

Meeting Notice

Missouri Dental Board Policy Review Committee

June 1, 2007 ~~ 11:00 a.m.

**Division of Professional Registration
Main Conference Room
3605 Missouri Boulevard
Jefferson City, Missouri**

Notification of special needs as addressed by the Americans with Disabilities Act should be forwarded to the Missouri Dental Board, 3605 Missouri Boulevard, Jefferson City, Missouri 65109 or by calling 573-751-0040 to ensure available accommodations. The text telephone for the hearing impaired is (800) 735-2966.

Except to the extent disclosure is otherwise required by law, the Policy Review Committee of the Missouri Dental Board is authorized to close meetings, records and votes, to the extent they relate to the following: Sections 610.021 (1), (3), (5), (7), (13) and (14), RSMo, and Section 620.010.14 (7) and (8), RSMo.

The Policy Review Committee of the Missouri Dental Board may go into closed session at any time during the meeting. When the meeting is closed, the appropriate section will be announced to the public with the motion and vote recorded in open session minutes.

Please see attached tentative agenda for this meeting.

cc: Members, Missouri Dental Board
Nanci Wisdom, Attorney-at-Law
Laurie Morris, Office of Administration
Vicki Wilbers, Executive Director, Missouri Dental Association
President, Missouri Dental Association
President, Missouri Dental Hygienists' Association
President, Missouri Dental Assistants' Association
David T. Broeker, Director, Division of Professional Registration

Posted: 05/21/07
9:00 a.m.

Open Agenda

Missouri Dental Board Policy Review Committee

June 1, 2007

11:00 a.m.

**Division of Professional Registration
Main Conference Room
3605 Missouri Boulevard
Jefferson City, Missouri**

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|----|---|-------------|
| 1. | Call to Order | Dr. Wallace |
| 2. | Roll Call | Pat Lepp |
| 3. | Approval of Agenda | Dr. Wallace |
| 4. | Review of Sedation Rules | Dr. Wallace |
| | <ul style="list-style-type: none">• 20 CSR 2110-4.010 – Definitions• 20 CSR 2110-4.020 – Conscious Sedation• 20 CSR 2110-4.030 – Guidelines for Administration of Conscious Sedation• 20 CSR 2110-4.040 – Deep Sedation/General Anesthesia• The next step in the Review Process | |
| 5. | Review of the UMKC Enteral Sedation Course | Dr. McCoy |
| 6. | Review of EFDA Programs | Dr. Wallace |
| 7. | New Model of Dentistry | Dr. Wallace |
| | <ul style="list-style-type: none">• Workforce Ad-hoc Committee Report | |
| 8. | Review of Licensure by Examination Rules | Ms. Lepp |
| | <ul style="list-style-type: none">• 20 CSR 2110-2.050 – Licensure by Examination-Dental Hygienists• 20 CSR 2110-2.010 – Licensure by Examination-Dentists• 20 CSR 2110-1.010 – General Organization | |
| 9. | Division Legal Council Request for Review of Rules | Dr. Wallace |
| | <ul style="list-style-type: none">• 20 CSR 2110-2.161-Post-Board Order Hearing Procedures | |

- 20 CSR 2110-2.162-Impaired Practitioner Procedures
10. Review of Statutes Regarding Temporary Licensure Dr. Wallace
 - 332.201 RSMo – Dentists
 - 332.301 RSMo – Dental Hygienists
 11. Proposed changes to 20 CSR 2110-2.130 Dental Hygienists Dr. Wallace
 - 20 CSR 2110-2.130(7)
 12. Prioritize Task List Dr. Wallace
 13. Other Agenda Items Dr. Wallace
 14. Adjournment

**Open Minutes
Missouri Dental Board
Policy Review Committee**

June 1, 2007

**Missouri Division of Professional Registration
3605 Missouri Boulevard
Jefferson City, Missouri**

The open meeting of the Missouri Dental Board's Policy Review Committee (PRC) was called to order by Dr. Kevin Wallace, Chairperson, at approximately 11:04 a.m. on Friday, June 1, 2007, at the Missouri Division of Professional Registration, 3605 Missouri Boulevard, Jefferson City, Missouri.

COMMITTEE MEMBERS PRESENT:

Dr. Kevin Wallace, Committee Chairperson
Dr. Rolfe McCoy, Member
Ms. Patricia A. Lepp, R.D.H., Member
Ms. E. Maxine Thompson, Member

STAFF MEMBERS PRESENT:

Sharlene Rimiller, Executive Director
Justin C. Smith, Executive I
Brian Barnett, Investigator III

GUESTS:

Deborah K. Polc, R.D.H., Advisory Commission for Dental Hygienists
Tia M. Strait, R.D.H., Advisory Commission for Dental Hygienists
Debra Fletcher Adams, R.D.H., Advisory Commission for Dental Hygienists
Deborah Gerecke, R.D.H., Advisory Commission for Dental Hygienists
Dr. Thomas Saak, Past President, Missouri Society of Anesthesiology
Mr. Fred Brown, Executive Director, Missouri Society of Anesthesiology
Lee Ann Turnbaugh, Missouri Dental Assistant's Association
Janet Sell, Ozarks Technical College
Lori Bruce, R.D.H., Missouri Dental Hygienists' Association
Karen Dent, Missouri Primary Care Association
Allan Schwartz, D.D.S., CRNA
Kathy Jeffries, Missouri Dental Assistant's Educators
Georgene Bosaw, CRNA, Missouri Association of Nurse Anesthetists
Darren Elliott, Missouri Association of Nurse Anesthetists
J.C. Standlee, D.D.S., Missouri Dental Association
Dr. Michael Hoffman
Mandy Stokes, Missouri Dental Association

To better track the order in which items were taken up on the agenda, each item in the minutes will be listed in the order it was discussed in the meeting.

APPROVAL OF AGENDA

A motion was made by Dr. Wallace and seconded by Dr. McCoy that the agenda be approved as written. The motion carried unanimously.

REVIEW OF SEDATION/ANESTHESIA RULES

Dr. Wallace thanked all of the attendees for their participation and input into the proposed rewrite of the rules regarding sedation. He stated that he did not believe that there should be any hurry in getting revisions passed because of the resolution to change the American Dental Association (ADA) Guidelines on sedation which will be voted on at their annual session in September.

Mr. Elliott pointed out that the term “accrediting body” is not defined in the current regulation. It is unclear, from his perspective, which accrediting body would review dental offices. Dr. Wallace explained that it is the Dental Board’s responsibility to ensure that the dental offices meet the safety standards that are defined in the regulations. He stated that the gold standard of safety is a hospital setting, and a determination needs to be made on how to get dental offices closer to that safety standard. Ms. Bosaw stated that she believes that the difference lies in the number of capable bodies that have the ability to oversee sedated, post-operative patients. Dr. Hoffmann explained that the oral surgery offices have had an exceptional track record, he believes, in part due to a well-trained sedation team and familiarity with the location. Dr. Saak agreed with all of the information conveyed from Ms. Bosaw and Dr. Hoffmann.

Dr. Wallace explained that in the time that he has been on the Board, the main problem has been monitoring issues; however, he does not believe that the problem is related to poorly written rules. He asked for suggestions on improving the rules in order to limit the problem. Dr. Hoffmann believes that the new ADA Guidelines will improve the monitoring deficiencies because of the increased training requirements.

Dr. Wallace thanked Dr. Schwartz for his work in the proposed rewriting of the sedation rules that he has submitted to the Committee. Dr. Saak stated that he believes that all of the qualified anesthesia providers should be required to obtain Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) without the opportunity to be exempted from obtaining that training. Dr. Schwartz did not oppose that change. Dr. Saak also noted that anesthesia assistants are still not listed as an option for the anesthesia team. Mr. Elliott stated that the Missouri Association of Nurse Anesthetists have no opposition to adding the anesthesia assistant to the anesthesia team; however, he recommended that the Dental Board research the anesthesia assistant role thoroughly before approving them because they are a relatively new provider to Missouri. Dr. Saak stated that anesthesia assistants are college graduates and have usually come from a pre-medical background, and have been used interchangeably with nurse anesthetists and can only work with anesthesiologists whereas a nurse

anesthetist can work with a dentist, podiatrist, or physician. Dr. Saak further stated that UMKC will begin their first class for anesthesia assistants in 2007.

Dr. Hoffmann is concerned with the title of Enteral/Minimal Conscious Sedation. He does not believe that the definition should include the technique and level of sedation, but rather the technique and level should be differentiated. Dr. Wallace asked if it would help if the Board redefined anxiolysis. Dr. Hoffmann believes that the problem lies in the training of the sedation team, not necessarily within the rule. He stated that the Dental Organization for Conscious Sedation (DOCS) is teaching an inappropriate standard of care by over prescribing – up to three (3) milligrams of Triazolam – to patients, and believes this course should not be approved by the Dental Board as an approved course for monitoring conscious sedation. Dr. Hoffmann stated that he does believe that the New York DOCS course would be acceptable because it teaches maximum recommended dosage of 0.5 milligrams of Triazolam. Dr. Schwartz stated that he does not believe that any of these procedures should be performed in a dental office. Dr. Saak does not understand why any practitioner would titrate oral drugs. Dr. Schwartz, Dr. Hoffmann and Dr. Saak each believe that the equipment required within the dental office should be identical for both the parenteral and enteral conscious sedation site certificates.

Dr. Hoffmann is also concerned with the range of training for the sedation assistants. He believes that there should be an hourly requirement as well as educational criteria that must be covered. Dr. Wallace stated that the ADA Guidelines require sixteen (16) hour of training. Dr. Hoffmann stated that there should be direct patient experience required – possibly four (4) weeks of operating room training - along with lecture and competency testing. In his opinion 90% of assistants could not open an airway on an oversedated patient. According to the new ADA proposed guidelines, the sedation team members will be required to complete twenty (20) cases instead of twenty (20) case experiences.

Dr. Wallace stated that currently, in order to renew the site certificate for conscious sedation, the dentist-in-charge is required to submit five (5) complete cases of the anesthesia provider in order to ensure that the proper standard of care was given. He believes that the five (5) cases should be tied to the conscious sedation permit rather than the site certificate. Dr. Schwartz asked if the Committee was interested in eliminating the enteral conscious sedation requirements completely. Dr. Hoffmann responded that the enteral conscious sedation rules should be changed to that of the ADA proposed guidelines because they will be the same as the parenteral conscious sedation requirements with the exception of minimal sedation.

Dr. Hoffmann stated that he defines minimal sedation as an amount of drugs that the patient can safely take at home without supervision. He does not believe that a dentist would need a permit for this type of sedation. Dr. Wallace stated that he is concerned with the administration and enforcement of a rule that would be stated in that fashion.

Dr. Wallace stated that the review of the sedation rules may be left off of the next PRC agenda because the new proposed ADA Guidelines will not be officially approved at that time.

REVIEW OF THE UMKC ENTERAL SEDATION COURSE

Dr. McCoy stated that there have been some recent concerns raised regarding the enteral conscious sedation course taught at the University of Missouri – Kansas City (UMKC). Dr. McCoy suggested to table further discussion on this matter since the Committee does not have any materials on the course, to send a letter to the dental school requesting a detailed outline of the course and put as the top priority on the prioritized task list.

REVIEW OF EFDA PROGAMS

Dr. Wallace presented his proposed changes in the regulation regarding expanded functions dental assistants (EFDA). Dr. McCoy stated that he is concerned with the ambiguity of the term appliance in numbers thirteen (13) and sixteen (16) of 20 CSR 2110-2.120 (4)(D) of Dr. Wallace's proposal.

Dr. Wallace recommended the following changes to his proposal:

1. Add back to section four (4), subsection (A), the words "after June 1, 1995" after the word "diploma."
2. Revise the language in section four (4), subsection (A), from the "American Dental Assistant's Association" to the "Dental Assisting National Board (DANB)."
3. Delete subsection (D)(13) in section four (4).
4. Revise the language in section four (4), subsection (D)(16), to read as "Making impressions for the fabrication of a fixed or removable prosthesis or any appliance with the exception of a diagnostic cast."

Dr. Wallace also noted that the Committee needs to inquire if a grandfather clause should be included for the proposed revisions to 4(D), paren (4), (6), (13), and (16).

Ms. Sell suggested requiring that dental assistants become certified dental assistants (CDA) before they are allowed to perform expanded functions. Dr. Wallace stated that he did not believe that in a rural state such as Missouri, it is practical to force assistants to become CDA. He believes that the answer is to raise the standard of the basic skills examination to equal the CDA examination. Ms. Bruce stated that it is the MDHA's position that the minimal requirement to perform expanded functions should be a CDA. Ms. Sell believes that time frames will create a sort of career chain that enables the on-the-job trained dental assistant to know what is to come in the future, such as an EFDA in one (1) year and CDA in two (2) years. Dr. McCoy believes that this potentially could raise the cost of dentistry inadvertently because the practitioner would have to pay their employees more. Ms. Sell stated that it would raise the level of care. A motion was made by Ms. Lepp and seconded by Ms. Thompson to require an on-the-job trained dental assistant to have one (1) year of work experience prior to taking the basic skills examination. Those voting yes: Ms. Lepp and Ms. Thompson. Those voting no: Dr. Wallace and Dr. McCoy. The motion failed 2 to 2.

Ms. Lepp asked the PRC to consider breaking down the nineteen (19) expanded functions into the four categories. She stated that while some of the functions may overlap, the duties could easily be defined. Ms. Lepp suggested that section four (4), subsection (C), read "Functions delegable upon successful completion of 4 (A) and 4 (B) are divided into four categories:" followed by a list of the functions currently listed in 4 (D) divided into category, i.e. prosthodontics, orthodontics, restorative, and periodontics. It was determined that the following functions currently listed in section 4 (D) be listed in the following categories:

1. Deleted
2. Deleted
3. Restorative
4. Restorative
5. Restorative
6. Restorative
7. Periodontics
8. Periodontics, Prosthodontics, Restorative
9. Orthodontics
10. Orthodontics
11. Orthodontics, Prosthodontics, Restorative
12. Deleted
13. Deleted
14. Prosthodontics
15. Prosthodontics, Restorative
16. Orthodontics, Prosthodontics, Restorative
17. Prosthodontics
18. Prosthodontics
19. Orthodontics

It was the consensus of the Committee to send out all the proposed changes to the rule to the PRC on a mail ballot prior to the July Board meeting.

REVIEW OF LICENSURE BY EXAMINATION RULES

Ms. Lepp provided a proposed rewrite of the licensure by examination rules that would eliminate the acceptance of a state licensure examination for licensure, as well as specified criteria that must be covered within the examination to ensure minimum competency. It was the consensus of the Committee to table further discussion on this item for six (6) months in order to allow more time to more thoroughly evaluate the regional examinations.

20 CSR 2110-2.161 – POST BOARD ORDER HEARING PROCEDURES

20 CSR 2110-2.162 – IMPAIRED PRACTITIONER PROCEDURES

Dr. Wallace reported that the Division attorney, Mr. David Barrett, has reviewed our rules and has made a recommendation that the Board rescind 20 CSR 2110-2.161 and 20 CSR 2110.2.162 because they have been superseded due to later changes in the rules and statutes. A motion was made by Dr. McCoy and seconded by Dr. Wallace to recommend to the Board that it rescind 20 CSR 2110-2.161 – Post Board Order

Hearing Procedures and 20 CSR 2110-2.162 – Impaired Practitioner Procedures. The motion passed unanimously.

REVIEW OF STATUTES REGARDING TEMPORARY LICENSURE

Ms. Debra Fletcher Adams, Chairperson of the Advisory Commission for Dental Hygienists, stated that the Advisory Commission has compared the statutes relating to temporary licensure of dentists and dental hygienists. She stated that the Commission is not interested in making both statutes consistent at this time as it has been reported that there have not been any temporary licenses issued pursuant to that statute, and likely never will be.

PROPOSED CHANGES TO 20 CSR 2110-2.130

Ms. Polc introduced a proposed rule change to 20 CSR 2110-2.130(7) that would allow dental hygienists to apply fluoride treatments without the presence of a dentist. A motion was made by Dr. McCoy and seconded by Ms. Lepp that the PRC approve the proposed rule change and refer it on to the full Dental Board pending review by legal counsel. The motion passed unanimously.

Dr. McCoy departed the meeting at 2:03 p.m.

NEW MODEL OF DENTISTRY

Dr. Wallace stated that the Workforce Assessment Ad-Hoc Committee has been dissolved; therefore it needs to be moved further down on the priority task list and put on hold. He stated that he would feel comfortable in working on a collaborative practice arrangement with dental hygienists; however, he does not believe that the Dental Board should be working on that at this time. He suggested that the MDA, MDHA, and MDAA work together on any further workforce legislative measures.

REVIEW OF PRIORITIZED TASK LIST

The PRC reviewed their prioritized task list and determined that it should be updated to reflect the following:

1. Review rules on Licensure by Examination (20 CSR 2110-2.010 & 20 CSR 2110-2.050) and General Organization (20 CSR 2110-1.010) to determine if changes should be implemented in light of becoming a WREB member state.
2. Review of Sedation Rules.
3. Review of the UMKC Enteral Sedation Course
4. Jurisprudence Examination – Computerize and seek out testing locations as well as consider options, other than the Board staff and Board members, administering the exam.
5. Review of Section 332.322 to Consider Changes for Dental Hygienists Working Unsupervised in Public Health Settings to Increase Access to Care.
6. Correspond with the Sedation Committees (Parenteral and Deep) Regarding what they Represent to the Licensee Concerning the Issuance of a Permit while doing the On-Site Evaluations.
7. Advisory Commission Recommendation to Amend or Rescind 20 CSR 1110-2.140 – Notice, Change of Employment – Dental Hygienists.

8. Review Statute Regarding the Issuance of a Probated License and Consider Changes to Include Language in the Statute Allowing for the Issuance of Probated Permits.
9. Establish Parameters for Board Action When Licensees do not Notify BNDD of a Change of Practice Address and their Registration Terminates. Does the Board Investigate to determine if Controlled Substances were stocked, prescribed and/or administered during that Period of Time? Include in Discussion a Policy for Investigating Licensees who do not Renew on Time and Continue to Practice.
10. Proposed Rule on Improper Influence on Professional Judgment.
11. Review of Renewal Application Questions and EFDA Tracking Data.
12. Mandating CPR for Renewal and Requiring Defibrillators in all Dental Offices.
13. Military EFDA Training and Certification.
14. Review of EFDA Program (Referred to Workforce Ad-hoc Committee).
15. New Model of Dentistry (Workforce and Access to Care).
16. Review of 20 CSR 2110-2.161 – Post-Board Order Hearing Procedures and 20 CSR 2110-2.162 – Impaired Practitioner Procedures. Division legal counsel recommends rescission of the rules.
17. Review of Section 332.201 and 332.301 relating to the Issuance of Temporary Permit. Advisory Commission to recommend language for statute change.
18. Notice of Injury or Death Rule.
19. Review rules on Licensure by Examination to determine if changes should be implemented to incorporate the ADEX examination.

ADJOURNMENT

There being no further business to be brought before the PRC at this time, a motion was made by Dr. Wallace and seconded by Ms. Lepp that the meeting adjourn. Motion carried 3 to 0, with Dr. McCoy absent from the vote on this motion. The meeting adjourned at approximately 2:27 p.m.

Respectfully submitted,

Justin C. Smith, Executive I

Sharlene Rimiller, Executive Director

Approved by Board on: _____