



STATE OF IOWA

IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

JILL STUECKER
EXECUTIVE DIRECTOR

IOWA DENTAL BOARD

MINUTES

October 17, 2014
Conference Room
400 S.W. 8th St., Suite D
Des Moines, Iowa

Board Members

Steven Bradley, D.D.S.,
Steven C. Fuller, D.D.S.
Matthew J. McCullough, D.D.S.*
Thomas M. Jeneary, D.D.S.
Kaaren G. Vargas, D.D.S.
Mary C. Kelly, R.D.H.
Nancy A. Slach, R.D.H.
Diane Meier, Public Member
Lori Elmitt, Public Member

October 17, 2014

Present
Present
Present
Present
Present
Present
Present
Present
Present

*Participated briefly by phone

Staff Members

Phil McCollum, Christel Braness, Brian Sedars, Dee Ann Argo, Janet Arjes

Attorney General's Office

Sara Scott, Assistant Attorney General

Other Attendees

Jane Slach, R.D.A. Iowa Dental Assistants Association
Jeannene, Veenstra, R.D.A., Iowa Dental Assistants Association
Bob Russell, D.D.S., Iowa Department of Public Health
James A Larsen, D.D.S., Iowa Dental Association
Larry Carl, Iowa Dental Association
Bruce Cochrane, D.D.S., Iowa Dental Association
Stephen Thies, D.D.S., Iowa Academy of General Dentistry
Carol Van Aernam, R.D.H., Iowa Dental Hygienists' Association
Tom Cope, Iowa Dental Hygienists' Association

I. CALL TO ORDER FOR OCTOBER 17, 2014

Dr. Bradley called the open session meeting of the Iowa Dental Board to order at 11:22 a.m. on Friday, October 17, 2014. A quorum was established with eight members present.

Roll Call:

| <u>Member</u> | <u>Bradley</u> | <u>Elmitt</u> | <u>Fuller</u> | <u>Jeneary</u> | <u>Kelly</u> | <u>McCullough</u> | <u>Meier</u> | <u>Slach</u> | <u>Vargas</u> |
|---------------|----------------|---------------|---------------|----------------|--------------|-------------------|--------------|--------------|---------------|
| Present | x | x | x | x | x | | x | x | x |
| Absent | | | | | | x | | | |

II. 1st OPPORTUNITY FOR PUBLIC COMMENT

Dr. Bradley allowed the opportunity for public comment.

Mr. Cope, Iowa Dental Hygienists' Association (IDHA), reported that there was discussion regarding upcoming legislation during a recent meeting of the trustees. The trustees voted to register their support for the legislative proposal that would make the position of the executive director an at-will position.

Mr. Cope reported that there were some discussion regarding the proposed draft of rules regarding expanded functions. There were some concerns about putting that language into a new chapter, Iowa Administrative Code 650—Chapter 23 as proposed, and the implications of that. There were also questions regarding supervision levels. Mr. Cope felt that discussion related to this topic at the Dental Hygiene Committee meeting held earlier that morning was productive. Progress was made towards a workable solution.

Mr. Carl inquired about the agenda items, and asked if public comments would be allowed during the meeting, or if those comments should be shared at this time. Dr. Bradley stated that some comments would be allowed.

Ms. Slach asked Mr. Carl about participation at the recent Iowa Mission of Mercy (IMOM). Mr. Carl reported that there was a shortage of dental hygienists, as the demand was quite high for hygiene services. Mr. Carl stated that the number of participants for restorative work seemed to be adequate. Ms. Slach reported having heard comments indicating that faculty permit holders, who were foreign-trained, were unable to participate. Mr. Carl stated that dental hygiene is in high demand. Dental hygiene was the area of greatest need due to the demand.

Mr. Carl reported that more than 1100 patients received treatment at no cost with a total value in excess of \$750,000. Mr. Carl did not have the numbers of participants readily available. Ms. Veenstra stated that there may have also been a shortage with dental assistants based on her experience at the event. Mr. Carl stated that he would provide additional data at a later date.

Dr. Russell stated that he is aware that the Board is considering allowing dental assistants to provide assistance in public health settings. Dr. Russell was in support allowing dental assistants to help in public health settings. Having said that, Dr. Russell believed there is some misunderstanding as to what is currently allowed by rule. Dr. Russell stated that some dentists were entering into memorandums of understanding agreements with dental assistants to provide assistance to some of these programs under the guise of general supervision. It is now his

understanding that unless these patients have been examined by the supervising dentists, dental assistants may not provide services in the public health settings. Dr. Russell stated that four-handed dentistry in these situations becomes very difficult when dental assistants are prohibited from providing services.

III. APPROVAL OF OPEN SESSION MINUTES

- *July 31, 2014 – August 1, 2014 – Quarterly Meeting Minutes*
- ❖ MOVED by KELLY, SECONDED by MEIER, to APPROVE the open session minutes as submitted. Motion APPROVED unanimously.
- *September 11, 2014 – Teleconference Meeting Minutes*
- ❖ MOVED by KELLY, SECONDED by VARGAS, to APPROVE the open session minutes as submitted. Motion APPROVED unanimously.

IV. REPORTS

EXECUTIVE DIRECTOR'S REPORT

Mr. McCollum reported that the search for the executive director continued.

Mr. McCollum reported that the current dental renewal season was winding down. There were approximately 183 licenses still pending renewal. On October 6, 2014, a final notice was forwarded to those licensees, who had not yet renewed. 76% renewed online, only slightly less than the previous year. Mr. McCollum provided some additional statistics related to the licensees and registrants.

Mr. McCollum reported that some additional functionality has been added to the database. These changes allow applicants to see what items may still be needed to complete an application. Additional search functionality has been added to the license query page and allows searches by county. Board orders are also being made available online. Other features will be added going forward.

LEGAL REPORT

Ms. Scott reported that Dr. Buckley filed an appeal regarding the District Court's ruling. The appeal has since been dismissed. No further action is pending.

ANESTHESIA CREDENTIALS COMMITTEE REPORT

Dr. Vargas reported that the Anesthesia Credentials Committee recently met to review applications and to discuss other committee-related matters. Dr. Vargas provided an overview of the committee's actions.

CONTINUING EDUCATION ADVISORY COMMITTEE REPORT

- *Recommendations RE: Continuing Education Course Applications*
- *Recommendations RE: Continuing Education Sponsor Application(s)*

Ms. Elmitt provided an overview of the committee's recommendations.

- ❖ **MOVED** by ELMITT, **SECONDED** by KELLY, to **APPROVE** the committee's recommendations as submitted.

Dr. Bradley reported that Dr. Louis Malcmacher contacted him about presenting a continuing education course in Iowa regarding the use of Botox. Dr. Malcmacher asked if that would be approved. Dr. Bradley informed him that most dentists are prohibited from using Botox in Iowa, and would not be approved currently. Dr. Malcmacher indicated that he would like to see that change. Dr. Bradley asked the Continuing Education Advisory Committee to consider this at an upcoming meeting. Dr. Malcmacher intends to put on a course in the Des Moines area in 2015.

Mr. McCollum referenced the Board's current position statement, which states that training in the use of Botox and dermal fillers must be completed in a residency program. If the Board deems it appropriate, the Board can modify its position on this matter.

Dr. Bradley stated Dr. Malcmacher would like Board members to attend a course so that the Board can make an informed decision going forward. Dr. Bradley reported that he attended one of the courses and was in favor of approving the courses. Dr. Bradley believed that the course was fairly extensive. Dr. Bradley reported having voted against the use of Botox and dermal fillers several years ago. After attending the course, Dr. Bradley has changed his position on this matter.

Ms. Kelly asked if the course included a hands-on component. Dr. Bradley reported that the course he completed was "sort-of hands on." Dr. Bradley stated that it was a two day course, and that it was fairly extensive. Dr. Bradley reported that there were different levels of training available.

Ms. Elmitt asked if this was something for which the committee should prepare. Dr. Bradley stated that he would try to update the Board members as more information becomes available. Dr. Bradley believed that an exception should be made to allow credit for this course since it includes significant information about anatomy.

Ms. Kelly asked if the Board can approve a course on procedures that practitioners cannot legally provide. Dr. Bradley stated that a majority of the course focuses on anatomy. Mr. McCollum stated that the Board would need to revisit the position statement first. The Board cannot approve a course when a position statement exists stating that those procedures cannot be legally provided by dental practitioners.

The Board can revisit the position statement. Mr. McCollum stated that Board members can attend the course for additional information. Mr. McCollum also suggested inviting specialists, who perform these procedures currently, to attend the course to get their input on the training.

- ❖ The vote was taken. Motion APPROVED unanimously.
- *Other Committee Recommendations, If Any*

BUDGET REVIEW COMMITTEE REPORT

- *Review of Quarterly IDB Financial Report*

Mr. McCollum reported that the committee did not meet recently. Mr. McCollum recommended that the annual fee review be completed at the January 2015 meeting.

- *Other Committee Recommendations, If Any*

There were no other recommendations from the committee.

EXECUTIVE COMMITTEE REPORT

Dr. Bradley reported that the committee met earlier this morning. The items discussed will be addressed later in the meeting.

Dr. Bradley reported that 72 people applied for the position of the executive director. The hiring committee has selected two final candidates. The hiring committee will discuss this later in the meeting.

LICENSURE/REGISTRATION COMMITTEE REPORT

- *Actions Taken by Committee on Applications*

Ms. Braness provided an overview of the applications reviewed and actions taken by the committee since the last quarterly Board meeting. Ms. Braness noted that a list of actions taken by the committee was included in the Board members' folders.

- *Pending Licensure/Registration Applications, If Any – Will be Discussed under Agenda Item VIII*
- *Other Committee Recommendations, If Any*

There were no other recommendations from the committee.

DENTAL HYGIENE COMMITTEE REPORT

- *Pending Dental Hygiene Applications, If Any – Will be Discussed Under Agenda Item VIII*
- *Report RE: Actions Taken at Dental Hygiene Committee Meeting*
- *Committee Recommendations, If Any*

Ms. Kelly reported the Dental Hygiene Committee met earlier that morning and discussed the expanded functions rules. There was a lot of input from interested parties.

- Dr. McCullough joined the meeting at 11:45 a.m.

Ms. Braness provided an overview of the committee's suggestion. The first suggestion was to change the language used in reference to denture reline. The Dental Hygiene Committee suggested that "tissue condition" would be better terminology. Ms. Kelly stated that the dentists and dental assistant in attendance at the meeting agreed that this would make the intent of the rule clearer. The proposed change was only in relation to the terminology used in the rule.

Ms. Braness reported that the second suggestion from the committee was to eliminate the reference to level 1 expanded functions for dental hygienists since these tasks fall within the current scope of practice. Ms. Kelly stated that this item tied into the third suggestion, which is to move the language regarding expanded functions into Iowa Administrative Code 650—Chapters 10 and 20. This would allow for the scopes of practice for dental hygienists and dental assistants to be addressed in their respective administrative code chapters instead of creating a new chapter just for expanded functions.

Ms. Elmitt had some questions about the original task force's recommendation to require dental hygienists to complete level 1 training before going on to level 2 training. Ms. Elmitt wanted to know how or if this recommendation was being applied. Ms. Slach stated that the level 1 duties fall within the current scope of practice for dental hygienists. Ms. Elmitt stated that she was referencing the discussion and recommendation of the original expanded functions task force. Ms. Kelly stated that the original task force never addressed the dental hygiene scope of practice. The discussion was limited to the proposed changes to expanded functions.

Dr. Vargas asked for some clarification regarding training since she was unaware of current training requirements. Dr. Vargas inquired as to whether dental hygiene programs teach the application of cavity liners, pulp vitality testing, and to monitor nitrous oxide. Ms. Kelly reported that all dental hygiene programs provide training in the monitoring and administration of nitrous oxide. Dr. Vargas asked about training in the other areas.

Ms. Kelly stated that the committee discussion focused on the idea that the rules inherently require training through an accredited program, or for other procedures, education needed to be obtained. Dr. Vargas asked if training is obtained in those areas. Ms. Kelly stated that some of the programs vary in the training they provide in regards to expanded functions; however, all dental hygiene programs currently provide training in nitrous oxide.

Dr. Vargas inquired further about the training completed. Dr. Vargas asked if dental hygienists are taught to take final impressions, remove adhesives, and to place periodontal dressing. Dr. Vargas just wanted clarification about the specific training received in these areas since those are the functions included in the proposed level 1 expanded functions. Ms. Kelly stated that dental hygienists receive training in most of those areas; however, it depends upon the dental hygiene program. Dr. Vargas asked for clarification on the point that not all dental hygiene programs provide training for each of these functions. Dr. Vargas asked if it is the same as dentists who may complete training in oral surgery, but choose not to do it since they may not have sufficient training to perform those tasks adequately. Ms. Kelly stated that the same idea could apply.

Ms. Slach stated that each of these tasks are currently allowed within the dental hygiene scope of practice. Dr. Vargas stated that she understood that; however, she wanted a better understanding of the reality in regards to providing adequate patient care.

Ms. Kelly asked Mr. McCollum or Mr. Sedars to address the expectations for proposed training requirements. Mr. Sedars stated that in the Dental Hygiene Committee meeting, he made a comparison to dentists who perform specialty work. The Board would only ask for proof of training as deemed necessary.

Dr. Vargas stated that if the Dental Hygiene Committee is asking to take these items out of the expanded functions rules for dental hygienists, there is a concern with respect to patient care. Ms. Slach stated that these duties are already allowed within the scope of practice. Dr. Vargas stated that she understood that it is legally allowed; however, Ms. Kelly has already stated that not all dental hygiene programs teach these duties to their students. Dr. Vargas stated that current dental assistant programs teach these duties, and therein lies a distinction.

Mr. McCollum stated that he surveyed all of the Iowa dental hygiene programs regarding expanded functions. Mr. McCollum reported that there was not any consistency between programs in relation to the expanded functions training provided. The same applies to dentists. In dental school, a certain level of sedation is taught, and the service falls within the scope of practice. In Iowa, however, dentists cannot provide moderate sedation or deep sedation/general anesthesia without additional education and training.

Dr. Vargas asked for clarification regarding proposed training requirements for dental assistants for level 1 expanded functions. Under the proposed rules, if a dental assistant has not graduated from an accredited program or does not hold a DANB certification, a dental assistant would be required to complete a competency examination prior to providing those services. Dr. Vargas believed that the competency examination is another level of control for these duties. Dr. Vargas stated that there was an assumption being made regarding dental hygienists' training. Ms. Kelly stated that this was part of the reason why the committee has proposed that these rules being separated into Iowa Administrative Code 650—Chapters 10 and 20. It would allow the Board to establish separate training requirements for each profession as deemed appropriate.

Ms. Kelly stated that it may not have been mentioned as part of the discussion with the suggestion out of the committee, but the committee proposed have a licensed dentist sign off on competency and experience as necessary. Ms. Braness reported that this suggestion was included as part of the committee's original motion; however, further discussion concluded that this should be unnecessary since the level 1 tasks fall with the current scope of practice. Therefore, that provision was removed from the motion prior to the vote. Mr. McCollum agreed with Ms. Braness' summary of the committee discussion in regard to training provisions for level 1 functions.

Ms. Slach stated that when you look at some of these tasks, such as occlusal registrations and placement and removal of gingival retraction, dental hygienists are working around the gum line all the time. Even if the training is not specific to that task, dental hygienists should be able to manipulate it very quickly and easily. Ms. Slach stated that applying desensitizing agents is

probably taught in all hygiene programs since some dental hygiene duties can sometimes cause root pain and discomfort. Ultimately, Ms. Slach stated that the dentist must delegate these duties based on prior training and experience. Ms. Slach stated that many of these tasks are straightforward and reversible, and should be allowed without additional training.

Ms. Meier asked if dental hygienists are elevated dental assistants. Ms. Slach disagreed. Ms. Slach stated that dental assistants do not, generally, have as much experience manipulating tissue and removing calculus as dental hygienists. Ms. Slach believed that the training in dental hygiene programs should be sufficient for these purposes. Ms. Slach believed that additional training for dental assistants would be appropriate.

Should complaints arise, Ms. Kelly stated that this could be handled in the same way as other complaints. The training would be verified as the need arose.

Ms. Slach asked if the dental assistants could speak to this issue. Ms. Slach asked if dental assistants, who graduated from accredited programs would have been trained in these tasks, and could test out of them. Ms. Braness stated that graduation from a dental assistant program makes someone eligible to receive training in expanded functions; graduation alone does not allow them to perform these services legally. Ms. Braness reported that current rules regarding expanded functions stipulate that certain requirements be met before someone is even eligible to begin training in these areas. Mr. McCollum and Mr. Sedars agreed. Dental assistant graduates cannot 'test' out of training requirements. Ms. Jane Slach, who is a dental assistant educator at Kirkwood Community College, confirmed that although the graduates have the knowledge, they still need to complete Board-approved training in expanded functions.

Ms. Kelly stated that, as mentioned previously, there was some discussion to allow a dentist sign off on the proof of competency. Ms. Kelly indicated that she completed training in these things while in dental hygiene school; however, could not obtain proof of training since her dental hygiene school closed.

Dr. Vargas stated that one could demonstrate competency if there was some kind of examination, or other system built in to address competency. Dr. Vargas' main point is that an assumption should not be made regarding education and training since hygiene programs are not consistent in which of these duties are covered. Dr. Vargas understood allowing some kind of exception for dental hygienists, who were previously dental assistants, and received that training. Dr. Vargas would like to see some kind of control to ensure adequate training. Dr. Vargas knows that the procedures reversible; however, she does not believe that the issue of training should be glossed over.

Ms. Slach stated that allowing level 1 duties for dental hygienists wouldn't require a change since they exist within the current scope of practice. Ms. Kelly agreed, and the Board has to acknowledge that these duties have been in existence for years, and that dental hygienists can perform these duties. To date, Ms. Kelly is not aware of any complaints regarding these services. Ms. Kelly stated that there is no known threat to the public.

Dr. Cochrane reported that he trained in fixed prosthetics and periodontics, he is on staff with Iowa Central Community College, and employs approximately 12 dental hygienists. Dr. Cochrane stated that, in his experience, dental hygienists do not know how to take impressions. Those dental hygienists who take impressions for him had to be trained by him. Dr. Cochrane, generally, either takes the impressions himself, or he delegates them to dental assistants who are far better at it than the dental hygienists.

Mr. Cope stated that one of the main reasons for the Iowa Dental Hygienists' Association's concern is that several of the items listed in level 1 are specifically listed in the current scope of practice for dental hygienists. By implementing the proposed changes, barriers would be added to dental hygienists, who could not provide proof of training, to performing tasks that are currently allowed. It would create a regulatory burden. The proposed rules would potentially eliminate services from dental hygienists who could not prove training. Mr. Cope is not aware of any threat to the public here.

Dr. Vargas stated that she understood what has been stated. Dentists always have the option to redo this work if necessary. However, simply being allowed by the scope of practice does not mean that additional training cannot or should not be required. Dr. Vargas referenced the example of sedation, which falls within the scope of practice of a dentist. Additional training is required prior to a practitioner being allowed to provide these services. Dr. Vargas stated that the educational background should not be ignored.

Ms. Slach stated that there are requirements for educational standards. If someone has graduated from an ADA-accredited dental assistant program perhaps the education standard is that they can take that test right when they graduate to become certified; this would not be different from a dental hygienist is in the program where those services are allowed within the scope of practice.

Dr. Thies asked which duties within level 1 fall within the current scope of practice. Dr. Thies asked what the dental hygienists are allowed to do apart from the monitoring or administration of nitrous oxide. Mr. Cope referenced Iowa Administrative Code 650—Chapter 10, which covers the scope of practice for a dental hygienist.

Ms. Jane Slach also noted that several of those items are listed. As an educator, Ms. Slach stated that some of the level 1 duties should be done under direct supervision as opposed to general supervision. Mr. Cope stated that the supervision level would be addressed within the proposed rules.

Ms. Kelly stated that the other item discussed in the Dental Hygiene Committee meeting was the request asking if correctional facilities would be covered in the current public health supervision locations. The committee has suggested that state public health programs should be interpreted to include correctional facilities. Dr. Vargas asked for clarification about this suggestion. Ms. Kelly and Ms. Slach stated that correctional facilities should be considered a state public health program.

Mr. Carl stated that the Iowa Dental Association would view this as an expansion of public health supervision. If so, Mr. Carl believed that a complete review of the public health supervision rules,

in their entirety, should occur prior to any changes being made. A system of oversight needs to be established.

Mr. Cope stated that Iowa Dental Hygienists' Association would welcome a complete review. Every time a review has occurred, it has shown the benefits of the program.

Mr. Carl stated again that the Iowa Dental Association would strongly suggest that a legitimate oversight system be put in place.

Ms. Kelly indicated that the Dental Hygiene Committee recommended that correctional facilities be considered a state public health program.

DENTAL ASSISTANT REGISTRATION COMMITTEE REPORT

- *Committee Update*
- *Committee Recommendations*
- *Dental Assistants and Public Health Supervision*

Dr. Fuller reported that committee met on October 10, 2014. Dr. Fuller provided an overview of the meeting.

Dr. Fuller reported that the committee reviewed a request from Dr. Moreno regarding a proposed dental assistant school. The committee responded by indicating that formal programs intended to fulfil the education and training requirements for dental assistants need to be accredited by the ADA, and are not approved by the Board.

The committee recommended the addition of more dental assistants to the committee. Dr. Fuller hoped that the Board can receive information prior to the January 2015 meeting to review regarding possible appointments to the committee.

Dr. Fuller reported that with regards to the request to consider allowing dental assistants to work in public health settings. The committee felt that the agreements need to be better managed before dental assistants are allowed to work under public health supervision.

Dr. Fuller stated the committee discussed the proposed expanded functions; however, that will be addressed later.

Dr. Fuller reported that the committee also looked at some of the issues and concerns related to reinstatement of dental assistants and the barriers that this may pose to some dentists, particularly in rural areas. The committee would like to find ways to simplify the reinstatement process for dental assistants. The committee will continue to discuss this issue further.

The committee also looked at some requests to clarify whether some tasks fell within the scope of practice for dental assistants. Specifically, the committee looked at the placement of Invisalign tabs/composites, and the use of CEREC, Itero or Trios Digital Impressions. It was determined that these fell within the current list of expanded functions.

Ms. Kelly asked if there are recommendations coming out of the committee for consideration. As to the expanded functions, the committee recommended approval with a few suggested changes as made by Dr. Thies in his comments.

Ms. Slach asked for clarification regarding the committee's recommendation regarding dental assistants helping in public health settings. Dr. Fuller stated that consideration needs to address the issue of supervision in regards to dental assistants. Mr. McCollum clarified that the committee was in favor of considering rule amendments to allow dental assistants to provide services in public health settings if the public health supervision rules are reviewed and updated to address those concerns.

Mr. Carl stated that the Iowa Dental Association would want the rules to be revisited prior to any further expansion. Mr. McCollum stated that this was the feeling of the committee.

Ms. Slach asked for clarification about who would review this issue. Mr. McCollum reported that both committees could review this matter and make recommendations to the Board about how to proceed.

❖ MOVED by KELLY, SECONDED by SLACH, to have the Board start drafting language for discussion to allow dental assistants to work under public health supervision.

Dr. Vargas asked for clarification about the proposal. Dr. Vargas wanted to know if dental hygienists who go into schools and other public health settings are simply asking for help. If so, would this be with or without the supervision of a dentist. Ms. Kelly stated that was the reason for the recommendation; though, considerations can be made to address concerns related to supervision.

Mr. McCollum stated that, ultimately, a dentist would have to provide supervision. The Board would need to decide how and under what circumstances that would be provided.

Dr. Russell cautioned the Board against making changes that might eliminate or make barriers to treatment.

Ms. Kelly summarized the difference in supervision levels for dental assistants. Ms. Kelly stated that they are asking that dental assistants be allowed to perform the same duties, which are currently allowed under general supervision, but under public health supervision.

Mr. Carl stated that a dental hygienist has no authority to make diagnoses. Mr. Carl clarified that the public health supervision agreements only allow dental hygienists to provide certain services in certain settings. Mr. Carl is not opposed to these programs; though, the Iowa Dental Association wants appropriate oversight. The Iowa Dental Association feels that the current oversight is minimal, and there may be concerns about whether adequate care is being provided.

Ms. Slach asked about the oversight issue. Ms. Slach asked Mr. Carl what he would propose to address his concerns. Mr. Carl stated that no entity has taken responsibility for ensuring that the

services being performed are allowed under the rules, and that the quality of care is being met. Dr. Russell stated that the Iowa Department of Public Health Oral Health Bureau is the administrator of the program; however, they do not have the authority to oversee or regulate the program. That authority lies with the Board.

Ms. Chickering stated that many programs use two dental hygienists to do the work of a dental hygienist and dental assistant. This arrangement is not cost effective. Ms. Chickering stated that she would support efforts to allow dental assistants to assist in public health settings. Ms. Chickering provided some data about the work provided in the school-based programs. These programs save money in the long run by providing preventive care to a population that might not otherwise receive it.

Dr. Vargas asked about the long term retention rates of sealants. Ms. Chickering stated that the retention rate is 92.5% is the historical average over a period of at least 10 years. Dr. Vargas asked who completed the check to determine the retention rate, and asked who completed the retention. Ms. Chickering stated that this was based on statistical analysis. The rechecks were completed by public health dental hygienists based on established protocols. Dr. Vargas stated that there is evidence that without caries protection there may additional concerns with about the long term benefits. Dr. Vargas stated that she is a pediatric dentist and understood the concerns. Dr. Vargas stated that she has seen sealant failures in her practice. Dr. Vargas agreed that there needs to be additional oversight.

Dr. Vargas agreed that oversight of the program is important. Ms. Slach stated that attempts are made to refer patients to a dental home for ongoing treatment. Dr. Vargas stated that referrals are great; however, she has not had a referral for treatment to date.

Ms. Kelly stated that public health retention rates mirror the retention rates she saw when she was employed at the Des Moines Health Center.

❖ The vote was taken. Motion APPROVED unanimously.

EXAMINATIONS REPORT

- *CRDTS – Dental Steering Committee Report*

Dr. Bradley reported that there is a meeting scheduled next week. The committee is looking at ways to improve the examinations, and make them more amenable to students.

- *CRDTS – Dental Hygiene Examination Review Committee Report*

Ms. Kelly reported that the committee last met in July 2014.

- *CRDTS – Dental Examinations Review Committee Report*

Dr. Vargas reported that they met in August 2014. A few changes were made to the dental examinations.

QUARTERLY IPRC REPORT

Mr. Sedars provided an overview of the current IPRC data.

SKILLED CARE FACILITY TASK FORCE REPORT

Mr. McCollum reported that the task force has not recently met.

EDUCATIONAL STANDARDS FOR EXPANDED FUNCTIONS TRAINING TASK FORCE REPORT

Ms. Braness reported that staff had a question about how to handle requests for review of expanded functions courses submitted that were utilizing curriculum previously approved by the Board, but taught by another practitioner. Staff was not sure if those courses should be considered approved, or forwarded for review and approval.

Mr. McCollum stated that the safest method would be to have the requests submitted for review to ensure that the curriculum is complete.

There was a question regarding the use of previously-approved curriculum. Ms. Braness stated that this was why the Board was asked about how to handle these requests. These courses will be forwarded to the task force upon receipt. Since the task force is an ad hoc committee, much of this could be handled by email.

Ms. Kelly stated that the instructors need to be qualified, and this would be another way to ensure that the qualifications of instructors.

Ms. Braness stated staff will ask that all requests be submitted as inquiries are received, and will forward those to the task force for review and consideration.

V. ADMINISTRATIVE RULES/PETITION FOR RULE WAIVER

- *Draft for Discussion – Proposed Amendments to Ch. 20, “Dental Assistants”; Ch. 23 (new chapter), “Expanded Functions for Dental Auxiliaries”*

Mr. McCollum reported that the current draft language before the Board for consideration was put together based on input from all of the professional organizations. A number of drafts have been submitted for review and discussion. It appeared that not everyone will be completely satisfied with the final proposals.

There are clear and distinct differences about how to proceed. Board staff needed direction about how to move forward.

The proposals were drafted into a single chapter with the idea that this would address the whole topic of expanded functions in a single chapter. It was also intended to address the differences in

baseline educational requirements in one place. There are also some questions about current scopes of practice and concerns about if education or training has ever been received in some of these areas. The Board could choose to require minimal training in these areas. One way this might be addressed is by having a supervising dentist attest to dental hygienists' competency.

Following a number of discussions, it was proposed that the rules for expanded functions be addressed in separate chapters: Iowa Administrative Code 650—Chapter 10 for dental hygienists, and in Iowa Administrative Code 650—Chapter 20 for dental assistants. This would allow the differences in baseline education requirements and training to be addressed separately. This would also allow the Board to address the matter of the current functions, which have been determined to fall within the scope of practice of a dental hygienist.

- ❖ MOVED by KELLY, SECONDED by SLACH, to draft the proposed rule changes regarding expanded functions in two separate chapters: Iowa Administrative Code 650—Chapters 10 and 20.

Ms. Slach stated that it makes more sense to address the entire scope of practice for each profession in their respective chapters. This would eliminate the need to have to refer to multiple chapters concerning the scope of practice for each profession.

Ms. Elmitt asked if the Board would still have the opportunity to clarify what was incorporated into the proposed changes. Ms. Braness stated that the Board would have that opportunity and that this motion only addressed whether to incorporate the changes into a single chapter, or to make the changes in two separate chapters.

Mr. McCollum stated that some items would be easier to address if the expanded functions rules were addressed in separate chapters.

- ❖ The vote was taken. Motion APPROVED unanimously.

Mr. McCollum reported that he would take the proposed changes into the separate chapters. Mr. McCollum stated that drafts of the proposals were distributed to the interested parties for review and input. Mr. McCollum asked the Board for input about how to address the proposed rules regarding level 1 and level 2 expanded functions. Mr. McCollum wanted clarification on the following: the distinction of level 1 and level 2, requirements to be eligible to training in level 2 expanded functions, and supervision requirements.

Mr. McCollum asked for clear direction about how to proceed on the items with the hope that the Board could consider a Notice of Intended Action at the next meeting. Ms. Elmitt asked how Board members should provide their input. Mr. McCollum stated that the Board could provide direction during the meeting.

Mr. McCollum stated that while the Board does not have a draft of the proposed changes in separate chapters, the end product will look very much like it is drafted currently. The primary difference is that expanded functions for dental hygienists would be included in Iowa

Administrative Code 650—Chapter 10, and expanded functions for dental assistants would be addressed in Iowa Administrative Code 650—Chapter 20.

Mr. McCollum asked for direction as to what should be required, if anything, for dental hygienists to perform the tasks currently listed as expanded functions for dental assistants. Mr. McCollum asked if those tasks could be delegated to dental hygienists without verifying training or education. Ms. Elmitt and Ms. Meier expressed concern about allowing these duties without verifying education or training. Ms. Kelly suggested that CODA-approved training, expanded functions training, or verification from a licensed dentist be accepted as a means of verifying education or competency.

Dr. Vargas commented on the suggestion to accept CODA-approved training. Dr. Vargas referred to information from Kirkwood Community College that these tasks might be taught in the classroom, but that hands-on experience did not always occur within the program. Dr. Vargas stated that there is a difference between what CODA has approved for training in these areas and what is taught in each program. Mr. McCollum reported that each of the dental hygiene programs indicated varying levels of training in the area of expanded functions.

Ms. Kelly indicated that some dental students receive classroom training, but not clinical training. Dentists would not necessarily be restricted from providing these services. Ms. Kelly sees this as being a similar situation. Dr. Vargas asked about Ms. Kelly's statement. Ms. Kelly stated that information provided to her by the University of Iowa College of Dentistry indicated that dental students do not necessarily receive training in implants to clinical competency, but would be allowed to provide these services as part of the dental license. Dr. Vargas asked if implants are considered part of the educational requirements of a dental student. Dr. Vargas stated that malpractice insurers place implants and other procedures in another category for dental procedures. Dr. Vargas stated that while implants may be taught, it may not fall within the accreditation standards of a dental students. Ms. Kelly stated that the dental license would allow a dentist to place these under the scope of practice. Ms. Kelly stated there is nothing in the rules, which specifically requires training in this area prior to providing these services. If a complaint were filed, at that time, the licensee would be required to demonstrate training. Ms. Kelly would like to see the same standard applied to the level 1 expanded functions that would be considered to be within the scope of practice of a dental hygienist.

Ms. Slach stated that proving training could be difficult and pose problems for the practice of dental hygiene in Iowa. Ms. Slach stated that if the rules went into effect as suggested, dental hygienists may be barred from providing services that they could prior to the implementation of the rule. This could potentially pose problems in the delivery of services. These procedures are reversible.

Ms. Scott asked for clarification on the suggested duties that fall within the scope of practice. Ms. Scott stated that the proposed Iowa Administrative Code 650—23.3 lists eight (8) functions, but the tasks which are being designated as expanded functions level 1 includes eleven (11) tasks. Ms. Kelly asked for clarification about which list was under discussion as it related to the current scope of practice of a dental hygienist. It was indicated that the list of eleven (11) tasks fall within the scope of practice. Mr. McCollum stated that is a matter of interpretation.

Ms. Kelly stated that number three (3) in the list of eleven (11) is different. Mr. McCollum stated that the reason for the differences in a few of those related to supervision levels. There were a few of the tasks that should be performed under direct supervision. Some of those tasks shouldn't be performed if a dentist is not present.

Ms. Scott stated that there may need to be further discussion about how to determine what falls within the scope of practice. Ms. Scott's recollection of the discussion related to the list of Frequently Asked Questions (FAQs), and the list appears to be longer than what was discussed previously. Ms. Kelly believed that items number 7 and 8 were new to the list because they were inherent. Those were part of the suggested level 2 expanded functions that came from the task force.

❖ MOVED by KELLY, SECONDED by MEIER, to include language to allow a dentist to oversee or attest to training and experience as a sufficient basis to demonstrate competency to provide these services. Motion DENIED, 1-7. Ms. Kelly voted to approve the motion; the remaining members opposed the motion. Dr. McCullough did not participate in this part of the meeting.

- *Draft For Discussion – 650—27.11, “Record Keeping”*

Mr. McCollum provided an update on the proposed changes. This draft provided instruction regarding the requirements for retention of study models and casts. The proposed draft would require offices to hold study models and casts for six (6) years after the completion of treatment.

Dr. Thies asked for clarification about the proposed requirement. Mr. McCollum stated that the casts and study models would need to be retained for six (6) years from the date of completion of the treatment for which they were required. This is different from the other aspects of the patient records, which would need to be held for six (6) years from the last date of all treatment, examination or prescription, or in the case of minors until the age of 19.

Dr. Cochrane stated that many offices do not have the space to continue storing these items. Dr. Cochrane proposed an amendment that the office retain these for the period as recommended, or that the office could transfer these items to the patient upon the completion of treatment.

Ms. Slach asked if offices could make a digital record of the casts and models, and store it that way. CEREC digital impressions would allow offices to do this. The Board members did not oppose this suggestion.

Ms. Slach stated that she was not opposed to providing the study models or casts to the patient so long as it is noted in the patient record.

❖ MOVED by SLACH, SECONDED by KELLY, to approve the draft language with an amendment to allow dental offices to transfer the study models and casts to the patients so long as it is noted in the record.

Mr. McCollum will come back to the January 2015 meeting with a Notice of Intended Action in regards to the amendments as proposed.

❖ The vote was taken. Motion APPROVED unanimously.

- *Update – Ch. 29, “Sedation and Nitrous Oxide Inhalation Analgesia”*
- *Update – Ch. 52, “Military Service and Veteran Reciprocity”*

Mr. McCollum reported that the Notices of Intended Action for these rules have already been approved by the Board. Mr. McCollum reported that he appeared before the Administrative Rules Review Committee this last week to discuss the proposed rules. The public hearing date is scheduled for October 21, 2014.

- *Other Recommendations, If Any*

There were no other recommendations for discussion.

VI. LEGISLATIVE UPDATE

Mr. McCollum reported that Board is pursuing a legislative change to reclassify the position of the executive director from a merit position to an at-will position. Mr. McCollum intended to file the proposed legislation within two (2) weeks. Mr. McCollum will inform the associations when the legislation is filed so that interested parties may register their support if they wish to do so.

Ms. Slach asked if the applicants for the position were aware of the proposed change. Mr. McCollum reported that the candidates were made aware of the proposed change.

Mr. Carl reported that the Iowa Dental Association was in favor of the proposal and would register their support.

VII. OTHER BUSINESS

TEMPORARY PERMITS FOR RETIRED DENTISTS

Mr. McCollum reported that he had been working with Dr. Cochrane to find draft language that would be acceptable to all parties. Mr. McCollum stated that the full board had not seen the most recent proposed language, nor have any of the other interested parties.

Dr. Cochrane questioned the delay with regards to this proposed legislation since they have the same deadlines for filing proposed legislation. Dr. Cochrane thanked Mr. McCollum for his work on this proposal. Dr. Cochrane has also spoken to Dr. Bradley about this matter as well.

Dr. Cochrane expressed his general support of the most recent draft, though he had a few comments. Dr. Cochrane would prefer that several small sections be addressed in the Iowa Administrative Code, as opposed to the Iowa Code.

Dr. Cochrane read a portion of the proposed language. “The board may issue... without remuneration.” Dr. Cochrane proposed ending the statement after the word “remuneration.” Dr. Cochrane also commented on the language regarding approved locations. Dr. Bradley and Mr. McCollum agreed to those terms.

The proposed language referred to a restriction on deep sedation/general anesthesia and moderate sedation for temporary permits to retired dentists. Since Board rules address the requirements to provide these services, Dr. Cochrane was not opposed to these proposals. Dr. Cochrane, however, questioned the exclusion of minimal sedation as a permit is not required to provide these services. Specifically, Dr. Cochrane questioned the use of nitrous oxide. Mr. McCollum reported that the reason for that language is that, often times, minimal sedation involves the use of controlled substances, which requires an active CSA and DEA permit. Dr. Cochrane understood those concerns and proposed that a revision be made to allow the use of nitrous oxide.

Dr. Cochrane referenced the language regarding a license that was lapsed due to disciplinary action being prohibited from participating. Dr. Cochrane indicated that there may be some additional questions in regards to this.

Dr. Cochrane reported being thrilled with the proposed item number 10. Dr. Cochrane was also in favor of some of the retired participants limiting themselves to triage. Mr. McCollum recommended leaving that section vague and address it more specifically in the Iowa Administrative Code.

Dr. Bradley stated that the Iowa Dental Association would be in the best position to submit this. Dr. Cochrane agreed to submit this to the legislature for consideration upon receipt of further direction from the Board about the final language. Mr. McCollum will touch based with Iowa Dental Hygienists' Association for further input.

Ms. Slach asked about faculty permit holders, who are foreign trained. Mr. McCollum reported that the current proposal would be limited to dentists and dental hygienists, who received their dental and dental hygiene education and training at ADA-accredited programs.

Mr. Carl stated that too many of the provisions were being placed in the proposed statute. Mr. Carl's concern is that the Iowa Administrative Code would be the best place to address some of these items since those rules can be changed as necessary with a greater degree of flexibility. Mr. Carl believes that the first paragraph is the key portion that ought to be included in the legislative proposal. The rest could be addressed in the Iowa Administrative Code.

Ms. Slach inquired about practitioners in the military. Mr. McCollum reported that the current language addresses those in the military.

Mr. McCollum asked Ms. Braness to provide an overview of the standards and requirements for faculty permits. Ms. Braness provided an overview on standards for faculty permits. An application for faculty permit asks for less information than a dental license since the practice is restricted to the educational setting and programs where the permit holder is employed as a faculty

member. For example, applicants for a faculty permit are not required to complete or show evidence of having completed a clinical examination. Applications for faculty permit that are submitted by applicants who are foreign-trained are forwarded to the Licensure/Registration Committee for additional review and approval prior to issuance. This process for review may not be specifically addressed in the Iowa Administrative Code; however, this step allows for additional review in cases where training was not completed by an ADA-accredited institution.

Mr. McCollum stated that the language of the proposed legislation could possibly be modified to include faculty permit holders as appropriate. Dr. Cochrane expressed his support for the inclusion of permit holders.

Mr. Carl indicated that there is a tight deadline to get the proposed legislation filed for the upcoming legislative session. Mr. Carl reported that the Iowa Dental Association will move forward with the legislation. Mr. McCollum indicated that he would do everything he could to expedite this as much as possible. Mr. McCollum reported that it may be best to hold a teleconference to get formal approval from the Board.

ITINERANT ORAL SURGEONS

Mr. McCollum provided an overview of this item. The request was submitted too late for consideration at the last meeting. There are some concerns by local oral surgeons about some practitioners, who are travelling from location to location providing services for brief periods of time, and are often unavailable for postoperative care. This requires local practitioners to assume the postoperative care when appropriate.

Mr. Carl stated that he has had a lot of conversations about this and wanted to make sure that the Board understood the problem as he did. Mr. McCollum stated that if a complaint were filed, it would be treated as patient abandonment, and the Board would have means to address the complaint from that standpoint.

Dr. Cochrane asked for the difference between itinerant practitioner and a satellite office. Mr. McCollum stated that itinerant practitioners are those that may not practice exclusively in Iowa, and travel to Iowa only to provide dental services. These would most likely be out-of-state practitioners.

Ms. Kelly inquired about this issue. Mr. McCollum and Mr. Sedars stated that there are ways to allow this and still meet the requirement for care. For example, if arrangements are made with the patient for follow up care with a local practitioner, then this may address the concerns. These would need to be reviewed individually to determine if the standard of care was met.

REQUEST FOR NATIONAL EXAMINATION CLEARINGHOUSE

Ms. Braness provided an overview of this item. The Louisiana State Board of Dentistry is requesting that a national clearinghouse for all clinical examinations be established. Currently, Louisiana prohibits licensure if someone fails 3 clinical examinations, regardless of examination completed. Currently, the Louisiana State Board of Dentistry must rely on the applicants to be

truthful. A national clearinghouse would allow states to verify information provided by the applicant. Ms. Braness stated that this does not necessarily require Board action; however, staff wanted to bring this to the attention of the Board.

Ms. Elmitt and Ms. Kelly agreed that this would be a good idea, as it might help Board staff. Mr. McCollum stated that this would likely function in much the same way that the American Association of Dental Boards provided updates to its members regarding action taken against licenses in other states. Dr. Bradley thought that the Board should support this.

- ❖ MOVED by JENEARY, SECONDED by ELMITT, to send a letter in support of the proposal for a central clearinghouse of clinical examinations. Motion APPROVED unanimously.

REQUEST TO INCLUDE CORRECTIONAL FACILITIES IN PUBLIC HEALTH SUPERVISION LOCATIONS

Dr. Bradley reported that there was a motion, which came out of the Dental Hygiene Committee earlier that morning regarding this request. Ms. Kelly confirmed that a motion came out of the committee regarding this item. Mr. McCollum stated that the Board needs to discuss this item further.

- ❖ MOVED by KELLY, SECONDED by SLACH, to interpret the current public health supervision rules to allow correctional facilities to be considered “federal, state, or local public health programs.”

Mr. McCollum asked Ms. Scott for her opinion on this matter. Ms. Scott stated that her initial impression of the request was that the public health supervision rules would need to be changed to include correctional facilities. Upon further discussion, it’s clear that the rule is broadly written, and “public health programs” aren’t defined. Since the rule is written very broadly, it could be interpreted to include a number of things. The question is whether the Board is comfortable interpreting the rule to include correctional facilities. The other option would be to propose a rule change to specifically include correctional facilities in the list of approved public health supervision locations.

Ms. Slach expressed a preference to leave the language broad, as opposed to having a long list of approved facilities. Ms. Kelly reported that each of the prison programs has a dentist associated with each of the locations.

Dr. Bradley has had some conversations with dentists who work within the prison system. Dr. Bradley reported that not all of these dentists are in support of this request. Ms. Kelly reported that some of the dentists were in support of the request. Dr. Bradley reported that some of the dentists are reluctant to support this since the dentists would bear most of the responsibility for the work provided even though they may never see these patients.

Mr. McCollum and Mr. Sedars reported that a dentist who worked in one of the correctional facilities had called the Board about this issue. It appeared that the prison system may be in support of this; however, not all of the dentists, who work for the prisons were in support. There may be a

point where the dentists employed at the correctional facilities would need to enter into these agreements, or terminate their employment with the correctional facilities.

Ms. Elmitt asked about the potential risks of this proposal. Ms. Slach stated that this would not change the public health supervision program itself, this would simply allow dental hygienists to work in these locations under public health supervision. Dr. Vargas believed that the risks would be minimal. The work being performed is reversible. Dental hygienists would refer the patients for further examination and treatment as necessary. Ms. Kelly stated that dentists and dental hygienists are employed by the prison systems.

- ❖ The vote was taken. Motion APPROVED, 7-1. Dr. Fuller opposed the motion.

VIII. APPLICATIONS FOR LICENSURE/REGISTRATION & OTHER REQUESTS

RATIFICATION OF ACTIONS TAKEN ON APPLICATIONS SINCE LAST MEETING

Mr. Braness reported that the Board was provided an updated list of actions taken in response to applications for license, registration, qualification, and permit.

- ❖ MOVED by MEIER, SECONDED by VARGAS, to approve the list as submitted. Motion APPROVED unanimously.

PENDING LICENSURE/REGISTRATION APPLICATIONS

- *David C. Reff, D.D.S. – Dental License*
- *Brian D. Newell, D.D.S. – Dental License*

These applications were discussed in closed session.

IX. 2nd OPPORTUNITY FOR PUBLIC COMMENT

Dr. Bradley allowed the opportunity for public comment.

Dr. Thies commented about the expanded functions and dental hygiene. Dr. Thies believed that the rules should be well defined. Their education prior to performing these services should be verified prior to allowing dental hygienists to perform these tasks. In his experience, dental hygienists cannot perform these tasks unless they were a dental assistant first. Dr. Thies recommended a formal education process for these tasks.

Dr. Cochrane asked to revisit the request from Becky McCarl, R.D.H. regarding the matter of public health supervision and correctional facilities. Dr. Cochrane stated that she is asking to complete examinations under the public health supervision program. Ms. Kelly stated that Ms. McCarl currently performs screenings. Dr. Cochrane stated that there is a reference to completing examinations in the request. Ms. Braness and Mr. McCollum stated that the Board's response would clarify those items that would be allowed pursuant to the rule. Additional clarification was

provided regarding what items she was asking to perform and those items, which are currently performed by the dentists within the correctional facilities.

X. CLOSED SESSION

- ❖ MOVED by VARGAS, SECONDED by SLACH, for the Board to go into closed session at 1:23 p.m. on Friday, October 17, 2014, pursuant to Iowa Code Sections 21.5(1)(a), (d) and (f) to discuss and review applications, complaints and investigative reports which are required by state law to be kept confidential and to discuss whether to initiate disciplinary investigations or proceedings.

| <u>Member</u> | <u>Bradley</u> | <u>Elmitt</u> | <u>Fuller</u> | <u>Jeneary</u> | <u>Kelly</u> | <u>McCullough</u> | <u>Meier</u> | <u>Slach</u> | <u>Vargas</u> |
|---------------|----------------|---------------|---------------|----------------|--------------|-------------------|--------------|--------------|---------------|
| Aye | x | x | x | x | x | | x | x | x |
| Nay | | | | | | | | | |
| Absent | | | | | | x | | | |

Motion APPROVED by ROLL CALL.

- The Board went into closed session at 1:23 p.m.
- The Board took a brief recess at 1:23 p.m.
- The Board reconvened at 1:40 p.m.

XIV OPEN SESSION

- ❖ MOVED by ELMITT, SECONDED by VARGAS, to return to open session. Motion APPROVED unanimously.
- The Board reconvened in open session at 6:15 p.m. on October 17, 2014.

ACTION ON CLOSED SESSION ITEMS

1. Closed Session Minutes

- ❖ MOVED by MEIER, SECONDED by VARGAS, to approve the closed session minutes for the July 31-August 1, 2014 quarterly meeting. Motion APPROVED unanimously.

2. Disciplinary Orders

- ❖ MOVED by MEIER, SECONDED by VARGAS, to approve the proposed Combined Statement of Charges, Settlement Agreement and Final Order in the Matter of Shawn M. Kerby, D.D.S., file number 14-0060. Motion APPROVED unanimously.
- ❖ MOVED by KELLY, SECONDED by SLACH, to approve the proposed Combined Statement of Charges, Settlement Agreement and Final Order in the Matter of Lisa A. Kennedy, R.D.H., file number 13-0001. Motion APPROVED unanimously.
- ❖ MOVED by KELLY, SECONDED by SLACH, to approve the proposed Combined Statement of Charges, Settlement Agreement and Final Order in the Matter of Linda G. Meyers, R.D.H., file number 14-0040. Motion APPROVED unanimously.

- ❖ MOVED by KELLY, SECONDED by SLACH, to approve the proposed Combined Statement of Charges, Settlement Agreement and Final Order in the Matter of Janet L. Hillis, R.D.H., file number 14-0049. Motion APPROVED unanimously.
- ❖ MOVED by KELLY, SECONDED by SLACH, to approve the proposed Notice of Hearing and Statement of Charges in the Matter of Lisa M. Kucera, R.D.H., file number 14-0041. Motion APPROVED unanimously.
- ❖ MOVED by JENEARY, SECONDED by ELMITT, to deny the Request to Modify Existing Board Order in the Matter of Andre' Q. Bell, D.D.S., file number 06-055. Motion APPROVED unanimously.

3. *Final Action on Cases*

- ❖ MOVED by FULLER, SECONDED by KELLY, to close file numbers 12-144 and 12-145. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file number 12-184. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to keep open file number 13-053. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file numbers 13-004 and 14-0077. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file number 14-0036. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY to close file number 14-0065. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to keep open file numbers 14-0080 and 14-0086. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file number 14-0102. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file number 14-0108. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to close file numbers 14-0110 and 14-0117. Motion APPROVED unanimously.
- ❖ MOVED by FULLER, SECONDED by KELLY, to keep open file number 14-0116. Motion APPROVED unanimously.

- ❖ MOVED by FULLER, SECONDED by KELLY, to keep open file number 14-0118. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0104. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0105. Motion APPROVED unanimously. Vargas recused.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0106. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file number 14-0107. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0109. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file number 14-0111. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file numbers 14-0112 and 14-0113. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0114. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0119. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0121. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0122. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0123. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0124. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0126. Motion APPROVED unanimously.

- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0127. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0128. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file number 14-0125. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file number 13-021. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to keep open file number 14-0067. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0088. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0100. Motion APPROVED unanimously.
- ❖ MOVED by ELMITT, SECONDED by JENEARY, to close file number 14-0101. Motion APPROVED unanimously.
- ❖ MOVED by JENEARY, SECONDED by ELMITT, to close file number 14-0026. Motion APPROVED unanimously.
- ❖ MOVED by JENEARY, SECONDED by ELMITT, to keep open file number 14-0097. Motion APPROVED unanimously.

4. *Licensure/Registration Issues*

- ❖ MOVED by KELLY, SECONDED by SLACH, to approve the issuance of a dental hygiene license to Sara Skattebo, R.D.H. and close file number 14-0135. Motion APPROVED unanimously.
- ❖ MOVED by VARGAS, SECONDED by FULLER, to keep open file number 14-0129. Motion APPROVED unanimously.
- ❖ MOVED by VARGAS, SECONDED by FULLER, to close file number 14-0130. Motion APPROVED unanimously.
- ❖ MOVED by VARGAS, SECONDED by FULLER, to approve the issuance of a dental license to Brian D. Newell, D.D.S., and to close file number 14-0137. Motion APPROVED unanimously.

- ❖ MOVED by VARGAS, SECONDED by FULLER, to approve the issuance of a dental assistant registration to Tera M. Hazen, D.A., and to close file number 14-0138. Motion APPROVED unanimously.
- ❖ MOVED by VARGAS, SECONDED by FULLER, to keep open file number 14-0139. Motion APPROVED unanimously.
- ❖ MOVED by VARGAS, SECONDED by FULLER, to approve the issuance of a dental assistant registration to Kelsey K. Hosch, D.A., and to close file number 14-0140. Motion APPROVED unanimously.

5. *For Board Discussion*

- ❖ MOVED by JENEARY, SECONDED by ELMIT, to close item #1 under this heading on the closed session agenda. Motion APPROVED unanimously.
- ❖ MOVED by JENEARY, SECONDED by ELMIT, to approve item #2 under this heading on the closed session agenda. Motion APPROVED unanimously.
- ❖ MOVED by JENEARY, SECONDED by ELMIT, to close item #3 under this heading on the closed session agenda. Motion APPROVED unanimously.

CLOSED SESSION

- ❖ MOVED by ELMITT, SECONDED by FULLER, to go into closed executive session. Motion APPROVED unanimously.
- The Board went into closed executive session at 6:25 p.m.

XVII. ADJOURN

The meeting was adjourned at 6:50 p.m. on October 17, 2014.

NEXT MEETING OF THE BOARD

The next meeting of the Board is scheduled for January 22-23, 2015, in Des Moines, Iowa.

These minutes are respectfully submitted by Christel Braness, Program Planner 2, Iowa Dental Board.