

October 11, 2024

Dear Colleagues and Members of the Healthcare Community,

Recently proposed resolutions by the American Dental Association (ADA) aim to remove faculty-to-student ratios in dental hygiene programs and allow dental students and foreign trained dentists to practice dental hygiene in the United States, without passing a state licensing exam.

As the leading voice for dental hygienists in the U.S., the American Dental Hygienists' Association (ADHA®) is submitting written testimony in strong opposition of these resolutions. We believe they pose significant risks to educational standards and patient safety, and we urge the ADA House of Delegates to reject these proposals.

The resolutions are outlined below, followed by the points the ADHA has prepared for consideration by the ADA House of Delegates reference committees.

**Resolution 401, "Increasing Allied Personnel in the Workforce"**, aims to align faculty-student ratios in dental hygiene programs with those of predoctoral dental education programs and raises the following concerns:

- **Compromised Education Quality:** Altering faculty-student ratios risks diluting and compromising the quality of education or the financial viability of allied dental programs. Smaller ratios ensure students receive the necessary hands-on guidance and oversight for mastering dental hygiene's clinical and theoretical components.
- **Not an Enrollment Mechanism:** Eliminating faculty-student ratios is not a mechanism for increasing student enrollment and may even decrease the appeal of attending a program.
- **Educator Burnout:** With the existing shortage of dental hygiene educators, eliminating faculty-student ratios may exacerbate educator burnout, further weakening academic programs and reducing educator retention.
- **Established Standards:** The Commission on Dental Accreditation (CODA) has already determined that existing faculty-to-student ratios in dental hygiene programs are essential for maintaining education standards and should remain unchanged.

Dental hygiene education, including clinical instruction, is distinct from dental student education. Requiring different structures, oversight and expertise. Dental hygiene educators are best positioned to determine the appropriate instruction and supervision levels necessary for effective clinical training of dental hygiene students and to uphold the educational standards of our profession.

**Resolution 513, "Resolution Dental Students and Residents as Dental Hygienists"**, proposes to allow dental students and residents to practice as dental hygienists after completing their dental competencies. This resolution raises the following concerns:

- **Inadequate Training:** Dental students and residents do not receive the same comprehensive education and specialized training required for providing preventive and therapeutic dental hygiene services. Their training and resulting qualifications in this area are extremely limited in comparison.

- **Risks to Patient Safety:** Employing individuals in roles they are not licensed for is irresponsible and can have serious legal and ethical consequences. For the safety and trust of the public, it is essential to maintain a clear line of licensure and qualifications in healthcare.
- **Erosion of Professional Standards:** The ADHA believes that maintaining the integrity of professional standards is paramount to ensuring quality patient care. Lowering the bar for licensure threatens to dilute the high standards of the dental hygiene profession and compromises patient care quality and safety.
- **Fostering Meaningful Work and Professional Development:** Rather than lowering professional standards, the ADHA believes efforts should be directed to improving workplace culture, enhancing professional development opportunities, and offering competitive benefits. These measures can attract new talent and retain qualified dental hygienists without sacrificing the integrity of the dental hygiene profession.

**Resolution 514/514B, "Internationally Trained Dentists as Dental Hygienists"** seeks to integrate internationally trained dentists into the dental hygiene workforce. This resolution raises the following concerns:

- **Inconsistent Education Standards:** Dental education standards vary widely across countries, and internationally trained dentists are unlikely to have the specific knowledge and clinical expertise necessary for practicing dental hygiene in the U.S.
- **Patient Safety Concerns:** Allowing individuals to practice as dental hygienists without proper U.S.-based training could jeopardize patient safety and care quality.
- **Appropriate Pathways:** Foreign-trained dentists who wish to practice as dental hygienists in the United States should follow the established pathway by enrolling in programs that are accredited by CODA to gain the specific expertise and ensure they are qualified for the roles they intend to fulfill. Creating alternative routes without proper accreditation undermines both the dental and dental hygiene professions.

We urge the ADA House of Delegates to reject these resolutions and focus on solutions that respect the distinct professional roles within dentistry and dental hygiene. The integrity of dental hygiene as a profession, and the quality of care provided to patients, depends on maintaining stringent educational and licensure standards.

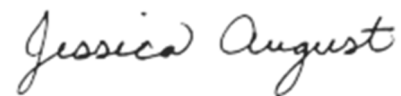
Sincerely,



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