To: Oregon Senate Committee on Health Care Re: HB 2996 & HB 3223

Chair Patterson, Vice-Chair Hayden, and Members of the Senate Committee on Health Care:

I am writing as a dental assisting program director in Nevada with information that may be of interest to you as you consider HB 2996 and HB 3223. I have been a Dental Assisting Program Director since 1998, having started working as an instructor in 1995. I have seen a decline in the number of people who are interested in dental assisting since 2016 and most acutely since 2020. In Nevada there are no requirements to become a dental assistant. The list of allowable tasks for dental assistants is large in comparison to some states.

NAC 631.220 Dental assistants: Authorization to perform certain services; supervision by dental hygienist for certain purposes. (<u>NRS 631.190</u>, <u>631.313</u>, <u>631.317</u>)

- 1. A dentist who is licensed in the State of Nevada may authorize a dental assistant in his or her employ and under his or her supervision to perform the following procedures before the patient is examined by the dentist:
 - a. Expose radiographs; and
 - b. Take impressions for the preparation of diagnostic models.
- 2. A dentist who is licensed in the State of Nevada may authorize a dental assistant in his or her employ and under his or her supervision only to do one or more of the following procedures after the patient has been examined by the dentist:
 - a. Retract a patient's cheek, tongue or other tissue during a dental operation.
 - b. Remove the debris that normally accumulates during or after a cleaning or operation by the dentist by using mouthwash, water, compressed air or suction.
 - c. Place or remove a rubber dam and accessories used for its placement.
 - d. Place and secure an orthodontic ligature.
 - e. Remove sutures.
 - f. Place and remove a periodontal pack.
 - g. Remove excess cement from cemented restorations and orthodontic appliances. A dental assistant may not use a rotary cutting instrument to remove excess cement from restorations or orthodontic appliances.
 - h. Administer a topical anesthetic in any form except aerosol.
 - *i.* Train and instruct persons in the techniques of oral hygiene and preventive procedures.
 - *j.* Take the following types of impressions:
 - *i.* Those used for the preparation of counter or opposing models;
 - ii. Those used for the fabrication of temporary crowns or bridges; and
 - *iii.* Those used for the fabrication of temporary removable appliances, provided no missing teeth are replaced by those appliances.
 - *k.* Fabricate and place temporary crowns and bridges. This procedure must be checked and approved by the supervising dentist before dismissal of the patient from the office of the dentist.
 - *I.* Retract gingival tissue if the retraction cord contains no medicaments that have potential systemic side effects.
 - *m.* Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A

licensed dentist or dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.

- n. Administer a topical fluoride.
- o. Apply pit and fissure sealant to the dentition for the prevention of decay. This procedure must be checked and approved by the supervising dentist before dismissal of the patient from the office of the dentist.
- *p.* Fit orthodontic bands and prepare teeth for orthodontic bands if the bands are cemented or bonded, or both, into the patient's mouth by the dentist who authorized the dental assistant to perform this procedure.
- 3. A dentist who is licensed in the State of Nevada may authorize a dental hygienist to supervise a dental assistant in the assistance of the hygienist's performance of one or more of the following:
 - a. Retract a patient's cheek, tongue or other tissue during a dental operation.
 - b. Remove the debris that normally accumulates during or after a cleaning or operation by the dental hygienist by using mouthwash, water, compressed air or suction.
 - *c.* Train and instruct persons in the techniques of oral hygiene and preventive procedures.
 - d. Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A licensed dentist or dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.
 - e. Administer a topical fluoride.

Even with all of those tasks and no barriers to employment, there is still a workforce shortage in the state. Last year I had 28 students, the largest class I have ever had; we usually take 24. In that class only half of the students wanted to work as soon as they graduated. It was not the low compensation or lack of benefits that swayed students away from working as dental assistants – it was what they heard from the dental assistants they interned with. The more experienced dental assistants said they were burned out and sick and tired of training assistants who did not stay. The newer dental assistants said they were frustrated they were not getting training and it felt like dental assisting was a dead-end job. It seemed like anyone could be hired as a dental assistant with no education, training or credentials. They wanted to feel that they were doing something important and had nowhere to grow unless they wanted to go to dental hygiene. Many said they would be working as a dental assistant until something better came along. To them, the fact that there was no growth path, no requirements, meant dental assisting was not a career. It was "just a job" with no recognition or validation.

I surveyed 130 former students. I received a 38% response, and of those responding, the assistants who had been in the business for 10 years planned to remain an assistant. Over 50% had been on the job three years or less and did not plan to stay as a dental assistant past the 5-year mark. Of that group, less than a quarter planned to stay in dentistry, and the rest planned to either go back to school or search for a "real" career.

We are seeing prospective employees that want a work/life balance, recognition, and room to grow. The ADA's research on Dental Workforce Shortages, conducted in collaboration ADAA, DANB and others, showed that increasing the number of dental assistants with no training at all does not meet the employers needs either. As many as 1 in 3 dentists say their unfilled schedule is a result of understaffing and 42% of dentists noted that unqualified dental assistants has been one of the main challenges with

recruiting. Then the cycle of hiring, training, leaving, lost production, hiring, training, leaving, lost production, is the result of swinging the pendulum of change too far and then needing to overcorrect.

So, eliminating some dental assisting requirements might meet a short-term need but it will not lead to retention, new recruitment (long term) or skilled assistants who can meet the production needs of a practice playing catch up since Covid and trying to survive the ensuing inflation and salary/benefit needs of employees. What dentist wants to pay upwards of \$20 an hour for someone who doesn't plan to stay and is not productive? I hope anyone thinking of dropping dental assisting exam requirements review that decision. Review the requirements and develop pathways for entry-level assistants to begin to work, but make the registered/certified dental assistant level a robust list of tasks. Make the restorative functions assistant level robust as well, not just a few tasks but real enough that the cost to the assistant is worth it and the dentists knows how to utilize those skills.

Julie Muhle, CDA, BOE, M.Ed. Truckee Meadows Community College Dental Assisting Academic Program Director