

Legislative Testimony
Public Health Committee
HB5541 AAC Services Provided by Dental Professionals and Certification
for Advanced Dental Hygiene Practitioner
Wednesday, March 21st, 2012

Testimony in opposition of HB 5541: We the undersigned are members of the CT State Dental Commission, but are writing as individual dentists.

Licensure in Connecticut is a high stakes process. Here, the patients are the stakeholders. Historically, and up until 2005, initial licensure in Connecticut was obtained after the candidate successfully completed a clinical skills examination. If a competent candidate failed the clinical skills examination on the first attempt, they will succeed on future attempts. It is the false positives that are the high risk outcome. One incompetent provider will conservatively see 3000 patients a year. The current clinical licensing exam offered in Connecticut, the NERB or ADEX (Northeast Regional Board and the American Dental Examination are identical) is a valid and reliable exam. It defines the skill set to be tested, it ranks the skill set in order of criticality and it tests skill sets performed by entry level practitioners in their first five years of practice. In fact, the NERB or ADEX exam is the only licensing examination to include all skill sets and a reliable (the consistency of the measurement decision) and valid (the degree to which a test measures what it was designed to measure) modality. Examinations are constructed to find the individual who should not be practicing and therefore reliability statistics should exclusively concentrate on failing decisions. Exams do not predict how a candidate behaves in the future, but can assess that a candidate is capable of performing certain procedures at one point in time.

The Connecticut State Dental Commission and the Department of Public Health understand what the scores actually mean and how they are computed. The performance standard should give confidence to the Commission, the Department and the public that the candidate has performed at a satisfactory level of performance to assure competency. Public confidence depends on transparency. The meaning of the scores must be easily understood, performance levels in all skill sets must be reported, and the percentage of available points that the candidate achieved should also be reported and easily understood. As State Dental Commission members, we must demand the standards we require when we are the patients.

NERB and ADEX currently offer a clinical examination for dental hygienists upon finishing a course on local anesthesia, which is not required in CT. This bill adds many duties and functions beyond traditional dental hygiene duties and as well as anesthesia. We believe a clinical licensure examination for dental hygienists will achieve the performance standard that the Commission, the Department and the public expect, and cannot support any bill that does not include this.

In addition to the examination issue, the bill proposes that accreditation standards should be adopted from the State Board of Education and competency standards adopted from the American Dental

Hygiene Association. The Commission on Dental Accreditation (CODA) is recognized by the US Department of Education as the accrediting body for all curricula and competency standards within dental education programs including dentistry, dental hygiene, dental assisting and dental laboratory technology. CODA has an arm's length arrangement with the ADA. This bill provides no accreditation by CODA. Again, as State Dental Commission members, we must demand the standards we require when we are the patients and we cannot support a bill short of this.

Respectfully submitted,

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