X	
Michael Long		X	
Sridevi Ponnala		X	

8. **EDU Committee Agenda Item 8: Discussion and Possible Action on the March 27, 2026, Education Committee Meeting Minutes.**

Motion: Member Long for the Education Committee to approve the March 27, 2026, Education Committee Meeting Minutes.

Second: Member Ponnala.

Committee Member discussion: None.

Public comment: None.

Vote: Motion for the Education Committee to approve the March 27, 2026, Education Committee Meeting Minutes. Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Joanne Pacheco, Chair	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Michael Long	X		
Sridevi Ponnala	X		

9. EDU Committee Agenda Item 9: Proposal of Future Agenda Items.

Committee Member comment: Member Long requested that an agenda item to discuss and take possible action to cite and fine Diablo Valley College if their violations are not resolved to the Board's satisfaction before the November 2026 Board Meeting.

Member Elginer requested an update on the Minimum Student Taskforce. Member Ponnala requested for more consistent language to ensure clarity across all programs regarding clinical contact hours.

Public comment: None.

10. EDU Committee Agenda Item 10: Adjournment of the Education Committee.

Chair Pacheco adjourned the Education Committee at **1:53 p.m.**

DRAFT



Friday, November 13, 2026

Dental Hygiene Board of California

Education Committee Agenda Item 8.

Proposal of Future Agenda Items.



Friday, November 13, 2026

Dental Hygiene Board of California

Education Committee Agenda Item 9.

Adjournment of the Education Committee.

DHBC
Dental Hygiene
Board of California

Friday, November 13, 2026
Legislation and Regulatory Committee
Meeting Materials

DHBC
Dental Hygiene
Board of California

Member	Present	Absent
Julie Elginer, Chair		
Michael Long		
Joanne Pacheco		
Sridevi Ponnala		
Nicolas Kiet Quach		

Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 1.

Roll Call & Establishment of Quorum.



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 2.

Public Comment for Items Not on the Agenda.

[The Legislation and Regulatory Committee may not discuss or act on any matter raised during the Public Comment section that is not included on this agenda, except whether to decide to place the matter on the agenda of a future meeting (Government Code Sections 11125 & 11125.7(a).]



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 3.

Discussion and Possible Action to Approve Responses to Comments and Continue Rulemaking to Amend California Code of Regulations (CCR), Title 16, Section 1116. Mobile Dental Hygiene Clinics; Issuance of Approval, and Section 1116.5. Registered Dental Hygienist in Alternative Practice, Physical Facility Registration

MEMORANDUM

DATE	November 13, 2026
TO	Legislation and Regulatory Committee Dental Hygiene Board of California
FROM	Adina A. Pineschi-Petty DDS Education, Legislative, and Regulatory Specialist
SUBJECT	**LEG REG 3: Discussion and Possible Action to Approve Responses to Comments and Continue Rulemaking to Amend California Code of Regulations (CCR), Title 16, Section 1116. Mobile Dental Hygiene Clinics; Issuance of Approval, and Section 1116.5. Registered Dental Hygienist in Alternative Practice, Physical Facility Registration.**

BACKGROUND:

RE: Proposed Sections 16 CCR 1116 and 1116.5

On January 1, 2025, California Code of Regulations (CCR), Title 16, sections 1116 and 1116.5 went into effect for the registration MDHCs and physical facilities by RDHAPs. Subsequently, the Board was informed about some confusion regarding the requirements for registration of physical facilities as a stand-alone practice versus registration of physical facilities to maintain portable equipment, as well as for requirements applicable to registration of an MDHC.

During the November 8, 2025, Full Board meeting, the Board reviewed and discussed the proposed amendments and made additional amendments to the text incorporating suggestions from educators present at the meeting, as well as utilizing the "Standards for Clinical Dental Hygiene Practice (Revised 2025)" by the American Dental Hygienists' Association. The text being submitted in this proposal was approved and incorporates the recommendations from the September 12, 2025, Townhall Meeting, as well as amendments put forth by the Legislation and Regulatory Committee during November 8, 2025, Legislation and Regulatory Committee meeting.

No public hearing was originally set for this proposal and none was requested. Board staff noticed the proposed rulemaking on August 14, 2026, with a 45-day comment period ending on September 28, 2026. The Board received three (3) comments which are summarized below.

STAFF RECOMMENDATION:

I move for the Legislation and Regulatory Committee to accept and recommend to the Full Board to accept Board staff's recommended comment responses received during the 45-day comment period and modified regulation text [either as presented or consistent with the Board's discussion] and initiate a 15-day comment period. Additionally, if no adverse comments are received during the 15-day comment period, authorize the Executive Officer to take all steps necessary to complete the rulemaking process and adopt the proposed regulation text at Section 1116 and 1116.5. Further, delegate to the Executive Officer the authority to make technical or nonsubstantive changes as may be required by the Control agencies to complete the rulemaking file.

PROPOSED MOTION LANGUAGE:

I move for the Legislation and Regulatory Committee to (accept/reject) and recommend to the Full Board to (accept/reject) Board staff's recommended comment responses received during the 45-day comment period and modified regulation text [either as presented or consistent with the Board's discussion] and initiate a 15-day comment period. Additionally, if no adverse comments are received during the 15-day comment period, authorize the Executive Officer to take all steps necessary to complete the rulemaking process and adopt the proposed regulation text at Section 1116 and 1116.5. Further, delegate to the Executive Officer the authority to make technical or nonsubstantive changes as may be required by the Control agencies to complete the rulemaking file.

Documents included for Reference:

1. Summary of Comments and Responses to 16 CCR Sections 1116 and 1116.5.
2. Modified Text for 16 CCR Sections 1116 and 1116.5.
3. Comment Letters for 16 CCR Sections 1116 and 1116.5.

Summary of Comments and Responses to Proposed Title 16, California Code of Regulations, Sections 1116 and 1116.5.

A. August 13, 2026, letter from Alexis Wisler, RDH.

Comment A-1 Summary

Ms. Wisler states she supports responsible regulations that improve access to care, protect patients, and urges the Board to ensure that the regulations clearly differentiate between a mobile dental hygiene clinic, a fixed RDHAP physical facility, and an RDHAP who transports portable equipment to authorized practice settings.

Response:

The Board acknowledges and appreciates Ms. Wisler's comment. The purpose of the current, proposed regulatory amendments was to address reported confusion regarding the requirements for registration of physical facilities as a stand-alone practice versus registration of physical facilities to maintain portable equipment, as well as for requirements applicable to registration of an MDHC. The Board held a Townhall Meeting on September 12, 2025, with the goal of obtaining stakeholder input, and prepared amendments to address those concerns.

As the Board is addressing clarity for requirements for registration of physical facilities as a stand-alone practice versus registration of physical facilities to maintain portable equipment, as well as for requirements applicable to registration of an MDHC within this regulatory action, the Board is making no changes to the regulations in response to this comment.

Comment A-2 Summary

Ms. Wisler states she requests the Board consider whether any requirements in sections 1116 and 1116.5 could unintentionally pose unnecessary barriers for individual RDHAPs or small RDHAP practices providing portable services.

Response:

The Board acknowledges and appreciates Ms. Wisler's comment. The Board has solicited and ensured that all stakeholder input was considered within this regulatory action and as such, the Board is making no changes to the regulations in response to this comment.

B. August 14, 2026, letter from Susan Mc Learan, CDHA Co-Chair, Government Relations Council

Comment B-1 Summary

Ms. Mc Learan states there is more than one application for the term "physical facility," that "Primary Physical Facility" is potentially misleading, and form DHBC HAPR-01 does not make the distinctions sufficiently clear.

Response:

The Board thanks Ms. Mc Learan and accepts this comment for the following reason: The Board determined there was a lack of clarity between the types of physical facilities required to be registered with the Board. Therefore, the Board amended the following terms to form DHBC HAPR-01:

1. Added "EACH Physical Facility requires a separate registration/renewal application." in the "Note" directions section. This ensures the reader is aware that each physical facility is registered separately, and each requires a separate registration form and renewal.

2. Separated "New Registration" to distinct category boxes and added a separate "Renewal" checkbox.

3. Amended "a primary physical facility" to "the first physical facility where dental hygiene services are rendered (fixed-site practice facility)" in the "Application Fees" box and in "Question 4. Type of Registration" of "RDHAP Information." as the term "Primary Physical Facility" does not appear to be defined in the applicable Business and Professions Code (BPC) or the CCRs.

4. Amended "portable equipment registration" to "any physical facilities to maintain portable equipment (portable practice)" in the "Application Fees" box to allow the distinction of physical facilities solely used to maintain portable equipment.

5. Added "(Portable Practice)" to "Physical Facility to Maintain Portable Equipment" in "Question 4. Type of Registration" of "RDHAP Information." to allow the distinction to register physical facilities solely used to maintain portable equipment.

6. The Board added "PLEASE NOTE: A physical facility is defined in 16 CCR section 1116.5 as a fixed structure in which dental hygiene services are rendered or where portable equipment is maintained." in "Question 4. Type of Registration" of "RDHAP Information."

These amendments provide the definition for a "physical facility" and allow the reader to distinguish between the two types of physical facilities required to be registered with the Board.

Comment B-2 Summary

Ms. Mc Learan states portable practice locations need to be clearly distinguished from additional offices on form DHBC HAPR-01.

Response:

The Board thanks Ms. Mc Learan and accepts this comment for the following reason:

The Board determined there was a lack of clarity to distinguish that the initial registration and registration renewal fee requirements applicable to RDHAPs owning more than the first physical facility where dental hygiene services are rendered (fixed-site practice facility) shall be responsible for those registration fees as opposed to physical facilities used to maintain portable practice equipment. Therefore, the Board added the following to form DHBC HAPR-01:

1. Added "where dental hygiene services are rendered (fixed-site practice facility)" to "registration fee for each additional physical facility." in the "Applications Fee" box on the first page.

2. Added "where dental hygiene services are rendered (fixed-site practice facility)" to "Biennial renewal fee for each additional physical facility." in the "Applications Fee" box on the first page.

These amendments provide the distinction between additional physical facilities where dental hygiene services are rendered (fixed-site practice facility) where fees are required, from physical facilities to maintain portable equipment (portable practice) which do not require a fee.

Comment B-3 Summary

Ms. Mc Learan states "Physical Facility to Maintain Portable Equipment" is also unclear in the address section on form DHBC HAPR-01.

Response:

The Board thanks Ms. Mc Learan and accepts this comment for the following reason:

The Board determined to clarify that every physical facility, regardless if it is to maintain portable equipment or a physical facility where dental hygiene services are rendered (Fixed-Site Practice Facilities), shall register that physical facility with the Board.

Therefore, to enhance clarity, the Board added the following to the "Address of Physical Facility" box on form DHBC HAPR-01:

1. The Board struck "the location" and added "all physical facilities where dental hygiene services are rendered (Fixed-Site Practice Facilities)" after "NOTE: At the time of registration,"

Comment B-4 Summary

Ms. Mc Learan states RDHAPs with no physical facility need a clear method to notify the Board of their practice status and requested a checkbox for notifying the Executive Officer pursuant to BPC section 1926.3(a) they do not have a physical facility.

Response:

The Board thanks Ms. Mc Learan and rejects this comment for the following reason:

Form DHBC HAPR-01 is only for registering physical facilities. Therefore, it is improper for a text box to include extraneous data such as a checkbox for not practicing as a sole RDHAP practitioner [i.e., physical facilities where dental hygiene services are rendered (fixed-site practice facility) or physical facilities to maintain portable equipment (portable practice) or owning an MDHC.]

Comment B-5 Summary

Ms. Mc Learan states the fee language should track the "additional office" requirement on form DHBC HAPR-01.

Response:

The Board thanks Ms. Mc Learan and accepts this comment for the following reason:

The Board incorporates by reference its response to Comment B-2.

Comment B-6 Summary

Ms. Mc Learan proposed form HAPR-01 Categories

Response:

The Board thanks Ms. Mc Learan and accepts this comment for the following reason:

The Board incorporates by reference its response to Comments B-1 through B-5.

3. **August 27, 2026, letter from Tooka Zokaie, Sr. Health Policy Analyst, California Dental Association**

Comment C-1 Summary

Ms. Zokaie states CDA supports removing the term dental hygiene diagnosis and adding the term "care plan" to align with both BPC section 1908(a) and 16 CCR section 1103(k)(3), thereby capturing the intent of a "dental hygiene care plan" and the "dental hygiene process of care." Additionally, she states CDA appreciates the incorporation of language to clarify that the physical facility must be in a dental health professional shortage area (DHPSA).

Response:

The Board thanks Ms. Zokaie for CDA's support on these amendments.

Comment C-2 Summary

Ms. Zokaie states the proposed regulations do not explicitly call for RDHAPs operating an MDHC to obtain patient consent for services. RDHAPs are required by the code of ethics to obtain patient consent for treatment, and this language should be clarified in MDHC regulations.

Ms. Zokaie suggested the addition of a section 1116.5(h) consent for services and language to support this section.

Response:

The Board thanks Ms. Zokaie and rejects this comment for the following reason:

While the Board appreciates CDA's suggestions, 16 CCR sections 1116 and 1116.5 are existing regulations and all comments and amendments are limited to the noticed amendments. However, the Board addresses CDA's concerns as such:

First, Ms. Zokaie erroneously cited section 1116.5 which is for physical facilities. Section 1116 is the proposed language for MDHCs.

Second, as Ms. Zokaie states, RDHAPs are required by the code of ethics to obtain patient consent prior to treatment.

The Board requires all licensees to satisfactorily complete an examination in California law and ethics as prescribed by the dental hygiene board prior to licensure [Bus. & Prof. Code §1917, subd. (d)].

The Board defines "Ethics" and incorporates the California Dental Hygienists' Association's Code of Ethics for Dental Hygienists ("CDHA Code of Ethics") in 16 CCR section 1100(k) which states:

"(k) "Ethics" for the purposes of the examination required by section 1917(d) of the Business and Professions Code, means an act or acts in accordance with the California Dental Hygienists' Association's (CDHA's) Policy Manual, Chapter 2, Code of Ethics for Dental Hygienists (Amended HOD 2015), which is hereby incorporated by reference, or the American Dental Hygienists' Association's (ADHA's) Bylaws and Code of Ethics (Adopted June 23, 2014), which is hereby incorporated by reference, and ADHA Policy Manual, pages 7-12, (Adopted June 22, 2015), which is hereby incorporated by reference."

The "Core Value" of "Individual Autonomy and Respect for Human Beings" in the "CDHA's Code of Ethics" speaks to "Informed Consent" as it states:

"People have the right to be treated with respect. They have the right to informed consent prior to treatment, and they have the right to full disclosure of all relevant information so that they can make informed choices about their care."

Additionally, in the "Standards of Professional Responsibility," the section regarding "To Clients" of the "CDHA's Code of Ethics", it states:

"Provide clients with the information necessary to make informed decisions about their oral health and encourage their full participation in treatment decisions and goals."

As RDHAPs are bound by their professional code of ethics, the Board determined adding this requirement to the regulation would be duplicative and unnecessary.

Accordingly, the Board is making no changes to the regulations in response to this comment.

Comment C-3 Summary

Ms. Zokaie states previous comments requested that RDHAP's provide patients with an information sheet reflecting the services provided during the visit, the limitation of the services that RDHAPs can provide, a recommendation to receive a comprehensive examination by a licensed dentist and contact information for follow-up services or dental emergencies.

Response:

The Board thanks Ms. Zokaie and rejects this comment for the following reason:

While the Board appreciates CDA's suggestions, 16 CCR sections 1116 and 1116.5 are existing regulations and all comments and amendments are limited to the noticed amendments. However, the Board addresses CDA's concerns as such:

It is the standard of care for RDHAPs to provide patients with after dental hygiene care information, including contact information for follow-up services or dental emergencies. Additionally, subdivision (d)(1)(A) requires the MDHC owner have a written procedure that specifies the means of obtaining emergency follow-up care for patients treated in the MDHC, as well as subdivision (d)(1)(A) requiring the MDHC owner to maintain a telephone number where patients are able to contact the MDHC owner or provider with questions, concerns, or emergency needs. Furthermore, section (d)(1)(B) requires an MDHC owner to maintain a relationship with at least one licensed dentist located in California for referral, consultation, and emergency services.

As stated before, RDHAPs are bound by their professional code of ethics.

In the "Standards of Professional Responsibility" regarding "To Clients" in the CDHA's "Code of Ethics," it states in part:

- Provide oral health care utilizing high levels of professional knowledge, judgment, and skill.
- Serve as an advocate for the welfare of clients.
- Provide clients with the information necessary to make informed decisions about their oral health and encourage their full participation in treatment decisions and goals.
- Refer clients to other healthcare providers when their needs are beyond our ability or scope of practice.
- Educate clients about high-quality oral health care.

Additionally, in the "To the Community and Society" section in the CDHA's "Code of Ethics," it states in part:

- Recognize and uphold the laws and regulations governing our profession.
- Comply with local, state, and federal statutes that promote public health and safety.
- Promote access to dental hygiene services for all, supporting justice and fairness in the distribution of healthcare resources.

As RDHAPs are bound by their professional code of ethics, the Board determined adding this requirement to the regulation would be duplicative and unnecessary.

Accordingly, the Board is making no changes to the regulations in response to this comment.

TITLE 16. DENTAL HYGIENE BOARD OF CALIFORNIA – DEPARTMENT OFCONSUMER AFFAIRS

MODIFIED TEXT

Legend:

Proposed amendments to the regulatory language are shown in single underline for new text and ~~single strikethrough~~ for deleted text.

Modifications to the proposed regulatory language are shown in double underline for new text and ~~double strikethrough~~ for deleted text.

Amend Section 1116 in Article 4 of Division 11 of Title 16 of the California Code of Regulations (CCR) to read as follows:

Article 4. Licensing

§ 1116. Mobile Dental Hygiene Clinics; Issuance of Approval.

(a) Definitions. For the purposes of this section, unless otherwise specified, the following definitions shall apply:

(1) "Active patient" refers to a patient of record whom the owner or provider has examined, treated, or cared for within the two (2) year period prior to discontinuation of practice, or the owner or provider moving from or leaving the city in which services were provided to the patient.

(2) "Communication capability" means an owner has telephone service they can access twenty-four (24) hours per day.

(3) "Dental hygiene services" means the professional practices of a registered dental hygienist in alternative practice (RDHAP) as set forth in Business and Professions Code section (BPC) section 1925.

(4) "Equipment" means any tool, instrument, or device used by an RDHAP to provide dental hygiene services.

(5) A "mobile dental hygiene clinic (MDHC)" means any self-contained facility in which dental hygiene services are rendered that may be moved, towed, or transported from one location to another. This term shall not include equipment used and transported by licensed RDHAPs in discharging their duties in locations or settings authorized by BPC section 1926.

(6) “Necessary parties” means emergency responders, medical/dental/dental hygiene clinics, care facility or school staff, guardians, and designated family members.

(7) “Owner” means an individual who applies for registration or operates an MDHC, is responsible for the MDHC’s registration, and is licensed to practice dental hygiene in alternative practice pursuant to BPC section 1922.

(8) "Patient of record" refers to a patient who has had a medical and dental history completed and evaluated, had oral conditions assessed and documented, and had a written dental hygiene care plan, as defined in California Code of Regulations (CCR), Title 16, section 1100(g), developed by the RDHAP.

(9) “Patient treatment records” shall include the patient’s dental history maintained by the MDHC related to the dental hygiene process of care which includes medical history, dental hygiene ~~evaluation(s)~~assessments, dental hygiene ~~diagnosis(es)~~care plan, dental hygiene procedures and treatment, response to dental hygiene treatment, documented consultations with other dental care and healthcare providers, and referrals for dental care and healthcare follow-up treatment.

(10) “Protected Health Information (PHI)” means the patient’s “individually identifiable health information” as defined in section 1320d of Title 42 of the United States Code. PHI includes a patient’s medical history, or dental history, which is a written record of the patient’s personal health history that provides information about allergies, illnesses, surgeries, immunizations, and results of physical exams and tests.

(11) “Provider” means an individual licensed to practice dental hygiene in alternative practice or dentist who provides dental hygiene treatment and/or services in an MDHC, but who is not necessarily the owner registering the MDHC.

(b) Application for Registration. An RDHAP who wishes to operate an MDHC in any setting authorized by BPC section 1926 shall apply to the Board for registration of an MDHC with the Board by submitting a completed application to the Board. A completed application shall include the following:

(1) A completed “Application for Registration of a Mobile Dental Hygiene Clinic (MDHC)” (DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026)), which is hereby incorporated by reference;

(2) All documents required by form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026); and,

(3) Payment of an initial registration fee of $100.

(c) Abandonment; Grounds for Denial, Withdrawal, Citation or Issuance of Registration.

(1) An applicant for a license who fails to complete registration application requirements set forth in subdivision (b) within one year after being notified bythe Board of deficiencies in their application, shall be deemed to have abandoned the application and shall be required to file a new application and meet all of the requirements in effect at the time of reapplication.

(2) The Board may deny, place on probation, issue a citation, or withdraw a registration as provided in BPC section 1926.1 for failure to meet the requirements of this section. For the purposes of this section and BPC section 1926.1, a registration may be withdrawn if compliance with this section is not demonstrated within 60 days from the date of written notice of the areas of noncompliance found by the Board and/or upon a final decision, pursuant to 16 CCR section 1142, thereby upholding the withdrawal in accordance with the notice and hearing procedures contained in the Administrative Procedure Act (Sections 11500 through 11529 of the Government Code).

(3) Upon meeting the requirements of subdivision (b), an MDHC shall be registered with the Board and the RDHAP operator shall be issued an MDHC registration.

(d) Minimum Operating Requirements.

(1) The MDHC applicant or owner shall meet all of the following requirements to obtain or maintain registration of the MDHC as required by BPC sections 1926.1 and 1926.2 and this section:

(A) The owner has a written procedure that specifies the means of obtaining emergency follow-up care for patients treated in the MDHC. The procedure shall include arrangements an RDHAP must make for treatment by a licenseddentist or physician whose place of practice is established within the city or county in which the MDHC provides or intends to provide dental hygiene services. A copy of these written procedures shall be given to each provider at the MDHC prior to any dental hygiene services being performed on a patient.

(B) An owner shall maintain a relationship with at least one licensed dentistlocated in California for referral, consultation, and emergency services pursuant to 16 CCR section 1117.

(C) The owner has communication capability that enables the owner to contact necessary parties in the event of a medical or dental emergency.

(D) The owner shall maintain a telephone number where patients are able to contact the MDHC owner or provider with questions, concerns, or emergency needs and have their calls returned within four (4) calendar days. If a live person is not available to answer calls, the telephone line shall include a recorded message with information about whom to contact in case of a dental emergency after receiving dental hygiene services.

(E) The owner shall comply with all state and local laws and ordinances regarding business licensing and operations, and shall obtain and maintain all state and local licenses and permits necessary to provide the dental hygiene services being rendered by the applicant or provider at the MDHC, including a local or county business license, a fictitious name permit as provided in BPC section 1962 if applicable, and/or a seller's permit if a permit is required under the Sales and Use Tax Law, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code.

(F) If the owner or any provider performs radiographs, a radiographic operatory must be used that complies with California Radiation Control Regulations. (Cal. Code Regs., tit. 17, Div. 1, Ch.5, Subchapter 4, §§30100 through 30395.)

(G) The driver of the MDHC shall possess a current, active, and unrestricted California driver's license.

(2) Official Place of Business and Maintenance of Records.

(A) The owner shall maintain a physical address of record for the MDHC registered with the Board and shall notify the Board in writing of any changein that address within thirty (30) days of the change.

(B) An owner shall include the name of the MDHC (including any fictitious name authorized by BPC section 1962), physical address of record and MDHC registration number for all forms of advertisement, solicitation, or other presentments made to the public in connection with the rendition of dental hygiene services, including any advertisement, card, letterhead, telephone listing, Internet Web site, written solicitation or communications to a prospective patient or patients, or contract proposal.

(C) All dental hygiene patient treatment records and communications relating to the care and treatment of the patient following the discharge of a patient shall be maintained by the owner for a minimum of seven (7) years.

(3) In addition to the other minimum operating requirements of this section, each MDHC shall:

(A) Use infection control equipment and follow infection control procedures

according to the requirements of 16 CCR section 1005.

(B) Comply with HIPAA's security standards in Subpart C of Part 164, 45 C.F.R. §§164.302 through 164.318, with respect to the patient's PHI. For the purposes of this section "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. §§1320d - 1320d-8) as amended by subsequent legislation and the implementation of Privacy, Security, and Enforcement Rules under 45 C.F.R. Part 160 and Subparts A, C, D, and E of Part 164.

(C) Be readily accessible to and useable by individuals with disabilities pursuant to the federal Americans with Disabilities Act of 1990 (ADA)(42 U.S.C. §§12101 through 12212), in accordance with the ADA's implementing rules under 28 C.F.R Part 36 and Subparts A-D of Part 36. For the purposes of this section,"disability" has the meaning set forth in Section 51 of the Civil Code.

(D) Have access to a sufficient water supply to meet patients' health and safety needs at all times, including hot water. Water quality shall meet guidelines setforth in the "Guidelines for Infection Control in Dental Health-Care Settings – 2003" from the Centers for Disease Control and Prevention (CDC), in additionto the "Safe Drinking Water Act." (42 U.S.C. §§300f through 300j-27.)

(E) Have toilet facilities available to staff and patients of the MDHC.

(F) Have a covered galvanized, stainless steel, or other noncorrosive ~~metal~~, heavy duty puncture-resistant and leak-proof container for deposit of refuse and waste materials.

(G) Have a working Automated External Defibrillator (AED).

~~(H)~~(4) If an RDHAP administers local anesthesia or performs soft tissue curettage pursuant to 16 CCR section 1118, an RDHAP shall have available~~Have~~ a self-contained, portable emergency oxygen unit with administration equipment (wheeled cart with oxygen cylinder, variable regulator, demand valve system, supplemental adult and child oxygen masks, hoses, and nasal cannulas) to assist with administration of basic life support.

~~(4)~~(5) Each MDHC owner shall notify the Board in writing within thirty (30) days of any change in operational status or ownership of the MDHC.

~~(5)~~(6) An RDHAP operator shall provide access during business hours to the RDHAP's records and facility to the Board, or its authorized representative(s), to review the MDHC for compliance with all laws, regulations, and standards applicable to MDHCs including, but not limited to, the BPC, CCR, CDC, and

HIPAA.

(e) Transferability. An MDHC registration is not transferable.

(f) Renewal. An MDHC registration shall expire at the same time as the registration holder's RDHAP license.

(1) To renew the MDHC, an owner shall submit a completed renewal application that includes the following:

(A) Form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026);

(B) A biennial renewal fee in the amount of $160; and

(C) All supporting documentation required by form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026).

(2) Renewal of each MDHC registration shall be accomplished by submission of the form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026), fee, and documentation required in subdivision (f)(1) by either:

(A) Electronic submission through a web link to the Department of Consumer Affairs' online licensing system entitled "BreEZe" located on the Board's website at: https://www.dhbc.ca.gov/ using the "BREEZE" tab or the "BreEZeOnline System" portal tabs or at: https://www.breeze.ca.gov/datamart/loginCADCA.do; or

(i) The owner and operator shall first register for a user account by creating a username and password.

(ii) The owner and operator shall provide all required documentation referenced in (f)(1) through the link referenced in subdivision (f)(2)(A) of this section. With respect to the application, the owner and operator may submit form DBHC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026) through BreEZe or electronically submit the same information that is requested by that form directly through BreEZe.

(iii) Electronic Signature: When a signature is required by the particular instructions of any filing to be made through the online portal, including any attestation under penalty of perjury, the owner shall affix their electronic signature to the filing by typing their name in the appropriate field and submitting the filing via the Board's online portal. Submission of a filing in this manner shall constitute evidence of legal signature by any individual whose name is typed on the filing.

(B) Submission of all required documentation referenced in subdivision (f)(1) by mail to the Board's physical address.

(g) Exemptions. MDHCs that fall within the definition of BPC section 1926.2(b) are exempt from the requirements of this section.

(h) Identification of Personnel, Notification of Changes in Written Procedures, and Display of Licenses.

(1) The owner shall advise the Board in writing within thirty (30) days of any change to any of the information provided to the Board in application form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026), whether for initial or renewal.

(2) Each RDHAP or any other provider licensed by the Board to provide dental hygiene services in the MDHC shall prominently display evidence of their California RDHAP or other Board license in a conspicuous location accessible to public view on the premises where the RDHAP or other Board licensee provides the licensed services pursuant to BPC section 680.

(3) A licensed RDHAP engaged in the practice of dental hygiene shall provide notice to each patient of the fact the RDHAP is licensed and regulated by the Board.

(A) The notice shall include the following statement and information:

NOTICE:
Dental Hygienists in Alternative Practice are licensed and regulated by the Dental Hygiene Board of California
(916) 263-1978
www.dhbc.ca.gov

(B) The notice required by this section shall be provided by prominently posting the notice in a conspicuous location accessible to public view on the premises where the RDHAP provides the licensed services, and the notice shall be in at least 48-point type font.

(i) Identification of Location of Services.

(1) Each owner of an MDHC shall maintain a confidential written or electronic record detailing the following information for each patient to whom services are provided:

(A) Name of patient served;

(B) Closest street address near the service location of the MDHC where service was provided;

(C) Date of each treatment session; and

(D) Types of dental hygiene services provided to each patient.

(2) The confidential written or electronic record shall be made available to a representative of the Board within fifteen (15) days of the date of the Board's written request pursuant to BPC section 1955.

(j) Cessation of Operation.

(1) Upon cessation of operation of an MDHC, the owner shall notify the Board in writing within thirty (30) days after the last day of operation and inform the Board of the final disposition of patient treatment records, including the physical mailing address or location where the treatment records are maintained and the name, telephone number and address for the custodian of records or other person whom the owner designates as responsible for maintaining those records.

(2) If an MDHC is sold to another RDHAP, that RDHAP ("succeeding MDHC owner") must register with the Board by filing a new form DHBC MDHC-01 (~~New 11/2022~~Amended 11/~~2025~~2026) and comply with this section prior to operating the MDHC.

(3) Upon cessation of operation of an MDHC, the previous owner shall preserve all records for a minimum of seven (7) years.

(4) Within thirty (30) days before the last day of operation, the owner shall provide written notice via first class mail to all active patients of record of the date of closure or cessation of the MDHC, including the last date the MDHC will remain open, and the name, telephone number and address of an individual the patient may contact to request transfer of copies of their patient treatment records to a succeeding MDHC owner or to the patient. The owner shall maintain proof the notice was provided to all active patients in accordance with this section and upon request to the Board in accordance with BPC section 1955. Within fifteen (15) days of receipt of a written request by the patient, the owner shall also provide for the transfer of copies of the patient's treatment records, including radiographs, to the succeeding MDHC owner or to the patient as specified by the patient. In addition, the owner shall provide written acknowledgement of receipt of the patient's request to the patient within five (5) business days of receipt of the written request, and also notify the patient of the method and date of expected delivery of the patient's treatment records.

(5) "Proof the notice was provided" shall mean proof of service of any notice required by this section to patients by mail by completion of a document showing the document's name and the person served, the person making service, and the date and manner of service (e.g., by first class mail, regular mail, or in person). Proof of service shall be in writing, but need not be signed, signed under oath, or in any particular format.

Note: Authority cited: Sections 1905, 1906, 1908, 1926.01, 1926.1, 1926.2 and 1944, Business and Professions Code. Reference: Sections 125.6, 137, 138, 142, 680, 1922, 1925, 1926, 1926.1, 1926.2, 1955 and 1962, Business and Professions Code.

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS
DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen Street, Suite 1350 Sacramento, CA 95815
P (916) 263-1978 | F (916) 623-4093 | www.dhbc.ca.gov

APPLICATION FOR REGISTRATION OF A MOBILE DENTAL HYGIENE CLINIC (MDHC)

Business & Professions Code (BPC) sections 1926.1, 1926.2, and 1944 and California Code of Regulations (CCR) Title 16, Division 11 section 1116.

NOTE: ALL questions on this registration/renewal application must be answered, and all information requested in this registration/renewal must be supplied by the applicant. If something does not apply to you, please check the "N/A" box. Failure to do so will cause a delay in processing your registration/renewal. Please type or print legibly; illegible registrations will be returned.

APPLICATION FEES

ALL FEES ARE NON-REFUNDABLE AND MUST ACCOMPANY THIS APPLICATION./

REGISTRATION FEE FOR INITIAL APPLICANTS: $100
BIENNIAL RENEWAL FEE FOR MDHC REGISTRATION: $160

Payment must be made by personal check, cashier's check, business check, or money order and must be made payable to "DHBC".

MDHC OWNER INFORMATION

*Note: The registration information provided in questions 1 and 2 will be used to establish the expiration date of the registration and will be the point-of-contact for this application.

1a. Last Name	1b. First Name	1c. Middle Name

2a. RDHAP License Number:	2b. RDH License Number:	2c. Social Security Number/Individual Taxpayer Number:

3a. Registered Fictitious Name: ☐ N/A	3b. Fictitious Name Permit Number: ☐ N/A

4. Type of Registration: ☐ New Registration ☐ Registration Renewal

MDHC Registration Number, if renewal:

ADDRESS OF RECORD/MAILING ADDRESS FOR RDHAP*(REQUIRED)

*The address of record will be posted on the internet and be disclosed to the public upon request (see BPC section 1902.2 and Government Code section 7922.530(a)).
The Board shall be notified within thirty (30) days of any change in the RDHAP owner's address of record.

5. Physical Address of Record (Number and Street) (including apartment number, if applicable)		
City	State	Zip Code
6. Email Address	7. RDHAP's Contact Number	

ADDRESS OF RECORD/MAILING ADDRESS FOR MDHC* (REQUIRED)

*The address of record will be posted on the internet and be disclosed to the public upon request (see BPC section 1902.2 and Government Code section 7922.530(a)).
The owner shall maintain a physical address of record for the MDHC registered with the Board and shall notify the Board in writing of any change in that address within thirty (30) days of the change.

8. Physical Address of Record (Number and Street) (including apartment number, if applicable) (If same as "Address of Record for RDHAP," indicate "Same as above.")		
City	State	Zip Code
9. MDHC's Email Address	10. MDHC's Contact Number	

~~MDHC~~ RDHAP OWNER REQUIREMENTS

11. Does the ~~MDHC's~~ RDHAP owner have a written procedure** that specifies the means of obtaining emergency follow-up care for patients treated in the MDHC as required by 16 CCR section 1116? *If YES, provide a copy **(labeled as Exhibit 1)**. For renewals, attach a copy if the written procedure has changed from initial registration. If no changes have been made check ~~this~~the N/A box.~~: ☐ N/A~~ **The procedure shall include arrangements for treatment by a licensed dentist or physician whose place of practice is established within the city orcounty in which the MDHC provides or intends to provide dental hygiene services.	☐YES*	☐NO	☐N/A

~~MDHC~~RDHAP OWNER REQUIREMENTS			
12. Does the ~~MDHC's~~RDHAP owner have a relationship with at least one licensed dentist located in California for referral, consultation, and emergency services pursuant to 16 CCR section 1117? *If YES, provide a copy **(labeled as Exhibit 2)** of your completed "Documentation of Registered Dental Hygienist In Alternative Practice (RDHAP) Relationship with Dentist" (form RDHAP-01 (07-2021) with this application as set forth in 16 CCR section 1117. For renewals, attach a copy if this information has changed from initial registration. If no changes have been made check ~~this~~the NA box.~~: ☐ N/A~~	☐YES*	☐NO	☐N/A
13. Does the ~~MDHC~~RDHAP owner have telephone service for the MDHC that ~~it can access~~can be accessed twenty-four (24) hours per day~~, that enables~~enabling the RDHAP owner or any provider of dental hygiene services to contact emergency responders, medical/dental/dental hygiene clinics, care facility or school staff, guardians,and designated family members, in the event of a medical or dental emergency?		☐YES	☐NO
14. Is there a telephone number where patients are able to contact the ~~MDHC's~~RDHAP owner or provider with questions, concerns, or emergency needs, and have their calls returned within four (4) calendar days?		☐YES	☐NO
15. If a live person is not available to answer calls, does the telephone line include a recorded message with information about whom to contact in case of a dental emergency?		☐YES	☐NO
16. Will the RDHAP owner comply with all state and local laws and ordinances regardingbusiness licensing and operations?		☐YES	☐NO
17. Will the ~~MDHC~~RDHAP owner obtain and maintain all state and local licenses and permits necessary to provide the dental hygiene services being rendered by the applicant or provider at the MDHC, including a local or county business license, a fictitious name permit as provided in BPC section 1962 if applicable, and/or a seller's permit if a permit is required under the Sales and Use Tax Law, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code? *A copy of each current license and permit shall be submitted with the application to include a local or county business license, a fictitious name permit as provided in BPC section 1962 if applicable, and/or a seller's permit if a permit is required under the Sales and Use Tax Law, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code. **If yes, provide copies and label as Exhibit 3.**		☐YES*	☐NO

MDHC REQUIREMENTS			
18. Does the MDHC's radiographic operatory comply with California Radiation Control Regulations (Cal. Code Regs., tit. 17, Div. 1, Ch.5, Subchapter 4, §§30100 through 30395)? *If the RDHAP does not provide radiographic services, check the "N/A" box.	☐YES	☐NO	☐N/A*
19. Does the driver of the MDHC possesses a current, active and unrestricted California driver's license? *If YES, please provide the Name of the Driver, Driver's License Number and Date of Expiration here: Name of Driver: _____ Driver License #: _____ Expiration Date: _____		☐YES*	☐NO
20. The ~~MDHC~~RDHAP owner acknowledges receiving notice that the ~~MDHC~~RDHAP owner must maintain all dental hygiene patient treatment records and communications relating to the care and treatment of the patient following the discharge of apatient for a minimum of seven years (see 16 CCR section 1116 for the minimum MDHC operating standards).		☐YES	☐NO
21. ~~Does the MDHC's owner~~Will the RDHAP owner and providers use infection control equipment and follow infection control procedures according to the requirements of 16 CCR section 1005?		☐YES	☐NO
22. ~~Does the MDHC~~Will the RDHAP owner and providers comply with HIPAA's security standards in Subpart C of Part 164, 45 C.F.R. §§164.302 through 164.318, with respect to the patient's "Protected Health Information (PHI)"? For the purposes of this question, PHI, as defined in section 1320d of Title 42 of the United States Code, includes a patient's medical history, or dental history, which is a written record of the patient's personal health history that provides information about allergies, illnesses, surgeries, immunizations, and results of physical exams and tests.		☐YES	☐NO
23. Is the MDHC readily accessible to and useable by individuals with disabilities pursuant to the federal Americans with Disabilities Act of 1990 (ADA)(42 U.S.C. §§12101 through 12212), in accordance with the ADA's implementing rules under 28 C.F.R Part 36 and Subparts A-D of Part 36?		☐YES	☐NO
24. Does the MDHC have access to a sufficient water supply to meet patients' health and safety needs* at all times, including hot water? *Water quality shall meet guidelines set forth in the "Guidelines for Infection Control in Dental Health-Care Settings – 2003" from the Centers for Disease Control and Prevention, in addition to the "Safe Drinking Water Act." (42 U.S.C. §§300f through 300j-27.)		☐YES	☐NO
25. Does the MDHC have access to toilet facilities available to staff and the patients of the MDHC?		☐YES	☐NO

MDHC REQUIREMENTS

26. Does the MDHC have a covered galvanized, stainless steel, or other noncorrosive ~~metal~~, heavy duty puncture-resistant and leak-proof container for deposit of refuse and waste materials?		☐YES	☐NO
27. Does the MDHC have a working Automated External Defibrillator (AED)?		☐YES	☐NO
28. If an RDHAP administers local anesthesia or performs soft tissue curettage pursuant to 16 CCR section 1118, does~~Does~~ the MDHC have a self-contained, portable emergency oxygen unit with administration equipment (wheeled cart with oxygen cylinder, variable regulator, demand valve system, supplemental adult and child oxygen masks, hoses, and nasal cannulas) to assist with administration of basic life support? *If registering or renewing an MDHC and the RDHAP ***does not*** administer local anesthesia or perform soft tissue curettage pursuant to 16 CCR section 1118, check the "N/A" box.	☐YES	☐NO	☐N/A*

ACKNOWLEDGEMENT

29. Have you reviewed BPC sections 1926.1, 1926.2, and 1944, and 16 CCR sections 1116, ~~and~~ 1117, and 1118? Please be advised that failure to comply with these provisions is grounds for denial or revocation of the registration.	☐YES	☐NO

REGISTRATION CERTIFICATION

I hereby certify under penalty of perjury under the laws of the State of California that all licensed persons practicing at the location designated in the registration hold valid licenses and no charges of unprofessional conduct are pending against any person practicing at that location [BPC section 1962(b)(4)].

I hereby certify under penalty of perjury under the laws of the State of California that I have read the foregoing registration application and that all information, statements, attachments, and representations provided by me in this application are true and correct. By submitting the application and signing below, I am granting permission to the Board or its assignees and agents to verify the information provided and to perform any investigation pertaining to the information I have provided as the Board deems necessary.

NOTICE: FALSIFICATION OR MISREPRESENTATION OF ANY ITEM OR RESPONSE ON THIS REGISTRATION OR ANY ATTACHMENT HERETO IS GROUNDS FOR DENYING OR REVOKING THE REGISTRATION.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____

NOTICES

The Dental Hygiene Board of California of the Department of Consumer Affairs collects the personal information requested on this form as authorized by Business and Professions Code Sections 1926.1 and 1926.2, and California Code of Regulations, Title 16, Section 1116. The Dental Hygiene Board of California

uses this information principally to identify and evaluate applicants for registration and to enforce licensing standards set by law and regulation.

MANDATORY SUBMISSION:
Submission of the requested information is mandatory. The Dental Hygiene Board of California cannot consider your registration unless you provide all the requested information.

ACCESS TO PERSONAL INFORMATION:
You may review the records maintained by the Dental Hygiene Board of California that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

POSSIBLE DISCLOSURE OF PERSONAL INFORMATION:
We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in the following circumstances:

- In response to a Public Records Act request (Government Code Sections 7920.000 through 7931.000), as allowed by the Information Practices Act (Civil Code Sections 1798 through 1798.78);
- To another government agency as required by state or federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

MANDATORY DISCLOSURE OF SOCIAL SECURITY NUMBERS:
Disclosure of your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is mandatory. Sections 30 and 31 of the Business and Professions Code authorize collection of your SSN or ITIN, which will be used exclusively for tax enforcement purposes, for investigation of tax evasion and violations of cash-pay reporting laws as set forth in Section 329 of the Unemployment Insurance Code, for purposes of compliance with any judgement or order for family support in accordance with Section 17520 of the Family Code, for measurement of employment outcomes of students who participate in career technical education programs offered by the California Community Colleges, or for verification of license or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN or ITIN, your application for initial licensure will not be processed AND you may be reported to the Franchise Tax Board, which may assess a $100 penalty against you.

STATE TAX OBLIGATION NOTICE:
The California State Board of Equalization (BOE) and the California Franchise Tax Board (FTB) may share taxpayer information with the Board. You are required to pay your state tax obligation and your registration may be suspended, or your renewal application denied if the state tax obligation is not paid, and your name appears on either the BOE or FTB certified list of top 500 tax delinquencies (Sections 31and 494.5 of the California Business and Professions Code).

CONTACT INFORMATION:
For questions about this notice or access to your records, you may contact the Executive Officer as follows:

Dental Hygiene Board of California
2005 Evergreen Street, Suite 1350
Sacramento, CA 95815
(916) 263-1978

INTERNAL OFFICE USE ONLY			
Date Received:	**Receipt #:** ☐ **Initial** ☐ **Renewal**		**$ Amount:**
File #:	**Registration #:**		**RDHAP Lic. Exp. Date:**
Date Issued:	**Analyst:**		

TITLE 16. DENTAL HYGIENE BOARD OF CALIFORNIA - DEPARTMENT OF CONSUMER AFFAIRS

MODIFIED TEXT

Legend:

Proposed amendments to the regulatory language are shown in single underline for new text and ~~single strikethrough~~ for deleted text.

Modifications to the proposed regulatory language are shown in double underline for new text and ~~double strikethrough~~ for deleted text.

Amend §1116.5 in Article 4 of Title 16 of the California Code of Regulations (CCR) toread as follows:

Article 4. Licensing

§ 1116.5. Registered Dental Hygienist in Alternative Practice; Physical Facility Registration.

(a) Definitions. For the purposes of this section, unless otherwise specified, the following definitions shall apply:

(1) "Active patient" refers to a patient of record whom the registered dental hygienist in alternative practice (RDHAP) owner or provider has examined, treated, or cared for within the two (2) year period prior to discontinuation of practice, or the RDHAP owner or provider moving from or leaving the city in which services were provided to the patient.

(2) "Dental hygiene services" means the professional practices of an RDHAP as set forth in Business and Professions Code (BPC) section 1925.

(3) "Equipment" means any tool, instrument, or device used by an RDHAP to provide dental hygiene services.

(4) "Necessary parties" means emergency responders, medical/dental/dental hygiene clinics, care facility or school staff, guardians, and designated family members.

(5) "Owner" means an individual licensed to practice dental hygiene in alternative practice pursuant to BPC section 1922 in the State of California who applies for registration or has registered a physical facility or portable equipment with the Board pursuant to the registration requirements of this section.

(6) "Patient of record" refers to a patient who has had a medical and dental history completed and evaluated, had oral conditions assessed and documented, and had a written dental hygiene care plan, as defined in California Code of Regulations (CCR), Title 16, section 1100(g), developed by the RDHAP.

(7) "Patient treatment records" shall include the patient's dental history maintained by the facility related to the dental hygiene process of care which includes medical history, dental hygiene ~~evaluation(s)~~assessments, dental hygiene ~~diagnosis(es)~~care plan, dental hygiene procedures and treatment, response to dental hygiene treatment, documented consultations with other dental care and healthcare providers, and referrals for dental care and healthcare follow-up treatment.

(8) "Physical facility" means either a fixed structure in which dental hygiene services are rendered or where portable equipment is maintained. A physical facility where services are rendered must be located in a dental health professional shortage area, as certified by the Department of Health Care Access and Information, pursuant to BPC sections 1926, 1926.01, and 1926.05.

(9) "Portable equipment" means any tool, instrument, or device used by an RDHAP to provide dental hygiene services designed for and capable of being carried or moved from one location to another.

(10) "Protected Health Information (PHI)" means the patient's "individually identifiable health information" as defined in section 1320d of Title 42 of the United States Code. PHI includes a patient's medical history, or dental history, which is a written record of the patient's personal health history that provides information about allergies, illnesses, surgeries, immunizations, and results of physical exams and tests.

(11) "Provider" means an individual licensed to practice dental hygiene in alternative practice or dentist who provides dental hygiene treatment and/or services in an MDHC, but who is not necessarily the owner registering the MDHC.

(b) Application for Registration.

(1) Within 30 days after the date of the issuance of their initial license, an RDHAP shall do the following:

(A) If the RDHAP owns a physical facility or utilizes portable equipment, the RDHAP shall register the physical facility where the dental hygiene services are rendered, or where the portable equipment is maintained according to the requirements of this section. The RDHAP shall register with the Executive

Officer by submitting to the Board a completed "Registered Dental Hygienists in Alternative Practice: Registration of Physical Facilities" (form DHBC HAPR-01 ~~New (11/2022~~Amended 11/~~2025~~2026)), which is hereby incorporated by reference, and meet all of the applicable requirements of this section; or,

(B) If the RDHAP does not own a physical facility, the RDHAP shall notify the Executive Officer by providing a written statement, signed and dated by the RDHAP, stating that they do not own a physical facility where dental hygiene services are rendered.

(2) An RDHAP owner who desires to have more than one place of practice shall, before opening the additional physical facility or facilities, apply to and obtain permission from the Board to have the additional place of practice as provided in this section. The RDHAP owner shall submit a completed "Registered Dental Hygienists in Alternative Practice: Registration of Physical Facilities." (form DHBC HAPR-01 (~~New 11/2022~~Amended 11/~~2025~~2026)), pay an additional office permit fee of $160, and meet all of the requirements of this section before the additional facility or facilities will be registered with the Board.

(3) The Board shall inform an RDHAP owner in writing whether the registration application (DHBC HAPR-01 (~~New 11/2022~~Amended 11/~~2025~~2026)) is complete and accepted for filing or is deficient and what further specific information is required. An applicant for a license who fails to complete registration application requirements within one year after being notified by the Board of deficiencies in their application, shall be deemed to have abandoned the application and shall be required to file a new application and meet all of the requirements in effect at the time of reapplication.

(4) The Board may deny or withdraw a registration or issue a citation as provided in BPC section 1926.3 for failure to meet the requirements of this section.

(5) Upon meeting the requirements of this section, the physical facility or facilities shall be registered with the Board and the ~~RHDAP~~RDHAP owner shall be issued an office permit for the initial facility, and, if applicable, an additional office permit ifadditional facilities are registered.

(c) Minimum Operating Requirements.

(1) An RDHAP applicant or owner shall meet all of the following requirements to obtain or maintain registration of their facility or facilities as required by BPC sections 1926.3 and 1926.4 and this section:

(A) There is a written procedure that specifies the means of obtaining emergency follow-up care for patients treated at the physical facility or after use of portable equipment. The procedure shall include arrangements an RDHAP must make for treatment in by a licensed dentist or physician whose place of

practice is established within the city or county in which the RDHAP owner or provider provides dental hygiene services. A copy of these written procedures shall be given to each provider at the physical facility prior to any dental hygiene services being performed on a patient.

(B) An RDHAP shall maintain a relationship with at least one licensed dentist located in California for referral, consultation, and emergency services pursuant to 16 CCR section 1117.

(C) An RDHAP shall maintain a telephone number where patients are able to contact the RDHAP owner or provider with questions, concerns, or emergency needs, and have their calls returned within four (4) calendar days. If a live person is not available to answer calls, the telephone line shall include a recorded message with information about whom to contact in case of a dental emergency after receiving dental hygiene services.

(D) The applicant or RDHAP owner shall comply with all state and local laws and ordinances regarding business licensing and operations, and shall obtain and maintain all state and local licenses and permits necessary to provide the dental hygiene services being rendered by the applicant or provider at the physical facility, including, a local or county business license, a county building permit, a fictitious name permit as provided in BPC section 1962, and/or a seller's permit if a permit is required under the Sales and Use Tax Law, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code.

(E) If the RDHAP owner or any provider performs radiographs, a radiographic operatory must be used that complies with California Radiation Control Regulations. (Cal. Code Regs., tit. 17, Div. 1, Ch. 5, Subchapter 4, §§30100 through 30395.)

(2) Official Place of Business and Maintenance of Records.

(A) The RDHAP owner shall maintain a physical address of record for the physical facility or facilities registered with the Board and shall notify the Board in writing of any change in that address within thirty (30) days of the change.

(B) An RDHAP owner shall include the name of the facility (including any fictitious name authorized by BPC section 1962), physical address of record and office registration number of their physical facility for all forms of advertisement, solicitation, or other presentments made to the public in connection with the rendition of dental hygiene services, including any advertisement, card, letterhead, telephone listing, Internet Web site, written solicitation or communications to a prospective patient or patients, or contract proposal.

(C) All dental hygiene patient treatment records and communications following the discharge of a patient shall be maintained by the RDHAP owner for a minimum of seven (7) years.

(3) In addition to the other minimum operating requirements of this section, each physical facility shall:

(A) Use infection control equipment and follow infection control procedures according to the requirements of 16 CCR section 1005.

(B) Comply with HIPAA's security standards in Subpart C of Part 164, 45 C.F.R. §§164.302 through 164.318, with respect to the patient's PHI. For the purposes of thissection "HIPAA" means the Health Insurance Portability and AccountabilityAct of 1996 (42 U.S.C. §§1320d - 1320d-8) as amended by subsequent legislation and the implementation of Privacy, Security, and Enforcement Rules under 45 C.F.R. Part 160 and Subparts A, C, D, and E of Part 164.

(C) Be readily accessible to and useable by individuals with disabilities pursuant to the federal Americans with Disabilities Act of 1990 (ADA)(42 U.S.C. §§12101 through 12212), in accordance with the ADA's implementing rules under 28 C.F.R Part 36 and Subparts A-D of Part 36. For the purposes of this section,"disability" has the meaning set forth in Section 51 of the Civil Code.

(D) Have access to a sufficient water supply to meet patients' health and safety needs at all times, including hot water. Water quality shall meet guidelines set forth in the "Guidelines for Infection Control in Dental Health-Care Settings – 2003" from the Centers for Disease Control and Prevention, in addition to the "Safe Drinking Water Act." (42 U.S.C. §§300f through 300j-27.)

(E) Have toilet facilities within the dental hygiene facility available to staff and the public.

(F) Have a covered galvanized, stainless steel, or other noncorrosive ~~metal~~, heavy duty puncture-resistant and leak-proof container for deposit of refuse and waste materials.

(G) Have a working Automated External Defibrillator (AED).

For RDHAPs who only utilize portable equipment and do not maintain a physical facility for patient treatment, (C), (E), and (G) of this subdivision do not apply.

~~(H)~~(4) If an RDHAP administers local anesthesia or performs soft tissue curettage pursuant to 16 CCR section 1118, an RDHAP shall have available~~Have~~ a self-

contained, portable emergency oxygen unit with administration equipment (wheeled cart with oxygen cylinder, variable regulator, demand valve system, supplemental adult and child oxygen masks, hoses, and nasal cannulas to assist with administration of basic life support.

~~(4)~~(5) Each RDHAP owner shall notify the Board in writing within thirty (30) days of anychange in operational status or ownership of all registered physical facilities.

(d) An RDHAP operator shall provide access during business hours to the RDHAP's records and facility to the Board, or its authorized representative(s), to review the physical facility for compliance with all laws, regulations, and standards applicable to physical facilities including, but not limited to, the BPC, CCR, CDC, and HIPAA.

(e) Transferability. A physical facility registration is not transferable.

(f) Renewal of Physical Facility Registration. The physical facility registration shall expire at the same time as the permit holder's RDHAP license.

(1) To renew the registration of a physical facility, an RDHAP shall submit:

(A) Form DHBC HAPR-01 (~~New 11/2022~~Amended 11/~~2025~~2026) for each physical facility;

(B) A biennial renewal fee in the amount of $250 for each additional physical facility if the RDHAP has more than one registered with the Board; and

(C) All supporting documentation required by form DHBC HARP-01 (~~New 11/2022~~Amended 11/~~2025~~2026).

(2) Renewal of each physical facility registration shall be accomplished by submission of form DHBC HARP-01 (~~New 11/2022~~Amended 11/~~2025~~2026), fees, and documentationrequired in subdivision (e)(1) by either:

(A) Electronic submission through a web link to the Department of Consumer Affairs' online licensing system entitled "BreEZe" that is located on the Board's website at: https://www.dhbc.ca.gov/ using the "BREEZE" tab or the "BreEZe Online System" portal at https://www.breeze.ca.gov/datamart/loginCADCA.do; or

(i) The owner and operator shall first register for a user account by creating a username and password.

(ii) The owner and operator shall provide all required documentation referenced in subdivision (e)(1) through the link referenced in subdivision (e)(2)(A) of this section. With respect to the application, the owner and operator may submit form DBHC HAPR-01 (~~New 11/2022~~Amended

11/~~2025~~2026) through BreEZe or electronically submit the same information that is requested by that form directly through BreEZe.

(iii) Electronic Signature: When a signature is required by the particular instructions of any filing to be made through the online portal, including any attestation under penalty of perjury, the owner shall affix their electronic signature to the filing by typing their name in the appropriate field and submitting the filing via the Board's online portal. Submission of a filing in this manner shall constitute evidence of legal signature by any individual whose name is typed on the filing.

(B) Submission of all required documentation referenced in (e)(1) by mail to the Board's physical address.

(g) Identification of Personnel, Notification of Changes in Written Procedures, and Display of Licenses.

(1) The RDHAP owner shall advise the Board in writing within thirty (30) days of any change to any of the information provided in application form DHBC HAPR-01 (~~New 11/2022~~Amended 11/~~2025~~2026), whether for initial or renewal.

(2) Each RDHAP, or any other provider licensed by the Board to provide dental hygiene services in the physical facility, shall prominently display evidence of their California RDHAP or other Board license in a conspicuous location accessible to public view on the premises where the RDHAP or other Board licensee provides the licensed services of patients pursuant to BPC section 680.

(3) A licensed RDHAP engaged in the practice of dental hygiene shall provide notice to each patient of the fact that the RDHAP is licensed and regulated by the Board.

(A) The notice shall include the following statement and information:

NOTICE:
Dental Hygienists in Alternative Practice are licensed and regulated
by the Dental Hygiene Board of California
(916) 263-1978
www.dhbc.ca.gov

(B) The notice required by this section shall be provided by prominently posting the notice in a conspicuous location accessible to public view on the premises where the RDHAP provides the licensed services, and the notice shall be in at least 48-point type font.

(h) Cessation of Operation.

(1) Upon cessation of operation of a physical facility, the owner shall notify the Board in writing within thirty (30) days after the last day of operation and inform the Board of the final disposition of patient treatment records, including the physical mailing address or location where the treatment records are maintained and the name, telephone number and address for the custodian of records or other person whom the owner designates as responsible for maintaining those records.

(2) If a physical facility is sold to another RDHAP, that RDHAP ("succeeding RDHAP provider") must register with the Board by filing a new form DHBC HAPR-01 (~~New 11/2022~~Amended 11/~~2025~~2026) and comply with this section.

(3) Upon cessation of operation of a physical facility, the previous RDHAP owner of the physical facility shall preserve all records for a minimum of seven (7) years.

(4) Within thirty (30) days before the last day of operation, the RDHAP owner shall provide written notice via first class mail to all active patients of record of the date of closure or cessation of the physical facility, including the last date the physical facility will remain open, and the name, telephone number and address of an individual the patient may contact to request transfer of copies of their patient treatment records to a succeeding provider or to the patient. The RDHAP owner shall maintain proof the notice was provided to all active patients in accordance with this section and upon request to the Board in accordance with BPC section 1955. Within fifteen (15) days of receipt of a written request by the patient, the RDHAP owner shall also provide for the transfer of copies of the patient's treatment records, including radiographs, to the succeeding provider or to the patient as specified by the patient. In addition, the RDHAP shall provide written acknowledgement of receipt of the patient's request to the patient within five (5) business days of receipt of the request, and also notify the patient of the method and date of expected delivery of the patient's treatment records.

(5) "Proof the notice was provided" shall mean proof of service of any notice required by this section to patients by mail by completion of a document showing the document's name and the person served, the person making service, and the date and manner of service (e.g., by first class mail, regular mail, or in person). Proof of service shall be in writing, but need not be signed, under oath, or in any particular format.

Note: Authority cited: Sections 1905, 1906, 1908, 1926, 1926.01, 1926.05, 1926.3, 1926.4 and 1944, Business and Professions Code. Reference: Sections 125.6, 137, 138, 142, 680, 1922, 1925, 1926, 1926.01, 1926.05, 1926.3, 1926.4, 1955 and 1962 Business and Professions Code.

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS
DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen Street, Suite 1350 Sacramento, CA 95815
P (916) 263-1978 | F (916) 623-4093 | www.dhbc.ca.gov

PHYSICAL FACILITY REGISTRATION/RENEWAL FOR REGISTERED DENTAL HYGIENISTS IN ALTERNATIVE PRACTICE (RDHAPs)

Business & Professions Code (BPC) sections 1905, 1906, 1926.3,1926.4, and 1944, and California Code of Regulations (CCR) Title 16, Division 11 section 1116.5.

NOTE: EACH Physical Facility requires a separate registration/renewal application. **ALL** questions on this registration/renewal application must be answered, and all information requested in this registration/renewal must be supplied by the applicant. If somethingdoes not apply to you, please check the "N/A" box. Failure to do so may cause a delay in processing your registration/renewal. Please type or print neatly; illegible registrations will be returned.

APPLICATION FEES

ALL FEES ARE NON-REFUNDABLE AND MUST ACCOMPANY APPLICATION

NO FEE FOR REGISTRATION OR RENEWAL OF ~~A PRIMARY~~THE FIRST PHYSICAL FACILITY WHERE DENTAL HYGIENE SERVICES ARE RENDERED (FIXED-SITE PRACTICE FACILITY) OR FOR ~~A~~ANY PHYSICAL ~~FACILITY~~FACILITIES TO MAINTAIN PORTABLE EQUIPMENT ~~REGISTRATION~~(PORTABLE PRACTICE)

REGISTRATION FEE FOR EACH ADDITIONAL PHYSICAL FACILITY WHERE DENTAL HYGIENE SERVICES ARE RENDERED (FIXED-SITE PRACTICE FACILITY): $160

BIENNIAL RENEWAL FEE FOR EACH ADDITIONAL PHYSICAL FACILITY WHERE DENTAL HYGIENE SERVICES ARE RENDERED (FIXED-SITE PRACTICE FACILITY): $250

Payment must be made by personal check, cashier's check, business check, or money order and must be made payable to "DHBC".

RDHAP INFORMATION

*Note: The registration information provided in questions 1 and 2 will be used to establish the expiration date of the registration and will be the point-of-contact for this application.

1a. Last Name	1b. First Name	1c. Middle Name

2a. RDHAP License Number	2b. RDH License Number	2c. Social Security Number/Individual Taxpayer Number:

3a. Registered Fictitious Name: ☐ N/A	3b. Fictitious Name Permit Number: ☐ N/A

4. Type of Registration (check all that apply):

~~☐New Registration ☐Renewal - Facility #~~

~~☐Portable Equipment ☐Primary Office Facility ☐Additional Office Facility~~

☐New Registration: ☐Physical Facility to Maintain Portable Equipment (Portable Practice)

☐~~Primary~~ First Physical Facility Where Dental Hygiene Services are Rendered (Fixed-Site Practice Facility)

☐Additional Physical Facility Where Dental Hygiene Services are Rendered (Fixed-Site Practice Facility)

☐Renewal: Physical Facility Number

PLEASE NOTE: A physical facility is defined in 16 CCR section 1116.5 as a fixed structure in which dental hygiene services are rendered or where portable equipment is maintained.

ADDRESS OF RECORD/MAILING ADDRESS FOR RDHAP* (REQUIRED)

*The address of record will be posted on the internet and be disclosed to the public upon request (see BPC 1902.2 and Government Code section 7922.530(a)).
The Board shall be notified within thirty (30) days of any change in the RDHAP owner's address of record.

5. Number and Street (including apartment number, if applicable):		
City	State	Zip Code
6. Email Address	7. RDHAP Contact Number	

ADDRESS OF PHYSICAL FACILITY* (REQUIRED)

*The RDHAP owner shall maintain a physical address of record for ~~the~~***each*** physical facility ~~or facilities~~ registered with the Board and shall notify the Board in writing of any change in that address within thirty (30) days of the change. **NOTE:** At the time of registration, ~~the location~~***all physical facilities where dental hygiene services are rendered (Fixed-Site Practice Facilities)*** shall be located in a dental health professional shortage area, as certified by the Department of Health Care Access and Information, pursuant to BPC sections 1926, 1926.01, and 1926.05. ~~Not applicable to Physical Facility to Maintain Portable Equipment Registration or Renewal.~~

8. Number and Street (including suite number, if applicable) (If same as "Address of Record for RDHAP," indicate "Same as above.")

City	State	Zip Code
9. Physical Facility's Email Address	10. Physical Facility's Contact Number	

~~PHYSICAL FACILITY~~RDHAP OWNER REQUIREMENTS			
11. Does the ~~physical facility's~~RDHAP owner have a written procedure** that specifies the means of obtaining emergency follow-up care for patients treated at the physical facility or during use of portable equipment as required by 16 CCR section ~~1116~~1116.5? *Provide a copy **(labeled as Exhibit 1)** if initial registration or written procedure has changed from initial registration. If no changes have been made check ~~this~~the "N/A" box.~~: ☐ N/A~~ **The procedure shall include arrangements for treatment in a dental facility which is established within the city or county in which the RDHAP owner or provider provides dental hygiene services.	☐YES*	☐NO	☐N/A
12. Does the ~~physical facility's~~RDHAP owner have a relationship with at least one licensed dentist located in California for referral, consultation, and emergency services pursuant to 16 CCR section 1117? *If yes, provide a copy **(labeled as Exhibit 2)** of your completed "Documentation of Registered Dental Hygienist in Alternative Practice (RDHAP) Relationship with Dentist" (form RDHAP-01 (07-2021) with this application as set forth in 16 CCR section 1117. For renewals, attach a copy if this information has changed from initial registration. If no changes have been made check ~~this~~the N/A box.~~: ☐ N/A~~	☐YES*	☐NO	☐N/A
13. Is there a telephone number where patients are able to contact the ~~physical facility's~~RDHAP owner or provider with questions, concerns, or emergency needs, and have their calls returned within four (4) calendar days?		☐YES	☐NO
14. If a live person is not available to answer calls, does the telephone line include a recorded message with information about whom to contact in case of a dental emergency after receiving dental hygiene services?		☐YES	☐NO
15. Will the RDHAP owner comply with all state and local laws and ordinances regarding business licensing and operations?		☐YES	☐NO
16. Will the ~~physical facility~~RDHAP owner obtain and maintain all state and local licenses and permits necessary to provide the dental hygiene services being rendered by the applicant or provider at the physical facility including a local or		☐YES*	☐NO

county business license, a fictitious name permit as provided in BPC section 1962 if applicable, and/or a seller's permit if a permit is required under the Sales and Use Tax Law, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code? *A copy of each current license and permit shall be submitted with the application to include a local or county business license, a county building permit, a fictitious name permit as provided in Section 1962 of the BPC, and/or a seller's permit if a permit is required under the Sales and Use TaxLaw, Part 1 (sections 6001 through 6024) of Division 2 of the Revenue and Taxation Code. **Provide copies and label as Exhibit 3.**			
17. Does the physical facility's radiographic operatory comply with California Radiation Control Regulations (Cal. Code Regs., tit. 17, Div. 1, Ch.5, Subchapter 4, §§30100 through 30395)? *Not applicable to Physical Facility to Maintain Portable Equipment Registration or Renewal. If registering or renewing registration of a physical facility to maintain portable equipment check ~~this~~the "N/A" box.~~: ☐ N/A~~ *If the RDHAP does not provide radiographic services, check the "N/A" box.	☐YES	☐NO	☐N/A*
18. The RDHAP owner acknowledges receiving notice that the physical facility must maintain all dental hygiene patient treatment records and communications relating to the care and treatment of the patient following the discharge of a patient a minimum of seven years (see 16 CCR section 1116.5 for the minimum physical facility operating standards).	☐YES	☐NO	
19. ~~Does the physical facility's owner~~Will the RDHAP owner and providers use infection control equipment and follow infection control procedures according to the requirements of 16 CCR section 1005?	☐YES	☐NO	
20. ~~Does the physical facility~~Will the RDHAP owner and providers comply with HIPAA's security standards in Subpart C of Part 164, 45 C.F.R. §§164.302 through 164.31, with respect to the patient's "Protected Health Information (PHI)"? For the purposes of this question, PHI, as defined in section 1320d of Title 42 of the United States Code, includes a patient's medical history, or dental history, which is a written record of the patient's personal health history that provides information about allergies, illnesses, surgeries, immunizations, and results of physical exams and tests.	☐YES	☐NO	
21. Is the physical facility readily accessible to and usable by individuals with disabilities pursuant to the federal Americans with Disabilities Act of 1990(ADA)(42 U.S.C. §§12101 through 12212), in accordance with the ADA's implementing rules under 28 C.F.R Part 36 and Subparts A-D of Part 36? *Not applicable to Physical Facility to Maintain Portable Equipment	☒YES	☐NO	☐N/A*

PHYSICAL FACILITYRDHAP OWNER REQUIREMENTS			
Registration or Renewal. If registering or renewing registration of a physical facility to maintain portable equipment check thisthe "N/A" box.: ☐ N/A			
22. Does the physical facility have access to a sufficient water supply to meet patients' health and safety needs at all times, including hot water? *Water quality shall meet guidelines set forth in the "Guidelines for Infection Control in Dental Health-Care Settings – 2003" from the Centers for Disease Control and Prevention, in addition to the "Safe Drinking Water Act." (42 U.S.C. §§300f through 300j-27.)?		☐YES	☐NO

PHYSICAL FACILITYRDHAP OWNER REQUIREMENTS			
23. Does the physical facility have toilet facilities within the dental hygiene facility available to staff and the public? *Not applicable to Physical Facility to Maintain Portable Equipment Registration or Renewal. If registering or renewing registration of a physical facility to maintain portable equipment check the "N/A" box.	☐YES	☐NO	☐N/A*
24. Does the physical facility have a covered galvanized, stainless steel, or other noncorrosive metal, heavy duty puncture-resistant and leak-proof container for deposit of refuse and waste materials?		☐YES	☐NO
25. Does the physical facility have a working Automated External Defibrillator (AED)? *Not applicable to Physical Facility to Maintain Portable Equipment Registration or Renewal. If registering or renewing registration of a physical facility to maintain portable equipment check thisthe "N/A" box.: ☐ N/A	☐YES	☐NO	☐N/A*
26. If an RDHAP administers local anesthesia or performs soft tissue curettage pursuant to 16 CCR section 1118, doesDoes the physical facility have a self-contained, portable emergency oxygen unit with administration equipment (wheeled cart with oxygen cylinder, variable regulator, demand valve system, supplemental adult and child oxygen masks, hoses, and nasal cannulas) to assist with administration of basic life support? *If registering or renewing: 1) a Physical Facility to Maintain Portable Equipment; or 2) a Physical Facility and the RDHAP ***does not*** administer local anesthesia or perform soft tissue curettage pursuant to 16 CCR section 1118, check the "N/A" box.	☐YES	☐NO	☐N/A*
27. Have you reviewed BPC sections BPC 1926, 1926.01, 1926.05, 1926.3, 1926.4, and 1944, and 16 CCR sections 1116.5, and 1117, and 1118? Please be advised that failure to comply with these provisions is grounds for denial or revocation of the registration.		☐YES	☐NO

REGISTRATION CERTIFICATION

I hereby certify under penalty of perjury under the laws of the State of California that all licensed persons practicing at the location designated in the registration hold valid licenses and no charges of unprofessional conduct are pending against any person practicing at that location [BPC section 1962(b)(4)].

I hereby certify under penalty of perjury under the laws of the State of California that I have read the questions in the foregoing registration and that all information, statements, attachments, and representations provided by me in this registration are true and correct. By submitting the registration and signing below, I am granting permission to the Board or its assignees and agents to verify the information provided and to perform any investigation pertaining to the information I have provided as the Board deems necessary.

NOTICE: FALSIFICATION OR MISREPRESENTATION OF ANY ITEM OR RESPONSE ON THIS REGISTRATION OR ANY ATTACHMENT HERETO IS GROUNDS FOR DENYING OR REVOKING THE REGISTRATION.

REGISTRANT SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____

NOTICES

The Dental Hygiene Board of California of the Department of Consumer Affairs collects the personal information requested on this form as authorized by Business and Professions Code Sections 1905, 1926.3, and 1926.4, and California Code of Regulations, Title 16, Section 1116.5. The Dental Hygiene Board of California uses this information principally to identify and evaluate applicants for registration and to enforce licensing standards set by law and regulation.

MANDATORY SUBMISSION:
Submission of the requested information is mandatory. The Dental Hygiene Board of California cannot consider your registration unless you provide all the requested information.

ACCESS TO PERSONAL INFORMATION:
You may review the records maintained by the Dental Hygiene Board of California that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

POSSIBLE DISCLOSURE OF PERSONAL INFORMATION:
We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in the following circumstances:

- In response to a Public Records Act request (Government Code Sections 7920.000 through 7931.000), as allowed by the Information Practices Act (Civil Code Sections 1798 through 1798.78);
- To another government agency as required by state or federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

MANDATORY DISCLOSURE OF SOCIAL SECURITY NUMBERS:
Disclosure of your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is mandatory. Sections 30 and 31 of the Business and Professions Code authorize collection of your SSN or ITIN, which will be used exclusively for tax enforcement purposes, for investigation of tax evasion and violations of cash-pay reporting laws as set forth in Section 329 of the Unemployment Insurance Code,

for purposes of compliance with any judgement or order for family support in accordance with Section 17520 of the Family Code, for measurement of employment outcomes of students who participate in career technical education programs offered by the California Community Colleges, or for verification of license or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN or ITIN, your application for initial licensure will not be processed AND you may be reported to the Franchise Tax Board, which may assess a $100 penalty against you.

STATE TAX OBLIGATION NOTICE:
The California State Board of Equalization (BOE) and the California Franchise Tax Board (FTB) may share taxpayer information with the Board. You are required to pay your state tax obligation and your license may be suspended, or your renewal application denied if the state tax obligation is not paid, and your name appears on either the BOE or FTB certified list of top 500 tax delinquencies (Sections 31 and 494.5 of the California Business and Professions Code).

CONTACT INFORMATION:
For questions about this notice or access to your records, you may contact:

Dental Hygiene Board of California
2005 Evergreen Street, Suite1350
Sacramento, CA 95815
(916) 263-1978

INTERNAL OFFICE USE ONLY			
Date Received:	**Receipt #:** ☐ **Initial** ☐ **Renewal**		**$ Amount:**
File #:	**Registration #:**		**RDHAP Lic. Exp. Date:**
Date Issued:		**Analyst:**	

Letter A

From: Alexis Wisler
To: Petty, Adina@DCA; Lum, Anthony@DCA
Subject: Public Comment – Proposed Amendments to 16 CCR Sections 1116 and 1116.5
Date: Thursday, August 13, 2026 5:28:22 PM

This Message Is From an External Sender
WARNING:This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

Report Suspicious

Dear Dr. Pineschi-Petty and Mr. Lum,

A-1 I am writing to submit public comments regarding the proposed amendments to Title 16, California Code of Regulations, sections 1116 and 1116.5, concerning Mobile Dental Hygiene Clinics and RDHAP physical facility registration.

I am a California Registered Dental Hygienist currently working toward licensure as a Registered Dental Hygienist in Alternative Practice (RDHAP). I am very interested in developing an alternative-practice model that can improve access to preventive dental hygiene services for patients who may have difficulty obtaining care in a traditional dental office.

I support responsible regulations that protect patients, ensure infection-control standards, and establish clear accountability for RDHAP practices. At the same time, I respectfully urge the Board to ensure that the regulations clearly differentiate among a mobile dental hygiene clinic, a fixed RDHAP physical facility, and an RDHAP who transports portable equipment to authorized practice settings.

A-2 One of the key advantages of the RDHAP model is its ability to provide preventive dental hygiene services directly to underserved and access-limited populations. Regulations should safeguard the public while enabling RDHAPs to create practical and financially sustainable practice models.

I respectfully request that the Board consider whether any registration, facility, equipment, or administrative requirements in sections 1116 and 1116.5 could unintentionally pose unnecessary barriers for individual RDHAPs or small RDHAP practices providing portable services. Clear definitions and straightforward registration procedures would help new RDHAPs understand their obligations while maintaining strong protections for patients.

Thank you for allowing RDHAPs, applicants, and other stakeholders to participate in this regulatory process and for considering my comments.

Sincerely,

Alexis Wisler
Registered Dental Hygienist
RDHAP Applicant
California

Letter B

Date: August 14, 2026

To: Dental Hygiene Board of California
From: Susan McLearan, CDHA Co-Chair, Government Relations Council
Re: Comments on Proposed Amendments to Sections 1116 and 1116.5 of Title 16 of the California Code of Regulations—Mobile Dental Hygiene Clinics; Issuance of Approval and Registered Dental Hygienist in Alternative Practice, Physical Facility Registration

Dear Members of the Dental Hygiene Board of California:

Based on information regarding the registration form presented by Traci Napper at the July 17, 2026, meeting of the Dental Hygiene Board of California (DHBC), as well as comments received from RDHAPs and discussions on RDHAP social media pages, I believe there is sufficient confusion regarding the current form to warrant revisions before implementation.

These revisions would reduce ambiguity, minimize unnecessary duplication, and make the registration process easier for RDHAPs to understand and complete accurately.

Thank you for considering these comments.

Susan McLearan
CDHA Co-Chair, Government Relations Council

Purpose

The amended HAPR-01 form would benefit from several non-substantive clarifications regarding the terms **"Physical Facility," "Primary Physical Facility," "Physical Facility to Maintain Portable Equipment,"** and **"Additional Physical Facility."**

The goal of these recommendations is not to change the requirements of 16 CCR §1116.5 or the governing statutes, but to make the form easier for RDHAPs to complete correctly and to avoid confusion regarding registration and additional-office fees.

B-1 ## 1. "Physical Facility" Has More Than One Application

BPC §1926.3 establishes different circumstances involving an RDHAP physical facility.

Under §1926.3(a), an RDHAP must register their physical facility, or all physical facilities if the RDHAP has more than one pursuant to §1926.4. An RDHAP who does not have a physical facility must notify the Executive Officer.

Separately, §1926.3(b)(1) provides that an RDHAP who utilizes portable equipment must register the **physical facility where the portable equipment is maintained.**

16 CCR §1116.5(a)(8) further defines a "physical facility" as:

> "a fixed structure in which dental hygiene services are rendered or where portable equipment is maintained."

The breadth of this definition can create confusion on HAPR-01 because a fixed structure may qualify as a "physical facility" even though it is not an RDHAP-owned or operated office or place of practice.

Example

Consider an RDHAP who operates a portable practice and provides services at both:

- a skilled nursing facility; and
- a public elementary school.

If the RDHAP maintains portable equipment, such as an instrument sterilizer, at both locations, both locations could fall within the regulatory definition of a "physical facility." Dental hygiene services are rendered there and portable equipment is maintained there.

However, neither location necessarily represents a separate brick-and-mortar RDHAP office or "additional office" opened by the RDHAP.

The current form does not make this distinction sufficiently clear.

2. "Primary Physical Facility" Is Potentially Misleading

HAPR-01 currently provides the following choices:

- Physical Facility to Maintain Portable Equipment
- Primary Physical Facility
- Additional Physical Facility

The term **"Primary Physical Facility"** does not appear to be defined in the applicable RDHAP statutes or regulations.

The governing provisions instead use:

- **"physical facility"** — BPC §1926.3 and 16 CCR §1116.5;
- **"place of practice"** — BPC §1926.4; and
- **"additional office"** — BPC §1926.4.

BPC §1926.4 provides that when an RDHAP desires more than one **place of practice**, the RDHAP must obtain Board permission before **"opening the additional office."**

The apparent intent of "Primary Physical Facility" on HAPR-01 is to identify the RDHAP's first fixed office or place of practice where patients receive services, as distinguished from a location associated with a portable practice.

If that is the intended meaning, it should be clarified on the form rather than relying on the undefined term "primary."

Simply replacing "Primary Physical Facility" with **"Physical Facility Where Dental Hygiene Services Are Rendered"** would not solve the problem. An SNF or school where a portable RDHAP treats patients would also meet that description.

B-2

3. Portable Practice Locations Need to Be Clearly Distinguished From Additional Offices

This distinction becomes particularly important because HAPR-01 imposes fees for an **"Additional Physical Facility."**

The form currently states:

Registration Fee for Each Additional Physical Facility: $160
Biennial Renewal Fee for Each Additional Physical Facility: $250

BPC §1926.4, however, connects the additional fee requirement to an RDHAP who desires more than one **place of practice** and is **opening an additional office.**

Therefore, the form should not inadvertently suggest that every additional fixed structure where an RDHAP provides portable services or maintains portable equipment constitutes an "additional physical facility" subject to the additional-office fee.

Returning to the example above, an RDHAP treating patients and maintaining equipment at both an SNF and a school could reasonably read the current form and conclude that one location must be designated the "primary" physical facility and the other is an "additional" physical facility subject to the $160 registration and $250 renewal fees.

That does not appear to reflect the intended distinction between a portable RDHAP practice and an RDHAP opening an additional office/place of practice.

Suggested clarification

Rather than attempting to define "primary," the form could clarify the existing categories through brief explanatory parenthetical language, for example:

Primary Physical Facility (RDHAP office/place of practice)

Additional Physical Facility (additional RDHAP office/place of practice pursuant to BPC §1926.4)

Physical Facility to Maintain Portable Equipment (portable practice)

A short instruction could further clarify that a facility where an RDHAP provides portable services and/or maintains portable equipment is not, solely for that reason, an "additional physical facility" subject to the additional-office fee.

This approach retains the terminology already approved on the form while clarifying its intended application.

B-3

4. "Physical Facility to Maintain Portable Equipment" Is Also Unclear in the Address Section

The amended HAPR-01 contains an "Address of Physical Facility" section.

For Items 8–10, the instructions state:

"Not applicable to Physical Facility to Maintain Portable Equipment Registration or Renewal."

However, the form design can still give the impression that these are required fields.

This creates unnecessary uncertainty for an RDHAP registering a location solely because portable equipment is maintained there.

The form could make this clearer by visibly labeling Items 8–10:

Required only for Primary or Additional Physical Facility. Not required for Physical Facility to Maintain Portable Equipment.

This would clarify the existing requirement without changing its substance.

B-4

5. RDHAPs With No Physical Facility Need a Clear Method of Notification

BPC §1926.3(a) expressly provides:

> "If the registered dental hygienist in alternative practice does not have a physical facility, the registered dental hygienist in alternative practice shall notify the executive officer."

The statute establishes the obligation, but an RDHAP reviewing HAPR-01 may not know how that notification is supposed to occur.

The form provides an opportunity to make the process clear and consistent.

A checkbox could be added:

☐ **I do not have a physical facility and am notifying the Executive Officer pursuant to BPC §1926.3(a).**

The form could then instruct the RDHAP to complete only:

- RDHAP Information;
- Address of Record/Mailing Address;
- signature; and

- date.

This would provide a uniform method for satisfying an existing statutory requirement rather than creating a new requirement.

B-5

6. Fee Language Should Track the "Additional Office" Requirement

The fee section may be one of the most important areas to clarify because misunderstanding it has a direct financial consequence.

Instead of:

REGISTRATION FEE FOR EACH ADDITIONAL PHYSICAL FACILITY: $160

consider:

REGISTRATION FEE FOR EACH ADDITIONAL PHYSICAL FACILITY THAT IS AN ADDITIONAL OFFICE/PLACE OF PRACTICE PURSUANT TO BPC §1926.4: $160

Similarly:

BIENNIAL RENEWAL FEE FOR EACH ADDITIONAL PHYSICAL FACILITY THAT IS AN ADDITIONAL OFFICE/PLACE OF PRACTICE PURSUANT TO BPC §1926.4: $250

Alternatively, if shorter wording is preferred for the form:

ADDITIONAL OFFICE/PLACE OF PRACTICE REGISTRATION FEE: $160

ADDITIONAL OFFICE/PLACE OF PRACTICE BIENNIAL RENEWAL FEE: $250

This terminology more clearly connects the fee to the statutory concept that generates it and reduces the likelihood that a portable RDHAP will interpret each SNF, school, residential facility, or other location where equipment is maintained as a separately fee-bearing office.

Recommended Approach

The form should preserve its existing registration categories while adding brief explanatory language that distinguishes an RDHAP **office/place of practice** from a **physical facility associated with a portable practice**.

The most important clarification is:

> **A physical facility where portable dental hygiene services are provided or portable equipment is maintained should not be identified as an "Additional Physical Facility" solely because the RDHAP provides services or maintains equipment at more than one such location. "Additional Physical Facility" should clearly refer to an additional RDHAP office/place of practice subject to BPC §1926.4.**

This distinction would make the form easier to understand without changing the underlying statutory or regulatory requirements.

B-6 Proposed HAPR-01 Categories

☐ **Physical Facility to Maintain Portable Equipment (Portable Practice)**

☐ **Primary Physical Facility (RDHAP Office/Place of Practice)**

☐ **Additional Physical Facility (Additional RDHAP Office/Place of Practice pursuant to BPC §1926.4)**

☐ **No Physical Facility — Notification to Executive Officer pursuant to BPC §1926.3(a)**

A brief explanatory note could then state:

> **For purposes of this form, an "Additional Physical Facility" refers to an additional RDHAP office/place of practice pursuant to BPC §1926.4. A location where an RDHAP provides portable services or maintains portable equipment is not considered an additional office solely because services are provided or equipment is maintained at that location.**

Letter C

August 27, 2026

Joanne Pacheco, RDH, President
Dental Hygiene Board of California
CC: Adina Pineschi-Petty, DDS & Anthony Lum
RE: Mobile Dental Hygiene Clinics

Dear President Pacheco,

On behalf of our 27,000 member-dentists, the California Dental Association (CDA) appreciates the opportunity to review and comment on the proposed mobile dental hygiene clinic (MDHC) regulations. CDA appreciates the careful attention to edits to align with statute and clarify roles and responsibilities or a dental hygienist in MDHCs. While CDA supports some amendments to the proposed language that create the ability for the Dental Hygiene Board of California to appropriately regulate MDHCs, CDA also recommends several clarifications and additions would enhance patient safety.

CDA-Supported Changes to Regulatory Package

C-1 Dental Hygiene Diagnosis

CDA supports removing the term dental hygiene diagnosis, and rather, use the term "care plan". "Diagnosis" is still contrary to statute, and Board action to delete "diagnosis(es)" ensures compliance with statutory authority. CDA agrees with the recommended edit to add "care plan" to align with both BPC section 1908(a) and 16 CCR section 1103(k)(3), thereby capturing the intent of a "dental hygiene care plan" and the "dental hygiene process of care." CDA also encourages the DHBC to monitor the CODA regulations, as they do not have "dental hygiene diagnosis" within their accreditation standards for Dental Hygiene programs.

Dental Health Professional Shortage Area

CDA appreciates the incorporation of language to clarify that the physical facility must be in a dental health professional shortage area (DHPSA). We support the amendment to 1116.5(a)(8) to describe a physical facility where services are rendered must be located in a DHPSA as certified by the Department of Health Care Access and Information, pursuant to BPC sections 1926, 1926.01, and 1926.05.

CDA's Remaining Concerns

To ensure clear communication with patients, upfront disclosures, and appropriate consent are equal to those required in brick-and-mortar settings, CDA requests the following concerns be addressed to fully support DHBCs proposed regulatory language for MDHCs:

C-2 Consent for Services

The proposed regulations do not explicitly call for RDHAPs operating an MDHC to obtain patient consent for services. RDHAPs are required by the code of ethics to obtain patient consent for

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treatment, and this language should be clarified in MDHC regulations. CDA recommends that existing approaches to obtaining consent in non-bricks-and-mortar settings should be appropriately applied to MDHCs. Collecting information about when a patient last received care from a dentist and requesting the dentist's contact information should be required. This not only supports the RDHAP's collaboration with the patient's dental home to coordinate comprehensive dental treatment, but assists in obtaining a complete health history and maintaining an accurate dental treatment record.

For these reasons, CDA recommends including the following language in this regulation package:

1116.5(h) Consent for Services.
(1) No dental hygiene services shall be performed on a patient without consent. If a patient is unable to provide direct consent, such as a minor or person with special needs, a signed consent form must be obtained from the patient's parent or legal representative.
(2) Consent forms shall include a request for the patient's dentist contact information and date of last visit, if known.

C-3

Information Sheet

Previous comments requested that RDHAP's provide patients with an information sheet reflecting the services provided during the visit, the limitation of the services that RDHAPs can provide, a recommendation to receive a comprehensive examination by a licensed dentist and contact information for follow-up services or dental emergencies. Minimum operating requirements [1116.5(c)(A)] have a written procedure for emergency follow-up care for patients treated at the physical facility. As a result, CDA recommends the following be added to 1116.5(c)(A): During or at the conclusion of each patient's visit to the mobile dental unit, the patient shall be provided with an information sheet. The information sheet as required herein shall include the following:

(A) Pertinent contact information for the mobile dental unit;
(B) Name and license number of the RDHAP and other licensed dental staff who provided services;
(C) A description of the treatment rendered, including CDT billed service codes and fees associated with treatment, and tooth numbers when appropriate; and
(D) A description of any dental needs observed during a screening, assessment, or other form of visual inspection; and
(E) A statement explaining that the dental hygiene services provided by the RDHAP are limited and do not include a comprehensive dental examination and advising the patient to seek a comprehensive dental examination from a dentist.
(F) RDHAPs shall meet their responsibility for ensuring care to patients of record by arranging for proper follow-up care for treatment provided and referring for care identified but not provided to a geographically accessible location for dental services pursuant to subsection (d).
(G) If applicable, instructions on how to pay for services rendered.

(H) Language, including the board's contact information, notifying patients of their right to contact the board should the patient have a problem they are unable to resolve with the operator or the mobile dental unit and/or the RDHAP who provided the services.
(I) Notification of the name and contact information for the dentist who has authorized patient treatment, if applicable, when that treatment is provided by an RDHAP.

CDA appreciates the opportunity to share these recommendations with DHBC. Addressing concerns regarding patient history, patient consent, and follow-up care will protect patient safety and ensure patients are fully educated about the treatment they receive.

Sincerely,



Tooka Zokaie
Sr. Health Policy Analyst
California Dental Association



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 4.

Status of Dental Hygiene Board of California (DHBC) Regulatory Packages.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
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MEMORANDUM

DATE	November 13, 2026
TO	Legislation and Regulatory Committee Dental Hygiene Board of California
FROM	Adina A. Pineschi-Petty DDS Education, Legislative, and Regulatory Specialist
SUBJECT	**LEG REG 4: Status of Dental Hygiene Board of California (DHBC) Regulatory Packages**

Rulemaking File	Board Approved Language	Package Assembly Progress	Formal DCA Review	DCA Director Review	Agency Review	OAL Notice Filed/ Published	OAL Final Filed	Submitted to Secretary of State/ Effective Date
1119 (Formerly 1115) Retired License	1.29.19	X	X	X	X	5.28.21/ 6.11.21	4.11.22	11.16.22/ 1.1.23
1109 RDM/ITR	1.29.19	X	X	X	X	7.21.20/ 7.31.20	4.16.21	9.27.21/ 1.1.22
1103 Definitions	5.29.20	X	X	X	X	3.26.21/ 4.9.21	8.2.21	11.1.21/ 1.1.22
1105 Requirements for DHEPs	11.23.19	X	X	X	X	7.27.21/ 8.6.21	12.13.21	1.25.22/ 4.1.22
1104.3 Inspections, Cite, Fine, and Probation for DHEPs	5.29.20 modified text 7.23.22 modified text 2.4.23	X	X	X	X	9.6.22/ 9.16.22	11.22.22	3.27.23/ 7.1.23
1105.2 DHEP Required Curriculum	5.29.20	X	X	X	X	11.2.21/ 11.12.21	2.16.22	3.30.22/ 7.1.22
1138.1 Unprofessional Conduct	11.21.20 Modified text 3.19.22	X	X	X	X	9.14.21/ 9.24.21	12.16.21	5.16.22/ 7.1.22

Rulemaking File	Board Approved Language	Package Assembly Progress	Formal DCA Review	DCA Director Review	Agency Review	OAL Notice Filed/ Published	OAL Final Filed	Submitted to Secretary of State/ Effective Date
1117 RDHAP/ Dentist Relationship	8.29.20	X	X	X	X	10.18.21/ 10.29.21	2.16.22	4.1.22/ 7.1.22
1118 RDHAP STC & LA	7.17.21	X	X	X	X	11.2.21/ 11.12.21	12.30.21	2.10.22/ 4.1.22
1104.1 Process for Approval of New RDH Program	7.23.22 Due to SB 534	X	X	X	X	10.10.22 10.21.22	12.16.22	2.1.23/ 4.1.23
1114 Licensure: Veterans and Military Spouses	11.19.22 Due to AB 107 Modified Text 11.18.23	X	X	X	X	4.11.23/ 4.21.23	8.29.23 Withdrawn 10.10.23 Resubmitted 12.6.23	1.17.24/ 4.1.24
1116 Mobile Dental Hygiene Clinics	11.19.22 Due to SB 534	X	X	X	X	1.23.24/ 2.2.24	10.10.24	11.22.24/ 1.1.25
1116.5 RDHAP Practice Registration	11.19.22 Due to SB 534	X	X	X	X	1.23.24/ 2.2.24	10.10.24	11.22.24/ 1.1.25
1105(b)(4) Faculty to Student Ratio	7.22.23	X	X	X	X	12.28.23 1.12.24	4.18.24	5.29.24/ 7.1.24
1105.4 Appeals Process and Reinstatement of Withdrawn DHEPs	11.18.23 Modified Text 7.19.24	X	X	X	X	10.7.24 10.18.24	12.11.24	1.27.25 4.1.25
1105.2(e) Periodontal Classifications	11.16.24	On hold.						
1116 and 1116.5 RDHAP MDHC and Physical Facilities	3.22.25 5.27.25 11.8.25	X	X	X	X	8.3.26/ 8.14.26		

Rulemaking File	Board Approved Language	Package Assembly Progress	Formal DCA Review	DCA Director Review	Agency Review	OAL Notice Filed/ Published	OAL Final Filed	Submitted to Secretary of State/ Effective Date
1105.21, 1105.22, and 1128 RDHAP/ RDHEF EDU Programs (Formerly DBC sections 1073.1, 1073.3, and 1082.2.)	In process.							
1111, 1111.5, 1112, 1112,5, 1113, 1113.5, 1115 RDH/AP/EF Licensure	In process.							

Section 100	Submitted to Legal	OAL Submission	OAL Approved/ SoS Effective Date
Board Reference from DHCC to DHBC Division 11 Title and Sections 1100, 1101, 1104.2, 1105.1, 1105.3, 1105.4, 1106, 1108, 1122, 1124, 1126, 1127, 1131, 1138, 1139, 1142, 1143	X	3.30.22	5.10.22
1104.1 Process for Approval of New RDH Program Non-substantive changes	X	4.28.22	6.6.22
DBC sections 1073.1, 1073.3, and 1082.2.	X	10.23.23	12.6.23 Withdrawn due to need for regular rulemaking

Processing Times

- A rulemaking file must be completed within one year of the publication date of the Notice of Proposed Action. The Office of Administrative Law (OAL) issues the Notice File Number upon filing the Notice of Proposed Action.
- The DCA is allowed thirty calendar days to review the rulemaking file prior to submission to the Department of Finance (DOF).
- The DOF is allowed thirty days to review the rulemaking file prior to submission to the OAL.
- The OAL is allowed thirty working days to review the file and determine whether to approve or disapprove it. The OAL issues the Regulatory Action Number upon submission of the rulemaking file for final review.

- Pursuant to Government Code section 11343.4, as amended by Section 2 of Chapter 295 of the Statutes of 2012 (SB 1099, Wright), regulation effective dates are as follows:

Date Filed with the Secretary of State	**Effective Date**
September 1st – November 30th	January 1st
December 1st – February 29th	April 1st
March 1st – May 31st	July 1st
June 1st – August 31st	October 1st

DHBC
Dental Hygiene
Board of California

Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 5.

Update on 2025-2026 Legislative Bills of Interest and Legislative Calendar.

a) Assembly Bill (AB) 1952 Berman. Dentistry: dental hygienists: licensure.
b) AB 350 Bonta. Health care coverage: fluoride treatments.
c) AB 2140 Johnson. Healing arts: reports: claims against licensees.
d) Senate Bill (SB 1311) Wahab. Dentistry: dental assistants: infection control course.
e) AB 1629 Haney. Dental Coverage.
f) AB 1670 Arambula. Medi-Cal: dental care.
g) AB 1717 Castillo. Medi-Cal dental reimbursement: house/extended care facility call.
h) AB 1760 Arambula. Dentistry
i) AB 1811 Rogers. Health Professionals.
j) AB 2029 Sharp-Collins. Dentistry
k) AB 2625 Solache. Dental Practice Act: foreign dental schools.
l) AB 2694 Alvarez. Public postsecondary education: community colleges: statewide baccalaureate degree program.
m) SB 1391 Wahab. Department of Consumer Affairs: retired category licenses.
n) SB 1416 Wahab. Physicians and surgeons: dentists: unprofessional conduct.
o) Tentative 2026 Legislative Calendar.

DHBC Dental Hygiene Board of California
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DATE	November 13, 2026
TO	Legislation and Regulatory Committee Dental Hygiene Board of California
FROM	Adina A. Pineschi-Petty DDS Education, Legislative, and Regulatory Specialist
SUBJECT	**LEG REG 5: 2025-2026 Legislative Bills of Interest as of October 30, 2026.**

MEMORANDUM

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
2026 Bills of Primary Interest to the Board			
AB 1952 Berman **Sponsor(s):** California Dental Association	**Dentistry: dental hygienists: licensure.** This bill would **require** the Dental Hygiene Board of California **to license as a registered dental hygienist an applicant who has successfully completed the dental hygiene examination given by the American Board of Dental Examiners and submitted an application and appropriate fees.** The bill would require the board to certify an individual as eligible to take that dental hygiene examination if they have earned a degree from a nonaccredited dental school ~~equivalent to a doctor of dental surgery or doctor of dental medicine degree~~ and they meet certain other requirements**.** Among those requirements, the bill would include submission of verification of their degree's equivalence, as specified, satisfactory completion of specified examinations within the 5 years preceding application, and satisfactory completion of certain coursework, including, among other things, a board-approved course in soft-tissue curettage, local anesthesia, and nitrous oxide-oxygen analgesia, within the 2 years preceding application. The bill would deem an individual eligible to enroll in a board-approved course in soft-tissue curettage, local anesthesia, and nitrous oxide-oxygen analgesia if they have otherwise satisfied certain	4.22.26 Amended Assembly. 5.14.26 Assembly. Held under submission. Failed passage and is dead.	Oppose unless amended. Letter sent 3.20.26.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	verification, examination, and coursework requirements, as specified.		
AB 350 Bonta **Sponsors:** Children Now and California Dental Association	**Health care coverage: fluoride treatments.** Requires a health plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2026, to provide coverage for the application of fluoride varnish in the primary care setting for children under 21 years of age, without a deductible, co-insurance, copayment or other cost-sharing requirement for that coverage. Clarifies that Medi-Cal coverage of fluoride treatment is for children under 21 years of age rather than 17 years of age and specifies that this coverage includes the application of fluoride varnish in the primary care setting and expands which staff may apply the fluoride varnish, as specified	Chapter 500 Approved by Governor 9.27.26. Filed with Secretary of State 9.27.26	Support. Letter sent 4.7.25.
AB 2140 Johnson **Sponsor(s):** No sponsor at this time.	**Healing arts: reports: claims against licensees**. Existing law makes failure of a licensee of the Medical Board of California, the Podiatric Medical Board of California, the Board of Psychology, the Dental Board of California, the **Dental Hygiene Board of California**, the Osteopathic Medical Board of California, the State Board of Chiropractic Examiners, the Board of Registered Nursing, the Board of Vocational Nursing and Psychiatric Technicians of the State of California, the State Board of Optometry, the Veterinary Medical Board, the Board of Behavioral Sciences, the Physical Therapy Board of California, the California State Board of Pharmacy, the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board, the California Board of Occupational Therapy, the Acupuncture Board, or the Physician Assistant Board, a claimant, or their counsel to report a settlement, judgment, or arbitration award over $3,000 of a claim or action for damages for death or personal injury caused by	4.10.26 Hearing cancelled at the request of author. Failed passage and is dead.	Watch.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	negligence, error or omission in practice, or by the unauthorized rendering of professional services, by a person who holds a license, certificate, or other similar authority from one of those boards, who does not possess professional liability insurance as to the claim, within 30 days to the agency that issued the license, certificate, or similar authority, punishable by a fine of not less than $50 or more than $500, as specified. **This bill would increase the minimum fine for a violation of that provision to $100.**		
SB 1311 Wahab **Sponsor(s):** Author	**Licensed Professions.** Existing law requires an unlicensed dental assistant not enrolled in a board-approved program for registered dental assisting or an alternative dental assisting program to complete an infection control certification course, as specified. In this regard, existing law allows the unlicensed dental assistant to complete a board-approved 8-hour course, with 6 hours being didactic instruction and 2 hours being laboratory instruction, as specified. **This bill would allow an unlicensed dental assistant to complete the Dental Assisting National Board's Infection Control examination instead of completing an infection control course.** The bill would also revise the requirements for those infection control courses **to allow an unlicensed dental assistant to complete one of specified courses approved by the board or a course with at least 4 hours of didactic instruction and at least 2 hours of laboratory instruction using video or a series of video training tools, as specified.** This bill would require the employer to ensure the dental assistant has successfully completed a course or examination in infection control, as described above, before performing any basic	Chapter 232 Approved by Governor 9.14.26. Filed with Secretary of State 9.14.26.	Oppose unless amended. Letter sent 4.6.26.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	supportive dental procedures involving potential exposure to blood, saliva, or other potentially infectious material. *Board concerned with no “in house” oversite supervision ensuring unlicensed DA is competent.		
2025-2026 Bills of Interest			
AB 1629 Haney **Sponsor(s):** California Dental Association	**Dental Coverage.** Existing law provides for the regulation of health insurers by the Department of Insurance, prohibits a contract between a plan or insurer and a dentist from requiring a dentist to accept an amount set by the plan or insurer as payment for dental care services provided to an enrollee or insured that are not covered services under the enrollee’s contract or the insured’s policy, and requires a plan or insurer to make specified disclosures to an enrollee or insured regarding noncovered dental services. This bill would require a plan or insurer, including a specialized plan or insurer, covering dental services, upon written and dated consent of the enrollee or insured, to pay a noncontracting dental provider directly for covered services rendered to the enrollee or insured in accordance with the benefit provided in the contract or policy, prohibit a noncontracting dental provider accepting assignment of benefits from charging an enrollee or insured, prior to the plan payment, more than an estimate of the enrollee’s or the insured’s cost sharing for the treatment or a deposit that approximates that cost share, and require a noncontracting dental provider to make specified disclosures to an enrollee or insured before accepting an assignment of benefits.	Chapter 535 Approved by Governor 9.27.26. Filed with Secretary of State 9.27.26	Support. Letter sent 5.27.26.
AB 1670 Arambula **Sponsor(s):**	**Medi-Cal: dental care.** This bill would make behavior management and desensitization services without an accompanying dental procedure covered benefits under the Medi-	5.14.26 Assembly. Held under submission.	Watch.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
Association of Regional Center Agencies.	Cal program, subject to utilization controls, when a patient's physical, behavioral, developmental, or emotional condition requires significant extra time, attention, or personnel, or requires such services preceding a dental visit, respectively, in order to safely deliver dental care. The bill would condition implementation of these provisions on the availability of federal financial participation and any necessary federal approvals having been obtained. The bill would, notwithstanding any other law, authorize the department to implement, interpret, or make specific these provisions by means of all-county letters, plan letters, plan or provider bulletins, or similar instructions without taking any further regulatory action.	Failed passage and is dead.	
AB 1717 Castillo **Sponsor(s):** Tom Lovinger, CEO of Golden Age Dental Care	**Medi-Cal dental reimbursement: house/extended care facility call.** Under the Medi-Cal Dental Provider Handbook, the maximum allowance for a house/extended care facility call under a specified billing code is $20. This bill would require the State Department of Health Care Services to increase the Medi-Cal reimbursement base rate for a house/extended care facility call in order to reflect the reasonable travel costs for purposes of delivering dental services in the patient's private residence or applicable facility instead of the location of the dental provider. The bill would require that the rate be adjusted to a minimum of $120 per patient per date of service, with subsequent readjustments every 2 years to account for inflation and provider cost data. The bill would require the department, every 2 years, to report to the Legislature about the impact of the rate adjustments on access, utilization, and reductions in emergency department visits for dental conditions.	5.14.26 Assembly. Held under submission. Failed passage and is dead.	Watch.
AB 1760 Arambula **Sponsor(s):**	**Dentistry.**	Chapter 167	Watch.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
Dental Board of California	Existing law, the Dental Practice Act, establishes the Dental Board of California to license and regulate the practice of dentistry. This bill would delete the requirement to furnish satisfactory evidence of financial responsibility or liability insurance for certain dental patient injuries. This bill would update cross-references to clarify that an applicant is not prohibited from taking an examination for licensure because their foreign dental school program was exempt from the accreditation requirement. This bill would revise the subject reexamination exemption to instead require a grading of pass. The bill would remove the above-described education requirement for reexamination, and would instead require an applicant to retake the entire examination after 3 failed attempts at a section of the examination. This bill would revise and recast that credential requirement to clarify that 5,000 hours of clinical practice is required of an applicant who has been in active clinical practice out of state or an applicant who has been a full-time faculty member, as described above. For an applicant whose credentials are based on engagement in nonclinical practice for an out-of-state public health program, as described above, the bill would instead require the applicant to have been engaged in that practice for a minimum average of 40 hours per week, as specified. The bill would require each of the 3 above-described types of applicants to submit certain documentation verifying compliance with the applicable requirements described above. By expanding the scope of the crime of perjury, the bill would impose a state-mandated local program. This bill would revise that provision by removing the requirement that the dental education program be approved by the board, and instead specifying that the program be accredited by CODA	Approved by Governor 8.31.26. Filed with Secretary of State 8.31.26.	

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	Existing law requires a dentist to possess an elective facial cosmetic surgery permit in order to perform specified procedures. This bill would delete the above-described provisions relating to the limitations that may be imposed on that permit, and would instead authorize the committee to recommend that an applicant who has applied for a permit to perform both categories of procedures be issued a permit limited to one category if the committee is not satisfied that the applicant has the training or competence to perform both categories of procedures. The bill would specify that the committee serves at the pleasure of the board, and would authorize the board to remove any member of the committee for continued neglect of duties required by law, incompetence, or unprofessional or dishonorable conduct. The bill would authorize the board to convene in closed session to consider any evidence relating to the removal of a member of the committee, as specified. This bill would add polishing and contouring existing amalgam restorations to that list of authorized duties for a registered dental assistant in extended functions and make conforming changes. This bill would revise the list of procedures required to be covered by a course for a registered dental assistant in extended functions. Specifically, the bill would remove taking final impressions for permanent indirect restorations, would add performing post, core, and build-up procedures in conjunction with direct and indirect restorations, and would add polishing and contouring existing amalgam restorations. Existing regulations require a dental assisting program or course to meet certain criteria to secure and maintain board approval. This bill would modify the requirements for courses in radiation safety, and would codify those regulations with certain modifications, including requiring that provisional approval for a course in radiation safety expire after		

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	one year or upon subsequent board approval or denial, whichever occurs first, and that the board provide, in writing, the specific reasons for provisionally approving or denying a course to the course director within 90 days of that decision. The bill would authorize the board to, in lieu of conducting its own investigation for a course in radiation safety, accept the findings of a commission or accreditation agency approved by the board, or its designee, and adopt those findings as its own. This bill would authorize didactic instruction to be provided through distance learning modalities and would require providers to meet specified requirements, including providing technological assistance to students, as needed, to participate in instruction, and requiring didactic instruction to be completed before a student participates in laboratory instruction. The bill would require the course provider to, among other things, notify prospective students of the computer or communications technology necessary to participate in didactic and laboratory instruction.		
AB 1811 Rogers Sponsor(s): Association of California Healthcare Districts and Rural County Representatives of California	**Health professionals.** This bill, until January 1, 2035, would define the term “health professional shortage area” to mean (1) an area determined by the Department of Health Care Access and Information to have a shortage of health professionals, (2) a health professional shortage area designated or recognized by the United States Department of Health and Human Services, or (3) an area designated or recognized as a health professional shortage area by the United States Department of Health and Human Services on January 1, 2025, regardless of whether that area remains designated or recognized by the United States Department of Health and Human Services as a health professional shortage area. For an area determined to be a health professional shortage area by the Department of Health Care Access and Information, the bill would authorize the department to revoke that designation.	Chapter 549 Approved by Governor 9.27.26. Filed with Secretary of State 9.27.26	Support. Letter sent 4.6.26.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	This bill would require the workforce data for future workforce planning to be collected or requested by boards at the time a license or registration is issued. The bill would require the information collected or requested by boards to also include, among other things, the hours worked in inpatient care, hours worked in outpatient care, and whether the licensee or registrant offers a formal sliding fee scale. *The bill would require each board to provide licensee and registrant data on a monthly basis.*		
AB 2029 Sharp-Collins **Sponsor(s):** California Dental Association	**Dental Plan Portal.** This bill would require a dental plan or dental insurer to establish a dental portal accessible to a treating dental provider to provide information regarding an enrollee's contract or insured's policy, including the actual payment or reimbursement amounts for covered services. The bill would require the portal to provide accurate, real-time benefit eligibility and benefits information in a clear and understandable format, provide specified information about a corresponding payment, accept attachments in an electronic format, and be made available at no cost to contracted and noncontracted dental providers, among other requirements. Because a willful violation of these provisions relative to health care service plans would be a crime, this bill would impose a state-mandated local program	4.21.26 Hearing cancelled at the request of author. Failed passage and is dead.	Watch.
AB 2625 Solache **Sponsor(s):** Unknown at this time.	**Dental Practice Act: foreign dental schools.** Existing law, the Dental Practice Act, provides for the licensure and regulation of dentists by the Dental Board of California within the Department of Consumer Affairs. Existing law requires an applicant for licensure to meet specified requirements, including, among others, furnishing satisfactory evidence of having graduated from a dental college approved by the board or by the	3.9.26 Assembly Business and Professions. Failed passage and is dead.	Watch.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	Commission on Dental Accreditation of the American Dental Association (CODA). Prior law provided for the approval of foreign dental schools by the board. Beginning January 1, 2024, existing law requires foreign dental schools seeking approval by the board to complete the international consultative and accreditation process with CODA or a comparable accrediting body approved by the board. Notwithstanding that requirement, existing law maintained the approval of any foreign dental schools whose program was renewed by the board prior to January 1, 2020, through any date between January 1, 2024, and June 30, 2026, through that renewal date. This bill would, instead, maintain the approval of a foreign dental school whose program was approved by the board prior to January 1, 2020, if that school applied for accreditation by an accrediting body, or CODA, on or before January 31, 2026, while that accreditation process is ongoing, as specified. The bill would require the foreign dental school to, commencing with January 1, 2027, and every 6 months thereafter, provide an update to the board on the status of the foreign dental school's accreditation application. The bill would authorize the board to terminate the maintained approval of a foreign dental school for failure to submit that update, as specified. This bill contains other related provisions and other existing laws.		
AB 2694 Alvarez Pacheco **Sponsor(s):** Author.	**Public postsecondary education: community colleges: statewide baccalaureate degree program.** Existing law authorizes the Board of Governors of the California Community Colleges, in consultation with the California State University and the University of California, to authorize the establishment of community college district baccalaureate degree programs, as provided. Existing law prohibits a community college district baccalaureate degree program from offering a	Chapter 308 Approved by Governor 9.18.26. Filed with Secretary of State 9.18.26.	Support. Letter sent 5.27.26.

2026 Legislation	Topic	Status	DHBC Position on 7.18.2026
	baccalaureate degree program or program curricula already offered by the California State University or the University of California. This bill would instead prohibit a community college district baccalaureate degree program from offering a baccalaureate degree program or program curricula substantially similar to a baccalaureate degree program offered by the California State University or the University of California within the geographic region served by the community college district, except where the California State University or the University of California does not enroll students from that geographic region in the same degree pathway or where documented unmet regional workforce needs justify the program.		
SB 1391 Wahab **Sponsor(s):** Author	**Department of Consumer Affairs: retired category licenses.** Existing law authorizes any of the boards within the department, except as specified, to establish by regulation a system for a retired category of license for persons who are not actively engaged in the practice of their profession or vocation. This bill would additionally require a board that offers a retired category of licensure to disclose that information on its internet website	6.30.26 Assembly Appropriations. Failed passage and is dead.	Support. Letter sent 5.27.26.
SB 1416 Wahab **Sponsor(s):** Author	**Physicians and surgeons: dentists: unprofessional conduct.** Existing law, including the Medical Practice Act and the Dental Practice Act, deem certain violations by licensees to be unprofessional conduct subject to discipline by the licensee's licensing board. This bill would reduce the duration for a physician and surgeon or dentist to refund a duplicate payment following patient request or patient notification to 21 days from 30 days.	6.30.26 Assembly Business and Professions. Failed passage and is dead.	Watch.

2026 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised September 29, 2025

JANUARY

S	M	T	W	TH	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

FEBRUARY

S	M	T	W	TH	F	S
1	2	3	4	5	6	7
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15	16	17	18	19	20	21
22	23	24	25	26	27	28

MARCH

S	M	T	W	TH	F	S
1	2	3	4	5	6	7
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15	16	17	18	19	20	21
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29	30	31				

APRIL

S	M	T	W	TH	F	S
			1	2	3	4
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26	27	28	29	30		

MAY

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3	4	5	6	7	8	9
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24	25	26	27	28	29	30
31						

*Holiday schedule subject to Senate Rules committee approval.

DEADLINES

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 5 **Legislature reconvenes** (J.R. 51(a)(4)).

Jan. 10 Budget must be submitted by Governor (Art. IV, Sec. 12 (a)).

Jan. 16 Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house in the odd-numbered year (J.R. 61(b)(1)).

Jan. 19 Martin Luther King, Jr. Day.

Jan. 23 Last day for any committee to hear and report to the **Floor** bills introduced in that house in the odd-numbered year (J.R. 61(b)(2)). Last day to **submit bill requests** to the Office of Legislative Counsel.

Jan. 31 Last day for each house **to pass bills introduced** in that house in the odd-numbered year (Art. IV, Sec. 10(c)), (J.R. 61(b)(3)).

Feb. 16 Presidents' Day.

Feb. 20 Last day for bills to be **introduced** (J.R. 61(b)(4)), (J.R. 54(a)).

Mar. 26 **Spring Recess** begins upon adjournment (J.R. 51(b)(1)).

Mar. 30 Cesar Chavez Day observed.

Apr. 6 Legislature reconvenes from **Spring Recess** (J.R. 51(b)(1)).

Apr. 24 Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

May 1 Last day for **policy committees** to hear and report to the Floor **non-fiscal bills** introduced in their house (J.R. 61(b)(6)).

May 8 Last day for **policy committees** to meet prior to June 1 (J.R. 61(b)(7)).

May 15 Last day for **fiscal committees** to hear and report to the Floor bills introduced in their house (J.R. 61 (b)(8)). Last day for **fiscal committees** to meet prior to June 1 (J.R. 61 (b)(9)).

May 25 Memorial Day.

May 26 – 29 Floor Session only. No committees, other than conference or Rules committees, may meet for any purpose (J.R. 61(b)(10)).

May 29 Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).

2026 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised September 29, 2025

JUNE						
S	M	T	W	TH	F	S
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14	15	16	17	18	19	20
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28	29	30				

JULY						
S	M	T	W	TH	F	S
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26	27	28	29	30	31	

AUGUST						
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23	24	25	26	27	28	29
30	31					

June 1 Committee meetings may resume (J.R. 61(b)(12)).

June 15 Budget Bill must be passed by **midnight** (Art. IV, Sec. 12(c)(3)).

June 25 Last day for a legislative measure to qualify for the Nov. 3 General Election ballot (Elections Code Sec. 9040).

July 2 Last day for **policy committees** to meet and report bills (J.R. 61(b)(13)). **Summer Recess** begins upon adjournment of session, provided Budget Bill has passed (J.R. 51(b)(2)).

July 3 Independence Day observed.

Aug. 3 Legislature reconvenes from **Summer Recess** (J.R. 51(b)(2)).

Aug. 14 Last day for **fiscal committees** to meet and report bills to the Floor (J.R. 61(b)(14)).

Aug. 17 – 31 **Floor Session only**. No committee, other than conference and Rules committees, may meet for any purpose (J.R. 61(b)(15)).

Aug. 21 Last day to **amend** on the Floor (J.R. 61(b)(16)).

Aug. 31 Last day for **each house to pass bills** (Art. IV, Sec. 10(c)), (J.R. 61(b)(17)). **Final recess** begins upon adjournment. (J.R. 51(b)(3)).

*Holiday schedule subject to Senate Rules committee approval.

IMPORTANT DATES OCCURRING DURING FINAL RECESS

2026

Sept. 30 Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor's possession on or after Sept. 1 (Art. IV, Sec. 10(b)(2)).

Nov. 3 General Election.

Nov. 30 Adjournment *sine die* at midnight (Art. IV, Sec. 3(a)).

Dec. 7 12 Noon convening of the 2027-28 Regular Session (Art. IV, Sec. 3(a)).

2027

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 5.

Discussion and Possible Action to Approve the July 17, 2026, Legislative and Regulatory Committee Meeting Minutes.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

Dental Hygiene Board of California
Legislative & Regulatory Committee
Meeting Minutes

DRAFT

Friday, July 17, 2026

DHBC Headquarters Building
2005 Evergreen Street
1st Floor Hearing Room
Sacramento, CA 95815

Legislative & Regulatory Committee Members Present:

Chair – Dr. Julie Elginer, Public Member
Committee Member – Joanne Pacheco, Registered Dental Hygienist (RDH) Educator Member
Committee Member – Naleni "Lolly" Tribble-Agarwal, RDH Member
Committee Member – Dr. Sridevi Ponnala, Public Health Dentist Member
Committee Member – Nicolas Kiet Quach, Public Member

DHBC Staff Present:

Anthony Lum, Executive Officer
Adina A. Pineschi-Petty, Doctor of Dental Surgery (DDS), Education, Legislative, and Regulatory Specialist
Crystal Yuyama, Administrative Analyst
Yuping Lin, Department of Consumer Affairs (DCA) Legal Counsel

1. LEG REG Committee Agenda Item 1: Roll Call and Establishment of a Quorum.

Dr. Julie Elginer, Legislative and Regulatory Committee Chair, called the Legislative and Regulatory Committee to order at **1:57 p.m.**, completed the roll call, and a quorum was established with five (5) members present.

2. LEG REG Committee Agenda Item 2: Public Comment for Items Not on the Agenda.

Committee Member comment: None.

Public comment: None.

3. **LEG REG Committee Agenda 3: Status of Dental Hygiene Board of California Regulatory Packages.** (Informational Only).

Dr. Adina Petty stated that the information regarding the current status of DHBC regulatory packages can be found in the July 17-18, 2026, Board meeting materials on pages 713 – 717. Dr. Petty provided a brief update on the package(s) that have entered the formal rulemaking process as well as those currently under development by staff. Dr. Petty stated that processing timelines have been slower due to the new interim DCA Director.

Executive Officer Anthony Lum informed the committee that staff continually reviews regulations to identify any deficiencies and will implement necessary updates as appropriate, bringing any proposed changes to the committee for approval.

Committee Member comment: Chair Elginer asked whether the Board should consider advancing any necessary regulatory items beforehand or hold them until after recommendations from the sunset process are issued.

EO Lum responded that all current regulatory packages listed in the chart will continue moving forward during the sunset review. He stated that staff are compiling a list of additional items, including previously pursued legislation, to present to the Legislature as part of the Board's sunset bill, pending approval. Chair Elginer acknowledged the importance of raising this topic given its significance over the next 18 months.

Public comment: None.

4. **LEG REG Committee Agenda 4: Discussion and Possible Action to Take a Position on 2025-2026 Bills of Interest and Legislative Calendar.**

Dr. Adina Petty reported as to current legislation of interest to the Board on pages 719 – 730, as well as reporting on the current legislative calendar on pages 989-990.

She stated that the Legislature entered summer recess on July 2, 2026, and will reconvene on August 3, 2026. Several bill updates were highlighted, including amendments to AB 1130, AB 1811, and AB 1187.

EO Lum reported that, following a recent meeting with the author's office and Senate B&P staff on Thursday, July 16, 2026, the RDHAP license category may be added to the bill. This represents the most recent information available on the bill's status.

The Chair opened the agenda item for committee discussion. It was noted that no new motions were required, as the Board had previously taken positions on the listed bills, with the exception of AB 1629, which the Board currently supports and which remains under consideration in Senate Appropriations.

DRAFT

Legislation	LEG REG Committee Position taken at Today's July 17, 2026, Committee meeting
a) **Assembly Bill (AB) 1952** Berman: Dentistry: dental hygienists: licensure.	Oppose unless amended. Letter sent 3.20.26.
b) **AB 350** Bonta: Health care coverage: fluoride treatments.	Support. Letter sent 4.7.25.
c) **AB 2140** Johnson: Healing arts: reports: claims against licensees.	Watch.
d) **Senate Bill (SB) 1311** Wahab: Licensed Professions.	Oppose unless amended. Letter sent 4.6.26.
e) **AB 1130** Berman: ~~Dentistry: outreach and support program.~~ Gutted and amended.	~~Watch.~~
f) **AB 1629** Haney: Dental Coverage.	Support. Letter sent 5.27.26.
g) **AB 1670** Arambula: Medi-Cal: dental care.	Watch.
h) **AB 1717** Castillo: Medi-Cal dental reimbursement: house/extended care facility call.	Watch.
i) **AB 1760** Arambula: Dentistry.	Watch.
j) **AB 1811** Rogers: Health professional ~~shortage areas.~~	Support. Letter sent 4.6.26.
k) **AB 2029** Sharp-Collins: Dental Plan Portal.	Watch.
l) **AB 2625** Solache: Dental Practice Act: foreign dental schools.	Watch.
m) **AB 2694** Alvarez: Public postsecondary education: community colleges: statewide baccalaureate degree program.	Support. Letter sent 5.27.26.
~~n) **SB 1187** Durazo: Open meetings: majority. meetings.~~	~~Watch.~~ *LEG REG Committee voted to remove from Bills of Interest.
o) **SB 1391** Wahab: Department of Consumer Affairs: retired category licenses.	Support. Letter sent 5.27.26.
p) **SB 1416** Wahab: Physicians and surgeons: dentists: unprofessional conduct.	Watch.
q) 2026 Tentative Legislative Calendar.	

DRAFT

Member Quach requested clarification regarding SB 1187 (Dazo) and its relevance to the Board. Dr. Petty confirmed that no changes in the bill text affected the Board directly. The member recommended removing SB 1187 from the Board's bills of interest, noting that the bill concerns the Brown Act, which applies to local bodies, whereas the Board operates under the Bagley-Keene Open Meeting Act.

Motion: Member Quach moved for the Legislation and Regulatory Committee to recommend to the Full Board to remove SB 1187 from the Legislative Bills of Interest.

Second: President Pacheco.

Committee Member discussion: Member Quach stated that SB 1187 is in reference to the Brown Act and is not applicable to the Board. He stated that the bill should not have been included on the Legislative Bills of Interest.

Public comment: None.

Vote: Motion moved for the Legislation and Regulatory Committee to recommend to the Full Board to remove SB 1187 from the Legislative Bills of Interest. Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Julie Elginer, Chair	X		
Lolly Agarwal	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

Following the vote, Chair Elginer then took comments from the Committee and the Public regarding the entire lineup of Bills of Interest.

Committee Member comment: The Chair thanked committee members and staff for their diligence in tracking legislative developments, noting the fast pace of changes leading up to fiscal deadlines. Public comment was received regarding SB 1311 (Wahab), advising the Board of the Dental Hygiene Association's updated position of "oppose unless amended," citing the need for a clinical training component for unlicensed dental assistants.

Public comment: Susan McLearan on behalf of the California Hygienists' Association (CDHA) commented that CDHA has updated its position on SB 1311 (Wahab) to "oppose unless amended." The Association supports the Dental Assisting National Board (DANB) certification for unlicensed dental assistants but expressed concern regarding the lack of a clinical training component. They have requested that the bill be amended to require clinical

instruction provided by a licensed individual within a dental office, citing both public safety and staff safety considerations.

5. **LEG REG Committee Agenda 5: Discussion and Possible Action to Approve the March 27, 2026, Legislative and Regulatory Committee Meeting Minutes.**

Motion: Member Ponnala moved to approve the March 27, 2026, Legislation and Regulatory Committee Meeting Minutes.

Second: Member Quach.

Committee Member discussion: None.

Public comment: None.

Vote: Motion to approve the March 27, 2026, Legislation and Regulatory Committee Meeting Minutes. Passed 5:0:0.

Name	Aye	Nay	Abstain/Absent
Julie Elginer, Chair	X		
Lolly Agarwal	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

6. **LEG REG Committee Agenda 6: Proposal of Future Agenda Items.**

Committee Member comment: President Pacheco commented that the Board should look to set a date for the May 2027 Teleconference Meeting to discuss current legislation.

Public comment: None.

7. **LEG REG Committee Agenda 7: Adjournment of the Legislative and Regulatory Committee.**

Legislation and Regulatory Chair Elginer adjourned the Legislative and Regulatory Committee at **2:17 p.m.**



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 7.

Proposal of Future Agenda Items.



Friday, November 13, 2026

Dental Hygiene Board of California

Legislation and Regulatory Committee Agenda Item 8.

Adjournment.

DHBC
Dental Hygiene
Board of California

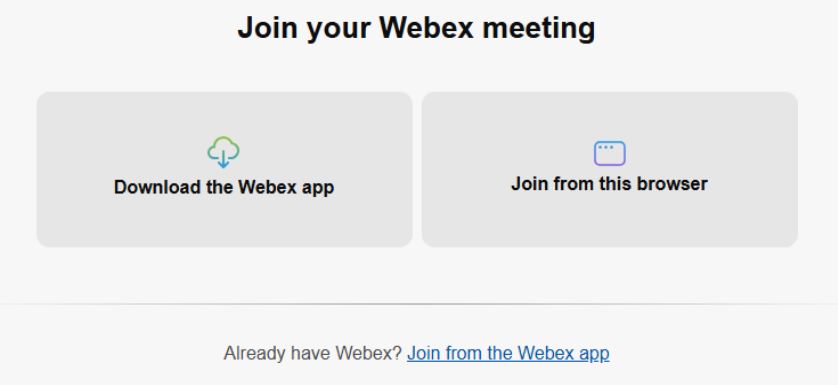
Saturday, November 14, 2026
Full Board
Meeting Materials
(Continued)

Recommended: Join using the meeting link.

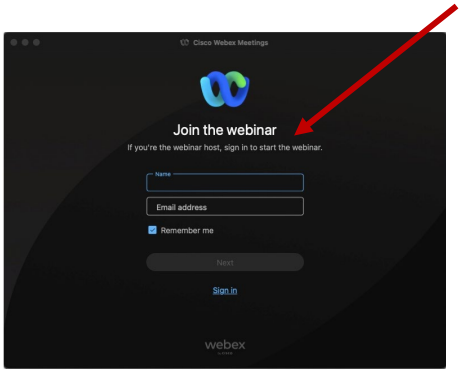
1. Click on the meeting link. This can be found in the meeting notice you received and is on the meeting agenda.

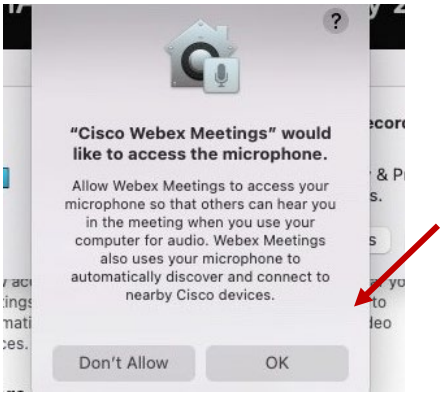
2. If you already have Webex on your device, click the bottom instruction, "Join from the Webex app."

   If you have **not** previously used Webex on your device, your web browser will offer "Download the Webex app." Follow the download link and follow the instructions to install Webex.



3. Enter your name and email address*. Click "Next."
   Accept any request for permission to use your microphone and/or camera.

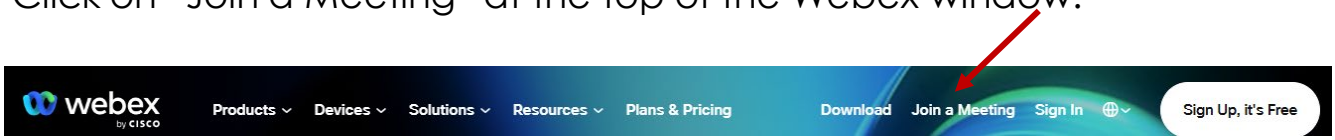




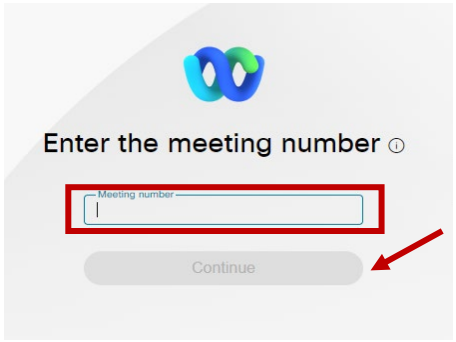
*Members of the public are not obligated to provide their name or personal information and may provide a unique identifier such as their initials or another alternative as well as a fictitious email address like in the following sample format: XXXXX@mailinator.com.

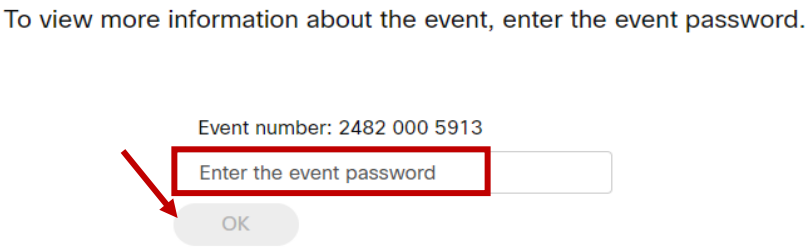
Alternative 1. Join from Webex.com

1 Click on "Join a Meeting" at the top of the Webex window.

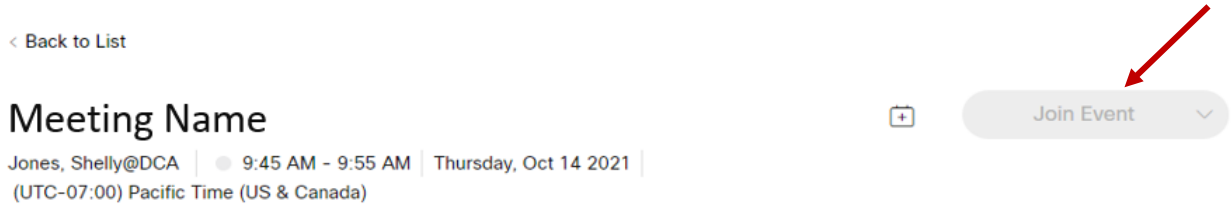


2 Enter the meeting/event number and click "Continue." Enter the event password and click "OK." This can be found in the meeting notice you received or on the meeting agenda.





3 The meeting information will be displayed. Click "Join Event."

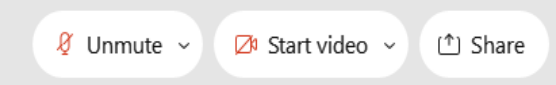


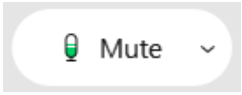
OR

Alternative 2. Connect via Telephone

You may also join the meeting by calling in using the phone number, access code, and passcode provided in the meeting notice or on the agenda.

Microphone control (mute/unmute button) is located at the bottom of your Webex window.





Green microphone = Unmuted: People in the meeting can hear you.



Red microphone = Muted: No one in the meeting can hear you.

Note: Only panelists can mute/unmute their own microphones. Attendees will remain muted unless the moderator invites them to unmute their microphone. Only panelists will be offered starting their video camera.

Attendees/Members of the Public

Joined via Meeting Link

The moderator will call you by name and indicate a request has been sent to unmute your microphone. Upon hearing this prompt:

Click the Unmute me button on the pop-up box that appears.



Joined via Telephone (Call-in User)

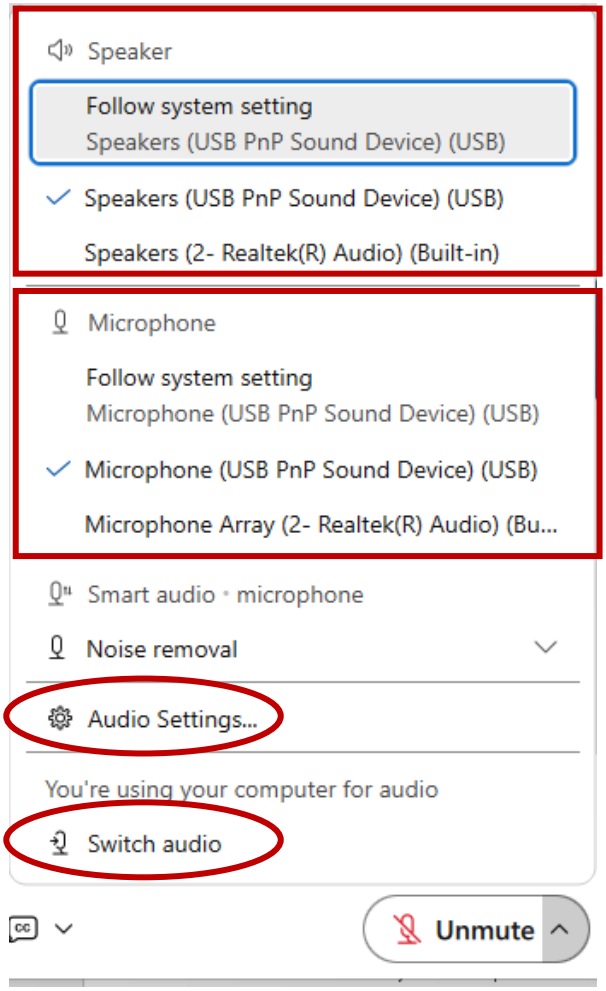
- When you are asked to unmute yourself, press *6.
- When you are finished speaking, press *6 to mute yourself again.

If you cannot hear or be heard

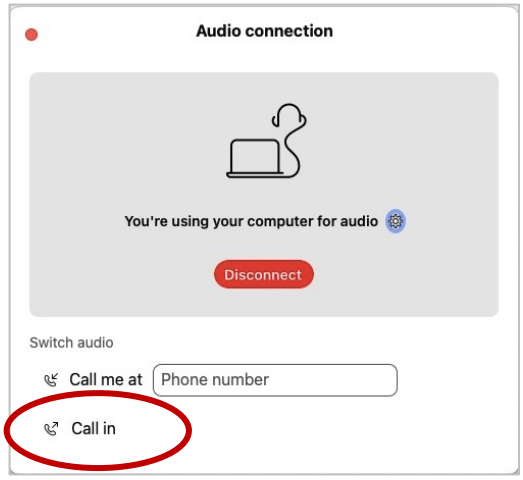
1. Click on the bottom facing arrow located on the Mute/Unmute button at the bottom of the Webex window.



2. From the drop-down menu, select different:
   A. Speaker options if **you can't hear** participants.
   B. Microphone options if **participants can't hear you**.
   C. Audio settings will offer testing of your devices, and let you choose a different device.



3. To link your phone to your Webex session, enabling your phone to become your microphone and speaker source:
   - Click on "Switch audio".
   - Select "Call in", which will show the phone number to call and the meeting login information.



Joined via Meeting Link

- Locate the hand icon at the bottom of the Webex window.
- Click the hand icon to raise your hand.
- Repeat this process to lower your hand.



The moderator will call you by name and indicate a request has been sent to unmute your microphone.

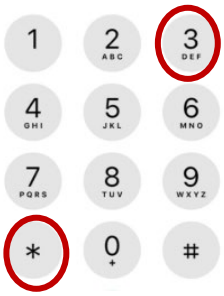
Upon hearing this prompt:

Click the Unmute me button on the pop-up box that appears.

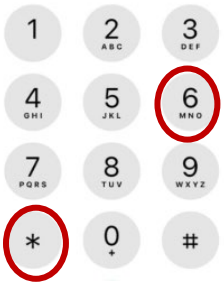


Joined via Telephone (Call-in User)

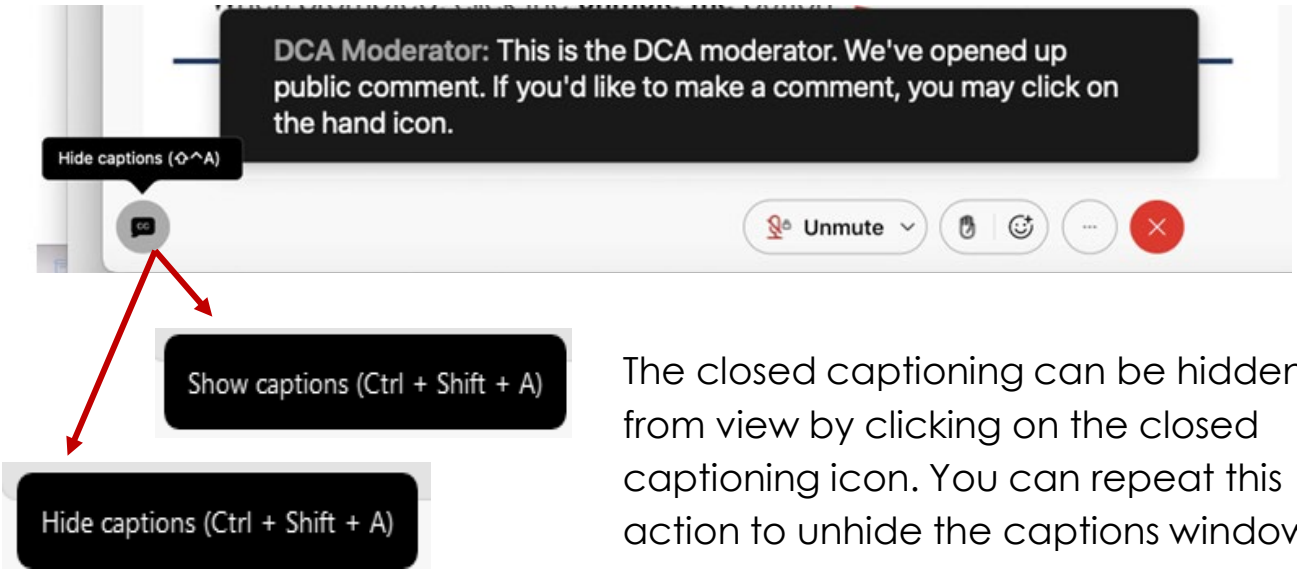
Press *3 to raise or lower your hand.



- When you are asked to unmute yourself, press *6.
- When you are finished speaking, press *6 to mute yourself again.



Webex provides real-time closed captioning displayed in a dialog box in your Webex window. The captioning box can be moved by clicking on the box and dragging it to another location on your screen.



The closed captioning can be hidden from view by clicking on the closed captioning icon. You can repeat this action to unhide the captions window.

You can view the closed captioning dialog box with a light or dark background or change the font size by clicking the 3 dots on the right side of the dialog box.



DHBC
Dental Hygiene
Board of California

Member	Present	Absent
Julie Elginer		
Sonia “Pat” Hansen		
Sherman King		
Michael Long		
Joanne Pacheco		
Sridevi Ponnala		
Nicolas Kiet Quach		
Naleni “Lolly” Tribble-Agarwal		

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 12.

Reconvene the Full Board Meeting – Roll Call & Re-Establishment of a Quorum.

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 13.

Discussion and Possible Action to Approve the July 18, 2026, Full Board Meeting Minutes.

DHBC Dental Hygiene Board of California
BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

Dental Hygiene Board of California
Full Board
Meeting Minutes

DRAFT

Friday and Saturday, July 17-18, 2026

DHBC Headquarters Building
2005 Evergreen Street
1st Floor Hearing Room
Sacramento, CA 95815

DHBC Members Present:
President – Joanne Pacheco, Registered Dental Hygienist (RDH) Educator Member
Vice President – Sonia "Pat" Hansen, RDH Member
Secretary – Naleni "Lolly" Tribble-Agarwal, RDH Member
Registered Dental Hygienist in Alternative Practice (RDHAP) Member – Michael Long
Public Health Dentist Member – Dr. Sridevi Ponnala
Public Member – Dr. Julie Elginer
Public Member – Nicolas Kiet Quach

DHBC Members Absent/Vacant:
Public Member – Sherman King
Public Member – Unappointed

DHBC Staff Present:
Anthony Lum, Executive Officer
Adina A. Pineschi-Petty, Doctor of Dental Surgery (DDS), Education, Legislative, and Regulatory Specialist
Crystal Yuyama, Administrative Analyst
Yuping Lin, Department of Consumer Affairs (DCA) Legal Counsel

Joanne Pacheco, President of the Dental Hygiene Board of California (DHBC, Board) reviewed meeting guidelines and called the meeting to order at **9:04 a.m.** Executive Officer (EO) Anthony Lum provided directions to the nearest emergency exits and restroom locations. EO Lum encouraged staff attending the meeting to introduce themselves to the Board.

The meeting began on Friday, July 17, 2026, with the Full Board meeting for Full agenda items one (1) through six (6). Then transitioned to allow for the Education Committee meeting, the Legislative and Regulatory Committee, and the Licensing and Examination Committee to meet. Open Session was recessed at the end of the committee meetings. The Full Board meeting then recessed until Saturday, July 18, 2026, at 9:00 a.m.

1. **FULL Board Agenda Item 1: Roll Call and Establishment of a Quorum.**

   Joanne Pacheco, Board President called the meeting to order at **9:09 a.m.** Board Staff completed the roll call, and a quorum was established with seven (7) members present. Board member Sherman King was excused from this meeting.

2. **FULL Board Agenda Item 2: Public Comment for Items Not on the Agenda.**

   Board Member comment: None.

   Public comment: None.

3. **FULL Board Agenda Item 3: Department of Consumer Affairs (DCA) Report on Departmental Activities.**

   Judie Bucciarelli, Department of Consumer Affairs (DCA) Board and Bureau Relations Representative reported on the following:

   She reported that on May 12, 2026, Governor Newsom announced the appointment of Rohit Chopra as Secretary of the new Business and Consumer Services Agency, officially launched on July 1, 2026. Secretary Chopra previously served as Director of the U.S. Consumer Financial Protection Bureau and Commissioner of the Federal Trade Commission. DCA looks forward to continuing its consumer protection mission under his leadership.

   Ms. Bucciarelli informed the Board that DCA, along with other state departments, transitioned to a four-day in-office schedule on July 1, 2026, consistent with the Governor's Executive Order. DCA issued guidance regarding telework agreements and acknowledged the Board's partnership in supporting staff through this transition.

   She provided training updates, noting that the next Board Member Orientation Training (BMT) will take place virtually on October 21, 2026, and must be completed within one year of appointment or reappointment. She also announced the launch of DCA's mandatory defensive driver training on May 26, 2026, available through DCA's Learning Management System (LMS). Board members may contact Board and Bureau Relations with any questions regarding access or compliance.

   Ms. Bucciarelli concluded her report and offered to answer any questions.

   Board Member comment: None.

   Public comment: None.

4. **FULL Board Agenda Item 4: Dental Board of California (DBC) Report on Matters of Interest to DHBC.**

Bryce Docherty, Executive Officer of the Dental Board of California, thanked EO Lum and members of the Board for the opportunity to provide an update.

EO Docherty reported on the following:

- He thanked the Board for its collaboration in updating minimum standards for infection control regulations. He reported that on July 6, the Dental Board submitted its rulemaking package revising section 10005 of the California Code of Regulations to the Department of Consumer Affairs Acting Director for review. The update reflects joint subject matter expertise from both boards. The Dental Board will continue to provide updates as the rulemaking proceeds.

- The upcoming Dental Board meeting dates in Sacramento are scheduled for August 12-13, 2026, at 2005 Evergreen Street, and on November 5-6, 2026, at the Department of Consumer Affairs headquarters at 1625 Market Boulevard.

Board Member comment: Member Long, who is also licensed as a Dental Assistant, thanked the Dental Board for recent improvements in license renewal notifications, including email reminders in addition to postcards. EO Docherty acknowledged the comment and stated the Dental Board's continued efforts to enhance communication and outreach, including expanded social media presence.

Public comment: None.

5. **FULL Board Agenda Item 5: Recess the Full Board Meeting Until Saturday, July 18, 2026, at 9:00 a.m.**

6. **FULL Board Agenda Item 6: *Closed Session – Full Board***

7. **FULL Board Agenda Item 7: Reconvene the Full Board Meeting – Roll Call & Re-Establishment of a Quorum.**

President Pacheco called the Full Board meeting to order at **9:04 a.m.** Board Secretary Lolly Agarwal called the roll and a quorum was established with seven (7) members present. Board member Sherman King was excused from the meeting.

EO Lum provided directions to the nearest emergency exits and restroom locations.

8. FULL Board Agenda Item 8: President's Report.

Joanne Pacheco, Board President, reported on the following:

- President Pacheco participated and co-chaired the Board's taskforce to address the creation of a violation rubric for the dental hygiene educational programs who are non-compliant of the California laws and Commission on Dental Accreditation Standards. Taskforce meetings took place in January and February 2026 to progress on a draft rubric. She stated that the draft will be presented at the Education Committee meeting for review and approval where more information and discussion will occur.

- The Board conducted an additional teleconference meeting on May 23, 2026, where staff updated the members on the status of multiple legislative proposals. Members voted to submit position papers on proposed legislation at the meeting.

- The President stated she and EO Lum maintain frequent communication for updates on Board issues and for items that need her attention.

- She thanked Board staff for their efforts in onboarding new graduates, acknowledging the significant workload during this time of year.

Board Member comment: None.

Public comment: None.

9. FULL Board Agenda Item 9: ADEX Presentation on the Dental Hygiene Clinical Examination.

ADEX Regulatory & Educational Affairs Director, Stephen Prisby

Steven Prisby, Regulatory and Educational Affairs Director for the American Board of Dental Examiners (ADEX), provided an overview of the ADEX dental hygiene clinical examination. Mr. Prisby stated his prior regulatory experience, including more than ten years as Executive Director of the Oregon Board of Dentistry, and emphasized ADEX's commitment to public protection and regulatory consistency.

He reported that the ADEX dental hygiene exam is accepted by all states except Nebraska and Delaware, both of which are currently evaluating acceptance. The exam consists of two components: a computer-simulated clinical exam and a simulated patient treatment clinical exam. In 2025, approximately 7,200 candidates took the exam at 210 dental hygiene programs nationwide, with increasing participation from internationally trained dentists in states that permit such pathways. Mr. Prisby highlighted modernization of

ADEX's local anesthesia exam, now delivered via simulation to improve safety and standardization.

He announced a new agreement with the American Dental Association (ADA) to integrate components of the ADA's Dental Licensure Objective Structured Clinical Examination (DLOSCE) into ADEX examinations, with discussions underway regarding future integration of the ADA's dental hygiene OSCE.

Mr. Prisby summarized recent organizational consolidation forming the unified American Board of Dental Examiners and described ADEX's national testing infrastructure, council structure, and ongoing strategic initiatives, including a forthcoming occupational job task analysis and the October testing and regulatory summit.

Board Member comment: Member Elginer thanked ADEX for the presentation and asked clarifying questions regarding representation on the ADEX Council on Examinations. She inquired about term staggering and potential loss of institutional knowledge. Mr. Prisby confirmed that terms vary by state and are staggered, with state boards determining their representatives. She also asked whether population health and health equity considerations are incorporated; ADEX stated these are addressed through regional caucuses where state boards may raise such issues.

EO Lum asked whether ADEX meetings allow virtual participation. Mr. Prisby stated that most meetings throughout the year are held virtually, with the annual meeting conducted in person due to the volume of business and importance of in-person participation.

President Pacheco asked about the SIM-LA local anesthesia simulation exam. Mr. Prisby confirmed the exam has been fully developed, tested, refined, and is scheduled for implementation beginning January. Portions of the simulation are proprietary, though certain training components may be available to schools.

Board members and staff requested clarification regarding whether the simulation provides feedback on anesthetic effectiveness. Mr. Prisby explained that while the device does not produce physiological responses, the simulated oral structures allow examiners to evaluate technique, depth, angle, and delivery consistent with live-patient standards. He offered to provide further technical detail separately.

Public comment: Tooka Zokaie, on behalf of the California Dental Association (CDA), asked about the number of internationally trained candidates included in the non-CODA pass-rate data. Mr. Prisby reported approximately 1,700 individuals in that category, most presumed to be international candidates.

Another public commenter asked whether the American Dental Hygienists' Association (ADHA) was consulted regarding exam alignment. Mr. Prisby stated that recent alignment discussions occurred solely with the American Dental Association (ADA), and it was not aware of any ADHA involvement.

EO Lum reminded members that although California does not require a clinical exam for graduates applying within three years, individuals applying after three years or applying from out of state must complete a clinical examination such as ADEX. He stated this as the rationale for including the presentation.

10. **FULL Board Agenda Item 10: Discussion and Possible Action to Approve the March 13, 2026, Full Board Teleconference Meeting Minutes.**

Motion: Member Long moved to approve the March 13, 2026, Full Board Teleconference Meeting Minutes.

Second: Member Ponnala.

Board Member discussion: None.

Public comment: None.

Vote: Motion to approve the March 13, 2026, Full Board Teleconference Meeting Minutes. Passed 6:0:2.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal			Abstain.
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

11. **FULL Board Agenda Item 11: Discussion and Possible Action to Approve the March 27-28, 2026, Full Board Meeting Minutes.**

Member Elginer commented on a change to be made on page 805 regarding Agenda Item 5: Discussion and Possible Action to Determine Board Member Per Diem Payments.

Motion: Member Elginer moved to approve the March 27-28, 2026, Full Board Meeting Minutes, as amended.

Second: Member Long.

Board Member discussion: None.

Public comment: None.

Vote: Motion to approve as amended the March 27-28, 2026, Full Board Meeting Minutes, as amended. Passed 6:0:2.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal			Abstain.
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

12. **FULL Board Agenda Item 12: Discussion and Possible Action to Approve the May 23, 2026, Full Board Teleconference Meeting Minutes.**

Motion: Member Long moved to approve the March 23, 2026, Full Board Teleconference Meeting Minutes.

Second: President Pacheco.

Board Member discussion: None.

Public comment: None.

Vote: Motion to approve the March 23, 2026, Full Board Teleconference Meeting Minutes. Passed 4:0:4.

DRAFT

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer			Abstain.
Sonia "Pat" Hansen			Abstain.
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala			Abstain.
Nicolas Kiet Quach	X		

13. **FULL Board Agenda Item 13: Executive Officer's Report.** (Informational Only).

EO Anthony Lum reported on the following:

a. Personnel:

EO Lum reported that the DHBC is actively hiring to fill two vacant positions. The long-term receptionist retired at the end of June, and the duty statement is being updated before beginning the hiring process. The second vacancy is being revised to support a second dental hygiene program staff member to conduct site visits due to increasing program volume and workload.

Recent hires include Continuing Education Analyst Lisa Montoya (April), Special Investigator Jeffrey Weiler (May), and seasonal staff member Brianna Wong (June), who is providing administrative and programming support to help analysts focus on core responsibilities.

b. Budget:

EO Lum stated that the latest Budget Report documents were in the Full Board meeting materials on pages 826 through 828.

The Expenditure Projection Report on page 826 shows anticipated expenses through the end of the year. The EO stated that through January 2026 the Board is expected to end the fiscal year with approximately 17.6% of its budget remaining, or about $505,000, indicating solid financial standing.

The Board's Revenue Projection Report is on page 827 and shows the amount of revenue the Board has received this year. He stated that the Board has received approximately $3.5 million in revenue through May 2026, meeting the full-year projection and expected to exceed it once the June totals are added.

The Fund Condition Report (page 828), which is our "savings account" by fiscal year, shows the amount of dollars available in the fund to indicate the fiscal health of the Board and the duration in months the Board could operate without any further revenue. He reported the fund continues to be good standing and is near its maximum balance. He stated that there will be gradual decrease in subsequent years as vacancies are filled although he states that this should not have a significant impact on the report to require additional revenue to be considered. EO Lum also stated that he doesn't foresee fee increase needs in the next few years unless there is a new mandated workload for the DHBC to address.

c. Sunset Review

The Executive Officer reminded the Board that Sunset Review preparation is underway this year. Sunset Review is the Legislature's periodic evaluation, which is conducted every four years to determine whether the Board continues to be necessary, effective, and protective of the public. Staff have already begun work following initial meetings with DCA and legislative staff.

The tentative plan includes:

1. Staff drafting the Board's Sunset Review Report based on questions issued in early July.
2. An additional teleconference meeting in late September or early October for the Board to review and revise the draft, which will then be finalized at the November meeting for submission by the January 5, 2027, deadline.
3. Staff arranging the additional meeting to address revisions.
4. Preparation by the Board President and Executive Officer for the legislative hearing in February or March, including participation in DCA's mock Sunset hearings.
5. Responding within 30 days to any issues raised in a legislative "white paper" following the hearing, including an additional meeting for Board approval of responses.
6. If successful, creation of a Sunset Bill to continue the Board's existence, which also provides an opportunity to request needed resources.

Board Member comment: Regarding the EO's personnel update, the Board members discussed separating legislative and regulatory duties from the Education and Examination Specialist role to reduce workload and prevent burnout. EO Lum reported that revised duty statements are under review and the new legislative/regulatory position is expected to be

posted within one to two months. Several members supported prioritizing that hire before adding another education site-visit specialist and asked whether temporary assistance could come from other DCA programs; management clarified that, as an autonomous board, such support is unlikely. EO Lum agreed to share job descriptions for both positions with all board members via email.

Member Elginer emphasized that the upcoming sunset review will significantly increase workload for all board members, noting the importance of fully reviewing materials, participating in meetings, and supporting the Executive Officer during legislative testimony. EO Lum referenced the sunset review timeline included in the meeting materials and clarified that a draft report will be presented at an additional meeting, where board members may provide input and request revisions before finalization in November.

Public comment: Jeanette Diaz-Olivera thanked the Board for its efforts to fill vacant positions and manage increasing workload demands, emphasizing the importance of adequate staffing to fulfill Board responsibilities. She asked where revenue from disciplinary actions and citation fines appears in the Board's financial reports. The Executive Officer clarified that these revenues are recorded under "unscheduled reimbursements" in the financial materials.

14. FULL Board Agenda Item 14: Discussion and Possible Action to Determine the November 2027 Date(s).

The Executive Officer reviewed proposed meeting dates for 2027 earlier than usual to give board members additional planning time. Staff also noted the need to schedule an additional teleconference meeting in fall 2026 to review the draft Sunset Review report.

Motion: Member Long moved for the Board to accept the following future meeting dates:

- Friday, October 9, 2026 – Draft Sunset Review Report.
- Friday, March 19 – Saturday, March 20, 2027.
- Friday, May 7, 2027 – Teleconference to Address Proposed Legislation.
- Friday, July 16 – Saturday, July 17, 2027.
- Friday, November 12 – Saturday, November 13, 2027.

Second: Member Ponnala.

Board Member discussion: Board members discussed potential adjustments to March, July, and November dates, the impact of state events on scheduling, and the possibility of using teleconference formats for certain meetings, especially those related to Sunset Review. Members also expressed interest in exploring meeting locations outside Sacramento and asked staff to gather cost comparisons and evaluate whether dental

hygiene programs could host future meetings, pending logistical considerations such as Wi-Fi reliability.

Public comment: None.

Vote: Motion for the Board for the Board to accept the following future meeting dates:

- **Friday, October 9, 2026** – Draft Sunset Review Report.
- **Friday, March 19 – Saturday, March 20, 2027.**
- **Friday, May 7, 2027** – Teleconference to Address Proposed Legislation.
- **Friday, July 16 – Saturday, July 17, 2027.**
- **Friday, November 12 – Saturday, November 13, 2027.**

Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

15. FULL Board Agenda Item 15: Discussion, Possible Action, and Update on the Board's 2024 – 2028 Strategic Plan.

Executive Officer Lum explained that the Board would review progress on the 2024-2028 Strategic Plan objectives, beginning on page 834 of the meeting materials. To facilitate discussion, each objective would be considered individually, with the Executive Officer providing status updates and responding to board member questions as they arose.

A robust discussion from the Board and the public focused on progress, challenges, and areas requiring further action across licensing, enforcement, legislation and regulation, educational oversight, administration, and outreach.

Licensing discussion included ongoing work to clarify BreEZe renewal language, continued CE audit improvements, and extensive outreach to dental hygiene programs, with suggestions to enhance student support through online modules, regional presentations, and involvement of recent graduates. The Board examined the feasibility of offering the Law and Ethics exam in Spanish, citing cost and complexity concerns while acknowledging equity considerations raised by the public. Public comments encouraged clearer tracking of new ideas. The Board agreed to conduct annual reviews and add outcome-assessment tracking.

Enforcement updates highlighted the need to modernize disciplinary guidelines, strengthen licensee education on enforcement processes, and maintain flexible complaint-intake procedures to avoid discouraging public reporting.

Legislation and Regulation discussion centered on scope-related objectives. Staff emphasized consumer-protection limitations while Board members and public speakers encouraged continued review of anesthesia supervision and scope requirements to support access to care.

Educational oversight discussion addressed staffing needs for site visits and clarified guidelines for CE coursework and extra-mural facilities. Public comments suggested clearer, measurable objectives and tracking of school community-service activities or access-to-care outcomes during cite visits. Suggestions included collecting data on the number of schools serving the public and participants reached through community rotations.

Administration discussion included requests for earlier distribution of meeting materials and ongoing website accessibility challenges and pending department-wide redesign efforts. Public comments called for addressing fee discrepancies on the RDHAP application.

Outreach discussion emphasized revitalizing the DHBC newsletter, expanding communication channels, and pursuing staffing for dedicated outreach. Public comments encouraged clearer progress metrics and confirmed the Executive Officer as primary contact for CDHA collaboration.

Across all sections, the Board committed to annual strategic-plan reviews and adding outcome-assessment tracking, with several objectives identified for priority work ahead of Sunset Review.

The Board members accepted the Strategic Plan update with no formal motion. The President asked for comments from the Board and the public on the Strategic Plan as a whole.

Board Member comment: Member Elginer thanked the Executive Officer for providing the Board's first comprehensive, section-by-section review of the 2024–2028 Strategic Plan. She supported conducting such reviews annually. Based on the discussion, she identified three areas requiring additional Board work prior to Sunset Review:

- Licensing 1.1 – Task force to clarify BreEZe renewal language.
- Enforcement 2.7 – Update and modernize disciplinary guidelines, with re-engagement of the Enforcement Committee.
- Education 4.2 – Task force to define acceptable non-hygiene CE courses.

She recommended that at least two members from each relevant subcommittee volunteer or be appointed by the President to address these items.

EO Lum responded that Enforcement 2.7 already appears later on the agenda for action.

Public comment: Jeannette Diaz-Olivera asked how the public would be informed of ongoing work related to Objectives 3.1 and 3.2 (anesthesia supervision and scope of practice). EO Lum responded that updates will occur through future board meetings and do not require waiting a full year for the next strategic plan review.

16. FULL Board Agenda Item 16: Discussion and Possible Action on the Board Member Procedural Manual Draft Language.

The Executive Officer reported that the Board's procedural manual, last updated in 2022, is undergoing revision by an ad hoc committee, which met on February 13 and June 18, 2026. The following two items were presented to the full Board for direction:

1. Adopt Rosenberg Rules of Order.
2. Review and Update Draft Language.

Issue 1: Adoption of Rosenberg's Rules of Order.
Member Long proposed adopting Rosenberg's Rules of Order to provide clear, consistent, and accessible parliamentary guidance for Board meetings. He stated that the rules are simpler than Robert's Rules and better suited for small public bodies.

Motion: Member Long moved for the Board to enact the use of Rosenberg Rules of Order when the DHBC conducts its public meetings.

Second: Vice President Hansen.

Board Member discussion: Member Elginer requested the need for future training or orientation for new members and clarified that Rosenberg's Rules complement, but do not replace, requirements under the Bagley-Keene Open Meeting Act. Member Elginer stated that she would be willing to share a parliamentary procedural guide with the members once adapted to the Rosenberg's Rules of Order.

Public comment: JoAnn Galliano supported adopting a simplified procedural framework using the Rosenberg's Rules of Order.

JoAnn Galliano also asked how quorum is determined when the Board has vacant seats, specifically whether quorum is based on the number of authorized seats (nine) or the number of currently appointed members (eight). Legal counsel, Yuping Lin, explained that quorum requirements are governed by state law and legal opinions specific to boards, and that if Rosenberg's Rules or Robert's Rules contain language inconsistent with statute, the statutory requirements under the Bagley-Keene Open Meeting Act would control. Counsel noted that quorum rules are better addressed outside this agenda item and may be added as a future agenda topic.

Vote: Motion for the Board to enact the use of Rosenberg Rules of Order when the DHBC conducts its public meetings. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

Issue 2: Review and Update Draft Language.
Member Quach presented revised language addressing how board members may express personal or professional viewpoints outside official board activities. The Board agreed that members must not use their board title or authority to advocate against an official board position but may express personal views in their individual capacity if they do not imply representation of the Board. The revised language clarifies staff's original intent and avoids restricting members' professional or civic engagement.

Motion: Member Quach moved to accept the proposed language for the DHBC Board member procedural manual pertaining to the issue of member opposition while working in their professional or other capacity away from Board activities.

Second: Member Long.

Board Member discussion: None.

Public comment: Jeanette Diaz-Olivera stated that while reviewing the manual there is a different mission statement compared to the website. She asked for clarification on if there was a new or updated mission statement.

Vote: Motion to accept the proposed language for the DHBC Board member procedural manual pertaining to the issue of member opposition while working in their professional or other capacity away from Board activities. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

17. FULL Board Agenda Item 17: Discussion and Possible Action on Education Committee Report and Recommendation(s).

Education Committee Chair Joanne Pacheco stated that because there were action items that required individual recommendations, she reported each item separately.

Chair Pacheco reported a quorum was established and asked for public comment for items not on the agenda. She stated there were no public comments.

FULL Board Agenda Item 17: EDU Agenda Item (3): Discussion and Possible Action to Approve a New Dental Hygiene Educational Program by Stanbridge University.

Chair Pacheco reported that Dr. Petty informed the Education Committee that the Stanbridge University main campus in Irvine, CA was founded in 1996 as "Executive 2000" and welcomed its first students with a certificate program in information technology. Following the successful launch of its inaugural program, the institution expanded, adding nursing, occupational therapy, and physical therapy programs. Stanbridge University serves a broad and diverse geographical area across Southern California, specifically

Orange County, Los Angeles, Riverside, and San Diego counties, and is now seeking to expand their operations in San Diego to open a dental hygiene educational program.

On April 2, 2025, Stanbridge University submitted a letter of intent to request Dental Hygiene Board of California (Board) approval to establish a new dental hygiene educational program based in Riverside, California to help meet the need for qualified dental hygienist graduates. On March 13, 2026, Stanbridge University submitted an updated letter of intent establishing San Diego as their base for their prospective dental hygiene educational program.

In May 2026, Stanbridge University submitted a feasibility study to the Board for review. In working with Stanbridge University, Board staff have now completed the review of Stanbridge University's feasibility study.

Motion: Member Ponnala moved for the Board to conditionally approve the new Dental Hygiene Educational Program offered by Stanbridge University. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort. And during the conditional period. The campus will enroll students every 7-9 months until the first cohort graduates.)

Second: Vice President Hansen.

Board Member discussion: None.

Public comment: Amber Davis, Dental Hygiene Program Director of Stanbridge University, thanked the Board for considering the university and approving the motion.

Vote: Motion for the Board to conditionally approve the new Dental Hygiene Educational Program offered by Stanbridge University. (The condition being an extendable 2-year probation period once the program begins operations and pending compliance with updates every four (4) months and site visits to confirm compliance prior to enrollment of the first cohort. And during the conditional period. The campus will enroll students every 7-9 months until the first cohort graduates.) Passed 7:0:1.

DRAFT

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 17: EDU Agenda Item (4): Discussion and Possible Action Regarding the Diablo Valley College Dental Hygiene Educational Program's Violations and Request for Support to Offer a Bachelor of Science degree in Dental Hygiene.

Chair Pacheco reported that Board staff conducted a site visit at the Diablo Valley College Dental Hygiene Educational Program (DVC) on October 14, 2025. This site visit was generated due to the submission of DVC's Commission on Dental Accreditation (CODA) Self Study as well as to the Board's oversite goals to review all Dental Hygiene Educational Programs (DHEPs) in California. Evidence of program compliance with the minimum DHEP standards set by the Business and Professions Code (BPC), the California Code of Regulations (CCR), and CODA was deficient. On October 31, 2025, December 5, 2025, December 19, 2025, January 23, 2026, February 25, 2026, and April 2, 2026, DVC provided responses to the violations discovered by the Board.

There have been two violations DVC has been unwilling to remedy into compliance since October 14, 2025: "Violation 1: Student Clinical Direct Patient Care Hours" and "Violation 2: Program Director Assignment Compliance." On April 2, 2026, DVC requested reconsideration and dismissal of Violations 1 and 2 (please refer to the Board's May 29, 2026, "Site Visit Determination 6," DVC's April 2, 2026, Letter, and DVC's June 30, 2026, Response to "Site Visit Determination 6.")

Regarding "Violation 1," staff acknowledges the importance of a "clinical assistant" rotation and does not advocate for eliminating this rotation. However, if DVC does not increase weekly direct patient care hours to accommodate for the "clinical assistant" rotation, students will still be significantly short on weekly "recommended" direct patient care hours, which is crucial to developing student competency in patient care (see "DVC Preclinical and Clinical Courses Deficiency Comparison" per the DVC 2025-2026 College Catalog (retrieved on April 6, 2026).

Regarding “Violation 2,” staff maintains when the DVC DHEP has program-specific courses that are provided during the summer session which require direct program director oversite and supervision, DVC’s program director should be present and available during the summer session.

Second, DVC requested from the Board a “Letter of Support” for DVC’s proposal to offer a Bachelor of Science degree in Dental Hygiene (BSDH)(please refer to DVC’s April 17, 2026, Request for Letter of Support of BSDH Degree.)

Motion: Member Long for the Full Board to accept the Education Committee’s recommendation to uphold “Violation 1: Student Clinical Direct Patient Care Hours” and uphold “Violation 2: Program Director Assignment Compliance” against the DVC DHEP.

Second: Member Elginer.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Full Board to accept the Education Committee’s recommendation to uphold “Violation 1: Student Clinical Direct Patient Care Hours” and uphold “Violation 2: Program Director Assignment Compliance” against the DVC DHEP. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia “Pat” Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

Motion: Vice President Hansen moved for the Full Board to accept the Education Committee’s recommendation to reject DVC’s request for a “Letter of Support” for DVC’s proposal to offer a Bachelor of Science degree in Dental Hygiene. Additionally, I move for the Full Board to reject DVC’s request for a “Letter of Support” for DVC’s proposal to offer a Bachelor of Science degree in Dental Hygiene.

Second: Secretary Agarwal.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Full Board to accept the Education Committee's recommendation to reject DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. Additionally, motion for the Full Board to reject DVC's request for a "Letter of Support" for DVC's proposal to offer a Bachelor of Science degree in Dental Hygiene. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 17: EDU Agenda Item (5): Discussion and Possible Action Regarding the Dental Hygiene Educational Program Site Visit Report.

Education Chair Pacheco stated that Dr. Adina Petty reported on the current status of the following DHEPs at Pasadena City College (PCC), Taft College (Taft), Cerritos College (Cerritos), Diablo Valley College (DVC), and Cabrillo College (Cabrillo). She also shared the upcoming Dental Hygiene Educational Program (DHEP) site visit schedule.

Dr. Petty informed the Education Committee that Pasadena City College is currently in temporary noncompliance with updating their current clinic to be compliant with regulations. At the July 17, 2026, meeting, the Education Committee discussed and took action regarding PCC to extend their probation for two years. Taft College is currently in full compliance, Cerritos College came into full compliance as of May 29, 2026, and Cabrillo College is working towards full compliance with one outstanding violation regarding faculty assignments. Diablo Valley College was updated in the Education Committee Agenda Item 4.

Motion: Member Elginer moved to extend the probationary period for PCC for an additional two years maintaining the original requirements of the probationary terms.

Second: Member Long.

Board Member discussion: None.

Public comment: None.

Vote: Motion to extend the probationary period for PCC for an additional two years maintaining the original requirements of the probationary terms. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 17: EDU Agenda Item (6): Discussion and Possible Action Regarding Gurnick Academy of Medical Arts' Request for Withdrawal of Provisional Approval to offer a New Dental Hygiene Educational Program in Modesto, California.

Education Chair Pacheco reported that on March 28, 2026, the Board provisionally approved a new, prospective Dental Hygiene Educational Program offered by Gurnick Academy of Medical Arts in Modesto, California.

On June 12, 2026, Gurnick Academy of Medical Arts submitted a "Request for Withdrawal of Provisional Approval" to the Board, stating that "After considerable deliberation, our institution has made the difficult decision not to move forward with the development and launch of our dental hygiene program. Accordingly, we are requesting to withdraw from the approval process as we will not be pursuing program implementation at this time."

Motion: Member Ponnala moved for the Full Board to accept the Education Committee's recommendation to approve the withdrawal request and move to approve the withdrawal request of Gurnick Academy of Medical Arts to offer a new dental hygiene educational program in Modesto, California.

Second: Secretary Agarwal.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Full Board to accept the Education Committee's recommendation to approve the withdrawal request and move to approve the withdrawal request of Gurnick Academy of Medical Arts to offer a new dental hygiene educational program in Modesto, California. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 17: EDU Agenda Item (7): Discussion and Possible Action on Concorde Career College-Garden Grove Campus Expansion and Increase in Enrollment.

The Chair reported that the Concorde Career College - Garden Grove Dental Hygiene Educational Program (CCCGG) is requesting the Board's consideration of a proposed substantive change involving the expansion of the existing Dental Hygiene program currently offered at the Garden Grove campus and adding a new major site located at CCCGG's Burbank campus, as well as an increase in enrollment of 50 students to be educated at the Burbank campus. The campus is currently operating in North Hollywood and is scheduled to relocate to a newly constructed facility in Burbank, California.

The proposed Burbank location would operate as a major site under the oversight and accreditation of CCCGG.

The CCCGG program director will maintain primary responsibility and authority for administration and oversight of both the Garden Grove campus and the proposed Burbank major site. Students enrolled at the Burbank location would complete the same curriculum

and be subject to the same policies, standards, and program requirements as students enrolled at the Garden Grove campus.

The anticipated completion date for the Burbank facility is approximately April 2027 and CCCGG anticipates enrolling the first cohort of students at the Burbank major site in November 2027.

Motion: Member Long moved for the Full Board to accept the Education Committee's recommendation to disapprove CCCGG's request and move to disapprove to add a new major site located at CCCGG's Burbank campus.

Second: Member Ponnala.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Full Board to accept the Education Committee's recommendation to disapprove CCCGG's request and motion to disapprove to add a new major site located at CCCGG's Burbank campus. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 17: EDU Agenda Item (8): Discussion and Possible Action on the March 27, 2026, Education Committee Meeting Minutes, and EDU Agenda Item (9): Proposal of Future Agenda Items.

Lastly, the Committee approved **EDU Committee Agenda Item 8** "Discussion and Possible Action on the March 27, 2026, Education Committee Meeting Minutes," of which there were no suggested changes. The Education Chair also stated that there were future agenda items suggested for **EDU Committee Agenda Item 9** "Proposal of Future Agenda

Items," including possible actions to cite and fine Diablo Valley College if their violations are not resolved and to update the Minimum Student Taskforce with more consistent language.

Board Member discussion: None.

Public comment: None.

Motion: Member Elginer moved for the Full Board to accept the Education Committee's full report.

Second: Member Long.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Board to for the Full Board to accept the Education Committee's full report. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

18. FULL Board Agenda Item 18: Discussion and Possible Action on Legislation and Regulatory Committee Report and Recommendation(s).

Legislation and Regulatory Committee Chair Dr. Elginer reported that the Legislative and Regulatory Committee established a quorum and asked for public comment for items not on the agenda. There were not any public comments.

FULL Board Agenda Item 18: LEG REG Agenda Item (3): Status of Dental Hygiene Board of California (DHBC) Regulatory Packages.

Chair Elginer reported that the Legislation and Regulatory Committee was advised of the "informational only" items including LEG REG Committee Agenda Item 3 "Status of Dental Hygiene Board of California (DHBC) Regulatory Packages." This was an informational only item.

FULL Board Agenda Item 18: LEG REG Agenda Item (4): Discussion and Possible Action to Take a Position on 2025-2026 Legislative Bills of Interest and Legislative Calendar.

Legislative and Regulatory Committee Chair Elginer reported on the Committee's current position on the bills listed below:

Legislation	Board Position
a) **Assembly Bill (AB) 1952** Berman: Dentistry: dental hygienists: licensure.	Oppose unless amended. Letter sent 3.20.26.
b) **AB 350** Bonta: Health care coverage: fluoride treatments.	Support. Letter sent 4.7.25.
c) **AB 2140** Johnson: Healing arts: reports: claims against licensees.	Watch.
d) **Senate Bill (SB) 1311** Wahab: Licensed Professions.	Oppose unless amended. Letter sent 4.6.26.
e) **AB 1130** ~~Berman: Dentistry: outreach and support program.~~ Gutted and amended.	~~Watch.~~
f) **AB 1629** Haney: Dental Coverage.	Support. Letter sent 5.27.26.
g) **AB 1670** Arambula: Medi-Cal: dental care.	Watch.
h) **AB 1717** Castillo: Medi-Cal dental reimbursement: house/extended care facility call.	Watch.
i) **AB 1760** Arambula: Dentistry.	Watch.
j) **AB 1811** Rogers: Health professional ~~shortage areas.~~	Support. Letter sent 4.6.26.
k) **AB 2029** Sharp-Collins: Dental Plan Portal.	Watch.
l) **AB 2625** Solache: Dental Practice Act: foreign dental schools.	Watch.
m) **AB 2694** Alvarez: Public postsecondary education: community colleges: statewide baccalaureate degree program.	Support. Letter sent 5.27.26.
~~n) **SB 1187** Durazo: Open meetings: majority. meetings.~~	~~Watch.~~

Legislation	Board Position
o) SB 1391 Wahab: Department of Consumer Affairs: retired category licenses.	Support. Letter sent 5.27.26.
p) SB 1416 Wahab: Physicians and surgeons: dentists: unprofessional conduct.	Watch.
q) 2026 Tentative Legislative Calendar.	

The Legislative and Regulatory Committee voted to recommend to the full Board to remove Senate Bill 1311 after clarifying that the bill concerned the Brown Act and does not apply to the DHBC, which operates under the Bagley-Keene Open Meeting Act.

Motion: President Pacheco moved to remove the watch position of SB 1187.

Second: Member Quach.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Board to remove the watch position of SB 1187 Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 18: LEG REG Agenda Item (5): Discussion and Possible Action on the March 27, 2026, Legislative and Regulatory Committee Meeting Minutes. LEG REG Agenda Item (6): Proposal of Future Agenda Items.

Lastly, the Committee approved **LEG REG Committee Agenda Item 5** "Discussion and Possible Action on the March 27, 2026, Legislation and Regulatory Committee Meeting Minutes," of which there were no suggested changes. The Chair also stated that there was one suggested future agenda item for **LEG REG Committee Agenda Item 6** "Proposal of

Future Agenda Items," requesting the Board to consider setting a date for the May 2027 Teleconference Meeting to discuss current legislation.

Board Member discussion: None.

Public comment: None.

Motion: Member Long moved for the Board to accept the Legislation and Regulatory Committee's full report.

Second: Member Ponnala.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Board to accept the Legislative and Regulatory Committee's full report. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

19. FULL Board Agenda Item 19: Discussion and Possible Action on Licensing and Examination Committee Report and Recommendation(s).

Licensing and Examination Committee Chair Michael Long reported that the Licensing and Examination Committee established a quorum and asked for public comment for items not on the agenda. There were no public comments.

FULL Board Agenda Item 19: LIC Agenda Item (3): Discussion and Possible Action to Nominate and Approve a Dental Hygiene Board Representative for the ADEX Council on Examinations.

Chair Long reported that the Licensing and Examination Committee discussed LIC Committee Agenda Item 3 “Discussion and Possible Action to Nominate and Approve a Dental Hygiene Board Representative for the ADEX Council on Examinations.” The Committee recommended Joanne Pacheco to be the Board’s representative to participate in the ADEX Council on Examinations and forward this nomination to the Full Board for approval.

Motion: Member Ponnala moved for the Full Board to accept the Licensing and Examination Committee’s nomination and move for Joanne Pacheco to be the Board’s representative to participate in the ADEX Council on Examinations.

Second: Secretary Agarwal.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Full Board to accept the Licensing and Examination Committee’s nomination and move for Joanne Pacheco to be the Board’s representative to participate in the ADEX Council on Examinations. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia “Pat” Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

FULL Board Agenda Item 19: LIC REG Agenda Item (4): Proposal of Future Agenda Items.

Lastly, the Chair also stated that there were future agenda items suggested for **LEG REG Committee Agenda Item 4** “Proposal of Future Agenda Items.” There were none suggested.

Board Member discussion: None.

Public comment: None.

Motion: Chair Long moved for the Board to accept the Licensing and Examination Committee's full report.

Second: Secretary Agarwal.

Board Member discussion: None.

Public comment: None.

Vote: Motion for the Board to accept the Licensing and Examination Committee's full report. Passed 7:0:1.

Name	Aye	Nay	Abstain/Absent
Lolly Agarwal	X		
Julie Elginer	X		
Sonia "Pat" Hansen	X		
Sherman King			Absent.
Michael Long	X		
Joanne Pacheco	X		
Sridevi Ponnala	X		
Nicolas Kiet Quach	X		

20. **FULL Board Agenda Item 20: Enforcement Update: Statistical Report.** (Informational Only).

Assistant Executive Officer Tiffany Moore presented the enforcement statistics covering the past two fiscal years and the current year.

She reported on the complaint volume and stated that citation-related complaints currently fall under "unprofessional conduct," but work is underway to create clearer categories, such as "CE audit failure," for improved tracking.

She highlighted an increase in non-jurisdictional complaints, largely due to a dentist-related social media incident that resulted in numerous complaints being referred to the Dental

Board of California (DBC). AEO Moore is developing a referral activity code to more accurately capture cross-agency referrals.

Case-processing data showed improved aging, with most cases resolving within zero to six months. She also reviewed Attorney General referrals, probationer statistics (20 active, 3 tolling), drug-testing outcomes, and probation violations.

Citation data showed 240 citations issued for CE audit failures and 14 for post-arrest or subsequent disciplinary issues. Moore provided outcomes of informal conferences, including upheld, dismissed, and modified citations, and reviewed fine totals, payment-notice cycles, Franchise Tax Board referral activity, and payment-plan usage. She reported 710 CE audits conducted, with 293 failures primarily due to missing mandatory courses or use of unapproved providers. Updated pie-chart visuals were included to assist with interpretation.

Board Member comment: Member Long thanked staff for including fine-amount details in the enforcement report and recognized the significant reduction in cases older than two years, expressing appreciation for the improved case management.

Member Ponnala also thanked staff, commenting that the reorganized presentation of information made the report much clearer and helped identify areas of opportunity and focus.

Public comment: Susan McLearan referenced the audit failures shown on page 902 and asked whether non-responsive licensees were delinquent in their fees and subject to citation or referral to the Franchise Tax Board. Staff clarified that most non-responsive licensees are currently active, but those who fail to pay citations are referred to as appropriate.

Jeanette Diaz-Olivera, thanked staff for improving the readability of the report and RDH and requested further detail separating audit-failure cases from other categories of unprofessional conduct, including any differences between RDH and RDHAP licensees.

21. **FULL Board Agenda Item 21: Licensing, Continuing Education Audits, and Examination Update: Statistical Report.** (Informational Only).

Licensing Manager Traci Napper presented statistical updates for fiscal year 2026. She reported that the Board received 858 RDH applications, 14 licensure-by-credential applications, 75 RDHAP applications, and 26 Fictitious Name Permit applications. Renewal activity and total licenses issued were also summarized.

Law and Ethics exam results showed consistent pass/fail trends: RDH pass rates remained steady at 70%, while RDHAP pass rates decreased from 86% in FY 25 to 80% in FY 26. Updated license-population data reflected 39,219 total licenses across all statuses,

including 20,659 active and inactive licenses. Approximately 64 licenses dating back to June 2021 may be canceled if renewal fees remain unpaid.

Ms. Napper also provided updates on RDHAP practice-location registration requirements. More than 800 licensees were notified to register their mobile, portable, physical, or non-practicing status; over 160 applications and 16 non-practice declarations have been received. Common deficiencies include unclear emergency procedures and misunderstandings of “mobile” versus “portable” practice definitions.

Additional updates included ongoing preparation of examination statistics for education programs (expected by July 31), continued outreach to new graduates, implementation of renewal-email notifications anticipated by October, and updates to licensing templates through PSI.

Board Member comment: President Pacheco asked clarifying questions regarding the Law and Ethics exam reporting. Licensing Manager Napper confirmed that each program will receive both the percentage pass/fail rates and the number of graduates tested during the fiscal year.

Member Long shared positive feedback from the University of the Pacific’s RDHAP program regarding staff’s outreach presentations and requested that future reports include a breakdown of out-of-state applicants. Licensing Manager Napper agreed to incorporate that data.

Member Long inquired why Live Scan forms are not available online. Ms. Napper explained that the Department of Justice prohibits posting the forms publicly for audit reasons; applicants must request them through the Board’s designated email process or receive them through program directors.

Member Long asked whether the licensing and examination statistics should be presented through the Licensing and Examination Committee in future meetings.

Member Long asked about the higher RDHAP application fee, and Ms. Napper explained that the amount reflects the higher licensure level and was set through prior regulatory action.

Public comment: Susan McLearan of the California Dental Hygienists’ Association (CDA) expressed concern that only about 160 RDHAP licensees had submitted the required practice-location registration forms by the June 30 deadline. Licensing Manager Napper stated she is processing submitted applications and will issue follow-up emails to those who have not responded. She confirmed this requirement will also be emphasized during outreach to RDHAP programs to ensure new graduates understand the obligation.

Ms. Napper summarized common deficiencies found in submissions, including: missing emergency procedures, inaccurate hazardous-waste handling (such as lack of a required galvanized metal container or proper sharps disposal), and confusion between “mobile

dental hygiene clinic" and "portable equipment," leading some applicants to submit incorrect applications. She explained that initial registration for portable or physical practice sites does not require a fee, and that any incorrect fees paid by applicants would be refunded.

Jeanette Diaz-Olivera expressed appreciation for the license-to-population ratio data and asked about the accuracy of sources used, including whether official government data might be preferable. She also requested that the Board track and report RDHAP brick-and-mortar practice locations to help identify underserved counties and support recruitment efforts. Staff stated that these topics may be addressed as future agenda items.

22. FULL Board Agenda Item 22: Proposal of Future Agenda Items.

1. Member Elginer requested the Enforcement Disciplinary Guidelines be updated.

2. Member Long requested a future agenda item to clarify interpretation of officer term limits in the Board's Guidelines and Procedural Manual.

3. Jeannette Diaz-Olivera requested a future agenda item to allow Board action related to Strategic Plan Goal 3, specifically objectives 3.1 and 3.2. She asked that a future report include the number of RDHAP brick-and-mortar businesses by county, as well as the methodology used to calculate general-population-to-licensee ratios.

23. FULL Board Agenda Item 23: Adjournment.

President Pacheco adjourned the Full Board meeting at **4:20 p.m.**

DRAFT



Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 14.

Discussion and Possible Action to Approve the October 9, 2026, Full Board Teleconference Meeting Minutes.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
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Dental Hygiene Board of California
Meeting Minutes

DRAFT

Friday, October 9, 2026

Public Access Teleconference Meeting Location:
DHBC Headquarters Building
2005 Evergreen Street
1st Floor Lake Tahoe Room 1290
Sacramento, CA 95815

Please note that the Board conducted the meeting online through WebEx.

DHBC Members Present:
President – Joanne Pacheco, Registered Dental Hygienist (RDH) Educator Member
Registered Dental Hygienist in Alternative Practice (RDHAP) Member – Michael Long
Public Health Dentist Member – Dr. Sridevi Ponnala
Public Member – Dr. Julie Elginer
Public Member – Nicolas Kiet Quach

DHBC Members Absent:
Vice President – Sonia "Pat" Hansen, RDH Member
Secretary – Naleni "Lolly" Tribble-Agarwal, RDH Member
Public Member – Sherman King
Public Member – Vacant

DHBC Staff Present:
Anthony Lum, Executive Officer
Tifany Moore, Assistant Executive Officer
Traci Napper, Licensing Program Manager
Adina A. Pineschi-Petty, Doctor of Dental Surgery (DDS), Education, Legislative, and Regulatory Specialist
Yuping Lin, Department of Consumer Affairs (DCA) Legal Counsel for the DHBC

1. FULL Board Agenda Item 1: Roll Call and Establishment of a Quorum

Joanne Pacheco, President of the Dental Hygiene Board of California (DHBC, Board), reviewed meeting guidelines and called the meeting to order at **10:46 a.m.** Board staff Dr. Adina Petty completed the roll call, and a quorum was established with five (5) members present.

2. FULL BOARD Agenda Item 2: Public Comment for Items Not on the Agenda.

Board Member comment: None.

Public comment: None.

3. FULL Agenda Item 3: Discussion and Possible Action on the Draft 2027 Sunset Review Report.

Motion: Dr. Julie Elginer moved for the Full Board to review the draft 2027 Sunset Review report in its entirety and provide recommendations and guidance for any edits or revisions to the report to be returned at the next meeting with revisions for approval.

Second: Michael Long.

Board Member discussion: A robust discussion took place regarding sections one (1) through nine (9) of the draft 2027 Sunset Review report.

Public comment:

Draft 2027 Sunset Review Report sections one (1) and two (2):

JoAnn Galliano questioned if the public members would be allowed to comment on each section. President Pacheco answered in the affirmative.

Draft 2027 Sunset Review Report section three (3):

1. JoAnn Galliano indicated there was no penalty to retake the California Law and Ethics Exam and questioned if there should be a penalty after a certain number of retakes.

2. JoAnn Galliano recommended to maintain the Registered Dental Hygienist in Extended Functions (RDHEF) category as there are ways that that RDHEF category could potentially be used in the future and there are some RDHEFs still practicing.

3. JoAnn Galliano stated it would be helpful to have the either a graphic or a chart in the Board reports that show where failures in continuing education audits are concentrated and what the Board is doing to try to mitigate those failures and addressing those issues with our stakeholders.

4. Jeannette Diaz-Olivera echoed JoAnn Galliano's comments regarding the Board's California Law and Ethics Exam pass rates.

Draft 2027 Sunset Review Report sections four (4), five (5) and six (6):

No public comments.

DRAFT

Draft 2027 Sunset Review Report section seven (7):

1. JoAnn Galliano stated that in question 57, there is no mention that the Board has increased the number of programs in development that are going to assist with an increase in the number of registered dental hygienists (RDHs) within the next four years. Additionally, the Board has also approved increases in enrollments, especially those areas that serve minorities and underserved communities. She stated that while the Board's workforce development should be focused primarily on consumer protection, it also needs to be focused on the fact that California needs to utilize RDHs to the level of their training and their education.

2. Jeannette Diaz-Olivera echoed JoAnn Galliano's comments regarding reporting the Board's efforts to increase the RDH workforce to the legislature, as well as utilizing RDHs to their full capacity so that they meet the dental hygiene needs of the California public. She questioned if the Board could provide data to the legislature as to where hygienists are working thereby supporting this claim.

Draft 2027 Sunset Review Report sections eight (8) and nine (9):

No public comments.

NOTE: Due to time constraints and loss of a Board member to maintain a quorum, Board Teleconference Agenda Item 3 was recommended to be continued at the November 13 – 14, 2026, Full Board meeting.

Additional Public Comment:

1. JoAnn Galliano stated to be clear that the original language regarding scope of practice language was only put in there by request of the California Dental Association (CDA) because they were concerned that the Board would be discussing scope of practice that would impact dentistry and they wanted to be able to review anything that the Board suggested in terms of scope and render an opinion. She stated the Board is an independent board and able to determine scope independently, without the input of the CDA or Dental Board of California (DBC).

2. Jennifer Tannehill, Aaron Read and Associates, stated as the lobbyist for the California Dental Hygienists' Association's (CDHA), the Board's Sunset Report is where the discussion for scope of practice changes begins. She stated removing the statutory language about getting approval from the DBC on scope changes did not mean that CDHA or the Board does not still have the authority to do its own scope changes as it always has. What it meant was the Board no longer has to get approval from the DBC. Ms. Tannehill stated that she spoke with the chief consultant of the legislature's Business and Professions Committee that oversees the sunset process and confirmed scope of practice changes are still included in Sunset reports from the boards, and that boards may include anything they want in the Sunset report for the legislature to discuss.

3. Susan McLearan, CDHA, agreed with JoAnn Galliano and Jennifer Tannehill and stated that CDHA is fully aware of all of the scope of practice issues and would like full discussion of these items before advancing any legislation. She stated CDHA wants the Board to weigh in on their opinion regarding public safety and their vision regarding the full utilization of hygienists and before CDHA advances any legislation.

4. Elisa Rios, commented on concerns with the rise in non-licensees opening offices and performing orthodontic treatment, cosmetic whitening, and dental cleanings, stating that while the DBC can't regulate or provide consequences to those individuals, it is unfair that the DBC is trying to regulate RDH scope of practice issues. She stated scope of practice should be regulated solely by the Board.

4. FULL Agenda Item 4: Proposal of Future Agenda Items.

Board Member comment: None.

Public comment: None.

5. FULL Agenda Item 5: Adjournment.

President Pacheco adjourned the Full Board meeting at **1:11 p.m.**

DRAFT

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 15.

Discussion and Possible Action on DHBC Election of 2027 Board Officers.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

MEMORANDUM

DATE	November 14, 2026
TO	Dental Hygiene Board of California
FROM	Anthony Lum Executive Officer
SUBJECT	**FULL 15: Dental Hygiene Board of California Election of 2027 Officers and Update on 2027 Meeting Dates.**

Current Slate of Officers:

President	Joanne Pacheco
Vice President	Sonia “Pat” Hansen
Secretary	Naleni “Lolly” Tribble-Agarwal

Nominations for New Officers:

President	
Vice President	
Secretary	

Member	Aye	Nay	Other
Julie Elginer			
Sonia “Pat” Hansen			
Sherman King			
Monika Lee			
Michael Long			
Joanne Pacheco			
Sridevi Ponnala			
Nicolas Kiet Quach			
Naleni “Lolly” Tribble-Agarwal			

REMINDER: 2027 DHBC Board Meeting Dates

- March 19-20, 2027.
- May 7, 2027, Teleconference to address Legislation.
- July 16-17, 2027.
- November 12-13, 2027.

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 16.

Legislation Presentation from DHBC Board Member, Dr. J. Elginer, in Preparation of the 2027-28 Legislative Session.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350, Sacramento, CA 95815
P (916) 263-1978 | www.dhbc.ca.gov

MEMORANDUM

DATE	November 13, 2026
TO	Dental Hygiene Board of California
FROM	Anthony Lum Executive Officer
SUBJECT	**FULL 16: Legislation Presentation from Dr. Julie Elginer.**

BACKGROUND

With the previous Legislative session ending at the end of August 2026, and the new session beginning in February 2027, staff believed it to be an opportune time for the Board to receive a presentation regarding the State's Legislative process. One of the Board's public members, Dr. Julie Elginer, monitors and follows legislation closely and offered to provide her expertise in a presentation for the Board and meeting participants.

STAFF RECOMMENDATION

Staff recommends for the Board and meeting participants to listen and learn from Dr. Elginer's Legislative presentation.

PROPOSED MOTION LANGUAGE:

None for this agenda item.

Introduction to Legislative Resources

Prepared for Dental Hygiene Board of CA

November 2026

Julie Elginer, DrPH, MBA
Public Member



Created by J Elginer - Do not reproduce without permission

About Me! – Julie Elginer (she/her/hers)

Title: Associate Professor

Organization: UCLA FSPH

Education: **DrPH** – UCLA, **MBA** – University of Maryland Robert H. Smith School of Business, **BA** – Carthage College

Public Health Interests or Experiences

- Maternal mental health, food insecurity
- **Civic leadership through public appointment**

Fun Fact: I've completed two 28-hour trail relay races at elevation with a group of moms and in 2018 we placed 1st in the master's division.

Email: Upon Request



Team 8 Bad Mother Runners



Elginer family attending UCLA Football game, 2024

Why this content? Why now?

- Public member appointed by Speaker Rivas in October 2024
- Expertise in public health, public policy, state legislation and regulatory affairs
- During my tenure, multiple Board members and staff have requested that I conduct a training on the legislative process and resources available.
- Given that we will begin a new 2-year legislative term in 2027, it seems like the appropriate time to conduct this training.

Center our time together on DHBC's responsibilities and our mission

Welcome to the Dental Hygiene Board of California (DHBC)

ABOUT DHBC

The responsibilities of DHBC include issuing, reviewing, and enforcing dental hygiene licenses as well as developing the Law and Ethics examinations. Additional functions include promulgating regulations, establishing and maintaining fees, oversight and approval of dental hygiene educational programs, and continuing education requirements for all dental hygiene licensure categories.

OUR MISSION

To protect the public and consumers by meeting all the oral health needs of all Californians through equitable regulation, enforcement, and dental hygiene educational oversight.

https://www.dhbc.ca.gov/

Session Objectives and Tangible Learning Outcomes

- **Increase** familiarity with legislative structure, process and points of influence.

- **Demonstrate** legislative resources available to the public to assist with bill analysis and identify code sections

Goals for Today's Session

Ultimately, encourage you to take *thoughtful* action when preparing for legislation and regulatory discussions.

What are your goals?

Introduction / Warmup
Are you smarter than a 4th grader?



Fill-In-The-Blank

Based on the information on the previous page, answer each question by filling in the blank with the letter of the correct answer. Use each answer just once. To get started, the answer to question #1 is "state laws," so fill in the letter "C."

1. The Legislature is the group of people that makes the ____.
2. The Legislature meets in our State Capitol in ____.
3. Each Assembly District has about ____ people.
4. The Legislature is divided into two parts: the Assembly and the ____.
5. Each Senate District has about ____ people.
6. It is the job of the Assembly and Senate to ____.
7. There are ____ Senators in California.
8. There are ____ Assemblymembers in California.
9. Legislators can serve for a total of ____ years.
10. Assemblymembers are elected every ___ years.
11. When the entire Assembly meets, they are ____.
12. The entire Assembly meets on the ____.
13. The leader of the Assembly is called the ____.
14. People who live in the Assemblymember's district are ____.
15. There are 80 Assembly ____.
16. The maximum length of time a person can work in the Legislature is called ____.
17. When Assemblymembers are not working in Sacramento they go____.
18. On the Assembly floor, each Assemblymember sits at his or her own ____.

A. 12	G. Assembly floor	M. 40
B. 460,000	H. 2	N. districts
C. state laws	I. Sacramento	O. in Floor Session
D. desk	J. 920,000	P. term limits
E. 80	K. home	Q. pass laws
F. constituents	L. Speaker	R. Senate

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Test your knowledge: Question 1



- Name the two U.S. Senators that represent California
  - Nithya Raman and Karen Bass
  - Adam Schiff and Alex Padilla
  - Brian Schatz and Mazie Hirano
  - Diane Feinstein and Adam Schiff

Test your knowledge: Question 2



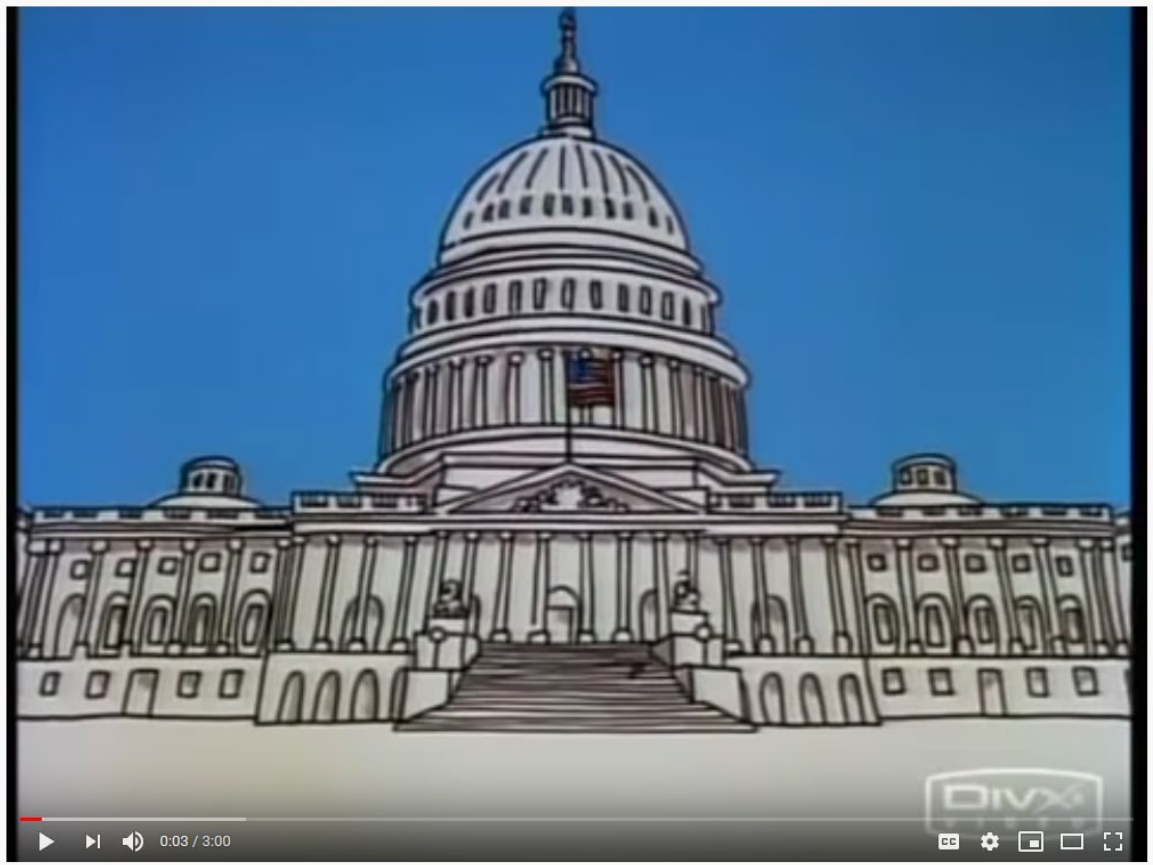
- Approximately how many people are represented by each Assembly District in California?
  - 150,000
  - 465,000
  - 930,000
  - 1.5 million

INTRODUCTION TO LEGISLATIVE PROCESS AND RESOURCES

One of the first things you should know: Who represents YOU?

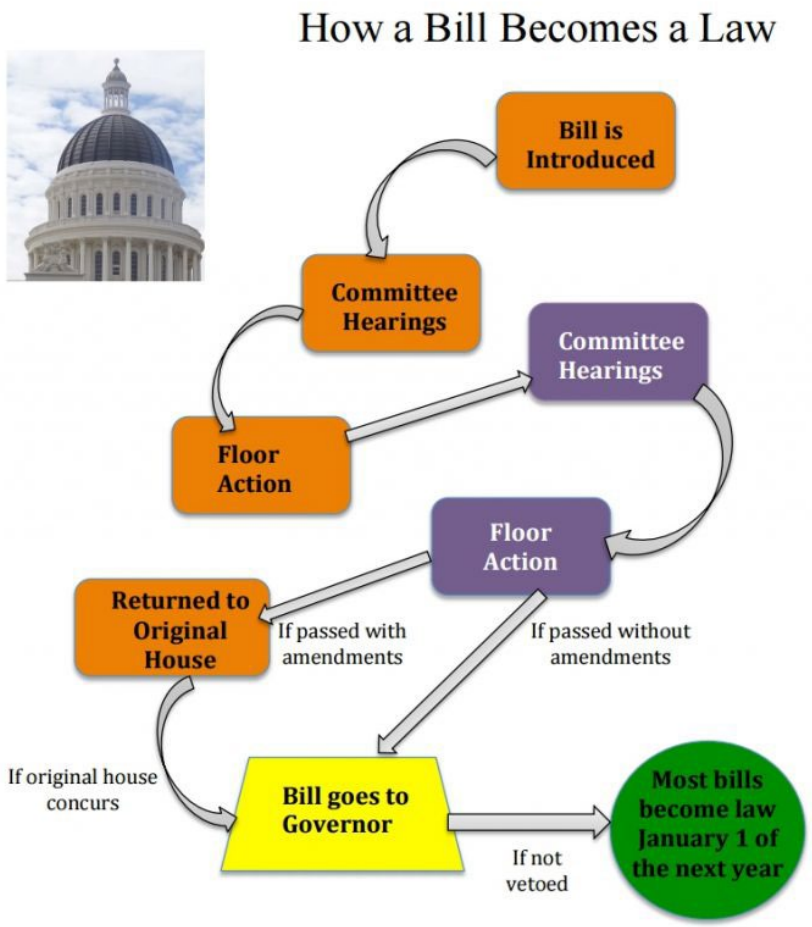
	Elected Office	Ideally, develop this for your home and your work location
1.	City Council	
2.	County Board of Supervisor	
3.	School Board	
4.	Water District	
5.	CA Assembly Member	
6.	CA State Senate	
7.	U.S. House of Representatives	
8.	U.S. Senate	**Adam Schiff and Alex Padilla* (CA)**

Introduction to Processes and Terms: “I’m Just a Bill”

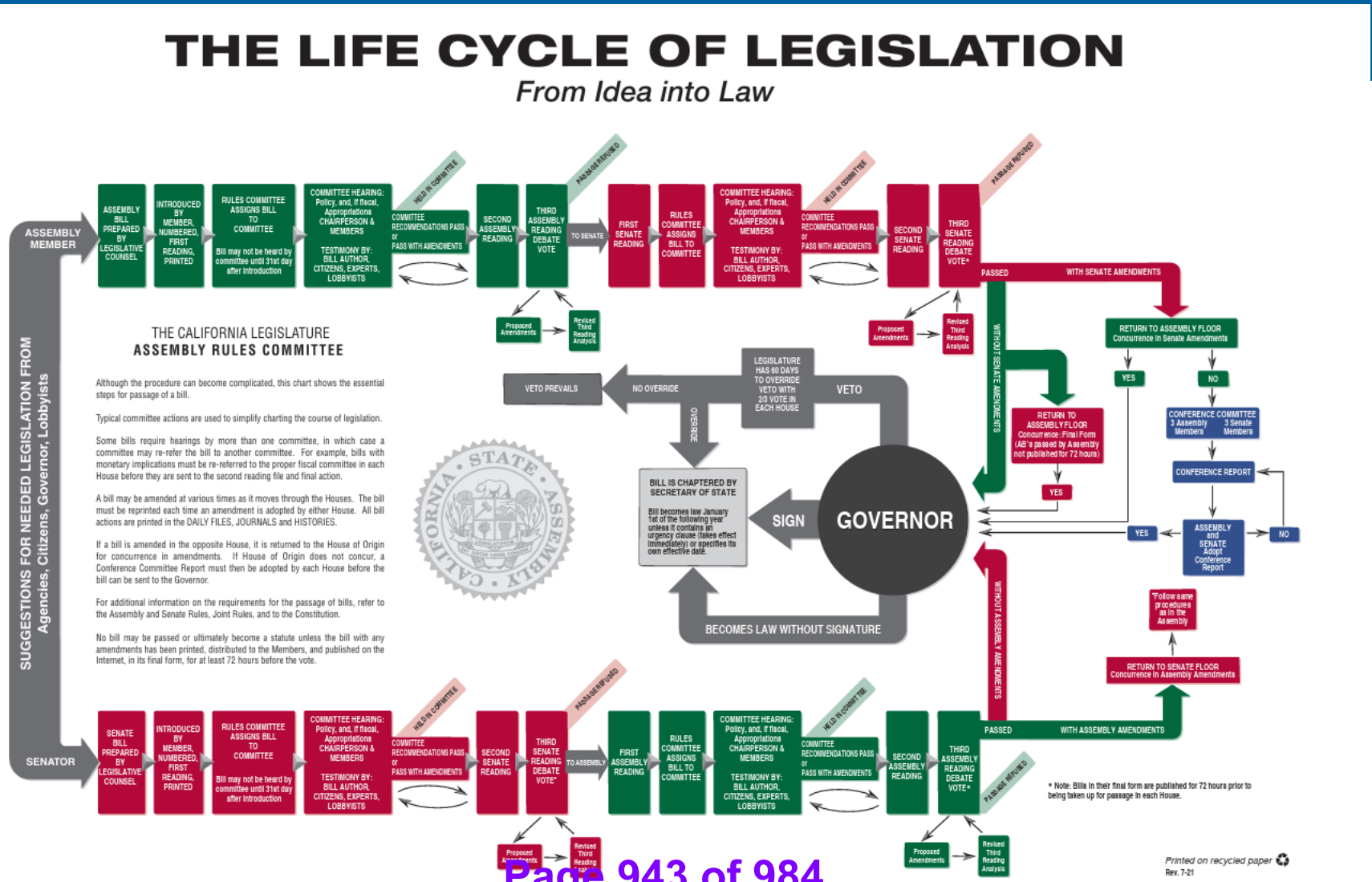


https://www.youtube.com/watch?v=tyeJ55o3El0

High-level overview of the California legislative process



Resource published by the CA State Assembly Clerk



Clarifying California Legislative Terminology

Sponsored Legislation

- "Own" the legislation
  - Draft it, secure the author (legislator to carry the bill), secure co-sponsors, create "fact sheet"
  - Track it
  - Lobby through each step of the process (bi-cameral)
    - Including with legislators, staffers, committee consultants, legislative analysts, etc.
    - Both at district and legislative offices
  - Provide input on amendments (bi-cameral)
  - May be called to testify or secure individuals to testify

Supported Legislation

- Conduct a bill analysis on behalf of your organization
- "Supportive role" towards the legislation
- Notify the author of your position
- Track the legislation
- May write letters as it moves through the process

Additional Legislative Terms



- Statutes
  - Bills / Laws
- House of origin / Second house
  - House where the bill was introduced
  - Other house (not original)
- Author
  - Legislator who agreed to carry the bill
- Amendments
  - Proposed changes
- Appropriations
  - Committee who decides whether a bill that costs $ should be endorsed
- Recess:
  - Legislators are at home in their districts
- Veto
  - Executive branch opposes a bill
- Held in Committee / Held in Suspense
  - Actions that committee can take if they don’t want to vote on a bill. Parking lot and “no man’s land” for bills
- Debate
  - Legislators have the opportunity to speak in support or opposition
- Spot Bill
  - Placeholder for a bill to come.

Legislative Terms:
Additional Resource designed for citizen engagement



Q

QUORUM - number of Members required to be present before business can be transacted: 21 in the Senate and 41 in the Assembly.

R

REAPPORTIONMENT AND APPORTIONMENT - division of the State into districts from which representatives are elected.

READING - presentation of a bill before either house by reading the title, a stage in the enactment of a measure. A bill, until passed, is either in process of first, second or third reading, no matter how many times it has actually been read.

RECONSIDERATION - motion which, when granted, gives rise to another vote annulling or reaffirming an action previously taken.

REFERENDUM - power of voters to reject a measure adopted by the Legislature by collecting enough signatures to place it on the ballot.

RESOLUTION - an opinion expressed by one or both houses which does not have the force of law. Concurrent resolutions and joint resolutions are voted on by both houses but do not require the Governor's signature.

ROLLCALL - a vote of a committee or the full Assembly or Senate. Committee rollcalls are conducted by the committee secretary who calls each member's name in alphabetical order with the Chair's name last. Assembly rollcalls are conducted electronically with each member pushing a button from his/her assigned seat. Senate rollcalls are conducted by the Reading Clerk who reads each Senator's name in alphabetical order.

RULES - methods of procedure: Joint Rules governing relationship between and affecting matters between the two houses; Standing permanent rules adopted by each house, for its own governance; Temporary practices usually adopted at the beginning of each session until Standing

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https://www.senate.ca.gov/citizensguide

The entire cycle is time sensitive and governed by a legislative calendar. If bills don't move forward by these dates, they stall.

APRIL						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY						
S	M	T	W	TH	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Apr. 6 Legislature reconvenes from **Spring Recess** (J.R. 51(b)(1)).

Apr. 24 Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

May 1 Last day for **policy committees** to hear and report to the Floor **non-fiscal bills** introduced in their house (J.R. 61(b)(6)).

May 8 Last day for **policy committees** to meet prior to June 1 (J.R. 61(b)(7)).

May 15 Last day for **fiscal committees** to hear and report to the Floor bills introduced in their house (J.R. 61 (b)(8)). Last day for **fiscal committees** to meet prior to June 1 (J.R. 61 (b)(9)).

May 25 Memorial Day.

May 26 – 29 Floor Session only. No committees, other than conference or Rules committees, may meet for any purpose (J.R. 61(b)(10)).

May 29 Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).

This is why we need a dedicated teleconference to discuss bills before they are voted on by the Floor.

Session Objectives and Tangible Learning Outcomes



Increase familiarity with legislative structure, process and points of influence.

- **Demonstrate** legislative resources available to the public to assist with bill analysis and identify code sections

Let’s consider the bills that DHBC was reviewing as of July 2026

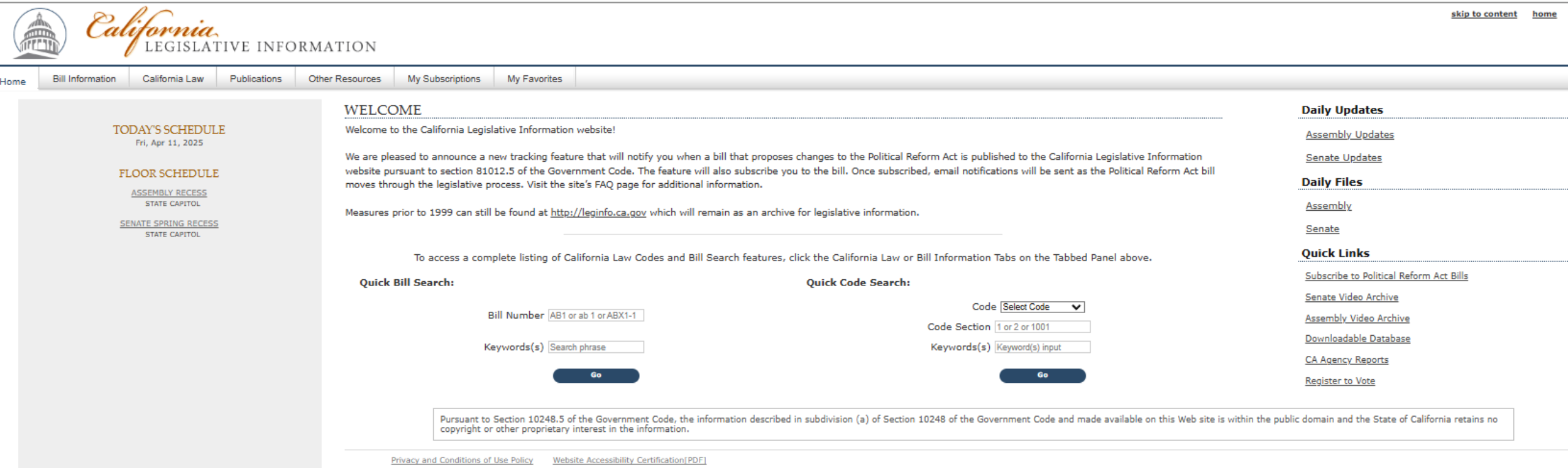
a) Assembly Bill (AB) 1952 – Berman: Dentistry: dental hygienists: licensure.
b) AB 350 – Bonta: Health care coverage: fluoride treatments.
c) AB 2140 – Johnson: Healing arts: reports: claims against licensees.
d) Senate Bill (SB) 1311 – Wahab: Licensed Professions.
e) AB 1130 – Berman: ~~Dentistry: outreach and support program~~ Political Reform Act of 1974: campaign disclosures.
f) AB 1629 – Haney: Dental Coverage.
g) AB 1670 – Arambula: Medi-Cal: dental care.
h) AB 1717 – Castillo: Medi-Cal dental reimbursement: house/extended care facility call.
i) AB 1760 – Arambula: Dentistry.
j) AB 1811 – Rogers: Health ~~professional shortage areas~~ professionals.
k) AB 2029 – Sharp-Collins: Dental Plan Portal.
l) AB 2625 – Solache: Dental Practice Act: foreign dental schools.
m) AB 2694 – Alvarez: Public postsecondary education: community colleges: statewide baccalaureate degree program.
n) SB 1187 – Durazo: Open ~~meetings: majority~~ meetings.
o) SB 1391 – Wahab: Department of Consumer Affairs: retired category licenses.
p) SB 1416 – Wahab: Physicians and surgeons: dentists: unprofessional conduct.

How do I ensure that I am knowledgeable and fully prepared to discuss these bills?

Actions to do together

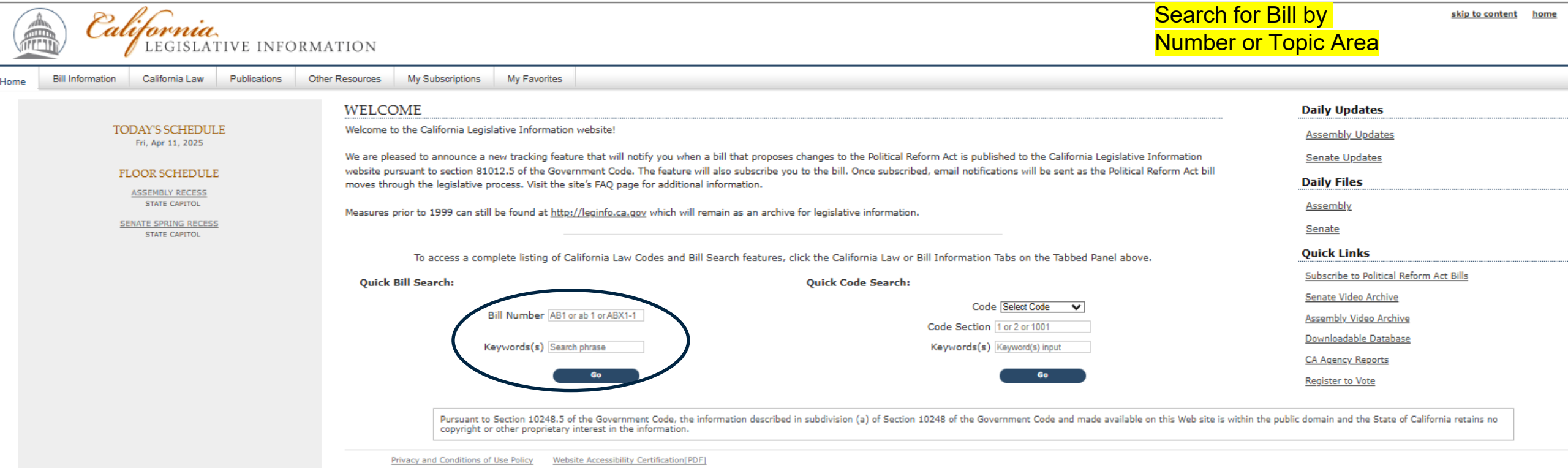
- Search for a bill and a topic area
- Review the tabs: history, status, bill analysis, etc.
- Walk through a committee consultant analysis
- Review the Legislative Index (Publications)
- Identify code section
- Find previous bills

Let’s visit the California Legislative information website together



https://leginfo.legislature.ca.gov/

Let’s visit the California Legislative information website together



https://leginfo.legislature.ca.gov/

Let’s walk through the website together using AB 1717 (2026)

Review each tab:
History, status, bill analysis



Bill PDF | Add To My Favorites | Track Bill | Version: 04/23/26 - Amended Assembly Go

AB-1717 Medi-Cal dental reimbursement: house/extended care facility call. (2025-2026)

Text | Votes | History | Bill Analysis | Today's Law As Amended | Compare Versions | Status | Comments To Author

SHARE THIS:

Date Published: 04/23/2026 09:00 PM

AMENDED IN ASSEMBLY APRIL 23, 2026

CALIFORNIA LEGISLATURE— 2025–2026 REGULAR SESSION

ASSEMBLY BILL **NO. 1717**

Introduced by Assembly Member Castillo

February 04, 2026

An act to add Section 14132.87 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1717, as amended, Castillo. Medi-Cal dental reimbursement: house/extended care facility call.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, including certain dental services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions.

Under the Medi-Cal Dental Provider Handbook, the maximum allowance for a house/extended care facility call under a specified billing code is $20.

This bill would require the department to increase the Medi-Cal reimbursement base rate for a house/extended care facility call in order to reflect the reasonable travel costs for purposes of delivering dental services in the patient’s private residence or applicable facility instead of the location of the dental provider. ~~The bill would require that the rate be adjusted to a minimum of $120 per patient per date of service, with subsequent readjustments every 2 years to account for inflation and provider cost data.~~

One of the most helpful resources are the Committee Consultant Analysis reports

(Bill Analysis tab)

Date of Hearing: April 21, 2026

ASSEMBLY COMMITTEE ON HEALTH
Mia Bonta, Chair
AB 1717 (Castillo) – As Introduced February 4, 2026

SUBJECT: Medi-Cal dental reimbursement: house/extended care facility call.

SUMMARY: Requires the Department of Health Care Services (DHCS) to increase reimbursement for a specific dental code that applies to "house call" services for dental trea of a homebound individual, and requires regular updates and reporting. Specifically, **this bi**

1) Requires DHCS to increase the Medi-Cal reimbursement base rate for a house/extended facility call under Current Dental Terminology (CDT) Code D9410 or its successor, to r reasonable travel costs of delivering dental services in a patient's private residence or applicable facility instead of the location of the dental provider.

2) Sets $120 as a minimum reimbursement floor for this code and requires DHCS to adjust rate as soon as possible to this amount. Requires the rate to thereafter be readjusted ever years to account for inflation and provider cost data, while not falling below $120.

3) Requires, every two years, DHCS to report to the Legislature about the impact of the rat adjustments on access, utilization, and reductions in emergency department visits for de conditions.

4) Allows DHCS to implement this bill using nonregulatory guidance, such as a provider bulletin, and makes the bill contingent on a budget appropriation, any necessary federal approvals, and the availability of federal matching funds.

EXISTING LAW:

1) Establishes the Medi-Cal Program, administered by DHCS, to provide comprehensive h benefits to low-income individuals who meet specified eligibility criteria. [Welfare and Institutions Code (WIC) § 14000, *et seq.*]

2) Establishes a schedule of benefits under the Medi-Cal program, which includes federall required and optional Medicaid benefits. [WIC § 14132]

3) Specifies coverage of adult dental benefits, including emergency and essential diagnosti restorative dental services, subject to utilization controls, and covers one cleaning and d exam per year to the extent funds are made available in the annual Budget Act. [WIC § 14131.10]

4) Establishes Early and Periodic Screening, Diagnostic and Treatment (EPSDT) as a Med benefit for any individual under 21 years of age, consistent with the requirements of fed law that requires coverage for medically necessary health care services for such individ as specified. [WIC § 14132(v)]

5) Specifies coverage of dental benefits for children, including coverage of the application fluoride, or other appropriate fluoride treatment as defined by DHCS, and other prophyl

FISCAL EFFECT: Unknown. This bill has not been analyzed by a fiscal committee.

COMMENTS:

1) **PURPOSE OF THIS BILL.** According to the author, this bill addresses a critical access gap in dental care for some of California's most vulnerable residents. The author notes older adults, individuals with disabilities, and patients in long-term care facilities often cannot travel to a traditional dental office and must rely on mobile providers. However, the author explains, Medi-Cal currently reimburses just $20 for mobile dental services, which is meant to cover the added time, travel, equipment, and coordination required for these visits. The author asserts this outdated rate does not reflect real-world costs and has discouraged providers from offering mobile services to Medi-Cal patients. By making mobile care financially viable, the author argues, this bill will expand access to preventive and routine dental services, reduce avoidable pain and emergency room visits, and ensure vulnerable Californians can receive care where they live.

2) **BACKGROUND.**

   a) **Medi-Cal Dental Coverage**. State Medicaid programs are required to provide certain benefits, and may choose to provide others at state option. All Medicaid programs cover dental benefits for child enrollees, but adult dental benefits are optional for states. There are no minimum federal requirements for adult dental coverage; states have flexibility to determine what dental benefits are provided to adult Medicaid enrollees. According to the American Dental Association, as of 2025, 38 states and Washington, D.C. have comprehensive dental benefits for adult Medicaid beneficiaries. Medi-Cal covers comprehensive dental benefit levels for adults at the state's option.

   b) **Medi-Cal Dental: Past and Current Budget Cuts**. Although Medi-Cal coverage is now robust, adult dental benefits, along with a list of other optional Medi-Cal benefits, were eliminated from Medi-Cal in 2009 as a budget cost-cutting solution. These benefits were partially restored in 2014, and SB 97 (Committee on Budget and Fiscal Review), Chapter 52, Statutes of 2017, fully restored the remainder of adult dental benefits, effective January 1, 2018.

   More recently, budget challenges have led to additional cuts, including a major pending cut to "Proposition 56" dental supplemental payments that is a topic of budget discussion this year. Proposition 56 of 2016 imposed a tobacco tax; part of the tax revenue was allocated to support supplemental rate increases for Medi-Cal dental services. These supplemental payments enhance reimbursement for specific dental categories including preventive, diagnostic, and restorative services. Since fewer people smoke each year, reducing state tax receipts under Proposition 56, and because the remaining Proposition 56 dollars were redirected to support other categories of health care services, dental supplemental payments have in recent years required General Fund support to maintain. To reduce projected General Fund deficits, the 2025-26 Governor's Budget proposed eliminating dental coverage for adults with unsatisfactory immigration status and eliminating General Fund support for Proposition 56 dental supplemental payments. The Legislature adopted these budget solutions last year but delayed implementation of Proposition 56 dental cuts to July 1, 2026. The 2026-27 Governor's Budget proposes

3) **SUPPORT.** This bill is being sponsored by Golden Age Dental Care, a company who provides mobile dental services in health facilities, and is supported by facilities and advocates for older adults. Supporters say mobile dental services improve access to dental care for Medi-Cal patients who cannot travel to traditional dental offices. They note many older adults, individuals with disabilities, and residents of skilled nursing or long-term car facilities rely on mobile dental providers who deliver services directly in homes or care facilities. Supporters note the current Medi-Cal rate of $20 has remained unchanged for decades and does not reflect the cost of delivering mobile dental care. Supporters explain providing dental services in these settings requires significant additional time and resource including travel, transportation and setup of portable equipment, coordination with facility staff, and longer appointment times for medically complex patients. Because the reimbursement rate is so low, many providers cannot afford to offer these services, leaving some of California's most vulnerable residents without access to basic oral health care. Supporters note this bill addresses the problem and will strengthen provider participation, expanding access to preventive and routine dental care for patients who depend on receivi care where they live.

4) **SUPPORT IF AMENDED**. The California Dental Association (CDA) supports this bill i concept, but requests that it be amended to be contingent on stabilized funding for the Me Cal Dental program with the restoration of Proposition 56 cuts, which CDA asserts are an existential threat to the entire Medi-Cal Dental program.

5) **RELATED LEGISLATION.**

   a) AB 350 (Bonta) would clarify standards for coverage of fluoride varnish for children in the primary care setting and would allow for Medi-Cal reimbursement when specified ancillary and public health staff apply fluoride varnish. AB 350 is pending on the Senate Floor.

   b) AB 1670 (Arambula), also being heard in this committee on April 21, 2026, would require additional compensation to dental providers in Medi-Cal for treatment of certain individuals who have challenges receiving dental treatment because of a physical, behavioral, developmental, or emotional condition, and sets parameters for such payment.

6) **PREVIOUS LEGISLATION.**

   a) SB 980 (Wahab) of 2024 would have added coverage of dental implants under specified circumstances and codified DHCS guidelines regarding the coverage of dental crowns. SB 980 was held on suspense in the Assembly Appropriations Committee.

   b) SB 97 (Committee on Budget and Fiscal Review), Chapter 52, Statutes of 2017, restored many Medi-Cal optional benefits including the remaining optional adult dental services.

   c) AB 82 (Committee on Budget), Chapter 23, Statutes of 2013, partially restored some optional adult dental services in Medi-Cal.

   d) AB X3-5 (Evans), Chapter 20, Statutes of 2009, eliminated certain Medi-Cal optional benefits, including most optional adult dental services, effective July 1, 2009.

7) **AMENDMENTS.** The author and committee have agreed to amendments to reduce administrative burden for DHCS and make rate-setting more consistent with the rate-setting methodology for other dental service codes, which are not set in statute nor updated on a biennial schedule. Amendments will remove the specified dollar amount that constitutes the minimum floor, remove the requirement to regularly update the rate, and remove the reporting requirement.

REGISTERED SUPPORT / OPPOSITION:

Support

Golden Age Dental Care (Sponsor)
AARP
California Advocates for Nursing Home Reform
California Association of Health Facilities
California Association of Oral and Maxillofacial Surgeons
California Dental Hygienists' Association
California Long Term Care Ombudsman Association (CLTCOA)
LeadingAge California

One of the most valuable publications is the Legislative Index (found under Publications)

The Legislative Index is published by the Legislative Counsel.

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DENTISTS AND DENTISTRY
assistants, dental—
duties and functions, AB 873

Subject—Number of bill*

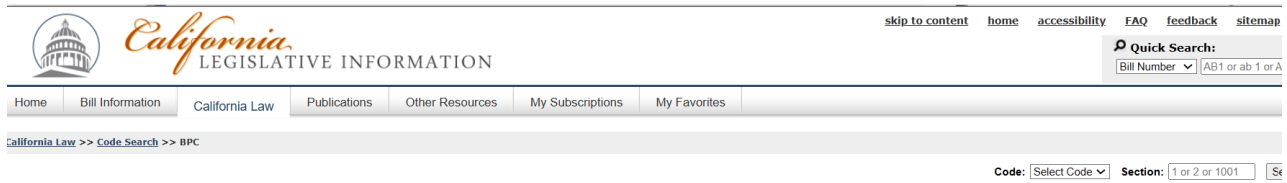
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Explore resources: Legislative Index

Finding code section when needed:

California Law->Code Section->Healing Arts->

Explore resources:
Code Section (*the actual CA law)*



Code Search | Text Search

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So, what does this mean for DHBC members?

- You now have detailed resources to use when considering a bill
  - In March, there are several bills (20+)
  - In May, we have a dedicated teleconference meeting for legislation.
  - In July, we review the bills again after they have cleared the House of Origin (there are inevitably amendments, often quite considerable)

- By law, the materials in our DHBC board packets have to be published 10 days before our meeting. These are often out-of-date by the time we meet.

- This can feel overwhelming. But these resources can ensure you are informed and prepared to vote.

So, what does this mean for DHBC members?

- Use the CA Legislative Information website to:
  - LOCATE A BILL / TOPIC AREA,
  - VERIFY,
  - REVIEW,
  - ANALYZE,
  - DETERMINE NEXT STEPS,
  - COUNT VOTES,
  - CONSIDER SUPPORT / OPPOSITION POSITIONS

NOW THAT YOU HAVE THIS BACKGROUND, ENCORAGE YOU TO BUILD THIS PROCESS INTO YOUR BOARD PREPARATIONS

Session Objectives and Tangible Learning Outcomes

- **Increase** familiarity with legislative structure, process and points of influence.

- **Demonstrate** legislative resources available to the public to assist with bill analysis and identify code sections

THANK YOU

I APPRECIATE YOUR DEDICATION TO DHBC AND TO THE GOVERNMENT AFFAIRS PROCESS



Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 17.

Discussion and Possible Action on a Nomination of a Board Member to the Central Regional Dental Testing Services (CRDTS) Steering Committee.

DHBC Dental Hygiene Board of California

BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • DENTAL HYGIENE BOARD OF CALIFORNIA
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MEMORANDUM

DATE	November 13, 2026
TO	Dental Hygiene Board of California
FROM	Anthony Lum Executive Officer
SUBJECT	**FULL 17: Discussion and Possible Action on a Nomination of a Board Member to the Central Regional Dental Testing Services (CRDTS) Steering Committee.**

BACKGROUND

The Board accepts the dental hygiene clinical examination results administered by the Central Regional Dental Testing Services (CRDTS) to apply toward a California dental hygiene license. In the past, the Board has elected a Board member to represent the Board and California on the CRDTS Steering Committee; however, that Board member no longer serves on the Board and a new member needs to be elected to replace them. This will enhance California's participation in dental hygiene clinical examination issues to ensure that the state has a voice in CRDTS Steering Committee discussions and decisions.

STAFF RECOMMENDATION

Staff recommends for the Board to nominate and elect a Board member to be the representative to CRDTS Steering Committee and participate in their meetings.

PROPOSED MOTION LANGUAGE:

I nominate _____ to represent the Board and the state in the Central Regional Dental Testing Services (CRDTS) Steering Committee meetings to ensure California's dental hygiene clinical examination issues are part of the discussions and decisions made by the Steering Committee.



Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 18.

Discussion and Possible Action on the Education Committee Report and Recommendation(s).



Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 19.

Discussion and Possible Action on the Legislative and Regulatory Committee Report and Recommendation(s).



Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 20.

Licensing, Examination, and Continuing Education Audit Update: Statistical Reports.

License Type	Registered Dental Hygienist (RDH) July 01, 2026 – September 30, 2026								
Exam Title	**RDH Law & Ethics Exam**								
	Total Tested	**Passed**	**%**	**Failed**	**%**	**1st Attempt to Pass Exam**	**%**	**Multiple Attempts to Pass Exam**	**%**
FY 2024/25	1,163	809	70%	354	30%	552	68%	257	32%
Out of State	16	9	56%	7	44%	9	75%	3	25%
FY 2025/26	1230	859	70%	371	30%	556	65%	303	35%
Out of State	32	16	50%	16	50%	13	81%	3	19%
FY 2026/27	378	276	73%	102	27%	183	66%	93	34%
Out of State	5	4	80%	1	20%	4	80%	1	20%

License Type	Registered Dental Hygienist in Alternative Practice (RDHAP) July 01, 2026 – September 30, 2026								
Exam Title	**RDHAP Law and Ethics Exam**								
	Total Tested	**Passed**	**%**	**Failed**	**%**	**1st Attempt to Pass Exam**	**%**	**Multiple Attempts to Pass Exam**	**%**
FY 2024/25	92	78	86%	14	15%	68	87%	10	13%
FY 2025/26	108	86	80%	22	20%	71	83%	15	17%
FY 2026/27	41	33	80%	8	20%	26	63%	7	17%
Out of State (Only recognized in CA)	0	0	0%	0	0%	0	0%	0	0%

CA Registered Dental Hygiene Licensee Population					
Counties	General Population	Current Active Licensee Population	Current Inactive Licensee Population	Total Current Active/Inactive Population	General Population to Licensee Population Ratio
ALAMEDA	1,649,473	690	42	732	2,391:1
ALPINE	1,616	0	0	0	0:1
AMADOR	41,428	32	0	32	1,295:1
BUTTE	207,929	139	4	143	1,496:1
CALAVERAS	46,248	27	1	28	1,713:1
COLUSA	21,984	9	2	11	2,443:1
CONTRA COSTA	1,165,012	663	46	709	1,757:1
DEL NORTE	27,107	7	2	9	3,872:1
EL DORADO	192,662	197	20	217	978:1
FRESNO	1,016,725	433	33	466	2,348:1
GLENN	28,494	11	0	11	2,590:1
HUMBOLDT	135,541	69	5	74	1,964:1
IMPERIAL	180,202	20	0	20	9,010:1
INYO	18,739	10	1	11	1,874:1
KERN	915,075	295	21	316	3,102:1
KINGS	153,298	71	2	73	2,159:1
LAKE	68,152	39	0	39	1,747:1
LASSEN	30,356	16	0	16	1,897:1
LOS ANGELES	9,808,667	2905	149	3054	3,376:1
MADERA	160,940	61	1	62	2,638:1
MARIN	257,969	125	7	132	2,064:1
MARIPOSA	17,082	6	0	6	2,847:1
MENDOCINO	90,244	50	7	57	1,805:1
MERCED	290,201	107	5	112	2,712:1
MODOC	8,600	4	0	4	2,150:1
MONO	13,148	6	0	6	2,191:1
MONTEREY	437,613	174	15	189	2,515:1
NAPA	134,541	88	3	91	1,529:1
NEVADA	102,481	75	2	77	1,366:1
ORANGE	3,165,820	1712	115	1827	1,849:1
PLACER	419,156	435	58	493	964:1
PLUMAS	19,423	7	44	51	2,775:1
RIVERSIDE	2,478,600	1168	44	1212	2,122:1
SACRAMENTO	1,594,006	844	41	885	1,889:1
SAN BENITO	67,290	62	10	72	1,085:1
SAN BERNARDINO	2,197,104	860	52	912	2,555:1
SAN DIEGO	3,288,774	1774	90	1864	1,854:1
SAN FRANCISCO	830,235	261	7	268	3,181:1
SAN JOAQUIN	797,334	266	17	283	2,997:1
SAN LUIS OBISPO	281,555	224	22	246	1,257:1
SAN MATEO	742,340	331	23	354	2,243:1
SANTA BARBARA	443,701	205	14	219	2,164:1
SANTA CLARA	1,902,047	900	50	950	2,113:1
SANTA CRUZ	264,926	186	21	207	1,424:1
SHASTA	181,436	166	14	180	1,093:1
SIERRA	2,746	1	0	1	2,746:1
SISKIYOU	43,466	24	2	26	1,811:1
SOLANO	451,918	252	13	265	1,793:1
SONOMA	485,040	406	17	423	1,195:1
STANISLAUS	553,990	261	14	275	2,123:1
SUTTER	98,857	65	2	67	1,521:1

CA Registered Dental Hygiene Licensee Population					
Counties	**General Population**	**Current Active Licensee Population**	**Current Inactive Licensee Population**	**Total Current Active/Inactive Population**	**General Population to Licensee Population Ratio**
TEHAMA	65,167	41	1	42	**1,589:1**
TRINITY	15,860	3	0	3	**5,287:1**
TULARE	478,693	205	9	211	**2,335:1**
TUOLUMNE	54,498	43	0	43	**1,267:1**
VENTURA	837,469	531	33	549	**1,577:1**
YOLO	220,564	78	11	85	**2,828:1**
YUBA	84,507	32	1	33	**2,641:1**
Total Active/Inactive Licensees within California		17,672	1093	**18,765**	**18,765**
Total Active/Inactive outside of California					**409**
Note: 570 Licenses in the system do not have the county codes captured in the system. **Licensee Count**					**19,744**

The data presented should not be interpreted as an accurate representation of the dental hygiene workforce in California. To estimate the ratio of licenses to the state population, the DHBC relied on address-of-record information for RDH and RDHAP licenses obtained from the internal BreEZe system. These addresses are used solely for licensing purposes and do not reflect workforce participation, employment status, or practice location. California population figures were drawn from the California Demographics Report, February 2026. Because the DHBC does not collect workforce data, these figures should be viewed strictly as licensure data rather than indicators of workforce distribution or capacity.

CA Dental Hygiene Alternative Practice Licensee Population					
Counties	**General Population**	**RDH Active Licensee Population**	**RDH Inactive Licensee Population**	**Total Current Active/Inactive Population**	**General Population to Licensee Population Ratio**
ALAMEDA	1,649,473	31	2	33	**53,209:1**
ALPINE	1,616	3	0	3	**0:1**
AMADOR	41,428	0	1	1	**0:1**
BUTTE	207,929	2	0	2	**103,965:1**
CALAVERAS	46,248	1	0	1	**46,248:1**
COLUSA	21,984	0	0	0	**0:1**
CONTRA COSTA	1,165,012	25	4	29	**46,600:1**
DEL NORTE	27,107	0	0	0	**0:1**
EL DORADO	192,662	4	1	5	**48,166:1**
FRESNO	1,016,725	22	1	23	**46,215:1**
GLENN	28,494	0	0	0	**0:1**
HUMBOLDT	135,541	7	0	7	**19,363:1**
IMPERIAL	180,202	0	0	0	**0:1**
INYO	18,739	0	0	0	**0:1**
KERN	915,075	25	0	25	**36,603:1**
KINGS	153,298	3	0	3	**51.099:1**
LAKE	68,152	7	0	7	**9,736:1**
LASSEN	30,356	1	0	1	**30,356:1**
LOS ANGELES	9,808,667	190	15	205	**51,625:1**
MADERA	160,940	2	0	2	**80,470:1**
MARIN	257,969	8	0	8	**32,246:1**
MARIPOSA	17,082	0	0	0	**0:1**
MENDOCINO	90,244	9	0	9	**10,027:1**
MERCED	290,201	5	0	5	**58,040:1**
MODOC	8,600	2	0	2	**4,300:1**
MONO	13,148	1	0	1	**13,148:1**
MONTEREY	437,613	9	0	9	**48,624:1**
NAPA	134,541	4	0	4	**33,635:1**
NEVADA	102,481	6	0	6	**17,080:1**
ORANGE	3,165,820	61	9	70	**51,899:1**
PLACER	419,156	14	1	15	**29,940:1**
PLUMAS	19,423	0	0	0	**0:1**
RIVERSIDE	2,478,600	42	2	44	**59,014:1**
SACRAMENTO	1,594,006	29	4	33	**54,966:1**
SAN BENITO	67,290	6	0	6	**11,215:1**
SAN BERNARDINO	2,197,104	45	2	47	**48,825:1**
SAN DIEGO	3,288,774	62	3	65	**53,045:1**
SAN FRANCISCO	830,235	10	1	11	**83,024:1**
SAN JOAQUIN	797,334	12	0	12	**66,445:1**
SAN LUIS OBISPO	281,555	12	0	12	**23,463:1**
SAN MATEO	742,340	14	1	15	**53,024:1**
SANTA BARBARA	443,701	7	0	7	**63,386:1**
SANTA CLARA	1,902,047	23	1	24	**82,698:1**
SANTA CRUZ	264,926	4	0	4	**66,232:1**
SHASTA	181,436	12	2	14	**15,120:1**
SIERRA	2,746	0	0	0	**0:1**
SISKIYOU	43,466	2	0	2	**21,733:1**
SOLANO	451,918	4	2	6	**112,980:1**
SONOMA	485,040	15	0	15	**32,336:1**
STANISLAUS	553,990	4	1	5	**138,498:1**

CA Dental Hygiene Alternative Practice Licensee Population					
Counties	**General Population**	**RDH Active Licensee Population**	**RDH Inactive Licensee Population**	**Total Current Active/Inactive Population**	**General Population to Licensee Population Ratio**
SUTTER	98,857	1	1	1	**98,857:1**
TEHAMA	65,167	4	0	4	**16292:1**
TRINITY	15,860	0	0	0	**0:1**
TULARE	478,693	3	0	2	**159.564:1**
TUOLUMNE	54,498	2	0	2	**27249:1**
VENTURA	837,469	13	2	15	**64421:1**
YOLO	220,564	0	0	0	**0:1**
YUBA	84,507	0	0	0	**0:1**
Total Active/Inactive Licensees within California		**768**	**56**	**824**	**824**
Total active/Inactive outside of California					**15**
Note: 87 Licenses in the system do not have the county codes captured in the system.					
Licensee Count					**926**

The data presented should not be interpreted as an accurate representation of the dental hygiene workforce in California. To estimate the ratio of licenses to the state population, the DHBC relied on address-of-record information for RDH and RDHAP licenses obtained from the internal BreEZe system. These addresses are used solely for licensing purposes and do not reflect workforce participation, employment status, or practice location. California population figures were drawn from the California Demographics Report, February 2026. Because the DHBC does not collect workforce data, these figures should be viewed strictly as licensure data rather than indicators of workforce distribution or capacity.

APPLICATIONS RECEIVED: FY 2026/2027													
Type of Application	**Jul.**	**Aug.**	**Sept.**	**Oct.**	**Nov.**	**Dec.**	**Jan.**	**Feb.**	**Mar**	**Apr**	**May**	**June**	**Total YTD**
Initial Licensure Applications													
RDH Application by Exam	110	56	24	34	57	51	49						**381**
RDH Application by Credential	3	2	1	3	2	5	1						**17**
RDHAP Application	8	7	3	3	3	6	14						**44**
Fictitious Name Permit Application	1	5	1	3	0	0	0						**10**
License Renewal Applications													
Type of Application	**Jul.**	**Aug.**	**Sept.**	**Oct.**	**Nov.**	**Dec.**	**Jan.**	**Feb.**	**Mar**	**Apr**	**May**	**June**	**Total YTD**
RDH Renewal Application	995	1457	1502	702	723	704	880						**6,963**
RDHAP Renewal Application	47	62	74	32	28	30	35						**308**
RDHEF Renewal Application	0	0	0	0	0	0	1						**1**
Fictitious Name Permit Renewal Application	0	0	0	6	0	11	6						**23**

LICENSES AND PERMITS ISSUED														
Type of License	**Prior Years**		**Current Year FY 2026/2027**											
	FY 2022/23	**FY 2023/24**	**Jul.**	**Aug.**	**Sept.**	**Oct.**	**Nov.**	**Dec.**	**Jan.**	**Feb.**	**Mar**	**Apr**	**May**	**June**	**Total YTD**
RDH License	802	806	55	78	53	19	45	54	60						**364**
RDHAP License	71	76	2	8	4	4	3	4	8						**33**
Fictitious Name Permit	14	24	2	1	4	4	0	0	0						**11**

License Type									
	18,629	1,115	3,637	12,965		33	215	1,194	
Registered Dental Hygienist in Alternative Practice RDH									
Registered Dental Hygienist in Extended Function RDH									
Fictitious Name Permit (FNP)									
Mobile Dental Hygiene Clinic Unit (MDHC)									
Portable Equipment or Physical Facility Registration									
Military Temporary Licenses (RDH, RDHAP and RDHEF)									
	19,750	**1,190**	**3,866**	**13,255**		**36**	**218**	**1,256**	

DELINQUENT LICENSES THAT WILL CANCEL FOR NON-PAYMENT AFTER 5 YEARS

Delinquent Licenses from 2021-2026 that will Cancel						
Licenses that have been in delinquent status since 2021 will cancel from non-payment of 5 years as of September 30, 2026, 81 of 291 would cancel effective October 3, 2026						

LICENSE STATUS DEFINITIONS

Active - Current and updated license and allowed to practice in CA. Continuing Education (CE) hours completed within the preceding 24 months (biennially) is required to renew the license.
Inactive - Current license but cannot practice in CA. CE hours are not required for the biennial license renewal (exempt).
Delinquent - Biennial license renewal not completed after expiration date. May not practice in CA unless proof of renewal is received and in processing (BPC 121).
Cancelled - License not renewed for 60 months after the last expiration and may not be renewed, restored, reissued, or reinstated (BPC 1939). May not practice in CA.
Retired - Cannot practice in CA and not renewable unless licensee re-activates the retired license and pays a one-time fee to re-activate and meet other requirements
Revoked - Disciplinary action taken; may not practice in CA.
Surrendered - Disciplinary action taken; may not practice in CA.
Military Temporary License - New Temporary License for the spouse or domestic partner of an active-duty military member stationed in California if the applicant currently holds an active and unrestricted license in another state.

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 21.

Enforcement Update: Statistical Report.

CALIFORNIA BUSINESS AND CONSUMER SERVICES AGENCY • GAVIN NEWSOM, GOVERNOR
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P (916) 263-1978 | F (916) 623-4093 | www.dhbc.ca.gov

MEMORANDUM

DATE	November 13, 2026
TO	Members, Dental Hygiene Board of California
FROM	Tifany Moore Assistant Executive Officer
SUBJECT	**Agenda Item FULL 21:** **Enforcement- Review of Statistics and Trends**

The following are the Enforcement Unit statistics for the first quarter of fiscal year 2026/2027

Complaint Intake

COMPLAINTS RECIEVED							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Consumer Complaints Received	**145**	**178**	19				**19**
Board Initiated Complaints	**18**	**7**	3				**3**
Citations Categorized As Board Complaints	**298**	**269**	78				**78**
Arrests/Convictions	**45**	**59**	8				**8**
Applicants	**38**	**12**	9				**9**
Total	**544**	**525**	**117**				**117**

COMPLAINT CLOSURES W/NO ADDITIONAL DISCIPLINARY OR ADMINISTRATIVE ACTION							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
License Application With Criminal Conviction Approved	**31**	**11**	0				**0**
Insufficient Evidence	**11**	**28**	1				**1**
No Violation	**62**	**32**	0				**0**
No Jurisdiction	**59**	**90**	16				**16**
Other	**16**	**24**	0				**0**
Total	**179**	**185**	**17**				**17**

COMPLAINT CASE TYPE RECEIVED							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Criminal Charges /Convictions	**83**	**67**	16				**16**
Fraud	**5**	**2**	0				**0**
Incompetence/ Negligence	**5**	**2**	1				**1**
Non-Jurisdictional	**3**	**3**	0				**0**
Sexual Misconduct	**0**	**2**	0				**0**
Substance Abuse - No criminal charges	**0**	**1**	0				**0**
Unprofessional Conduct*	**379**	**399**	86				**86**
Unlicensed	**16**	**11**	5				**5**
Unsafe/Unsanitary Conditions	**2**	**13**	1				**1**
Other	**51**	**25**	7				**7**
Total	**544**	**525**	**116**				**116**

*Citations issued for failed CEU Audits are entered into BreEZe as Unprofessional Conduct.

Investigations

OPEN INVESTIGATIONS												
FY 26/27												
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
Desk Investigations	11	4	6									
Field Investigations	5	5	7									
Total	**16**	**9**	**13**									

CLOSED INVESTIGATIONS												
FY 26/27												
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
Desk Investigations	7	9	3									
Field Investigations	11	10	9									
Total	**18**	**19**	**12**									

CASE AGING FOR INVESTIGATIONS (OPEN CASES)												
Desk Investigations FY 26/27												
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
0 - 90 Days	15	14	8									
3 - 6 months	12	10	15									
7 months – 1 year	20	22	23									
1 - 2 years	10	10	10									
Over 3 years	2	2	3									

CASE AGING FOR INVESTIGATIONS (OPEN CASES)												
Field Investigations FY 26/27												
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
0 - 90 Days	10	11	12									
3 - 6 months	12	10	7									
7 months – 1 year	8	4	4									
1 - 2 years	7	7	7									
Over 3 years	4	4	3									

Attorney General's Office

ATTORNEY GENERAL							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Cases Transmitted to AG	**22**	**19**	4				**4**
Statement of Issues Filed	**1**	**3**	0				**0**
Accusations Filed	**25**	**10**	4				**4**
Accusations Withdrawn	**1**	**1**	0				**0**

DISCIPLINARY OUTCOMES							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Revocation	**2**	**8**	0				**0**
Surrender	**0**	**0**	0				**0**
Public Reproval	**8**	**3**	0				**0**
Probation	**7**	**4**	1				**1**
Total	**17**	**15**	**1**				**1**

PROBATION SUBSEQUENT DISCIPLINE							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Subsequent Case Transmitted to AG	**1**	**3**	0				**0**
Petition to Revoke Probation Filed	**0**	**2**	0				**0**
Accusation Filed	**4**	**3**	0				**0**
Probation Revoked	**1**	**2**	0				**0**
Probation Extended	**0**	**1**	0				**0**

Probation

PROBATION CASES							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Active Probationers	**21**	**20**	22				**22**
Tolled Probationers	**3**	**3**	3				**3**
Biological Testing Probationers	**26**	**19**	25				**25**
Positive Drug Screen for Banned Substances	**3**	**7**	0				**0**
Violations of Probation Addressed	**4**	**3**	0				**0**

Citations Statistics

CITATIONS ISSUED							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Failed CE Audit	**291**	**240**	77				**77**
Enforcement Discipline for Practice or Conduct Violations	**21**	**14**	4				**4**
Total	**312**	**254**	**81**				**81**

CITATION INFORMAL CONFERENCE RESULTS							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Citation Affirmed	**9**	**3**	3				**3**
Citation Modified	**29**	**11**	9				**9**
Citation Dismissed	**13**	**6**	3				**3**
Total	**51**	**17**	**15**				**15**

TOTAL FINE AMOUNT ORDERED							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Citations Issued	**$ 268,200**	**$221,350**	$59,150				**$59,150**
Citations Modified	**$ 14,825**	**$9,550**	$4,758				**$4,758**
Citations Dismissed	**$ 12,350**	**$8,000**	$4,766				**$4,766**
Total Amount of Fines	**$ 241,025**	**$203,800**	**$49,626**				**$49,626**

Request for Payment Statistics

REQUEST FOR PAYMENT NOTICES SENT						
	FY 25/26	FY 26/27				
	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Request for Payment Notice 1	**28**	16				**16**
Request for Payment Notice 2	**13**	9				**9**
Request for Payment Notice 3	**2**	12				**12**
Referred to FTB	**2**	6				**6**
Initial Fine Outstanding Fine Amount	**$34,175**	$57,031				**$57,031**
Payments Received	**$13,354**	$17,492				**$17,492**
Outstanding Fines Grand Total	**$20,821**	**$39,539**				**$39,539**

ACCOUNTS WITH FTB FOR INTERCEPTION	
Total Active Accounts	**46**
Total Completed Accounts	**1**
Total Amount Of Outstanding Fines	**$64,600**
Total Amount Received Via FTB Interception	**$3,714**
Outstanding Fines Grand Total	**$60,886**

Payment Plans

PAYMENT PLANS						
	FY 25/26	**FY 26/27**				
	YTD	**Jul-Sept**	**Oct-Dec**	**Jan-Mar**	**Apr-Jun**	**YTD**
Total Pending Payment Plans	**14**	18				**18**
Initial Fine Amount Total	**$16,250**	$20,500				**$20,500**
Total Amount Paid	**$3,266**	$7,983				**$7,983**
Current Total Balance	**$12,983**	**$12,517**				**$12,517**

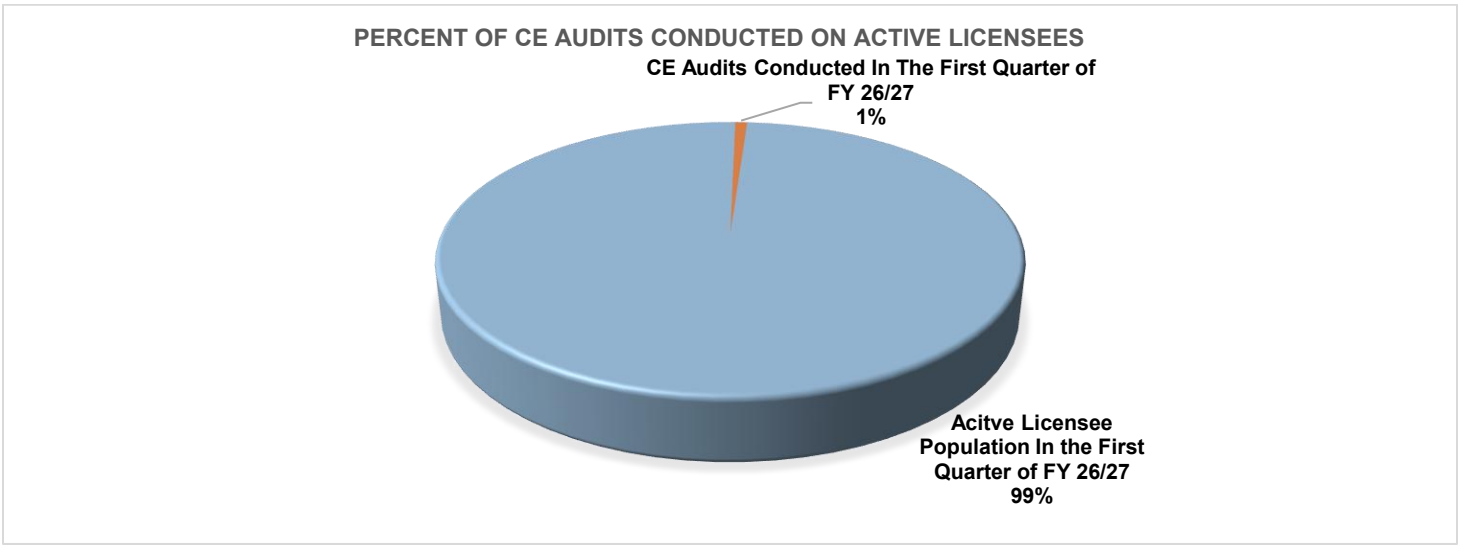
CE Audit Statistics

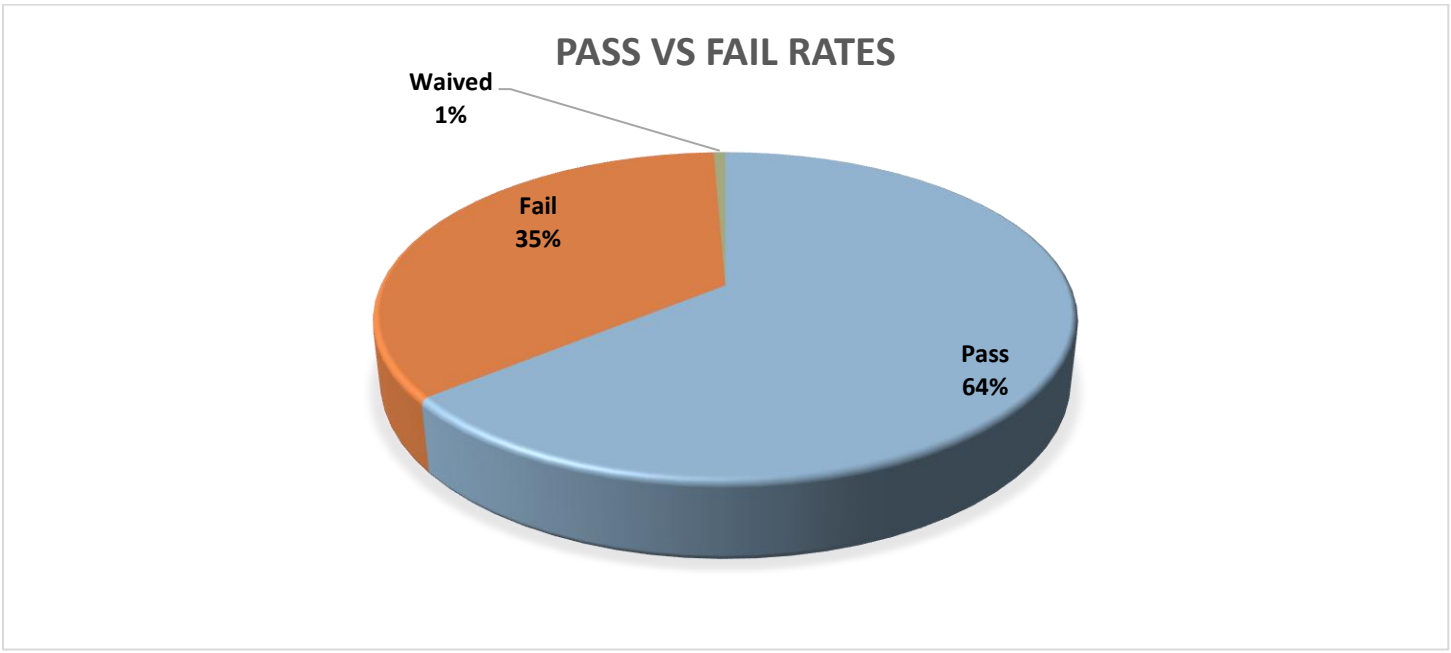
CE AUDIT RESULTS							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
Pass	**514**	**417**	100				**100**
Fail	**325**	**293**	55				**55**
Waived*	**-**	**-**	1				**1**
Total Audits Conducted	**839**	**710**	**156**				**156**

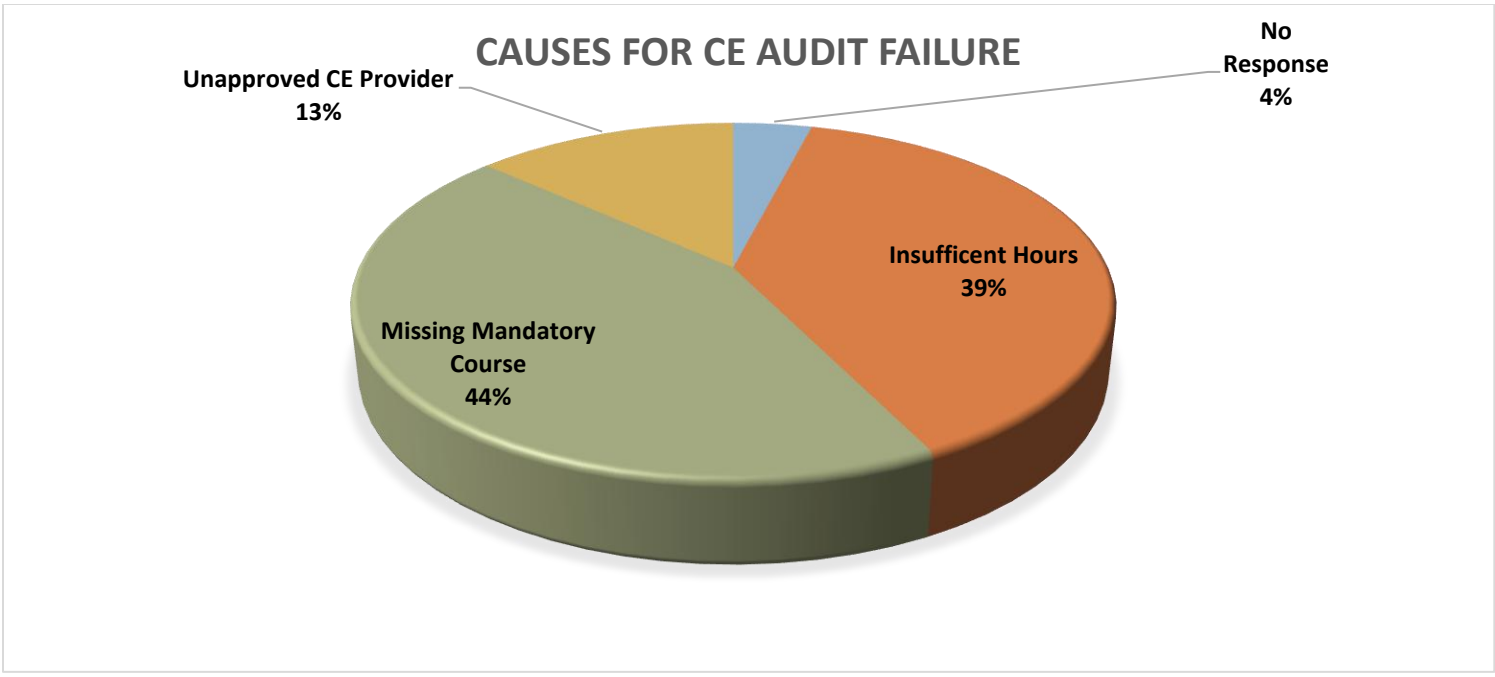
*This is new data for this report.

CAUSE FOR CE AUDIT FAILURE							
	FY 24/25	FY 25/26	FY 26/27				
	YTD	YTD	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	YTD
No Response	**43**	**42**	3				**3**
Insufficient Hours	**61**	**66**	29				**29**
Missing Mandatory Course(s)	**132**	**126**	33				**33**
Unapproved CE Provider	**89**	**59**	10				**10**
Total	**325**	**293**	**75**				**75**

CE Audit Pie Charts






CAUSES FOR CE AUDIT FAILURE
Unapproved CE Provider
13%
No
Response
4%
Insufficent Hours
39%
Missing Mandatory
Course
44%

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 22.

Proposal of Future Agenda Items.

DHBC
Dental Hygiene
Board of California

Saturday, November 14, 2026

Dental Hygiene Board of California

FULL Board Agenda Item 23.

Adjournment.