

Policy Committee Meeting Minutes

Thursday, January 16, 2025
5:00 pm
335 Randolph Avenue Room 104
St. Paul, MN 55102
and
Open Webex/Teleconference

Call to Order

Hassan Ismail, DDS, Chair, called the meeting to order at 5:05 pm.

Committee Members

Hassan Ismail, DDS, Chair
Trina Courtright, DH, ADT
Heidi Donnelly, LDA
P. Angela Rake, DDS

Board Staff

Bridgett Anderson, Executive Director
Brian Cochran, Assistant Director Licensing and
Credentialing
Kathy Johnson, Legal Analyst
Mary Luecke, Executive Administrative Assistant

Approval of Draft Agenda

The January 16, 2025 agenda was reviewed and approved.

Approval of Past Meeting Minutes

The December 5, 2024 meeting minutes were reviewed and unanimously approved.

Reports

None

Unfinished Business

None

New Business

Internationally Trained Dentists – Dental Hygiene Discussion

Reference: <https://adanews.ada.org/ada-news/2024/november/new-ada-policies-empower-states-to-alleviate-dental-workforce-shortage/>

The Committee, along with audience stakeholders, discussed the American Dental Association (ADA) new policy resolutions. ADA is not a regulatory agency. Minnesota has pathways for an

IEDs to obtain limited general dentist licensure if they meet certain criteria. The University of Minnesota has the Program for Advanced Standing Students (PASS) program for IEDs.

Please see letters related to this discussion that are presented with the minutes.

Committee members discussed internationally trained dentists (IEDs) practicing hygiene. IED education may not always align with standards of a hygienist practicing in Minnesota

The American Hygienist Association has put out statements expressing concern for patient safety. The Committee reviewed letters of opposition from the Minnesota Educators of Dental Assistants and the University of Minnesota Division of Dental Hygiene. See attached.

Rochelle Westlund from the Minnesota Association of Community Health Centers reported the organization has bill language this session to amend MN Statute 158.06 creating a subdivision B. The bill proposes allowing IEDs who have received a dental school diploma or comparable education to a DDS or DMD from a dental school in another country, to apply for dental hygiene licensure without attending a dental hygiene school. All other criteria a dental hygienist would have to meet including passing the hygiene examinations would be required. She said there could be language needed for client safety or patient protection, and the Association is open to further discussion. She emphasized there is a great need for hygienists. Ms. Westlund opined hygiene is nonpermanent and noninvasive work where IEDs can be supervised by a dentist.

Grounds for Discipline Discussion

The Committee discussed adding grounds for discipline licensure and registration actions.

MOTION: Heidi Donnelly made a motion to approve the changes to Minnesota Statute 158A.08 licensure and registration actions. Trina Courtright second. See attached.

VOTE: For: 4
Opposed: 0

RESULT: Motion passed

Emeritus Active Guidance

The Committee discussed providing further information regarding emeritus active licensure. Bridgett Anderson worked with Minnesota Dental Foundation earlier this year to develop a document. The Committee approved revised language so the Foundation can update their resource. See attached.

Announcements

The Board is expecting new appointments in February 2025.

Adjourn

Hassan Ismail adjourned at 6:05 pm

Reviewed by:

Hassan Ismail DDS
Hassan Ismail, DDS, Chair

May 29, 2025
Date

Minnesota Educators of Dental Assistants

January 14, 2025

Minnesota Board of Dentistry
Attn: Bridgette Anderson, Executive Director
335 Randolph Ave Suite 250,
St Paul, MN 55102

Dear Members of the Minnesota Board of Dentistry Policy Committee,

I am writing on behalf of the Minnesota Educators of Dental Assistants (MEDA), in support of our dental hygiene colleagues, to express our strong opposition to the recent ADA resolutions 513H-2024 and 514H-2024, which propose allowing foreign-trained dentists and dental students to perform dental hygiene duties. As dedicated members of the dental community, we are deeply concerned about the potential implications these resolutions could have on patient safety, educational standards, and the professional integrity of hygienists.

Resolution 513H-2024 proposes allowing dental students and residents who have completed certain hygiene competencies to practice as dental hygienists. This resolution undermines the specialized training and expertise that licensed dental hygienists possess. Dental hygiene is a distinct profession with its own set of skills and knowledge, and it is essential that those practicing in this field meet the highest standards of education and competency.

Resolution 514H-2024 encourages states to license foreign-trained dentists to practice as dental hygienists. While it is important to address workforce shortages, this resolution raises significant concerns about the consistency and quality of care provided to patients. Foreign-trained dentists may not have the same level of training and experience in dental hygiene as those who have completed accredited programs in the United States. Ensuring that all dental professionals meet rigorous standards is vital to maintaining public trust and safety.

We must insist that retention and recruitment of employees is the answer. Improving benefits, work environment, and opportunities for growth are possible without negatively impacting our professions. By focusing on these areas, we can address workforce shortages while maintaining the high standards and integrity of the dental hygiene profession.

In conclusion, we urge the Minnesota Board of Dentistry to carefully consider the potential risks associated with these resolutions. It is imperative that we prioritize patient safety, uphold high educational standards, and protect the integrity of the dental hygiene profession. We respectfully request that the Board oppose ADA resolutions 513H-2024 and 514H-2024.

Sincerely,

Tammy Erickson

Tammy Erickson BA, CDA, LDA
MEDA President

ATTN: Minnesota Board of Dentistry Policy Committee, Dr. Hassan Ismail

RE: Internationally trained dentists as alternative pathway to dental hygiene licensure

Dear Minnesota Board of Dentistry,

I am writing to express my deep concern regarding the proposed alternative pathway for internationally trained dentists (ITDs) to become licensed dental hygienists in Minnesota. This proposal, while aimed at addressing the current workforce shortage, raises significant issues concerning public safety and the integrity of the dental hygiene profession.

The experience of Florida, which has implemented a similar pathway, serves as a cautionary tale. Their program has been fraught with challenges, including high failure rates on clinical exams. These difficulties led to modifications in requirements, often necessitating multiple attempts and remedial courses for ITDs to pass the exams. This situation has placed an additional burden on dental hygiene faculty to provide review courses, further straining an already limited workforce, highlighted by ADA in their recent resolutions adopted in October 2024 addressing workforce shortages.

A fundamental issue with the proposed pathway is the inadequacy of a one-time exam to demonstrate competency. This stands in stark contrast to the rigorous training provided by CODA-accredited dental hygiene programs, which require multiple assessments over an extended period. For instance, at the University of Minnesota, dental hygiene students undergo assessments on approximately 200 patients and four semester competency exams. A single clinical exam on manikins simply cannot provide the same level of assurance of an individual's ability to practice safely and effectively on patients.

It's crucial to consider Minnesota's own history in this matter. In the past, when ITDs were licensed as dentists without proper qualifications, numerous problems and complaints arose. This led to the creation of the PASS program at the University of Minnesota, ensuring ITDs receive proper training alongside traditional dental students before licensure. This experience underscores the importance of comprehensive training and assessment.

While the dental hygiene workforce shortage is a pressing issue, it requires thoughtful, long-term solutions. Recent research conducted jointly by ADHA and ADA identified key factors

contributing to attrition in the field, including workplace culture, pay, and workload. Conversely, work-life balance, positive workplace culture, and the ability to help patients were found to be significant retention factors. Addressing these underlying issues would be a more effective approach to solving the workforce shortage than creating a potentially problematic alternative licensing pathway.

I strongly urge the Board to conduct thorough research and due diligence before making a decision on this matter. This should include consultations with the Florida Board of Dentistry, CDCA, Florida dental hygiene programs, and the broader dental hygiene community. ADHA is actively working on solutions, including an innovative project using clinical dental hygienists to recruit patients to the dental hygiene profession. It would be beneficial to focus efforts on retaining the current workforce and attracting those who have left the profession, while also developing proactive, long-term strategies to address cyclical shortages.

Furthermore, I encourage the exploration of creative solutions such as teledentistry and patient-centered care models, which can reduce the burden on the demand for chairside time. These innovative approaches could help improve access to care while maintaining the high standards of the profession.

In conclusion, while addressing the dental hygiene workforce shortage is undoubtedly crucial, the proposed alternative pathway for ITDs raises significant concerns that cannot be overlooked. I implore the Board to carefully consider the potential consequences of this proposal and to explore more comprehensive, long-term solutions. By prioritizing public safety and the integrity of the dental hygiene profession, we can work together to find sustainable solutions that benefit both practitioners and patients alike.

Thank you for your consideration of these important issues.

Sincerely,

Cyndee Stull, DHSc, RDH

Director, Division of Dental Hygiene

University of Minnesota