

Final Status of SB 781

Senate Bill 781 passed the House on Thursday morning, April 23, 2015 by a vote of 88-11. SB 781 will now go to the Governor for signature and will become law, unless it is vetoed. There were NO amendments to improve the bill and it passed as it was introduced by the *Oklahoma Dental Association*.

I urge you to go to the Oklahoma Legislature website and on the left side of the home page click on House Floor Video, then Live on House Floor, then scroll down to On Demand Videos for Apr. 23, 9:00 AM. Click on SB 781 at bottom of the list. You will be able to watch the actual debate. Do not wait to check on it because I do not know how long it will be available.

It is the **most eye-opening thing you will ever watch** about how misinformation from a bill author can influence a vote. (The bill HAS been updated many times in 47 years! It was just updated in 2013 to allow dentists to employ the equivalent of 3 hygienists, create the OMS assistant etc...)

You will understand how critical it is to educate your legislator about your profession. The author of the bill interchanged dental assistants with dental hygienists and misspoke regarding the requirements for dental assistants to have any education in infection control. Those legislators who asked questions were well informed by their hygienist constituents but were answered with inaccurate information by the author, Rep.(Dr.) Cox.

It will make you realize that to lay people and especially legislators, dental terminology is a foreign language and they don't have the time to read all bills.

This bill was 90 pages and it was much easier to listen to the author who is a "doctor" instead of listening to a professional who DOES have the dental background to point out the flaws in the bill. **Please write those 11 legislators who listened to the facts and read the sections of the bill our Association had concerns with, and thank them!**

Below are the results of this bill passing:

- 1.) There is NO mandatory infection control course as part of continuing education for the over 5,000 regular dental assistants in Oklahoma.

2.) The didactic/on the job course for the oral maxillofacial surgery assistant is only 4 (four) hours. None of the training/education must be taught in an accredited program but in a private oral surgeon's office and online. There is no required competency testing and no oversight of the instructor dentist. There is no required informed consent required from the patient to know that they are being used as part of training for an assistant in anesthesia. (The definition of "administer" is the oral surgeon is *responsible* but the assistant is the "accessory hand" on behalf of the oral surgeon "who is delivering the anesthesia".)

3.) The requirement that all Expanded Duty courses be taught in an accredited program was changed to allow non-accredited providers approved by the Board to teach Expanded Duties. (The Board is in a sense taking the place of the Commission On Dental Accreditation (CODA) for non-accredited courses.)

4.) A new Expanded Duty: *Assisting a dentist who holds a parenteral or pediatric anesthesia permit; provided, only the dentist may administer anesthesia and assess the patient's level of sedation.* (There is NO course developed and any provider may teach it now with Board approval.)

5.) There is NO requirement for a jurisprudence course for all dental assistants and oral maxillofacial surgery assistants. They will be ignorant of the law that regulates them.

(Only Certified Dental Assistants (CDA) and those dental assistants graduating from a CODA accredited program must take the Jurisprudence test.)

6.) The Board President may make private settlements without having to notify the Board. (The requirement to notify the Board of all settlements has been deleted.)

7.) The requirement that "a final order issued by the Board shall be subject to the Oklahoma Open Records Act" has been deleted from the Dental Act.

(So if a patient wants to check to see if their dentist or dental specialist or dental hygienist has been the subject of any disciplinary action, it will remain secret. So something like the Harrington case in Tulsa where an oral surgeon had egregious infection control violations and exposed over 7,000 patients to HIV and Hepatitis C, and allowed his dental assistants to administer general anesthesia will be able to be kept from the public.)

As an ethical decision, the ODHA Board of Trustees voted **not** to endorse the bill. We were not *neutral* as stated by the bill author, Rep. Cox. It was our decision to contact legislators to inform them of our concerns and try to “fix” the areas that did not protect the public by amending with the highest educational standards. The bill was not amended and this bill *reduces* the protections that a State Agency should afford the public.

Thank you all for writing your legislators. Please share this information with your dentist employer and your patients.

Sincerely,

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