Testimony
Health Services Committee
Wednesday, April 13, 2016 – 10:05 AM
North Dakota Oral Health Coalition
Collaborative Practice Task Force Summary Report

Good morning, Chairman Lee and members of the Health Services Committee. My name is Kimberlie Yineman and I am the Director of the North Dakota Oral Health Program for the North Dakota Department of Health and Vice President of the Oral Health Coalition. I am here today to provide testimony regarding the efforts of the North Dakota Collaborative Practice Task Force.

During the 2015 North Dakota Legislative Session, the North Dakota Oral Health Coalition was identified by legislators as an organization that could help facilitate discussion around collaborative practice between North Dakota dentists, dental hygienists, and other key stakeholders.

Collaborative practice is a concept in which the dentist and dental hygienist enter into a written agreement that authorizes a registered dental hygienist to work under the general supervision of a dentist. A dentist-dental hygienist collaborative practice is defined as a commitment to interact on a professional level that empowers the participants to blend their talent to achieve a goal that neither can do alone.

The task force reviewed, discussed and agreed upon key elements of a collaborative practice for North Dakota by reviewing current state supervision laws. Task force members actively solicited input from individuals who had prior experience with collaborative practice from an implementation and policy perspective (see Attachment A for a list of task force members). During the first meeting, the task force agreed to the following criteria to achieve an optimal collaborative practice agreement:

- Maintain and improve current quality standards of care and safety for North Dakotans
- Increase access to care with the best interests of the patient in mind
- Link patients to a dental home

Outcome

After a thorough discussion, the task force agreed that the existing language in North Dakota Administrative Code already describes a collaborative practice

model that works best for North Dakota: Chapter 20-01-02 (21), Definitions – "General supervision" means the dentist has authorized the procedures and they are carried out in accordance with the dentist's diagnosis, if necessary, and treatment plan. The dentist is not required to be in the treatment facility. Limitations are contained in North Dakota Century Code Section 43-20-03 (see Attachment B).

A Collaborative Practice Task Force Summary Report was provided to the North Dakota Board of Dental Examiners for their consideration.

This concludes my presentation. I am happy to answer any questions you may have.

Attachment A

North Dakota Collaborative Practice Task Force Members:

Cheryl Underhill – North Dakota Oral Health Coalition, Executive Director, Facilitator

Kimberlie Yineman – North Dakota Department of Health, Oral Health Program, Dental Director

Jaclyn Seefeldt – North Dakota Department of Health, Oral Health Program, Oral Health Prevention Coordinator

Rachelle Gustafson – North Dakota Dental Hygienists' Association, President

Judy Bernat – North Dakota Dental Hygiene Association, Alternate

Dr. Brent Holman – North Dakota Dental Association, Executive Director

Dr. Omar Chahal – North Dakota Dental Association, Alternate

Marcia Olson – Bridging the Dental Gap, Executive Director and North Dakota Oral Health Coalition, Board President

Attachment B

43-20-03. Dental hygienists - Practice by

As used in this chapter, "dental hygiene" and the practice thereof means the removal of accumulated matter from the natural and restored surfaces of teeth and from restorations in the human mouth, the polishing of such surfaces, and the topical application of drugs to the surface tissues of the mouth and to the surface of teeth if such acts are performed under the direct, modified general, or general supervision of a licensed dentist. General supervision may be used if the procedures are authorized in advance by the supervising dentist, except procedures which may only be used under direct supervision as established by the board by rule. Only a person licensed as a dental hygienist may be referred to as a dental hygienist. Additional tasks permitted to be performed by licensed dental hygienists may be outlined by the board of dental examiners by appropriate rules.

North Dakota Oral Health Coalition (NDOHC)

Collaborative Practice Task Force Summary Report

During the 2015 North Dakota Legislative Session, the North Dakota Oral Health Coalition (NDOHC) was brought forward by legislators as an organization that could help facilitate discussion around collaborative practice between North Dakota dentists, dental hygienists and other key stakeholders.

Collaborative practice is a concept in which the dentist and dental hygienist enter into a written agreement that authorizes the supervision of the Registered Dental Hygienist working under the general supervision of a dentist. Dentist-dental hygienist collaborative practice is "a commitment to interact on a professional level that empowers the participants to blend their talent to achieve a goal that neither can do alone." *D.J.Thompson, Florida Atlantic University*

On 08/06/15, the NDOHC Executive Director convened a collaborative practice planning meeting with key stakeholders including Bridging the Dental Gap, the ND Dental Association (NDDA), North Dakota Dental Hygienists' Association (NDDHA), North Dakota Department of Health, Oral Health Program (NDDOH OHP) and the North Dakota Oral Health Coalition. This group agreed to function through a consensus based process as the "Core Planning Group". An additional group of stakeholders, the "Advisory Group" were identified as potential partners and technical advisors to provide advice and other input as the process evolved.

Task Force Members

Cheryl Underhill –North Dakota Oral Health Coalition Executive Director, Facilitator

Kimberlie Yineman- North Dakota Department of Health Oral Health Program, Dental Director

Jaci Seefeldt-, North Dakota Department of Health Oral Health Program, Oral Health Prevention Coordinator

Rachelle Gustafson- North Dakota Dental Hygienists' Association, President,

Judy Bernat-NDDHA Alternate

Dr. Brent Holman- North Dakota Dental Association, Executive Director

Dr. Omar Chahal-NDDA Alternate

Marcia Olson- Bridging the Dental Gap, Executive Director and NDOHC Board President

8/6/15-9/25/15

Unfortunately, Marcia Olson passed away during this process; the group renewed their committed to the process in honor of Marcia's dedication to oral health.

Members concluded that task force outcomes would maintain and improve current quality standards of care and safety for North Dakotans; be evidenced based; and allow for greater access to care with the best interests of the patient in mind.

The Core Group convened four times by teleconference and once in a half-day face-to-face meeting in Fargo to review, discuss and agree upon key elements of a collaborative practice definition for ND. Key elements of collaborative practice definitions were reviewed from other state's existing Collaborative Practice Agreements, particularly Minnesota and South Dakota.

Extensive discussion regarding dental home and oral health reviews took place. All members agreed that the goal to link high-risk patients to a Dental Home without creating barriers to access to care was an important consideration. The specific timeframes within which an oral health exam should take place posed challenges that had the potential to become a barrier to care, particularly in the public health setting.

Task Force members actively solicited input from individuals who have prior experience with Collaborative Practice from an implementation and policy perspective. After much discussion, the Task Force decided to support the existing language in ND rules relating to collaborative practice, and that the all members and their respective organizations should make it a priority to educate dental professionals about current rules/law and focus on using the law to bring care to schools, nursing homes, etc. All members expressed interest in continuing the partnerships established through the Task Force.

Outcome

The North Dakota Collaborative Practice Task Force concluded on 12/01/15 to leave existing NDCC 43-20-03, rules 20-04-01-01, and NDCC 43-20-01 (5), and NDCC 43-28-18 (14) law as is related to Collaborative Practice and Supervision.

Concluding Remarks

All members of the task force agreed that this process led to greater understanding of inter-professional issues and enhanced professional partnerships. Members should be commended for adhering to a challenging process in the interest of improved oral health access for all North Dakotans while representing their respective associations and professions in a diligent and thoughtful manner.