



STATE OF IOWA

IOWA DENTAL BOARD

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

JILL STUECKER
EXECUTIVE DIRECTOR

IOWA DENTAL HYGIENE COMMITTEE

AGENDA

JULY 23, 2015

9:30 A.M.

Location: Iowa Dental Board, 400 SW 8th St., Suite D, Des Moines, Iowa

Members: *Mary Kelly, R.D.H., Chair; Nancy Slach, R.D.H., Vice Chair; Thomas Jeneary, D.D.S.*

- I. CALL MEETING TO ORDER – ROLL CALL**
- II. 1st OPPORTUNITY FOR PUBLIC COMMENT**
- III. APPROVAL OF OPEN SESSION MINUTES**
 - a. April 23, 2015 – Quarterly Meeting
- IV. EXECUTIVE DIRECTOR’S REPORT**
- V. LEGAL REPORT**
- VI. ADMINISTRATIVE RULES/ADMINISTRATIVE RULE WAIVERS**
 - a. Review of Public Comments for Iowa Administrative Code 650 – Chapter 10 “*General Requirements*”
 - b. Discussion of Iowa Administrative Code 650 – Chapter 10.6 (1) “*Change of address or name*”
 - c. Rule Waiver Request – Gina Houston – IAC 650—11.7(1)b, “*Licensure to Practice Dentistry or Dental Hygiene*”
- VII. OTHER BUSINESS**
 - a. Discussion on Supervision Levels in CODA Approved Dental Hygiene Education Programs
 - b. Discussion on Recommendations Made in Dental Hygiene Work Force Publication
 - c. Discussion on Use of Live Patients for Dental Hygiene Exam
- VIII. APPLICATIONS FOR LICENSURE & OTHER REQUESTS***
- IX. 2nd OPPORTUNITY FOR PUBLIC COMMENT**

X. CLOSED SESSION*

XI. ACTION, IF ANY, ON CLOSED SESSION ITEMS

XII. ADJOURN

NEXT QUARTERLY MEETING: October 22, 2015

If you require the assistance of auxiliary aids or services to participate in or attend the meeting because of a disability, please call the office of the Board at 515/281-5157.

*This portion of the meeting may be conducted in closed session to discuss confidential matters that may concern examination information, peace officers' investigative reports, attorney records related to litigation, patient records and reports on the condition, diagnosis, care or treatment of a patient, or investigation reports and other investigative information which is privileged and confidential under the provisions of Sections 22.7(2), 22.7(4), 22.7(5), 22.7(9), 22.7(19), and 272C.6(4) of the 2015 Code of Iowa. These matters constitute a sufficient basis for the committee to consider a closed session under the provisions of section 21.5(1), (a), (c), (d), (f), (g), and (h) of the 2015 Code of Iowa. These sections provide that a governmental body may hold a closed session only by affirmative public vote of either two-thirds of the members of the body or all of the members present at the meeting to review or discuss records which are required or authorized by state or federal law to be kept confidential, to discuss whether to initiate licensee disciplinary investigations or proceedings, and to discuss the decision to be rendered in a contested case conducted according to the provisions of Iowa Code chapter 17A.



STATE OF IOWA

IOWA DENTAL BOARD

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

JILL STUECKER
EXECUTIVE DIRECTOR

DENTAL HYGIENE COMMITTEE

OPEN SESSION MINUTES

April 23, 2015
Conference Room
400 S.W. 8th St., Suite D
Des Moines, Iowa

Committee Members

Mary C. Kelly, R.D.H.
Nancy A. Slach, R.D.H.
Matthew J. McCullough, D.D.S.

April 23, 2015

Present
Present
Present

Staff Members

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

Attorney General's Office

Sara Scott, Assistant Attorney General

I. CALL TO ORDER FOR APRIL 23, 2015

Ms. Kelly called the meeting of the Dental Hygiene Committee to order at 10:05 a.m. on Thursday, April 23, 2015. A quorum was established with all members present.

Roll Call:

<u>Member</u>	<u>Kelly</u>	<u>Slach</u>	<u>McCullough</u>
Present	x	x	x
Absent			

II. 1st OPPORTUNITY FOR PUBLIC COMMENT

Ms. Kelly allowed the opportunity for public comment.

Mr. Cope, Iowa Dental Hygienists' Association, was appreciative of the work that board staff and Board has put into the draft Notice of Intended Action for Iowa Administrative Code 650—Chapter 10, specifically as it relates to expanded functions for dental hygienists.

III. APPROVAL OF OPEN SESSION MINUTES

- *January 22, 2015 – Quarterly Meeting Minutes*
- ❖ MOVED by MCCULLOUGH, SECONDED by SLACH, to APPROVE the minutes as submitted. Motion APPROVED unanimously.

IV. LEGAL REPORT

Ms. Scott reported on the decision that came out of the U.S. Supreme Court on the case between the Federal Trade Commission (FTC) and the North Carolina Board of Dental Examiners. The FTC alleged that the North Carolina board was infringing on free trade with the issuance of cease and desist letters to non-licensed dental professionals who were providing teeth whitening services.

Ms. Scott noted that there are some distinct differences between the Iowa Dental Board and the North Carolina Board of Dental Examiners. Their members are elected by the professions, and they retained private counsel. The state practice act was also different from Iowa.

Historically, state agencies were exempt from antitrust laws due to state action immunity. One of the key points of the ruling is that the court stated that a board or agency that is comprised of a controlling number of “market participants” should not have that same immunity. In these cases, the court indicated that these state agencies should be treated differently. Ms. Scott stated that this was a departure from previously-established case law.

The Board will need to demonstrate the reasons for anticompetitive action taken by the Board when those actions occur. Active state supervision is the piece that the Board may need to look at when considering these kinds of actions. When the board members are market participants, an uninterested party may need to review decisions for potential anticompetitive concerns.

Ms. Scott stated that the Board needs to be sure to review the statutes and administrative code to ensure compliance with legal requirements. Ms. Scott stated that nothing needs to change at this point in time; though, it is something to be aware of going forward. The Board needs to be sure to act within the scope of the authority and be cautious of not straying from that. Ultimately, the Board needs to act in the best interest of the public.

There was further discussion about this matter. Ms. Scott also recommended that when interpreting statute, it would be best to do that by the rulemaking process.

V. ADMINISTRATIVE RULES/ADMINISTRATIVE RULE WAIVERS

- *Vote on Notice of Intended Action – Proposed Amendments to Ch. 10, “General Requirements”*

Ms. Kelly reported that the committee had a draft of the Notice of Intended Action for consideration.

Ms. Stuecker reported on some of the history of the rulemaking with respect to expanded functions and dental hygienists. Ms. Stuecker acknowledged that these conversations have been

longstanding and that the Notice of Intended Action being voted on today was the result of compromise.

The committee members and board staff discussed the proposed Notice of Intended Action in detail. While some of the committee members expressed concerns about the limited scope of some of these functions, the committee determined that the rulemaking process should proceed to avoid further delays.

- ❖ **MOVED** by MCCULLOUGH, **SECONDED** by SLACH, to recommend adoption of the proposed draft of the Notice of Intended Action. Motion **APPROVED** unanimously.

Ms. Kelly reported that this would be brought forward to the Board as a recommendation.

VI. OTHER BUSINESS

- *Performing Educational Services Under General Supervision*

Ms. Kelly stated that some questions arose during the discussion related to expanded functions pertaining to the issue of supervision and educational services. Ms. Kelly read the portion of the Iowa Code, which addresses educational services by dental hygienists. Educational services must be supervised by licensed dentists. When working under public health supervision, the services must be documented. There has been some question about how to document this under general supervision.

Ms. Kelly reported that there is a coalition with Delta Dental of Iowa Foundation that will train direct care workers in nursing facilities. It will begin as an initial group of 15 individuals, who will later train others. There are questions about how to document the required level of supervision. Since the statute requires supervision, the Board does not have authority to waive this requirement. The main concern is how to find a way of meeting the requirement without being burdensome.

Mr. McCollum provided some further information. Mr. McCollum stated that Iowa Code Chapter 153 requires supervision by a licensed dentist. However, Iowa Administrative Code 650—Chapter 10 addresses this further: the service must be delegated by a licensed dentist, and supervised by a licensed dentist. This can be done under general supervision.

Ms. Slach asked for a definition of educational services. Mr. McCollum read the portion of Iowa Code, which addressed this in detail.

The committee members, board staff and attendees discussed this in detail. When asked for her opinion, Ms. Scott stated that she was inclined to agree with Mr. McCollum's statements regarding what is required by rule. There may not be anything, which requires correction. There isn't a specific requirement to document compliance with this; however, if someone is concerned about documenting the services and supervision, licensees can certainly document those things as they feel appropriate. Ms. Scott stated that regulating the documentation may raise concerns about over-regulation.

Ms. Kelly asked if it would be sufficient to reflect this in the minutes. Ms. Scott believed that this should be adequate. The committee determined that educational services are allowed under general supervision. Although, there aren't specific requirements to document these services and supervision, licensees may do so if they prefer.

VII. APPLICATIONS FOR LICENSURE & OTHER REQUESTS

- *Request for Clarification on Clinical Examination Requirement for Reinstatement of Dental Hygiene License – Tammy Brousseau, R.D.H.*

Ms. Braness provided an overview of the request. Ms. Brousseau has been inquiring about reinstatement of her Iowa dental hygiene license. Ms. Brousseau has been out of practice for five years. Historically, the Dental Hygiene Committee has required a clinical examination prior to reinstatement in cases where licensees have been out of practice five or more years. This was forwarded for consideration.

The committee members and staff discussed this matter in detail.

- ❖ **MOVED** by KELLY, **SECONDED** by SLACH, to require successful completion of a clinical examination prior to reinstatement. Motion **APPROVED** unanimously.

X. 2nd OPPORTUNITY FOR PUBLIC COMMENT

Ms. Kelly allowed the opportunity for public comment.

No comments were received.

Ms. Kelly asked for input about the new format of the quarterly meetings schedule. Ms. Veenstra stated that it may depend upon how much business is to be conducted. There may be occasions wherein all of the committee and Board business could be completed in one day.

VIII. CLOSED SESSION

- ❖ **MOVED** by MCCULLOUGH, **SECONDED** by SLACH, to go into closed session pursuant to Iowa Code 21.5(1)(a) and (d) to discuss and review complaints and other information required by state law to be kept confidential.

Roll Call:

<u>Member</u>	<u>Kelly</u>	<u>Slach</u>	<u>McCullough</u>
Yes	x	x	x
No			
Absent			

Motion APPROVED by ROLL CALL.

- The Dental Hygiene Committee convened in closed session at 11:06 a.m.

IX. RECONVENE IN OPEN SESSION

- ❖ MOVED by SLACH, SECONDED by MCCULLOUGH, to return to open session. Motion APPROVED unanimously.

- The Dental Hygiene Committee reconvened in open session at 11:08 a.m.

X. ACTION ON CLOSED SESSION ITEMS

- ❖ MOVED by MCCULLOUGH, SECONDED by SLACH to APPROVE the closed session minutes as submitted. Motion APPROVED unanimously.

XI. ADJOURN

- ❖ MOVED by SLACH, SECONDED by MCCULLOUGH, to adjourn. Motion APPROVED unanimously.

The meeting of the Dental Hygiene Committee adjourned at approximately 11:09 a.m. on April 23, 2015.

NEXT MEETING OF THE COMMITTEE

The next meeting of the Dental Hygiene Committee is scheduled for July 23, 2015, in Des Moines, Iowa.

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

DENTAL BOARD[650]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code sections 147.76 and 272C.2, the Dental Board hereby gives Notice of Intended Action to amend Chapter 10, “General Requirements,” Iowa Administrative Code.

The purposes of the proposed amendments are as follows: to clarify that the removal of adhesives and the preliminary charting of existing dental restorations and teeth are permissible services a dental hygienist may perform under the supervision of a licensed dentist; to permit dental hygienists to perform expanded function procedures which may be delegated by a licensed dentist; to set the education and training requirements for those procedures; and to update the name of the Bureau of Oral and Health Delivery Systems.

Current rules permit a dental hygienist to remove adhesives and to perform the preliminary charting of existing dental restorations and teeth. These amendments would list these specific procedures.

Current rules do not allow a dentist to delegate expanded function procedures to a dental hygienist. These amendments would allow a dentist to delegate expanded function procedures to a dental hygienist. The amendments list each expanded functions procedure, define the supervision requirements when each procedure is performed, and set the education and training requirements for the procedure.

These amendments change the Bureau’s name from the Oral Health Bureau to the Bureau of Oral and Health Delivery Systems.

Any interested person may make written comments on the proposed amendments on or before July 21, 2015. Such written materials should be directed to Phil McCollum, Associate Director, Iowa Dental Board, 400 S.W. Eighth Street, Suite D, Des Moines, Iowa 50309; or sent by e-mail to phil.mccollum@iowa.gov.

There will be a public hearing on July 21, 2015, at 2 p.m. in the Board office, 400 S.W. Eighth Street, Suite D, Des Moines, Iowa, at which time persons may present their views orally or in writing.

The proposed amendments are subject to waiver or variance pursuant to 650—Chapter 7.

After analysis and review of this rule making, a positive impact on jobs has been found for dental hygienists who will now be able to perform additional procedures.

These amendments are intended to implement Iowa Code section 153.15.

The following amendments are proposed.

ITEM 1. Amend paragraph **10.3(1)“b”** as follows:

b. Therapeutic. Identifying and evaluating factors which indicate the need for and performing (1) oral prophylaxis, which includes supragingival and subgingival debridement of plaque, and detection and removal of calculus with instruments or any other devices; (2) periodontal scaling and root planing; (3) removing and polishing hardened excess restorative material; (4) administering local anesthesia with the proper permit; (5) administering nitrous oxide inhalation analgesia in accordance with 650—subrules 29.6(4) and 29.6(5); (6) applying or administering medicaments prescribed by a dentist, including chemotherapeutic agents and medicaments or therapies for the treatment of periodontal disease and caries; (7) removal of adhesives.

ITEM 2. Amend paragraph **10.3(1)“d”** as follows:

d. Diagnostic. Reviewing medical and dental health histories; performing oral inspection; indexing dental and periodontal disease; preliminary charting of existing dental restorations and teeth; making occlusal registrations for mounting study casts; testing pulp vitality; analyzing dietary surveys.

ITEM 3. Adopt the following **new** subrule 10.3(8):

10.3(8) Expanded function requirements.

a. Supervision requirements. A dental hygienist may only perform expanded function procedures which are delegated by and performed under the supervision of a dentist licensed pursuant to Iowa Code chapter 153. The taking of occlusal registrations for purposes other than mounting study casts may be performed under general supervision; all other expanded function procedures shall be performed under direct supervision.

b. Expanded function training required. A dental hygienist shall not perform any expanded function procedures listed in this chapter unless the dental hygienist has successfully met the education and training requirements and is in compliance with the requirements of this chapter.

c. Education and training requirements. All expanded function training must be prior-approved by the board. The supervising dentist and the dental hygienist shall be responsible for maintaining in each office of practice documentation of successful completion of the board-approved training.

(1) Expanded function training for Level 1 procedures shall be eligible for board approval if the training is offered through a program accredited by the Commission on Dental Accreditation of the American Dental Association (ADA) or another program, which may include on-the-job training offered by a dentist licensed in Iowa. Training must consist of the following:

1. An initial assessment to determine the base entry level of all participants in the program;
2. A didactic component;
3. A laboratory component, if necessary;
4. A clinical component, which may be obtained under the personal supervision of the participant's supervising dentist while the participant is concurrently enrolled in the training program; and
5. A postcourse competency assessment at the conclusion of the training program.

(2) Expanded function procedure training for Level 2 procedures shall be eligible for board approval if the training is offered through the University of Iowa College of Dentistry or a program accredited by the Commission on Dental Accreditation of the American Dental Association.

ITEM 4. Adopt the following **new** subrule 10.3(9):

10.3(9) Expanded function providers.

a. Basic expanded function provider. Dental hygienists who do not wish to become certified as a Level 1 or Level 2 provider may perform select Level 1 expanded function procedures provided they have met the education and training requirements for those procedures and are in compliance with the requirements of this chapter. A dentist may delegate to a dental hygienist only those Level 1 procedures for which the dental hygienist has received the required expanded function training.

b. Certified Level 1 provider. A dental hygienist must successfully complete training for all Level 1 expanded function procedures before becoming a certified Level 1 provider.

(1) A dentist may delegate any of the Level 1 expanded function procedures to a dental hygienist who is a certified Level 1 provider.

(2) Level 1 procedures include:

1. Taking occlusal registrations for purposes other than mounting study casts;
2. Placement and removal of gingival retraction;
3. Fabrication and removal of provisional restorations;
4. Applying cavity liners and bases and bonding systems for restorative purposes; and
5. Taking final impressions.

c. Certified Level 2 provider. A dental hygienist must become a certified Level 1 provider and successfully pass a board-approved entrance examination with a score of at least 75 percent before beginning training to become a certified Level 2 provider. A dental hygienist must successfully complete training for all Level 2 expanded function procedures before becoming a certified Level 2 provider.

(1) A dentist may delegate any of the Level 1 or Level 2 expanded function procedures to a dental hygienist who is a certified Level 2 provider.

(2) Level 2 procedures include:

1. Placement and shaping of amalgam following preparation of a tooth by a dentist;

2. Placement and shaping of composite following preparation of a tooth by a dentist;
3. Forming and placement of stainless steel crowns;
4. Taking records for the fabrication of dentures and partial dentures; and
5. Tissue conditioning (soft reline only).

These procedures refer to both primary and permanent teeth.

ITEM 5. Amend paragraph **10.5(3)“d”** as follows:

d. A copy of the written agreement for public health supervision shall be filed with the ~~Oral Health~~ Bureau of Oral and Health Delivery Systems, Iowa Department of Public Health, Lucas State Office Building, 321 E. 12th Street, Des Moines, Iowa 50319.

ITEM 6. Amend subrule 10.5(4) as follows:

10.5(4) Reporting requirements. Each dental hygienist who has rendered services under public health supervision must complete a summary report at the completion of a program or, in the case of an ongoing program, at least annually. The report shall be filed with the ~~oral health~~ bureau of oral and health delivery systems of the Iowa department of public health on forms provided by the department and shall include information related to the number of patients seen and services provided ~~to enable so~~ that the department ~~to~~ may assess the impact of the program. The department will provide summary reports to the board on an annual basis.

BEFORE THE IOWA DENTAL BOARD

Petition by Gina Houston }
 for the waiver of 650 IAC 11.7 (1) b _____ } PETITION FOR WAIVER
 relating to anesthesia permit _____ }
 _____ }

1. Petitioner's name, address, and telephone number. All communications concerning the petition can be directed to the address, phone, and e-mail address listed below.

Name: Gina Houston
 Address: 175 Lakeshore Dr
 Work Telephone: (641) 394-4026
 Home Phone: (319) 961-4385
 Cell phone, if desired: (319) 961-4385
 Email: gina@jcblog.net

2. I am requesting a waiver of 650 Iowa Administrative Code subrule 11.7 (1) b.

3. I am requesting a waiver of 650 Iowa Administrative Code subrule 11.7 (1) b, which requires Evidence that formal training in the administration of local anesthesia has been completed within 12 months of the date of application.

 In lieu of the 12 months from application date requirement

_____, I would like the board to accept the following: Remediation training that I received at Hawkeye Community College in Waterloo, Iowa, from January 16 ,2015 through April 6, 2015. This

remediation encompassed local anesthesia review of technique, and practice on patients seen during clinical time on campus for remediation. As well as, local anesthesia that was given to my patient during my CRDTS Dental Hygiene Exam on May 9, 2015.

Local Anesthesia and Pain Control Class within the Dental Hygiene Program at Hawkeye Community College in Waterloo, IA. This class was taken in the Fall Semester of 2013. As well as the Remediation training I above mentioned, that included review and practice on patients of local anesthesia which was attended from January 16, 2015 through April 6, 2015.

(List specific training at accredited schools or other relevant information).

(Below, list any additional relevant information)

In addition, I really enjoy providing local anesthesia to patients because it assists them in their comfort of challenging dental cleanings and allows them to establish trust with me as a hygienist. I also believe that being able to provide local anesthesia as part of my job description will allow me to be more attractive as a potential employee. Since I have received the full training I would really like to have a permit to perform local anesthesia so I can work to my full training and potential.

4. Explain the relevant facts and reasons that the petitioner believes justify a waiver. Include in your answer all of the following:

a. Undue Hardship. ___ I believe I would experience a hardship if I were denied a local anesthesia permit because it would be a function of the job that I wouldn't be allowed to do,

which would affect my future income earnings. Plus, I have already invested a considerable amount of time and money by completing the required courses to obtain training in local anesthesia and pain control.

(Insert any other information to justify undue hardship)

b. Why Waiving the Rule Would Not Prejudice the Substantial Legal Rights of Any Person.

Waiver of the rule would not prejudice the substantial legal rights of any person because I am competent in my abilities to provide local anesthesia to patients who require to receive it with their dental cleanings and for any other reasons I am instructed to give local anesthesia to a patient. Patient care is of the utmost importance to me. It is one of the main reasons I chose the dental hygiene profession.

This ensures and protects public health, safety, and welfare.

c. The Provisions of the Rule Subject to the Waiver are NOT Specifically Mandated by Statute or Another Provision of Law. Iowa Code Chapter 153 does not mandate the requirements of rule 650—11.7 (1) b. I'm not sure if another mandate within the statute or provision of the law that applies to the above mention code.

d. Substantially Equal Protection of the Public Health, Safety, and Welfare has been Afforded by. I believe that the health, safety, and welfare of the public will still be protected if I'm granted a permit for local anesthesia because, I have had formal training and there is just a small time lapse from my training and my application for dental hygiene. During which, local anesthesia has still been practiced and performed on numerous patients, therefore, local anesthesia is still current within my scope of practice.

The subrule that I am requesting a waiver from helps to ensure that I am able to receive a permit to practice local anesthesia along with my dental hygiene license and provide these services within my scope of practice under a dental hygiene license. _____

5. A history of prior contacts between the board and petitioner related to the regulated activity is as follows.

I have had contact with the board in the past for approval, from the Dental Hygiene Committee, for my remediation plan which was approved in October of 2014. I also have been in contact regarding this matter, and was advised to apply for this rule waiver regarding a local anesthesia

permit.

6. Information related to the board's action in similar cases: I received a rule waiver index, from the dental board, when I requested the documents to apply for this rule waiver and it appears that another individual, Mackenzie Meyer, applied for a rule waiver under Iowa Code section 650 11.7 (b). It appears that the rule waiver was approved on January 22, 2015.

7. There is no other public agency or political subdivision that regulates dentistry in Iowa. Are there any public agencies or political subdivisions that would be affected by your request? If yes, please provide the name, address and other contact information below. Yes No

8. I am not aware of any person or entity that would be adversely affected by the granting of a waiver in this case. I am not aware of any.

9. Provide the name, address, and telephone number of any person with knowledge of the relevant facts relating to the proposed waiver, if any.

Mrs. Kathryn Gisleson, RDH . Hawkeye Community College. 1501 E Orange Road, Waterloo, IA 50704. 1 (800) 670-4769. Email address is: kathryn.gisleson@hawkeyecollege.edu. Mrs. Gisleson is a teacher and clinic instructor.

10. I hereby authorize the Board to obtain any information relating to this waiver request from the individuals named herein. I will provide signed releases of information if necessary.

I hereby attest to the accuracy and truthfulness of the above information.

Gina Houston
Petitioner's signature

6/19/15
Date



Submit Query

Publications

[Home](#)

[About Us](#)

[Current Studies](#)

[Health Policy](#)

[Housing & Land Use Policy](#)

[Transportation & Vehicle Safety Policy](#)

[Social Science Policy](#)

[Environmental Policy](#)

[Iowa Social Science Research Center](#)

[People](#)

[Publications](#)

[All Publications](#)

[Forkenbrock Series](#)

[Contact Us](#)

Dental Hygiene Workforce in Iowa: Snapshot and Recommendations for a Workforce Monitoring System

Reynolds, J.C.; Kuthy, R.A.; Pooley, M.J.; Kelly, M.C.; McKernan, S.C.

11/2014

Abstract

In 2012, the Delta Dental of Iowa Foundation (DDIF) convened a workgroup of stakeholder organizations to investigate factors related to the labor market environment for dental hygienists in Iowa. The initiation of this workgroup came from a paucity of information about hygienist workforce in the state, as well as anecdotes that a workforce surplus is causing difficulty for hygienists trying to find employment.

With the intent to create an ongoing data collection system to monitor trends in Iowa dental hygiene workforce, the DDIF initially invited the Iowa Dental Board (IDB) and the Iowa Workforce Development (IWD), as these groups hold ongoing sources of data about Iowa hygienists. The workgroup then invited representatives from additional stakeholder organizations to solicit broad input on the content and format of a workforce monitoring system. These organizations include the Iowa Dental Hygienists' Association (IDHA), the Iowa Department of Public Health (IDPH), and dental hygiene training programs.

Concurrently, the University of Iowa Public Policy Center (PPC) received an oral health workforce grant from the Health Resources and Services Administration (HRSA) to coordinate and improve oral health workforce activities in Iowa. When the stakeholder group learned of this, representatives from the PPC were invited to collaborate. In order to provide a backdrop on information that had already been collected from dental hygienists in Iowa, the PPC team created a database containing 1) dental hygiene surveys that had been administered in Iowa, and 2) other state dental hygiene surveys for comparison.

The PPC team identified five key data sources for recent information on dental hygienists in the state:

- IDHA survey (2005)
- Allen College survey (2012)
- IDB relicensure data (updated every odd-numbered year)
- IDPH Public Health Supervision data (updated on an ongoing basis)
- Iowa Workforce Development data (updated every year)

This report contains a compilation and synthesis of these existing data sources, and is intended to serve as both a source of background information on the supply of dental hygienists in Iowa as well as a guide for developing an ongoing data collection system for monitoring dental hygiene workforce trends in the future.

Citation

Reynolds, Julie C, Raymond A Kuthy, Mark J Pooley, Mary C Kelly, and Susan C McKernan. 2014.

"Dental Hygiene Workforce In Iowa: Snapshot And Recommendations For A Workforce Monitoring System". Iowa City, IA: University of Iowa Public Policy Center.



[Download PDF](#)



Public Policy Center
310 South Grand Ave
209 South Quadrangle
Iowa City, IA 52242
(319) 335-6800

© 2013 Public Policy Center