



Dora
Department of Regulatory Agencies

**2014 Review:
Proposal for Mandatory Continuing
Education for Dentists and Dental
Hygienists**

July 28, 2014



Executive Director's Office

Barbara J. Kelley
Executive Director

John W. Hickenlooper
Governor

July 28, 2014

Members of the Colorado General Assembly
c/o the Office of Legislative Legal Services
State Capitol Building
Denver, Colorado 80203

Dear Members of the General Assembly:

As a part of the Executive Director's Office within DORA, the Office of Policy, Research and Regulatory Reform seeks to fulfill its statutorily mandated responsibility to conduct reviews of proposals to require mandatory continuing education with a focus on protecting the health, safety and welfare of all Coloradans.

DORA has completed its evaluation of the proposal to impose continuing education requirements on dentists and dental hygienists and is pleased to submit this written report. The report is submitted pursuant to section 24-34-901, Colorado Revised Statutes, which provides that DORA shall conduct an analysis and evaluation of the proposal to determine whether mandatory continuing education would likely protect the public served by the practitioners.

Sincerely,

Barbara J. Kelley
Executive Director



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Background

Prior to introduction of legislation designed to impose a mandatory continuing education requirement on a regulated occupation or profession, the proponents of the legislation must submit information concerning the need for such a requirement to the office of the Executive Director of the Department of Regulatory Agencies. The Executive Director is required to review, analyze, and evaluate the proposal and report in writing to the General Assembly whether mandatory continuing education would likely protect the public. Section 24-34-901, Colorado Revised Statutes, states:

Proposed continuing education requirements for regulated occupations and professions - review by office of executive director.

(1) Before any bill is introduced in the general assembly that contains, or any bill is amended to contain, a mandatory continuing education requirement for any occupation or profession, the practice of which requires a state of Colorado license, certificate, or registration, the group or association proposing such mandatory continuing education requirement shall first submit information concerning the need for such a requirement to the office of the executive director of the department of regulatory agencies. The executive director shall impartially review such evidence, analyze and evaluate the proposal, and report in writing to the general assembly whether mandatory continuing education would likely protect the public served by the practitioners. Proposals may include, but need not be limited to: Information that shows that the knowledge base for the profession or occupation is changing; that mandatory continuing education of this profession or occupation is required in other states; if applicable, that any independent studies have shown that mandatory continuing education is effective in assuring the competency of practitioners. The proposal may also include any assessment tool that shows the effectiveness of mandatory continuing education and recommendations about sanctions that should be included for noncompliance with the requirement of mandatory continuing education. The provisions of this section shall not be applicable to:

(a) Any profession or occupation that, as of July 1, 1991, has mandatory continuing education requirements in place;

(b) Any bill that is introduced as a result of a legislative interim committee and that as introduced in the general assembly includes a mandatory continuing education requirement.

Before beginning the review, the Executive Director evaluated the application to determine if the review was necessary under the requirements of the statute. The evaluation revealed that a mandatory continuing education program for dentists and dental hygienists did not meet any of the exemptions from the statute and, therefore, was subject to review by the Executive Director.

Proposal for Continuing Education

The Colorado Dental Association (Applicant) submitted information on January 16, 2014 to the Department of Regulatory Agencies (DORA), proposing mandatory continuing education for all Colorado-licensed dentists and dental hygienists. The Colorado Board of Dental Examiners (Board) regulates dentists and dental hygienists in Colorado and would consequently be responsible for enforcing this requirement.

The Applicant proposes that during each two-year license renewal cycle, dentists and dental hygienists complete at least 30 hours of continuing education. Under the proposal, at least 16 of those 30 hours would have to be courses designed to enhance dental clinical skills.

The Applicant states that continuing education for these professions is readily available from professional or specialty associations, internships, residencies, and other sources. Under the proposal, licensees could also gain credit for military service, original research, and home or graduate study. For the courses devoted to enhancing dental clinical skills, the Applicant proposes that the Board accept for credit only those courses/programs offered by entities recognized by the American Dental Association Continuing Education Recognition Program (CERP) or the Academy of General Dentistry Program Approval for Continuing Education; or any American Medical Association Category One continuing medical education course.

According to information the Applicant submitted, 48 states, the District of Columbia, and Puerto Rico require dentists and dental hygienists to complete continuing education. The number of required hours per year averages 18 for dentists and about 11.5 for dental hygienists. Kansas requires dentists complete the most hours, at 30 hours per year, and Indiana the least, at 10 hours per year. Wyoming does not have a continuing education requirement, but does require dentists and dental hygienists to maintain current cardiopulmonary resuscitation certification.

The Applicant argues that continuing education is necessary for these professions because dentistry is “a profession that is constantly evolving with new techniques and materials.” The Applicant gives numerous examples of recent technological advances in the dental profession, including:

- Diagnostic systems such as digital x-rays, 3-D imaging, and intraoral cameras;
- Restorative/preventative tools such as lasers, air abrasion to remove decay, and Chairside Economical Restoration of Esthetic Ceramics (commonly known as CEREC), where dentists use computer-assisted design/computer-assisted manufacture (commonly known as CAD/CAM) technology to provide crowns, veneers, and other restorations; and

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- Monitoring systems such as capnography, where dentists monitor the concentration of exhaled carbon dioxide in order to assess physiologic status or determine the adequacy of ventilation during anesthesia.

The Applicant also states that:

[t]here are continual advances and changes in disease management, pharmacology, and drug modalities. Most dental professionals practice for more than 30 years. Best practices and standards change drastically over a dental professional's practice lifetime.

The Applicant proposes that dentists and dental hygienists would be responsible for maintaining documentation of the continuing education they complete. Under this regime, the Board would require licensees to attest that they had met the continuing education requirement when renewing their licenses. The Board could then conduct periodic, random audits to ensure licensees were complying with the law.

The Applicant proposes that the Board could levy fines against or issue letters of concern or letters of admonition to dentists or dental hygienists who fail to comply with the continuing education requirement.

Analysis

Section 24-34-901, Colorado Revised Statutes, requires a group seeking to impose mandatory continuing education on any profession or occupation to submit a proposal to the Executive Director of the Department of Regulatory Agencies (Executive Director and DORA respectively). The statute directs the Executive Director to analyze the proposal and determine whether mandatory continuing education is likely to protect the public.

The Applicant argues that because the profession of dentistry is continually evolving, mandatory continuing education is necessary in order to ensure practitioners maintain competency. The Applicant proposes that for each two-year renewal period, both dentists and dental hygienists complete a total of 30 hours of continuing education, 16 hours of which must focus on improving clinical skills.

The Colorado Dental Hygienists Association has no continuing education requirement for its members. Based on conversations with stakeholders, however, it is reasonable to conclude that a significant majority of dental hygienists work in settings alongside licensed dentists.

The Applicant did not provide any assessment tools to show that mandatory continuing education is effective in assuring practitioners' ongoing competence.

The Applicant states that there are few studies demonstrating the efficacy of mandatory continuing education for dentistry because the nearly universal requirement makes it difficult to find a control group (i.e., a group of dentists who did not take continuing education) to compare to a group that does.

The Applicant did, however, submit two studies that evaluated the efficacy of continuing education for the medical profession. It is important to note that both studies considered continuing education in general, rather than mandatory continuing education.

Both studies conclude that continuing education can improve performance. The first study (Forsetlund study) concludes that educational meetings¹ alone or combined with other interventions might improve professional practice and healthcare outcomes for patients.² The authors continue, "the effect on professional practice tended to be small but varied between studies, and the effect on patient outcomes was generally less." The authors further observed that "mixed interactive and didactic education was more effective than either alone."

¹ The study's authors define "educational meeting" as including "courses, conferences, lectures, workshops, and symposia."

² Forsetlund L., Bjørndahl A., Rashidian A., Jamtvedt G., O'Brien MA, Wolf FM, Davis D., Odgaard-Jensen J., Oxman A. *Continuing education meetings and workshops: effects on professional practice and health care outcomes*. Cochrane Database of Systematic Reviews 2009, Issue 2. Art No: CD003030.

The second study (Davis study) concluded that “(o)verall, (continuing education) is... generally effective in changing physician performance.”³ The Davis study also found that certain course modalities were more effective than others, i.e., courses using live or multiple media and multiple educational techniques were found to be most effective, while content delivered solely via print media was the least. The study also found that continuing medical education was most effective in settings where students could have multiple exposures to the material.

Although the studies the Applicant provided support the potential of continuing education, both acknowledge that certain criteria must be met for continuing education to be effective.

If the conclusions in the studies can be applied to mandatory continuing education for dentistry and dental hygiene, and if certain criteria were met in fulfilling a continuing education requirement—if a licensee sought a course that was delivered with both interactive and didactic components and provided multiple exposures to the educational material—then it would be reasonable to conclude that such education might protect the public.

The Applicant proposes that 16 of the 30 required continuing education hours be obtained in courses that focus on dental clinical skills. For this portion of the requirement, the Applicant suggests that the Board accept only those courses/programs offered by providers recognized by the American Dental Association Continuing Education Recognition Program (CERP) or the Academy of General Dentistry Program Approval for Continuing Education; or any American Medical Association Category One continuing medical education course. Because these providers must meet certain standards, it is more likely the courses they offer will have merit. However, such a determination of merit must be made independently by the Board.

In its application, the Applicant lists some of the many new technologies, techniques, and procedures that have emerged in the world of dentistry. In a competitive marketplace, the best way for dentists and dental hygienists to ensure success is to keep abreast of developments in the field and continue to develop their professional skills. Because all licensed healthcare providers are responsible for the care they provide, before embarking upon a new technique or using a new piece of equipment, conscientious practitioners ensure they possess the knowledge, skills, and experience to do so safely, regardless of whether there is a continuing education requirement in place. If a licensee undertakes a new procedure without the requisite knowledge, skills, and experience, he or she risks injuring the patient, which could result in the patient filing a complaint with the Board, seeking legal action, or simply seeking care elsewhere. These are all outcomes that conscientious professionals strenuously avoid.

³ Davis D, Galbraith R. *Continuing medical education effect on practice performance: effectiveness of continuing medical education: American College of Chest Physicians Evidence-Based Educational Guidelines*. Chest. 2009 Mar;135(3 Suppl):42S-48S. doi: 10.1378/chest.08-2517.

Further, current Colorado law requires dentists⁴ and dental hygienists⁵ to practice within the scope of their education, training, and experience. This is a de facto mandate for ongoing professional development directly applicable to a licensee's practice.

Bad actors might offer a service without possessing the necessary knowledge. The Applicant's proposal would not prevent this. Bad actors could either fail to complete the mandatory continuing education and hope they do not get selected for audit, or they could simply take the courses in areas that do not address their deficiencies.

Thus, it is reasonable to conclude that some market dynamics apply pressure on licensees to keep abreast of changes in the profession. Even with MCE in law, such market dynamics remain in play because practitioners are not required to conduct any type of needs assessment when choosing MCE.

In other words, dental patients rely on the licensee to choose course work that the practitioner needs, not course work that is simply convenient or low priced.

The choice for Colorado, then, is continued reliance on market competition and the judgment of dentists and dental hygienists to maintain competency or to impose a legal requirement to obtain state mandated continuing education. Both approaches share the goal of protecting the public while avoiding unnecessary expense and regulatory red tape.

⁴ § 12-35-103(5), C.R.S.

⁵ § 12-35-103(4), C.R.S.

Conclusion

The Executive Director of the Department of Regulatory Agencies (DORA) is charged with determining whether mandatory continuing education for dentists and dental hygienists would likely protect the public. The Colorado Dental Association (Applicant) has successfully proven that state mandated continuing education for the professions under review is likely to protect the public.

First, 48 states impose mandatory continuing education requirements on licensees. Colorado should follow these states so that Colorado practitioners' competence will be assured. Additionally, the creation of mandatory continuing education (MCE) will facilitate licensee mobility through reciprocity with other states.

Second, dentistry and dental hygiene are fast growing and evolving professions. The Applicant points out that the average licensee practices for as many as 30 years. This means that it is possible that some dentists and dental hygienists have been practicing since 1984 without any continuing education to keep abreast of new information and technology such as digital x-ray, use of lasers, pharmacology advances and development or improvement of other drug modalities used in dentistry and dental hygiene. The Applicant points out that best practices and standards change drastically over a practitioner's career. Colorado's regulatory scheme runs the significant risk of contributing to misleading a patient when a practitioner's license is renewed without proof having been provided to the state that the practitioner has kept abreast of the drastic changes impacting his or her profession. The imposition of a mandatory continuing education requirement monitored by the state regulatory board will go a long way in correcting this flaw in Colorado's regulatory system. Colorado's citizens will benefit from dentists' and dental hygienists' improved practices.

Colorado's mandatory continuing education review process requests that applicants provide copies of independent studies that show the mandatory continuing education is effective in assuring the competency of practitioners. The Applicant provided an abstract of a study conducted in Norway that concluded that educational meetings can improve professional practice and health care outcomes for patients. The proposed MCE requirement appears to meet the standard of the study.

While the Norwegian study may not establish a strong promise of increased practitioner competence, other provisions of the Applicant's proposal work to strengthen the value of the required educational meetings. As an example, the Applicant suggests that a portion (16 hours of the required 30) of the required MCE hours be obtained by completion of a course designed to enhance dental clinical skills and/or procedures. Such coursework must be offered by an organization that is an American Dental Association Continuing Education Recognition Program Recognized Provider. Thus, quality control is imposed upon the MCE system.

For the above reasons, the Colorado General Assembly should direct the Colorado Board of Dental Examiners to develop and impose mandatory continuing education requirements on dentists and dental hygienists licensed to practice in Colorado.
