



**Dental Hygiene Board of California
California Department of Consumer Affairs**

INITIAL STATEMENT OF REASONS

Hearing Date: The Board has not scheduled a hearing in this matter.

Subject Matter of Proposed Regulations: Definitions

Sections Affected: Section 1103 of Title 16 California Code of Regulations (CCR)

Specific Purpose of Each Adoption, Amendment, or Repeal:

1. Problem Being Addressed:

The Dental Hygiene Board of California (Board) is the entity charged with oversight authority of registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended functions (collectively RDHs). BPC sections 1905 and 1906 authorize the Board to adopt, amend, and revoke regulations to implement the statutory requirements of Article 9 of Chapter 4, BPC sections 1900 through 1967.4, regarding dental hygienists.

Stakeholders have apprised the Board that the current regulatory language definitions regarding RDH educational programs do not adequately define areas of instruction. The Board proposes to address these and other issues discussed herein with this proposed rulemaking.

Additionally, effective January 1, 2019, Senate Bill 1482 (Hill, Chapter 858, Statutes of 2018) (SB 1482) changed the Dental Hygiene Committee of California (DHCC) to the Dental Hygiene Board of California (DHBC). As a result of this statutory change from a "Committee," to a "Board," the Board proposes to amend the definitions in section 1103 to update the language in the regulation from "Committee" to "Dental Hygiene Board."

At the Board's May 29, 2020 Full Teleconference meeting, this regulatory proposal was presented to the Board for its review and approval. The Board approved the proposed language and delegated authority to the Board's executive officer to make any technical, non-substantive changes, if necessary.

2. Anticipated Benefit(s) from this Regulatory Action:

The proposed amendments to section 1103 will benefit licensees and the public by clarifying the definitions contained therein by updating inconsistent language and providing additional descriptive language to further define certain terms.

Factual Basis and Rationale:

Amend section 1103 of Article 3 of Division 11 of Title 16 of the CCR (Definitions).

Section 1103, amendments to replace “Committee” with “Dental Hygiene Board”

The Board proposes to amend “Committee” to “Dental Hygiene Board” for consistency with SB 1482. The term is replaced in subdivisions (a) and (e) of section 1103.

Section 1103, subdivision (a), definition of “Academic year.”

The Board proposes amendments to subdivision (a) to further define and clarify the definition of “academic year” to: (1) provide that the 45 quarter units or 30 semester units must be within a 12-month period; and (2) provide an alternative definition of three quarters or two semesters which also must be within a 12-month period.

Stakeholders have apprised the Board that the definition of “Academic year” is unclear as to the timeframe in which quarter or semester units must be obtained. Therefore, the Board proposes to redefine the term by reference to a 12-month period in which semesters or quarters occur and/or the units obtained. These amendments are necessary to clarify the definition and better reflect the Board’s intent.

Section 1103, subdivision (c), definition of “Approved accreditation standards.”

The Board proposes to amend the definition of “Approved accreditation standards” as follows:

1. Delete “for the purposes of this section.”

This statement is unnecessary and confusing because the preface of the regulation states that the definitions are provided for purposes of Division 11 of Title 16.

2. Delete “contained in the” and replacing with “issued by.”

It is more accurate to state “issued by” because the standards referenced are issued by the Commission on Dental Accreditation (CODA).

3. Delete “Accreditation’s ‘Accreditation Standards for Dental Hygiene Education Programs (as last revised February 6, 2015)’ which is hereby incorporated by reference and.”

The Board proposes to reference the accreditation standards and their statutory authority in statute and where they can be located on the internet instead of their last revision date. The standards are revised periodically, and this change eliminates the need to revise the regulation each time the standards are revised.

CODA has been granted accreditation authority for dental and dental-related education by the United States Department of Education (USDE) since 1952. According to its website, this recognition affirms for the public and governmental funding and licensure agencies that CODA adheres to good accreditation practice, i.e., the Secretary of Education's *Criteria for Recognition*. The USDE conducts reviews for continued recognition at five-year intervals. CODA was most recently granted re-recognition by the USDE Office of Postsecondary Education in July 2013.

Based on its status as an accreditation authority in the United States, the Board proposes to simply refer to CODA standards instead of a particular document based on "status conferred" principles.

4. Add "<https://www.ada.org/en/coda> as set forth in BPC 1905(a)(1)" and delete "and referenced throughout this article."

The Board proposes to add a website reference to CODA along with the statutory authority of BPC 1905(a)(1) authorizing the use of CODA Standards and delete "and referenced throughout this article." As explained above, referring the reader to CODA's website where they find the operative CODA standards eliminates the need to state a last revised date in the regulation. "[A]nd referenced throughout this article" is unnecessary because the preface of the regulation states that the definitions are provided for purposes of Division 11 of Title 16.

Section 1103, subdivision (d), definition of "Clinical instruction."

The Board proposes to delete "as referenced in subsection (c) of section 1103 of this article." This phrase is unnecessary because the regulation already instructs the reader how "approved accreditation standards" is defined in subdivision (c).

Section 1103, subdivision (e), definition of "Clinical practice."

The Board proposes to add "with patients" to follow "planned learning experiences." This amendment is necessary for clarity that "clinical practice" shall include working on live patients and not simulated patients, the latter of which would be considered "preclinical" experience.

The Board proposes to delete "skills labs, simulation labs, and computer labs." Skills labs, simulation labs, and computer labs are utilized in preclinical settings. They are not

appropriately considered for clinical practice because they do not entail patient care.

The Board proposes to add “clinics” and “extramural clinical facilities” to define additional facilities where clinical practice may permissibly take place. These facilities are appropriate because clinics and extramural facilities where dental hygiene may be practiced on live patients. Clinics and extramural clinical facilities require infection control practice procedures, which enhances safety for dental hygiene practice on live patients.

Section 1103, subdivision (k)(6), definition of “Dental hygiene process of care.”

The Board proposes to delete the final sentence of subdivision (k) and insert “shall meet approved accreditation standards” to the second sentence. This amendment is non-substantive because the Board is merely moving this phrase to another location in subdivision (k), without changing the meaning.

The Board is deleting “as referenced in subsection (c) of section 1103 of this article” in the final sentence of subdivision (k). This phrase is unnecessary because the regulation already instructs the reader how “approved accreditation standards” is defined in subdivision (c).

Section 1103, subdivision (r), definition of “Laboratory instruction.”

The Board proposes to delete “referenced in subsection (c) of section 1103 of this article.” This phrase is unnecessary because the regulation already instructs the reader how “approved accreditation standards” is defined in subdivision (c)

Section 1103, subdivision (y), definition of “Preclinical instruction.”

The Board proposes to add “Preclinical instruction may include supervised learning experiences provided in various settings, including, but not limited to, dental hygiene skills labs, simulation labs, and computer labs,” and delete “referenced in subsection (c) of section 1103 of this article.” This amendment is necessitated by the removal of “skills labs, simulation labs, and computer labs” from the definition of “clinical practice” in subdivision (e). Stakeholders have apprised the Board that skills labs, simulation labs, and computer labs are utilized in preclinical settings. These learning formats are not properly considered as clinical practice because they do not entail patient care.

The Board proposes to delete “referenced in subsection (c) of section 1103 of this article.” This phrase is unnecessary because the regulation already instructs the reader how “approved accreditation standards” is defined in subdivision (c).

Underlying Data:

Technical, theoretical or empirical studies, reports, or documents relied upon (if any):

- Minutes: DHBC Full Board Teleconference May 29, 2020.
- Printout from <https://www.ada.org/en/coda/accreditation/faq> (retrieved on 7/9/20).
- Academic Year Definition: 5 CCR section 30000.

Business Impact:

This regulation will not have any economic impact on businesses. This initial determination is based on the following facts:

The proposed amendments to the regulation would simply clarify definitions within the regulation that are applicable to RDH educational programs and therefore will not create any sort of economic impact.

Economic Impact Assessment:

This regulatory proposal will have the following effects:

- It will not create or eliminate jobs within the State of California because the regulations are aimed at clarifying definitions for RDH educational programs.
- It will not create new businesses or eliminate existing business within the State of California because the regulations are aimed at clarifying definitions for RDH educational programs.
- It will not affect the expansion of businesses currently doing business within the State of California because the regulations are aimed at clarifying definitions for RDH educational programs.
- This regulatory proposal benefits the health and welfare of California residents because it would clarify definitions for RDH educational programs, ensuring that RDH educational programs adhere to acceptable clinical treatment processes when working with live patients.
- This regulatory proposal does not affect worker safety because it does not involve worker safety.
- This regulatory proposal does not affect the state's environment because it does not involve environmental issues.

Specific Technologies or Equipment:

This regulation does not mandate the use of specific technologies or equipment.

Consideration of Alternatives:

No reasonable alternative to the regulatory proposal would be either more effective in carrying out the purpose for which the action is proposed or would be as effective or less burdensome to affected private persons and equally effective in achieving the purposes of the regulation in a manner that ensures full compliance with the law being

implemented or made specific.

Set forth below are the alternatives which were considered and the reasons each alternative was rejected:

1. Refrain from amending the regulation: This option is not reasonable because as it stands, educators have come forward to request clarity within the regulation with regard to the definitions applicable to RDH educational programs. The Board is not aware of any opposition to the proposed amendments with regard to RDH educational program definitions.
2. Amend the regulation: The Board determined that this alternative is the most feasible because the regulation would clarify language with regard to definitions applicable to RDH educational programs.

Any interested person may submit comments to the Board in writing relevant to the above determinations at 2005 Evergreen Street, Suite 2050, Sacramento, California 95815.