



**MAY 2-3, 2014 MEETINGS**

**Western University of Health Sciences  
College of Dental Medicine  
Community Based Dental Education Offices  
@The Village at Indian Hill  
1460 E. Holt Avenue, Suite 150  
Pomona, CA 91767**



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee Meeting Agenda**

Agenda



Notice is hereby given that a public meeting of the Dental Hygiene Committee of California (DHCC) will be held as follows:

### **FULL COMMITTEE MEETING AGENDA**

The DHCC welcomes and encourages public participation in its meetings. The public may take appropriate opportunities to comment on any issue before the DHCC at the time the item is heard.

**Saturday, May 3, 2014**  
**9:00 am - Adjournment**  
**Western University of Health Sciences**  
**College of Dental Medicine**  
**Community Based Dental Education Offices**  
**@ The Village at Indian Hill**  
**1460 E. Holt Avenue, Suite 150**  
**Pomona, CA 91767**

#### **9:00 a.m. Dental Hygiene Committee of California – Full Committee – Open Session**

Roll Call/Establishment of Quorum

1. Public Comment for Items Not on the Agenda
2. Approval of the March 5, 2014 DHCC Teleconference Meeting Minutes
3. President's Report
4. Executive Officer's Report
5. Update from the Dental Board of California
6. Update from the Department of Consumer Affairs
7. Update on BreEZe Project
8. Budget Report
9. Update on the Following Regulations:
  - a. Uniform Standards related to Substance Abuse and Disciplinary Guidelines, California Code of Regulations (CCR), Title 16, Division 11, §1138
  - b. Courses in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia, and Periodontal Soft Tissue Curettage, CCR, Title 16, Division 11, §1107
  - c. Remedial Education, CCR, Title 16, Division 11, §1108

10. Update on Sunset Review Hearing and DHCC's Written Responses to the Joint Legislative Oversight Committee's Issues as Identified in the Background Paper.

11. Licensing and Examination Subcommittee Report:

The DHCC may take action on any items listed on the Licensing and Examination Subcommittee agenda and the recommendations provided by the subcommittee.

12. Legislative and Regulatory Subcommittee Report:

The DHCC may take action on any items listed on the Legislative and Regulatory Subcommittee agenda and the recommendations provided by the subcommittee.

13. Enforcement Subcommittee Report:

The DHCC may take action on any items listed on the Enforcement Subcommittee agenda and the recommendations provided by the subcommittee.

14. Education Subcommittee Report:

The DHCC may take action on any items listed on the Education and Outreach Subcommittee agenda and the recommendations provided by the subcommittee.

15. **Closed Session**

*The DHCC may meet in closed session to deliberate on disciplinary matters pursuant to Government Code §11126 (c)(3)*

**Return to Open Session**

16. Future Agenda Items

17. Adjournment

Public comments will be taken on agenda items at the time the specific item is raised. The Committee may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. For verification of the meeting, call (916) 263-1978 or access DHCC's Web Site at [www.dhcc.ca.gov](http://www.dhcc.ca.gov).

The meeting facilities are accessible to individuals with physical disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Anthony Lum at (916) 576-5004, via e-mail at: [anthony.lum@dca.ca.gov](mailto:anthony.lum@dca.ca.gov) or send a written request to DHCC at 2005 Evergreen Street, Ste. 2050, Sacramento, CA 95815. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodation.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Roll Call**

Establishment of a Quorum



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 1**

Public Comment for Items Not on the Agenda



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 2**

Approval of the March 5, 2014

Meeting Minutes



**DENTAL HYGIENE MARCH 5, 2014 TELECONFERENCE MEETING MINUTES**

**Lake Tahoe Room  
2005 Evergreen Street, 1<sup>st</sup> Floor  
Sacramento, CA 95815  
Wednesday, March 5, 2014**

**ITEM 1 – Roll Call – Establishment of a Quorum**

The Dental Hygiene Committee of California's (Committee) President, Michelle Hurlbutt, called the meeting to order with roll call at 12:02 p.m. She asked Noel Kelsch, RDHAP, Secretary, to take the roll to establish a quorum. She also asked the members to identify their location for the teleconference record and whether any public attendees were at their locations as well. With eight Committee members present via teleconference, a quorum was established.

**Committee Members Present:**

Michelle Hurlbutt, President, RDH Educator  
Location: Upland, CA  
Nicolette Moultrie, Vice President, RDH  
Location: Pleasant Hill, CA  
Noel Kelsch, Secretary, RDHAP  
Location: Moorpark, CA  
Susan Good, Public Member  
Location: Fresno, CA  
Sherrie Gordon, Public Member  
Location: Pomona, CA  
Susan Johnson, Public Member  
Location: Sacramento, CA  
Timothy Martinez, DMD  
Location: Pomona, CA  
Evangeline Ward, Secretary, RDH  
Location: Vacaville, CA

**Committee Members Absent:**

Garry Shay, Public Member

Staff Present:

Lori Hubble, Executive Officer (EO),  
Anthony Lum, Administrative Analyst,  
Donna Kantner, Legislative and Regulatory Analyst,  
Richard Wallinder, Retired Annuitant  
Norine Marks, Department of Consumer Affairs (DCA) Legal  
Representative

Public Present:

Cindy Callaghan, RDH, Education Consultant  
Guadalupe Castillo, Legislative and Policy Analyst, DCA Division of  
Legislative and Policy Review  
Karen Fischer, Executive Officer, Dental Board of California (DBC)  
Gayle Mathe, California Dental Association (CDA)  
Sarah Wallace, Legislative and Regulatory Analyst, DBC

President's Comments - President Hurlbutt welcomed all of the participants to the teleconference meeting and requested that when each individual speaks to identify themselves so that the other meeting participants know who is making the comment.

**ITEM 2 – Public Comment for Items Not on the Agenda**

President Hurlbutt asked whether there were public participants at any of the teleconference sites and if there were, whether there was any public comments for the Committee that was not on the meeting agenda. There was no public comment from any of the teleconference sites for items not on the agenda.

**ITEM 3 – President's Report**

President Hurlbutt reported that since the Committee's December 2013 meeting, she attended task force meetings regarding various Committee regulation packages. She stated that she also attended the February 28, 2014 DBC meeting in San Diego where she provided the DBC members with an update about Committee activities. She concluded her report by informing Committee members that she is planning on attending the Committee's Sunset Review hearing that will be held on March 17, 2014, in Sacramento. She noted that Dr. Martinez will also attend the hearing.

President Hurlbutt asked if there were any questions or comments from the public or the Committee members.

Ms. Kelsch asked if the Sunset Review hearing was open to the public. President Hurlbutt responded that the sunset review hearings are public hearings and that anyone may attend.

**ITEM 4 – Discussion and Possible Action to Approve the December 7, 2013 DHCC Full Committee Meeting Minutes**

President Hurlbutt asked for a motion to accept the December 7, 2013 Full Committee meeting minutes.

- **MOTION: Noel Kelsch moved to accept the December 7, 2013 Full Committee meeting minutes.**

**Sherrie Gordon seconded the motion.**

President Hurlbutt asked if there were any questions or comments from the public or Committee members. There were no questions or comments.

**Vote: 8 - 0 to accept the motion via roll call of all participating members (Garry Shay was absent for the vote).**

**ITEM 5 – Discussion and Possible Action to Amend Proposed Regulatory Language as a result of Comments Received During the 45-Day Public Comment Period for the DHCC’s Rulemaking to Add California Code of Regulations (CCR), Title 16, Division 11, §1100, 1101, 1121, 1122, 1124, 1126, 1127 and 1133 Relevant to Definitions, Administration, and Examinations**

Lori Hubble, EO, requested that this item be deferred to a future meeting as the Committee had received additional comments beyond the 45-day comment period and would like to give staff and the ad hoc committee an opportunity to review those comments and then bring the item back to a future meeting.

- **MOTION: Nicolette Moultrie moved to continue this agenda item to a future meeting to allow the EO, ad hoc committee, and DCA legal counsel to work on issues that have been identified by the Committee staff related to public comments that have been received.**

**Noel Kelsch seconded the motion.**

President Hurlbutt responded to Susan Good’s question that this agenda item will return to a future Committee meeting with the additional comments that were received after the 45-day comment period.

Gayle Mathe said that CDA appreciated the opportunity to attend the Committee's meeting and the action the Committee considered taking with regard to this regulation proposal. She remarked that CDA respects the Committee's authority to promulgate regulations, but believed that the Committee has exceeded their authority with this regulatory package. She added that the CDA has submitted letters asking for a resolution of jurisdictional issues that have been raised and appreciates the Committee addressing the issue.

Ms. Mathe then submitted two CDA letters to the Committee for the record. She said that the first letter was sent to the Department of Consumer Affairs and the DBC and is dated February 21, 2014. She indicated that it articulates the jurisdictional concerns that CDA has with this regulatory package. She stated that the second letter will be delivered to the Committee today (March 5, 2014) for their review. She explained that the letter reiterates the concerns regarding the regulation proposal, expresses CDA's desire to avoid costly challenges to the regulations should they become enacted, and requests that the Committee take no further action on this regulatory package until those jurisdictional issues have been resolved.

Lisa Okamoto asked if the Committee continued this agenda item to a future meeting, would it be on the agenda for the next planned Committee meeting. Ms. Hubble responded that this issue could possibly be on the next meeting agenda.

President Hurlbutt asked if there were any questions or comments from the public or Committee members. There were no questions or comments.

**Vote: 7 – 1 to accept the motion via a roll call of all participating Committee members (Susan Good opposed and Garry Shay was absent for the vote).**

**ITEM 6 – Discussion and Possible Action on Feasibility Study Regulations, California Code of Regulations, Title 16, Division 11 § 1104, 1104.1 and 1104.2.**

- **MOTION: Nicolette Moultrie moved to table this agenda item to the May 2-3, 2014 DHCC meeting.**

**Noel Kelsch seconded the motion.**

President Hurlbutt asked if there were any questions or comments from the public or the Committee members. There were no questions or comments.

**Vote: 7 – 1 to accept the motion via a roll call of all participating Committee members (Susan Good opposed and Garry Shay was absent for the vote).**

Before adjourning the meeting President Hurlbutt asked for any comments from Committee members or the public.

Ms. Good commented that she was disappointed that the staff recommendations pertaining to the regulatory comments received was not discussed before voting to continue the item. She noted that the meeting had been called, effort and time was made to conduct the meeting, and participants may have traveled a great distance to hear the items discussed.

President Hurlbutt thanked Ms. Good for her comments.

The teleconference meeting adjourned at 12:25 p.m.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 3**

President's Report:

A verbal report will be provided.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 4**

Executive Officer's Report:

A verbal report will be provided.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 5**

Update from the Dental Board of California:

A verbal report will be provided.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 6**

Update from the Department of Consumer Affairs



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 7**

Update on the BreEZe Project



## MEMORANDUM

<b>DATE</b>	May 3, 2014
<b>TO</b>	Dental Hygiene Committee of California Committee Members
<b>FROM</b>	Lori Hubble, Executive Officer
<b>SUBJECT</b>	<b>Agenda Item 7 - Update on BreZE</b>

The BreZE is a licensing system that will replace the antiquated systems currently being used. DHCC staff has been meeting with the software vendors to define the functionality (framework) of what we would like BreZE to perform for DHCC employees and our licensing base. We have provided the requirements for examination, licensure application, renewal, and enforcement procedures from Internet-facing and back-office perspectives. The Internet-facing refers to what the public, applicants and license base see online and the back-office refers to DHCC staff.

The next steps will be to develop processes to support the functionality of the framework. The next steps will focus on specific requirements in the system, identifying and adjusting internal business processes and working with the Online Team to define the Internet experience for our user base. Once this process is completed, our software vendors will take our input and build our product.

Once the system is built, it will be tested. We will begin our "Conference Room Pilot" which will be our final review before End-to-End testing. End-to-end testing will validate the functionality of the entire System so that we can process every aspect of our licensing process in preparation for "GoLive." GoLive is anticipated to be early in 2015.

### **Committee Action Requested**

- Informational only. No action requested.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 8**

Budget Report

**DENTAL HYGIENE COMMITTEE OF CALIFORNIA**

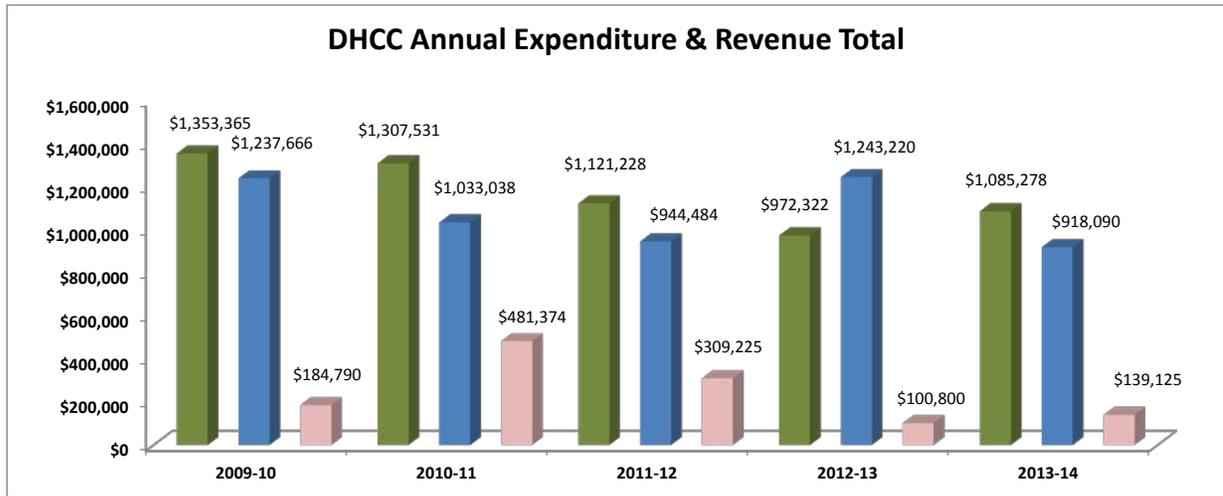
**BUDGET REPORT**  
**FY 2013/14 Expenditure Projection**  
**For the Period Ending March 31, 2014**

OBJECT DESCRIPTION	FY 2013-14				
	BUDGET ALLOTMENT	CY EXPENDITURES (MONTH 9)	PERCENT SPENT	Budget office PROJECTIONS TO YEAR END	UNENCUMBERED BALANCE
<b>PERSONNEL SERVICES</b>					
Salary & Wages	446,002	276,762	62%	365,000	81,002
Temp Help 907	57,000	34,367	60%	42,000	15,000
Proctors 915	1,881	0	0%	0	1,881
Allocated Proctor	0	437	0%	0	0
Committee/Bd members (901)	24,400	6,400	26%	10,000	14,400
Overtime	0	9,338	#DIV/0!	12,000	(12,000)
Benefits	181,038	124,937	69%	181,038	0
Salary Savings	0	0	#DIV/0!	0	0
<b>TOTAL PERS SVS</b>	<b>710,321</b>	<b>452,241</b>	<b>64%</b>	<b>610,038</b>	<b>100,283</b>
<b>OPERATING EXPENSES &amp; EQUIPMENT</b>					
General Expense	7,000	6,641	95%	7,000	0
Minor Equipment 226	0	0	#DIV/0!	0	0
Fingerprint Reports	1,000	0	0%	1,000	0
Printing	10,358	7,945	77%	10,000	358
Communication	4,812	1,958	41%	3,000	1,812
Postage	22,000	10,880	49%	18,000	4,000
Insurance	0	0	0%	0	0
Travel In state	44,187	39,827	90%	43,500	687
Travel Out of state	0	0	0%	0	0
Training	1,800	5	0%	500	1,300
Facilities Ops	63,120	60,156	95%	63,000	120
Utilities	0	0	0%	0	0
C&P Serv. Internal	24,323	0	0%	1,000	23,323
**C&P Serv. External	6,491	150	2%	3,000	3,491
<b>Departmental Services</b>					
OIS Prorata	127,666	95,572	75%	127,666	0
Indirect Distributed Costs	73,901	55,463	75%	73,901	0
Interagency Services	29,635	0	0%	29,635	0
IA with OPES (formerly OER)	0	2,512	#DIV/0!	3,000	(3,000)
DOI - Prorata	2,359	1,769	75%	2,359	0
Public Affairs Prorata	3,312	2,487	75%	3,312	0
CCED Prorata	2,848	2,136	75%	2,848	0
Consolidated Data Centers	1,594	135	8%	1,594	0
Data Processing	2,558	1,583	62%	2,558	0
Central Adm. Services	64,125	48,094	75%	64,125	0
<b>EXAMS</b>					
Exam supplies & freight	1,612	0	0%	0	1,612
Exam Site rental	28,567	18,386	64%	28,567	0
Exam Contracts	192,348	83,353	43%	118,000	74,348
Expert Examiners (SME)	19,392	545	3%	0	19,392
<b>ENFORCEMENT</b>					
Attorney General	47,136	24,218	51%	32,000	15,136
Off of Admin Hearings	3,120	955	31%	2,000	1,120
Evidence/Witness	36	0	0%	300	(264)
Court Reporter Services	0	150	#DIV/0!	0	0
DOI Investigative Costs	1,238	929	0%	1,238	0
Major Equipment	7,000	0		0	7,000
Other Items of Expense	117	0		0	117
Vehicle Op	9,000	0		0	9,000
<b>Total OE &amp; E</b>	<b>802,655</b>	<b>465,849</b>	<b>58%</b>	<b>643,103</b>	<b>159,552</b>
<b>TOTAL EXPENDITURES</b>	<b>1,512,976</b>	<b>918,090</b>	<b>61%</b>	<b>1,253,141</b>	<b>259,835</b>
<b>NET APPROPRIATION</b>					
Scheduled, Other Reimbursement	(1,000)			(1,000)	0
Distributed Costs	(5,000)			(5,000)	0
Unscheduled Reimbursement					0
<b>NET, TOTAL EXPENDITURES</b>	<b>1,506,976</b>	<b>918,090</b>	<b>61%</b>	<b>1,247,141</b>	<b>259,835</b>
NOTES/ASSUMPTIONS:					
<b>Surplus/Deficit</b>					<b>17.2%</b>

<b>DHCC ANNUAL EXPENDITURE &amp; REVENUE TRACKING</b>						
<b>Fiscal Year (FY)</b>	<b>2009-10</b>	<b>2010-11</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>
<b>DHCC Revenue per FY</b>	\$1,353,365	\$1,307,531	\$1,121,228	\$972,322	\$1,085,278	\$0
<b>DHCC Exam Revenue</b>	\$184,790	\$481,374	\$309,225	\$100,800	\$139,125	\$0
<b>DHCC Expenditure per FY</b>	\$1,237,666	\$1,033,038	\$944,484	\$1,243,220	\$918,090	\$0

Notes:

- a) DHCC established in FY 2009/10
- b) Exam Fees - increased to \$525 in FY 2009/10 from \$220
- c) WREB exam accepted in FY 2010-11
- d) FY 2013-14 data thru 3/31/2014



GREEN = Total Revenue
BLUE = Total Expenditures
PINK = Exam Revenue

	<b>FY 2009-10</b>	<b>FY 2010-11</b>	<b>FY 2011-12</b>	<b>FY 2012-13</b>	<b>FY 2013-14</b>	<b>FY 2014-15</b>
<b>FY Expenditure Authority</b>	\$1,257,446	\$1,246,858	\$1,354,668	\$1,438,632	\$1,512,976	TBD
<b>Reversion at Year-end</b>	\$19,780	\$213,820	\$410,184	\$195,412	TBD	TBD



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 9**

Update, Discussion, and Possible Action on the Following Regulations:

- a. DHCC Uniform Standards Related to Substance Abuse and Disciplinary Guidelines, California Code of Regulations (*CCR*), *Title 16, Division 11, §1138*;
- b. Courses in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia, and Periodontal Soft Tissue Curettage, *CCR, Title 16, Division 11, §1107; and*
- c. Remedial Education, *CCR, Title 16, Division 11, §1108*



## MEMORANDUM

<b>DATE</b>	May 3, 2014
<b>TO</b>	Dental Hygiene Committee of California Committee Members
<b>FROM</b>	Donna Kantner, DHCC Staff
<b>SUBJECT</b>	<b>Agenda Item 9</b> - Regulations Update

- a. DHCC Uniform Standards Related to Substance Abuse and Disciplinary Guidelines, CCR, Title 16, Division 11, §1138

This file was approved by the Office of Administrative Law and is effective as of January 16, 2014.

- b. Courses in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia, and Periodontal Soft Tissue Curettage, CCR, Title 16, Division 11, §1107

This proposal has been submitted to the Department of Consumer Affairs (DCA) for review. Once reviewed and approved by the Department and its umbrella agency, Business, Consumer Services and Housing Agency, the file will proceed to Department of Finance for review and approval before it is submitted to the Office of Administrative Law for its review.

- c. Remedial Education, CCR, Title 16, Division 11, §§1108

This file was delivered to DCA on April 4 to begin the review and approval process. Once reviewed and approved by DCA Legal Office, Legislative and Regulatory Unit, Budgets, and our umbrella agency, Business, Consumer Services and Housing Agency, the file will proceed to Department of Finance for review and approval before it is submitted to the Office of Administrative Law for its review.

### **Committee Action Requested**

- Informational only. No action requested.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 10**

Update on Sunset Review Hearing and DHCC's  
Written Responses to the Joint Legislative  
Oversight Committee's Issues as Identified in the  
Background Paper.



## MEMORANDUM

<b>DATE</b>	May 3, 2014
<b>TO</b>	Dental Hygiene Committee of California Committee Members
<b>FROM</b>	Lori Hubble, Executive Officer
<b>SUBJECT</b>	<b>Agenda Item 10</b> - Sunset Hearing Update

Attached is the DHCC's written response to the Joint Legislative Sunset Review Oversight Committee.

### **Committee Action Requested**

- Informational only. No action requested.



## WRITTEN RESPONSE FROM THE DENTAL HYGIENE COMMITTEE OF CALIFORNIA (DHCC) TO THE ISSUES AND RECOMMENDATIONS RAISED IN THE BACKGROUND PAPER FOR THE JOINT LEGISLATIVE SUNSET REVIEW OVERSIGHT HEARINGS

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### ***ISSUE #1: Should the DHCC be approved to have an additional managerial position?***

**STAFF RECOMMENDATION:** *The DHCC should confer with the administrative staff of the DCA to review the recently submitted request for a managerial position. Both parties should work to create a solution for filling the vacant position in order to assist the DHCC with their increasing workload.*

**DHCC'S WRITTEN RESPONSE:** The DHCC's Executive Officer (EO) has the responsibility for the entire office consisting of managing 7.2 staff and two retired annuitant temporary positions in order to complete mission critical functions and policies of the DHCC, the Department of Consumer Affairs (DCA), and control agencies. The DHCC attempted to reclassify a vacant position to a manger level position to assist the EO with direct programmatic oversight, management of staff, and other supervisory functions; however, the request was denied. The DHCC was informed by the DCA Office of Human Resources (OHR) that the request for a managerial position did not conform to current CalHR requirements with regard to a staff to manager ratio (i.e., the manager would not supervise an adequate number of analyst positions to warrant re-classifying a vacant position to a manager).

However, after further research on this issue and a review of the CalHR standards for a manager position, the DHCC *strongly disagrees* with the DCA OHR's opinion and denial that the DHCC's request does not conform to the manager standards. As per CalHR defined standards, "A Staff Services Manager I is the first working supervisor level that supervise a small group of analysts performing journeyperson level work and personally performs the most difficult or sensitive work and may direct functions such as budgeting, management analysis, and/or personnel." The definition does not continue to define what 'a small group of analysts' consists of and, as such, the DHCC's re-classification request and justification fulfilled the CalHR standard's for programmatic function and supervisory description by overseeing four analytical positions performing journeyperson level work that includes budgets, program analysis, and personnel among other functions.

At the time of submitting our position re-classification request, there were no issues or concerns about the request's justifications or workload for the DHCC's managerial position from DCA OHR; only that it did not conform to the 'current CalHR standards' due to a staff to manager ratio for supervision. In larger state programs where there is numerous staff performing similar functions, this may be the case to have a staff to

manager ratio requirement. But with the unique operations within the programs under DCA, the DCA OHR should review each position request on the merits of the workload to be addressed and position justification submitted and not so much on staffing ratios. Many DCA boards have a small number of staff that serve a large licensee population and to have them conform to personnel guidelines that may be tailored to larger state programs makes it difficult to obtain new positions to address workloads. No other entity knows the DHCC's programmatic workload better than DHCC staff and to conform to undefined staffing ratios when there are only 8.2 total authorized positions including the EO in the program is not practical or efficient.

As an example of the current workload the DHCC is experiencing with limited staff, the following table shows the comparison (and discrepancy) of the DHCC licensee population with that of other DCA boards with similar programmatic functions, but much smaller licensee populations and a few with equal or less staff than the DHCC. The difference between the DHCC and the DCA boards listed in the table is that they have an EO and at least one (some two) manager position(s) to assist with programmatic functions and supervisory oversight of their staff, whereas the DHCC only has the EO to perform the same program and supervisory functions.

DCA PROGRAM	LICENSEE/REGISTRATION POPULATION*	TOTAL STAFF	EO	SSM II	SSM I
Dental Hygiene Committee	30,297	8.2	1	0	0
Architects Board	20,181	24.9	1	1	1
Landscape Architect Committee	3,503	5.5	Architect Board's EO oversees program	0	1
Occupational Therapy Board	12,353	7.7	1	0	1
Psychology Board	24,254	17.3	1	1	1
Respiratory Care Board	20,390	16.4	1	0	2
Speech and Hearing Board	17,752	8.6	1	0	1
Veterinary Medicine Board	27,088	12.8	1	0	1

\*From FY 2011/12 DCA Annual Report

\*\*From FY 2013/14 Department of Finance Authorized Position Count

As a result of the denial by DCA OHR of its managerial staffing request, the DHCC was forced to research the issue of other DCA board's staffing levels as a comparison of similar programmatic functions and the licensee population each serves and identify the discrepancies. The DHCC found that there is no uniformity or 'standard' in the number of staff to manager ratio in the comparison of DCA boards as shown above. The DHCC would prefer to focus on its own programmatic workload, staffing levels, and resource needs; however, when requests that affect the DHCC's operations are denied simply due to a 'standard' and not taking a program's need or workload justifications into consideration, the DHCC will pursue the resources it believes is necessary to carry-out its program mandates in the most efficient and productive manner possible.

The DHCC accepts the staff's recommendation and will continue to pursue the manager position and work with DCA, emphasizing the recommendation and endorsement of the Joint Oversight Sunset Committee to help justify and fulfill our request.

**ISSUE #2: What is the status of the BreEZe implementation by the DHCC?**

**STAFF RECOMMENDATION:** *The DHCC should update the Committees about the current status of its implementation of BreEZe. Have there been any challenges in working to implement this new system? What are the anticipated costs of implementing this system?*

**DHCC'S WRITTEN RESPONSE:** The DHCC's integration analyst has been applying best practices in moving forward to prevent challenges that were encountered in the first phase of the BreEZe configuration. There has been a reallocation of resources to focus on planning to ensure a more quality product through testing prior to the release of BreEZe for the DHCC.

The biggest challenge with this project is redirecting staff resources for BreEZe training and maintaining the daily work of the Committee. With only six filled positions (out of 8.2 authorized), there are many days when over half of the DHCC staff must be away from their normal program functions to concentrate on the BreEZe training. The DHCC is aware that the training is only temporary, but it still leaves the DHCC with a very minimal working crew to address the ongoing daily operation needs. The DHCC is wary that many of the same or new problems that occurred with the first release of the BreEZe system will occur when it is implemented for the DHCC (second release).

The anticipated cost for the new computer system, as reported by the BreEZe team at the DHCC's December 2013 meeting, is \$440,000. The DHCC anticipates that this total cost will be higher due to the nature of this type of project, but has yet to be determined. The DHCC expects that any additional expenses for the BreEZe system will be communicated to the DHCC early and in a timely manner so that appropriate budgetary planning and forecasting can occur.

The DHCC accepts the staff's recommendation on the BreEZe project and will update the Committees on the status of its implementation.

**ISSUE #3: *What changes should be made to how RDHAPs practice?***

**STAFF RECOMMENDATION:** *Based on the concerns raised regarding the re-designated shortage area, as well as the issues with reimbursement from insurance companies, the DHCC might consider seeking legislation to make the necessary changes to both BPC §1926(d) and BPC §1928.*

**DHCC'S WRITTEN RESPONSE:** The DHCC believes that a Registered Dental Hygienist in Alternative Practice (RDHAP) should not have to eliminate his or her practice if a designated dental shortage area is changed. Under current law, an RDHAP is permitted to open a standalone practice, that includes a building with equipment, in a dental health shortage area as designated by the Office of Statewide Health Planning and Development (OSHPD). If an underserved area's designation changes, the law is not clear as to whether or not it would require an RDHAP to close the practice. Closure of the dental hygiene office in that area would leave patients with no access to dental hygiene services and would be devastating to the practitioner who has an immense investment in both time and money in the practice. An RDHAP should be legally allowed to continue to operate an existing dental hygiene practice in an area that is no longer designated a shortage area by OSHPD. If the area has a change in designation from a dental health shortage area, it may be directly due to the dental hygiene services rendered by the RDHAP in that area. The DHCC believes it is unfair to penalize an RDHAP who was part of the solution for a region that was once a designated shortage area and more importantly decrease access to consumers for dental hygiene services.

The DHCC will follow the staff's recommendation and pursue future legislation to make the necessary changes to BPC §1926(d) and BPC §1928.

**ISSUE #4: *Should the DHCC seek statutory changes to allow the DHCC to implement measures of continued competency?***

**STAFF RECOMMENDATION:** *The DHCC should advise the Committees what the "measure of continued competency" would consist of. If the DHCC decides to expand its practice act to include measures of continued competency, it will need to seek legislation to pursue this change.*

**DHCC'S WRITTEN RESPONSE:** The DHCC's licensure process provides a means for educated individuals to obtain licensure at a level of minimum competency. However, once an individual is licensed, there is no current follow-up method to ensure that the practitioner maintains or increases his/her level of competency in the dental hygiene field. Continuing Education (CE) can be viewed as one means to ensure continued competence; however, it has been debated that CE does little to ensure that licensees remain competent and provide quality dental hygiene care.

The DHCC plans to conduct further investigation into the issue of continued competency before acting, as it was a new issue raised in sunset as a concern. Because many other healthcare professions maintain continued competency as a means to gauge a practitioner's ability to provide safe, quality healthcare, the DHCC will explore various approaches and possibly contact other healthcare agencies for continued competency information in order to maintain a certain skill level for dental

hygiene. The DHCC can then initiate discussions as to whether it wants to pursue the issue of continued competency and possibly seek legislation, if warranted.

**ISSUE #5: *Should supervision requirements for dental hygienists be amended?***

**STAFF RECOMMENDATIONS:** *The DHCC should consult with the Dental Board of California (DBC) regarding the implications of adopting a general supervision model for the procedures. If the DHCC desires to amend its practice act to allow for a change in supervision model, it will need to seek legislation to pursue this change.*

**DHCC'S WRITTEN RESPONSE:** In statute, all services provided by dental hygienists are under the general supervision of a licensed dentist, with the exception of the administration of local anesthetic, administration of nitrous oxide and oxygen, and soft tissue curettage. In 1976, law provided that dental hygienists could perform these three services with the appropriate training and under direct supervision. By law, direct supervision means a dentist must be present in the office while the procedure is being performed by the dental hygienist. There have been no reports of incidents regarding dental hygienists performing these three services since that time. The DHCC believes the supervising licensed dentist should be the one to determine the necessary supervision level of these current three procedures. By doing so, this will align with what is currently the language in statute for all dental assisting and registered dental assistant allowable procedures. By eliminating direct supervision requirements for local anesthetic administration, administration of nitrous oxide and oxygen, and soft tissue curettage, there would be consistency throughout the dental practice as the supervising dentist will be able to determine the level of supervision (direct or general) he or she is comfortable with regarding these three procedures.

The DHCC accepts the staff recommendation and will consult with the DBC on whether there are any implications for dentists in adopting a general supervision model for administration of local anesthetic, administration of nitrous oxide and oxygen, and soft tissue curettage. If the DHCC seeks to amend its practice act to change the supervision model, it will seek legislation in the future.

**ISSUE #6: *Should the DHCC be changed to an independent board under the DCA?***

**STAFF RECOMMENDATION:** *Despite the DHCC's stated ability to operate independently from the DBC, it is important to note that this is only the first Sunset Review Hearing of the DHCC. The BP&ED Committee has established a pattern of reviewing entities multiple times before creating independent boards. As such, the Committees suggest that the DHCC undergo additional review(s) before seeking legislation to change their name to the Dental Hygiene Board of California.*

**DHCC'S WRITTEN RESPONSE:** After the DHCC's genesis, the DHCC realized that there was some confusion regarding the jurisdictional language in the statute. While the DHCC is the first independent Dental Hygiene Committee in the nation, we continue to face identity challenges. In other states, Dental Boards have complete oversight of the dental hygiene profession. The fact is that the DHCC has authority over dental hygiene education, examination, licensure, investigations, and discipline, operating independently in all of these areas. However, since the statutory language states that the DHCC is "within the jurisdiction of the Dental Board of California," it gives rise to the confusion of applicants, licensees, and often, dentists, as to who actually licenses and regulates California dental

hygienists. It also creates confusion inside and outside of California of agencies that work with the DHCC. For example, we learned that we could not become a voting member for the Western Regional Examining Board because the California DBC already fills that role. Another example is that dental hygiene licensees are being informed during CE courses that the DHCC is a committee within the jurisdiction of the DBC. This misinformation is being interpreted that the DHCC has no authority of its licensees and that the jurisdiction is the DBC's.

The DHCC will certainly continue to consult and collaborate with the DBC on areas of mutual professional interest, but it seems overly restrictive that the statutory language places the DHCC under the "jurisdiction" of the DBC, since it performs all of its functions independently.

The DHCC accepts the staff's recommendation to pursue an independent board in the future and look forward to revisiting this issue at the next sunset review.

**ISSUE #7: *Should the licensing and regulation of dental hygienists be continued and be regulated by the current DHCC?***

**STAFF RECOMMENDATION:** *Recommend that the practice of dental hygiene continue to be regulated by the current DHCC in order to protect the interests of the public. The DHCC should be reviewed by the Committees again in four years.*

**DHCC'S WRITTEN RESPONSE:** The DHCC accepts the staff recommendation and expresses its gratitude to the Joint Oversight Sunset Review Committee and staff for this recommendation to continue the DHCC for another four years.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 11**

Licensing and Examination Subcommittee Report:  
The DHCC may take action on any items listed on the Licensing and Examination Subcommittee agenda and the recommendations provided by the subcommittee.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 12**

Legislative and Regulatory Subcommittee Report:  
The DHCC may take action on any items listed on the Legislative and Regulatory Subcommittee agenda and the recommendations provided by the subcommittee.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 13**

Enforcement Subcommittee Report:  
The DHCC may take action on any items listed on the Enforcement Subcommittee agenda and the recommendations provided by the subcommittee.



**Saturday, May, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 14**

Education Subcommittee Report:

The DHCC may take action on any items listed on the Education and Outreach Subcommittee agenda and the recommendations provided by the subcommittee.



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 15**

***Closed Session***

*The DHCC may meet in closed session to deliberate  
on disciplinary matters pursuant to Government  
Code §11126 (c)(3)*



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 16**

Future Agenda Items



**Saturday, May 3, 2014**

**Dental Hygiene Committee of California**

**Full Committee**

**Agenda Item 17**

Adjournment