



June 10, 2020

Rita Sommers, RDH, MBA, Executive Director  
North Dakota Board of Dental Examiners  
P.O. Box 7246  
Bismarck, ND 58507-7246

Dear Rita:

I hope you and your staff are all well! I am writing on behalf of Dental Assisting National Board (DANB) and the Dental Advancement through Learning and Education Foundation (the DALE Foundation) in support of the collaborative work performed by representatives of North Dakota Dental Assistants Association (NDDAA), North Dakota State College of Science's (NDSCS) dental assisting program (as you know, the only such program in the state that is accredited by the Commission on Dental Accreditation [CODA]), North Dakota Dental Association (NDDA) and North Dakota Dental Foundation (NDDF).

Representatives from NDDAA, NDSCS, NDDA, NDDF, DANB and the DALE Foundation met by conference call a number of times over the past two weeks to discuss the requirements for registration as a Qualified Dental Assistant (QDA) in North Dakota. DANB and the DALE Foundation appreciate the support that the North Dakota Board of Dental Examiners (NDBDE) has demonstrated over many years, recognizing the quality of DANB examinations and DALE Foundation online interactive education. Most recently (in January), the NDBDE passed a rule change to QDA registration requirements, substituting passing DANB's National Entry Level Dental Assistant™ (NELDA®) certification exam in lieu of prior QDA requirements.

In discussions with representatives from the above-named groups, I became aware of concerns that this substitution has the potential of "watering down" the current QDA requirements (*that is, some QDAs would have fewer than the current requirement of 650 hours of clinical instruction*) and potentially making access to QDA registration more restrictive (*e.g., all NELDA pathways require a high school diploma or equivalent and three require formal education*).

There are four eligibility pathways to earning DANB's NELDA certification. In addition to requiring that all NELDA certificants have passed DANB's Radiation Health and Safety (RHS®), Infection Control (ICE®) and Anatomy, Morphology and Physiology (AMP) exams and hold a current DANB-accepted CPR/BLS/ACLS certificate, only one (Pathway IV) requires work experience (*a minimum of 300 and up to 3,000 hours maximum dental assisting work experience, verified by a licensed dentist and accrued over a period of at least two months and no more than three years*). The other three NELDA certification eligibility pathways require completion of different types of formal dental assisting education programs (none of which are CODA-accredited). **Please see the attached NELDA Certification Eligibility document.** Therefore, a NELDA certificant could apply for QDA registration with as few as 0 to between 300 and 3,000 hours of clinical instruction supervised by a licensed dentist.

Representatives of each of these North Dakota organizations and NDSCS support maintaining the current QDA requirement of 650 hours of clinical dental assisting instruction, supervised by

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a licensed dentist, as they all believe this level of supervised instruction is of the utmost importance to safe and efficient dental assisting practice.

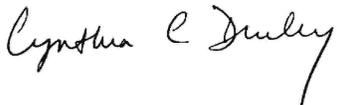
For the reasons outlined above, the NDDAA, NDSCS, NDDA, NDDF, DANB and the DALE Foundation respectfully request that the NDBDE consider the attached QDA requirements proposal, with current requirements in black and recommended edits in red in track changes. This proposal maintains the current requirements of passing DANB's RHS and ICE exams and completing 650 hours of clinical instruction under the supervision of a licensed dentist, while expanding the state's flexibility to attract qualified dental assistants into the state (those who pass DANB's RHS and ICE exams and/or hold NELDA certification) and prepare a greater number of incoming and currently employed dental assistants to qualify for QDA registration.

In addition, because DANB will be able to provide documentation to NDBDE staff (on a monthly or more frequent basis) regarding which eligibility pathway a NELDA certificant came through (and the number of clinical hours individuals who applied via NELDA eligibility pathway IV had earned), adopting this proposal will further streamline the QDA registration process for board staff.

Carla Schneider, NDDAA member, former Chair of DANB's Board of Directors and former President of the DALE Foundation's Board of Trustees will be present at the NDBDE meeting on June 12 to answer any questions on behalf of the groups in support of this QDA proposal.

Rita, you may also reach me at 708-431-9010 with any questions. In addition, should this proposal be adopted by the NDBDE members, I would be happy to assist in drafting language to update the current QDA registration form regarding document requirement.

Sincerely,



Cynthia C. Durley, M.Ed., MBA  
Executive Director

Cc: Sasha Dusek, RDA, NDDAA President  
Marsha Krumm, RDA, CDA, LDA, CDHC, NDDAA Treasurer  
Susan Peters, CDA, RDA, LDA, NDDAA Secretary  
Carla Schneider, CDA, RDA, NDDAA member  
Chanel Malone, B.S., RDA, LDA, CDA, NDDAA Board member, NDSCS Dental Assisting Program Director  
Brent Holman, DDS, Pediatric Dentist, NDDA Clinical Consultant  
Mr. William Sherwin, Executive Director, NDDA  
Mr. Michael Little, Executive Director, NDDF  
Carolyn Breen, Ed.D., CDA, RDA, RDH, Education Consultant to DANB and the DALE Foundation and Chair, Entry Level Dental Assisting Curriculum Task Force

Enclosures:

- DANB NELDA Certification Eligibility Pathways
- Proposed edits to QDA registration requirements



## North Dakota Dental Assistants Association

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February 20, 2020

Dear ND Board of Dental Examiners,

The North Dakota Dental Assistants Association, representing the 731 registered and qualified dental assistants in ND, is writing this letter to express our concerns about changes being proposed to the requirements to become a qualified dental assistant in ND. In the future, we would appreciate the opportunity to provide input and discuss any concerns prior to any proposed changes that directly affect dental assistants.

The regulations in ND currently state that in order to apply to be registered as a Qualified Dental Assistant in ND, a person must complete at least 650 hours of dental assistance instruction including on-the-job training, and have successfully completed the DANB Radiation Health and Safety Exam & Infection Control Exam. The NDDAA has become aware that the NDBODE is in favor of dropping the 650 hours of dental assisting training (including on-the-job) and adopting the language of DANB's NELDA pathways. The NDDAA does not support dropping the 650 hours of dental assisting instruction and on-the-job training.

The NELDA (National Entry Level Dental Assistant) pathway through DANB is designed as an entry level pathway to get people interested and involved in dental assisting. NELDA certification through DANB has a renewal limitation of 4 years with the ultimate goal of becoming DANB certified within that 4 year period. Will North Dakota's rules language mirror that renewal limitation and goal of becoming DANB certified?

NELDA pathway #III (high school program) only requires a one semester class in dental assisting. It does not specify the curriculum of that class. They then must pass the RHS exam and the ICE exam. We are very concerned that there will be no hands-on learning. How can you learn to safely take xrays through an online class? How can you learn to be safe and avoid needle sticks, accidentally dropping instruments or syringes on a patient without first learning and practicing in a safe environment? We are in favor of keeping the 650 hours of dental assisting instruction including on-the-job training.

## Concerns:

-No hands-on training before being able to take xrays, pass instruments/syringes & sterilize instruments = risk to the patient and dental team members.

-No in-office training for infection control = risk to patients and dental team members.

-Lowering the bar of qualification does not produce qualified dental assistants. It produces unqualified assistants that will put patients at risk. What will encourage people to attend college & become a professional dental assistant? How will they be encouraged to stay in the profession of dental assisting? Our state has a shortage of dental assistants, shouldn't we try to retain quality dental assistants by promoting dental assisting as a career?

-The quality and skills of the dental assistant will be lower. The duties that a NELDA QDA will be able to perform will be limited. The role of a registered dental assistant is to assist the dentist by taking xrays, performing office infection control, applying sealants, placing temporary crowns and many other duties, so that the dentist can focus on their work. If they never have the opportunity to learn their skills hands-on, we can't rely on them to competently and safely perform their job.

As stated on the North Dakota Board of Dental Examiners home page:

“The function of ND Board of Dental Examiners is to protect the public's dental health and safety by establishing qualifications for **minimal clinical competency**, to grant or deny license and registration for dentists, hygienists and dental assistants.”

**Learning** is defined as “the acquisition of knowledge or skills through experience, study or by being taught”. There are no shortcuts to becoming a skilled & competent professional dental assistant.

The NDDAA is **against** removing the clinical hours requirement to become a QDA in ND.

Sincerely,

Sasha Dusek RDA, EFDA  
President of the North Dakota Dental Assistants Association

October 26, 2020

North Dakota State Board of Dental Examiners  
PO Box 7246  
Bismarck, ND 58507

Dear North Dakota State Board of Dental Examiners,

I am writing to express my personal views and frustration about the proposed regulatory changes in Title 20 of the ND Administrative Code.

I would urge the Board to delay the scheduled public hearing on October 30, in the interest of providing adequate time for considered input by all interested and groups and individuals. I have the following questions and concerns:

1. Was adequate notice given of the October 30 meeting according to N.D.C.C. 44-04-20?
2. Given the extensive changes proposed with anesthesia and sedation requirements, what were the evidenced-based sources for the initial draft of the language?
3. Were there adequate attempts to reach out to state sources with professional expertise, such as the ND State Society of Oral and Maxillofacial Surgeons, NDDA, NDDAA, NDDHA, or other organizations in the drafting of the proposed changes?
4. Were Board members adequately engaged early and often in the active discussion of changes after being provided with necessary credible background information?

I would urge the Board to evaluate their process for making changes in administrative rules by improving communication and providing transparency in that process. Thank for your service to the citizens of North Dakota.

Respectfully,

Brent L Holman DDS  
75 Prairiewood Drive  
Fargo, ND 58103

Greetings,

I have reviewed the proposed changes to the dental practice act and would like to suggest the following changes:

Section 20-02-01-01 paragraph 2 top of page 6

In it is the wording referring to specialists "or any variation of that term". I suggest dropping the "or any variation of that term" wording. It is too nebulous and subject to an individual interpretation. I have been through a lawsuit, in which we prevailed, with the Board over an advertising misunderstanding. It cost the Board over \$10,000 in legal fees and our practice an equivalent amount, I have seen how these misunderstandings can happen.

At the top of page 17 in paragraph d it says the dentist must provide "and document" training to the hygienists or registered assistant who are monitoring N2O. The documentation is unnecessary paperwork. There is nothing that says what the documentation entails. With all the HIPPA and OSHA training we must document it just adds to the regulatory burden.

Also on page 17 section f - it talks about a 12 hour class to take to be able to administer N2O. Where is this 12 hour class taken? Is it even available? We shouldn't set up a requirement without it being attainable. In addition, under this section every hygienist and registered assistant who didn't graduate in the last 13 months will need to take the course to administer N2O even though they have already been trained in it. There should be a grandfather-in clause. In addition shouldn't a qualified assistant be able to monitor a patient on N2O if they take the class?

In section 20-02-01-09, on page 32 there are very specific rules on how you are supposed to chart and lay out dental records. This is very much regulatory over reach into how we are supposed to practice. Especially in section 2 c and g. We may see someone only once on an emergency or only for emergencies and how detailed does a dental history need to be? Do we really need to detail each option we offer with prognosis, benefits, and risks of each option? This is a disincentive for giving patients options. The amount of paperwork is onerous and does nothing to improve patient care. Please drop this section as a whole.

Since this is a large rewrite of the dental practice act there are two things I could add;

There is no good entry system for assistants from other states that move to North Dakota who may have worked multiple years in good standing for another practice. If they have say 5 years experience taking radiographs legally at their previous employment they should at least be allowed to be qualified assistants without retaking an examination.

In addition, licensed radiology techs should be allowed to take radiographs while acting as a basic assistant. I have been told by the Board that they can not.

Lastly I would like to see additional outreach from the Board while there are changes being considered to the dental practice act. I really don't think just putting something in the minutes or on the website is enough. This is the largest rewrite of the practice act I have seen in 39 years. I and most of my colleagues did not know of this. In the end it is very important that those governed by the board and pay for its functioning are able to know what is happening in laws that govern them.

Thank you,  
Dr. Bradley King DDS