

Ana Karina Mascarenhas, BDS, MPH, DrPH, FDS RCPS (Glasg)

Testimony before

Oregon State Legislature

House Committee on Health Care

Re: HB 2528

March 4, 2021

Chairperson Prusak and committee members, thank you for the opportunity to share information about accreditation of dental therapy education programs and their relation to dental therapists' scope of practice.

I currently serve as a professor at Nova Southeastern University, having served as the associate dean for research for 9 years. I am a Diplomate of the American Board of Dental Public Health. My previous roles include: Executive Director of the American Board of Dental Public Health; President of the American Association of Public Health Dentistry; President of the American Board of Dental Public Health; and the Commission on Dental Accreditation (CODA)'s Commissioner for Dental Public Health.

The Commission on Dental Accreditation (CODA) is the specialized accrediting agency recognized by the United States Department of Education to accredit programs that provide basic preparation for licensure or certification in dentistry and the related disciplines.

During the time I served as CODA Commissioner for Dental Public Health the process to develop standards to accredit dental therapy education programs was developed. This was a multi-year process involving many experts nationwide. The first dental therapy accreditation standards were developed by CODA in 2013. Prior to approving the standards in February 2015, the Commission carefully considered comments received from all sources. The accreditation standards were implemented in August 2015. I will refer to them here as "*standards*."

The assessment of educational program quality is the foundation for the *standards*. In addition to emphasizing quality education, the top two goals that the *standards* are designed to meet are:

1. to protect the public welfare; and
2. to promote an educational environment that fosters innovation and continuous improvement.

I will discuss these two goals further, as I believe they should be considered when making decisions regarding dental therapy authorization.

1. To protect public welfare. An education program that has been granted accreditation by CODA has received thorough evaluation and has been determined to be in the public's best interest. This is true for the entirety of the program's curriculum and implementation, including all procedures taught that might exceed the minimum standards required by CODA.
2. To promote... innovation and continuous improvement. The *standards* further explain this goal by stating the following: "The importance of institutional academic freedom is recognized by the Commission, and the Accreditation Standards allow institutions considerable flexibility in

structuring their educational programs. The Commission encourages the achievement of excellence through curricular innovation and development of institutional individuality. Dependent upon its objectives, resources, and state practice act provisions, the institution may elect to extend the scope of the curriculum to include content and instruction in additional areas.” “The school identifies the competencies that will be included in the curriculum based on the school’s goals, resources, accepted dental therapy responsibilities and other influencing factors. Recognizing that there is a single standard of dental care, the care experiences provided for patients by students should be adequate to ensure competency in all components of dental therapy.”

The *standards* are thereby encouraging programs to be responsive to the needs of their states and to teach those skills that their state or regulatory agency deems important. They then state, “Where graduates of a CODA-accredited dental therapy program are authorized to perform additional functions defined by the program’s state-specific dental board or regulatory agency, program curriculum must include content at the level, depth, and scope required by the state.”

CODA accreditation applies to the whole program, and so is validation of the program's entire curriculum. The CODA standard for dentists 2-24 says “At a minimum, graduates must be competent in providing oral health care within the scope of general dentistry, as defined by the school.” In fact, the CODA standards for dentists does not even mention the word “extractions”, yet all dental schools teach their students to perform this procedure. CODA in all its accreditation standards refers to “minimum” giving dental schools and educational programs maximum flexibility to meet the public’s oral health needs and state requirements.

Given CODA’s rigorous standards and procedures, I do not doubt that students graduating from a CODA accredited program are competent to perform all procedures in their program’s curriculum. I am further confident that programs accredited by CODA, or those substantially equivalent, are producing high quality oral health care providers – be they dentists, specialist, dental hygienists or dental therapists.

At this time, one dental therapy education program has achieved CODA accreditation: the Alaska Dental Therapy Education Program. At least two others are in the process of obtaining accreditation.

Please do not hesitate to contact me with any questions.

Sincerely,

Ana Karina Mascarenhas, BDS, MPH, DrPH, FDS RCPS (Glasg)