



Advanced Dental Hygiene Practitioner Frequently Asked Questions

Q: Why is ADHA establishing this new position?

A: To make a positive impact on the lack of access to oral health care plaguing millions of people in the U.S., as well as part of ADHA's commitment to the Surgeon General's Report on Oral Health and the *National Call to Action* to Promote Oral Health. It is ADHA's objective to answer the unmet oral health needs of the public by advocating for and creating an advanced dental hygiene practitioner, which was overwhelmingly supported by our membership and adopted by our House of Delegates almost unanimously. The ADHP will provide preventive and basic restorative oral health care—easily accessible primary care—in a more cost-effective manner to a greater number of individuals who previously had limited to no access to oral health care services.

Q: How does this relate to the Surgeon's General Report or the *National Call to Action*?

A: Access to oral health care is at the core of the 2000 Surgeon General's report on oral health and the subsequent *National Call to Action* released last year. The National Call to Action identifies the need to "enhance oral health workforce capacity". The National Call to Action acknowledges that "the lack of trained professionals ultimately results in a loss in the public's health. ADHA believes that an advanced dental hygiene practitioner would answer the country's need for more suitably qualified oral health care providers.

Q: What does this mean for the registered dental hygienist?

A: The traditional registered dental hygienist position will remain an integral part of the oral health profession. With the implementation of the ADHP position, the RDH will have the opportunity to continue their education and move into an expanded role in their field.

Q: What are the next steps in implementing this new position?

A: ADHA's Council on Education is now working on curriculum and competency development. Once the curriculum has been developed a determination will be made on the level of education required for a dental hygienist to achieve an advanced education credential.

Q: What does it mean that ADHA has adopted policy to create this new position?

A: The ADHA House of Delegates, representing more than 120,000 dental hygienists across the country, has recognized the need for ADHA to increase its efforts to address the public's unmet oral health needs and thereby approved the development of an advanced dental hygiene practitioner. This is a significant advancement for the dental hygiene profession and demonstrates ADHA's strong commitment to the public's oral health.

Q: What level of education and credential will be necessary for the ADHP?

A: ADHA's Council on Education is now working on curriculum and competency development. Once the curriculum has been developed a determination will be made on the level of education required for a dental hygienist to achieve an advanced education credential.

Q: Will this replace the entry-level position for the registered dental hygienist?

A: No. Similar to the precedent set in the nursing profession, ADHA is answering an unmet public health need in the oral health care of the un-served populations in the U.S. This initiative is intended to go beyond the entry-level education for dental hygienists. Not every dental hygienist will choose this option to advance their education in this way. There will always be dental hygienists who are happy within their chosen professional role. We believe this advancement in our profession gives dental hygienists more professional practice opportunities.

Q: How soon will classes be available to take?

A: As this process will be taken one step at a time, we don't have a date to provide at this time. However, the curriculum development process is underway.

Q: When is the first graduating class expected within this new program?

A: As this process will be taken one step at a time, we don't have a date to provide at this time. However, the curriculum development process is underway.

Q: Where will the classes be taught?

A: As this process will be taken one step at a time, we don't have locations to provide at this time. However, the curriculum development process is underway.

Q: What will be required to enter this educational program?

A: This will be determined as the curriculum is further developed.

Q: What does this mean in relation to the practice acts within each state?

A: ADHA recognizes that much of the restorative aspect of the ADHP will require some widespread changes with regard to scope of practice enhancements. That said, many states currently have some degree of restorative duties in current law—including Minnesota and Washington state. We envision that once this position is established, state lawmakers and regulators will look to the ADHP as one of the solutions to the access to oral health care dilemma and make scope enhancements. Practice acts are, in most cases, permissive laws and there will not be any mandate for all dental hygienists to practice as an ADHP.

Q: How will this affect the legislative efforts in each state to increase practice areas for the registered dental hygienist?

A: ADHA recognizes that much of the restorative aspect of the ADHP will require some widespread changes with regard to scope of practice enhancements. That said, many states currently have some degree of restorative duties in current law—including Minnesota and Washington state. We envision that once this position is established, state lawmakers and regulators will look to the ADHA as one of the solutions to the access to oral health care dilemma and make scope enhancements.

Q: What is the difference between a registered dental hygienist, an advanced dental hygiene practitioner, a dentist and a dental assistant?

A: The professional roles of a dentist, a dental hygienist and a dental assistant are fairly well defined in their respective scopes of practice. The ADHP would be a new professional entity with its own prescribed scope of practice, which can be further delineated as the curriculum and educational programming is determined.

Q: How will the ADHP differ from the dental therapist or dental aide positions available elsewhere?

A: ADHA will examine all related models of oral health providers such as the dental therapist, dental nurse or dental health aide as background information and research for the advanced dental hygiene practitioner. However, the ADHP will be developed in a unique way that considers the oral health needs and the health care delivery system in the U.S.

Q: Who is making the decisions about this new position?

A: At this time the ADHA House of Delegates has authorized the association to move forward with the creation of an advanced dental hygiene practitioner and the corresponding curriculum. From here the ADHA Board of Trustees has delegated the responsibility for the development of the curriculum to the Council on Education. However, the Board of Trustees maintains oversight responsibility for the ADHP.

Q: How does this new position impact access to oral health care?

A: The dental hygiene profession is already on the frontline of defense against disease. However, due to current state practice acts, there are barriers imposed that do not allow the public direct access to preventive care and education from dental hygienists.

Additionally, the U.S. is experiencing a crisis shortage of dentists available to treat the populations who need oral care the most. Millions of Americans in both rural and urban areas are unable to obtain care because there are not enough dentists practicing in those areas.

Further, with government statistics revealing a projected decline in the number of dentists while there is a projected growth in the dental hygiene profession, it is clear that dental hygienists will be able to make a huge impact through this expanded role. The ADHP will expand the practice areas and offer this person the ability to serve the public in un-served areas by providing both preventive and restorative care.

Q: Are there any preparatory classes current or prospective dental hygiene students could take now or in the next year to help prepare them for ultimately pursuing the ADHP credential?

A: This will be determined as the curriculum is further developed.

Q: Are there institutions planned as pilot sites or permanent locations for this new program? If so, please name them.

A: ADHA will be interested in discussions with educational institutions or other entities who have similar goals in increasing the public's access to oral health care through expanded use of dental hygienists. As the curriculum becomes further developed, we will begin to hold these discussions with multiple educational institutions and other interested groups.

Q: Will the ADHP be eligible to receive Medicaid reimbursement?

A: The ability for dental hygienists to be reimbursed through Medicaid is controlled at the state level. The creation of the ADHP should lead to even more states adopting regulations for Medicaid reimbursement given that more dental hygienists will be providing services directly to the public.

Q: Will the ADHP be eligible to receive direct reimbursement by dental insurers?

A: It is too premature to determine at this time.

Q: In what settings do you expect the ADHP to work?

A: In hospitals, nursing homes, public health settings or wherever there is a need for this position. The ADHP could be applicable in any setting. As this concept is further developed, defined and implemented in the states the practice settings will be determined.

Q: How are these positions in the various settings going to be established in the various practice settings, as they will be new positions?

A: In hospitals, nursing homes, public health or wherever there is a need for this position. The ADHP could be applicable in any setting. As this concept is further developed, defined and implemented in the states the practice settings will be determined.

Q: How is the potential salary range determined for this new position?

A: ADHA does not direct salaries, as they are determined by individual employers; different practice settings have different remuneration rates.

Q: Would the salary be different in private practice than in public health or hospitals?

A: While ADHA does not direct salaries, as they are determined by individual employers, different practice settings have different remuneration rates.

Q: Why does ADHA compare this move toward an ADHP with the evolution in the nursing field?

A: The concept of an advanced dental hygiene practitioner, pioneered by ADHA, is not the first of its kind in the health care industry. Precedent has been set in the nursing profession with positions that include: certified nurse midwife, nurse practitioner, clinical nurse specialist and certified registered nurse anesthetist. The nursing profession moved toward the development of advanced practice nurse through recognition of unmet public health needs. Below are some facts related to advance practice nursing:

- All require advanced education beyond the Bachelor of Science in Nursing (BSN)
- First Nurse Practitioner educated at University of Colorado in 1965
- Role of Nurse Practitioner built upon knowledge and skills of the public health nurse
- Answered need for cost-efficient, easily accessible primary health care in rural, underserved areas
- Now evolved into several specialties

Q: What are the prerequisites for entering an ADHP program?

A: This will be determined as the curriculum is further developed.

Q: Explain the difference between the ADHP and a bachelor's or master's degree in dental hygiene?

A: There may be a great deal of similarity in the future of the ADHP with baccalaureate or master's degree programs as they may be the host educational institutions for such a program. The ADHP curriculum could become infused into such advanced dental hygiene educational programs.

Q: Who has or will be joining ADHA in this project?

A: We expect that a number of like-minded organizations interested in increasing the public's access to oral health care will be interested in working with ADHA.

In October, ADHA announced its support of actions taken by the American Dental Association (ADA) that demonstrated its openness to the ADHP as an ADHA-initiated solution to the severe oral health care access crisis in the U.S. These actions included the ADA's House of Delegates' referral of three ADHP-related resolutions proposed by its Board of Trustees at the ADA's annual meeting.

Q: Explain the advanced practice that is already occurring in other states and how does it differ from the ADHP?

A: Our nation's more progressive states, such as Minnesota and Washington, which have already expanded the role of dental hygienists, have recognized that the traditional oral health delivery system does not work for many segments of our population. In a certain number of states, dental hygienists can already do some restorative procedures. But at this time the ability of dental hygienists to actually remove decayed tooth structure and prepare the tooth for a temporary or permanent restoration has yet to be enacted in any state. The ADHP takes this next step.

As many of our citizens, the working poor, their children and the elderly, have untreated dental decay and do not have access to proper oral health care, ADHA feels strongly that the ADHP can make a huge impact in un-served communities by providing much needed preventive services and home care education, as well as some restorative services that are currently not available.

For more information on the current scope of dental hygiene practice by state, please go to: http://www.adha.org/governmental_affairs/index.html and refer to "Dental Hygienist Restorative Duties by State" and "States Permitting Unsupervised Practice/Less Restrictive Supervision" as well as other resources.

Q: What would it mean for an ADHP to serve as a collaborative partner?

A: The ADHP will be able to work with a host of public health and medical professionals in a variety of settings. This collaborative working partnership will offer patients and clients a well-rounded approach to health service.

Q: Explain the crisis shortage of dentists in the U.S.?

A: The U.S. is experiencing a crisis shortage of dentists available to treat the populations who need oral care the most. Millions of Americans in both rural and urban areas are unable to obtain care because there are not enough dentists practicing in those areas. Further, with government statistics revealing a projected decline in the number of dentists while there is a projected growth in the dental hygiene profession, it is clear that dental hygienists will be able to make a huge impact through this expanded role. The ADHP will expand the practice areas and offer this person the ability to serve the public in un-served areas by providing both preventive and restorative care.

Q: Haven't there been other attempts to increase the practice areas for the dental hygienist? Please explain.

A: Yes, there have been a relatively large number of state level efforts to expand the practice of dental hygiene. For example, in the last 11 years, the number of general supervision states has gone from 30 to 42 and the number of states that allow for unsupervised practice now stands at 19.

Q: Why doesn't ADHA just support the expansion of the Alaska dental health aide position?

A: These positions are not the same. While the Alaska dental health aide does perform certain restorative work in the role of assisting a dentist, they do not perform the preventive oral health care services offered by a dental hygienist. The ADHP position will offer both preventive and some restorative services.

Q: Considering the access to oral health care issue, wouldn't it be easier to have pediatricians or nurses take on some dental hygiene services?

A: Dental hygiene is an entire profession. Dental hygienists are licensed oral health professionals who focus on preventing and treating oral diseases-both to protect teeth and gums, and also to protect patients' total health. They are graduates of accredited dental hygiene education programs in colleges and universities, and must take written and clinical exams before they can practice. Dental hygienists play a key role in the oral health care of their patients or clients through the preventive services and home care education they provide. However, the addition of an ADHP to the medical team is wonderful prospect.

About ADHA

ADHA is the largest national organization representing the professional interests of the more than 120,000 dental hygienists across the country. Dental hygienists are preventive oral health professionals, licensed in dental hygiene, who provide educational, clinical and therapeutic services that support total health through the promotion of optimal oral health. For more information about ADHA, dental hygiene or the link between oral health and general health, visit <http://www.adha.org>.