

# 2017

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Annual Reports and Resolutions  
Volume 2

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## Dental Education, Science and Related Matters

Resolution No. 8 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Dental Education and Licensure

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

## 1 RESCISSION OF THE POLICY, CARDIOPULMONARY RESUSCITATION INSTRUCTION

2  
3 **Background:** In accord with Resolution 170H-2012, Reaffirming Existing ADA Policy, the Council on  
4 Dental Education and Licensure recommends that the policy, Cardiopulmonary Resuscitation Instruction  
5 (Trans.1976:860) be rescinded. When this policy was adopted by the House of Delegates in 1976,  
6 cardiopulmonary resuscitation (CPR) courses were not readily available, and thus the ADA encouraged  
7 dental societies to sponsor CPR as continuing education for members. Now, forty years later, CPR (now  
8 referred to as Basic Life Support for Healthcare Providers) courses are widely accessible. The Council  
9 believes that this policy is no longer needed and for housekeeping purposes, should be rescinded.

### 10 Resolution

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12  
13 **8. Resolved,** that the ADA policy, Cardiopulmonary Resuscitation Instruction (*Trans.1976:860*)  
14 be rescinded.

### 15 Cardiopulmonary Resuscitation Instruction (*Trans.1976:860*)

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17  
18 **Resolved,** that constituent and component societies be encouraged to make regularly  
19 available to their members and their auxiliary personnel continuing education in  
20 cardiopulmonary resuscitation.

21  
22  
23 **BOARD RECOMMENDATION: Vote Yes.**

24  
25 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
26 **BOARD DISCUSSION)**

Resolution No. 9 NewReport: N/A Date Submitted: August 2017Submitted By: Council on Dental Education and LicensureReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**RESPONSE TO RESOLUTION 19H-2016: RECOGNITION OF OPERATIVE DENTISTRY AS AN INTEREST AREA IN GENERAL DENTISTRY****Background:** The 2016 House of Delegates adopted Resolution 19H-2016, calling for Operative Dentistry to be recognized by the ADA as an interest area in general dentistry:**19H-2016: Resolved**, that operative dentistry is an interest area in general dentistry recognized by the American Dental Association and sponsored by the Academy of Operative Dentistry, and be it further**Resolved**, that the Council on Dental Education and Licensure work with the Academy of Operative Dentistry to develop a name for a deserved interest area that more closely represents the expertise and focus described in the application.

In response to Resolution 19H-2016, the Council contacted the leadership of the Academy of Operative Dentistry and the American Board of Operative Dentistry regarding their willingness to revise the name of the recognized general dentistry interest area as well as to support a proposed definition for this interest area. Both entities support the proposed name change as reflected in the revised proposed policy below. Both organizations supported the proposed definition.

The definitions of the dental specialties and interest areas in general dentistry are the responsibility of the Council on Dental Education and Licensure. In June 2017, the Council adopted the following definition of Operative Dentistry, Cariology and Biomaterials, believing that it complements the policy statement and clarifies the expertise and focus of the interest area.

**Operative Dentistry, Cariology and Biomaterials:** That branch of general dentistry concerned with the advanced knowledge, expertise and clinical skills in operative dentistry, restorative dental materials, educational theory, techniques, and teaching skills. It includes scientific research and knowledge in the areas of cariology and advanced scientific clinical training in restorative materials and biomaterials.

The Council believes that the proposed name change more closely represents the expertise and focus described in the Academy's application. Therefore, the Council on Dental Education and Licensure presents the following resolution:

**Resolution**

**9. Resolved**, that the ADA Policy Recognition of Operative Dentistry as an Interest Area in General Dentistry (*Trans.2016:304*) be amended (additions are underscored):

**Recognition of Operative Dentistry, Cariology and Biomaterials as an Interest Area in General Dentistry**

**Resolved**, that operative dentistry, cariology and biomaterials is an interest area in general dentistry recognized by the American Dental Association and sponsored by the Academy of Operative Dentistry.

**BOARD COMMENT: Vote Yes.**

**BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

Resolution No. 10 NewReport: N/A Date Submitted: August 2017Submitted By: Council on Dental Education and LicensureReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

## AMENDMENT OF THE POLICY STATEMENT ON CONTINUING DENTAL EDUCATION

**Background:** In accord with Resolution 170H-2012, Reaffirming Existing ADA Policy, the Council on Dental Education and Licensure recommends that the Policy Statement on Continuing Dental Education (*Trans.*2006:331; 2011:465), be amended to reflect contemporary language that more accurately 1) defines the ways in which continuing dental education is currently structured, 2) provides a listing of continuing education activities and subject matter that may be acceptable to state dental boards for licensure renewal purposes and 3) complements the amendment to Section 5.H. of the ADA Principles of Ethics and Code of Professional Conduct adopted by the 2016 House of Delegates (*Trans.*2016:341).

### Resolution

**10. Resolved,** that the ADA Policy, Statement on Continuing Dental Education (*Trans.*2006:331; 2011:465) be amended as follows (additions are underscored; deletions are ~~stricken~~):

**Definition of Continuing Dental Education:** Continuing dental education consists of educational activities designed to review existing concepts and techniques, to convey information beyond the basic dental education and to update knowledge on advances in scientific, clinical, and non-clinical related subject matter, including evidence-based dentistry and ethics. The objective is to improve the knowledge, skills and ability of the individual to provide the highest quality of service to the public and the profession. All continuing dental education should strengthen the habits of critical inquiry, balanced judgment and ethics that denote the truly professional and scientific person and should make it possible for new knowledge to be incorporated into the practice of dentistry as it becomes available.

Continuing education programs are typically designed for part-time enrollment and are ~~usually of variable short duration, although longer programs with structured, sequential curricula may also be included within this definition.~~ In contrast to accredited advanced dental education programs, continuing dental education programs do not lead to eligibility for ethical announcements or certification in a specialty recognized by the American Dental Association. Continuing dental education should be a part of a lifelong continuum of learning.

**Acceptable Subject Matter:** In order for specific course subject material to be acceptable for credit, the stated course objectives, overall curriculum design or topical outlines should be clearly stated. The information presented should enable the dental professional to enhance the ~~dental oral~~ health and well-being of the public, either directly or through improved effectiveness of operations in dental practice, or through expansion of present knowledge through research. The dental professional should be able to apply the knowledge gained within his or her professional capacity.

**Acceptable Activities:** Continuing education activities are conducted in a wide variety of forms using many methods and techniques which are sponsored by a diverse group of institutions and organizations, including formally structured educational content offered by accredited or approved providers, and other types of activities that State boards and/or legislatures may by law specify as acceptable activities or content. The Association urges the state boards to allow maximum flexibility for an individual to choose content and learning activities based on individual preferences, needs, interests and resources. Additionally, clinical credit should be awarded for all activities related to the delivery of dental procedures including those with ethical components and self-study activities.

Acceptable forms might include but are not limited to:

- ~~attendance at and/or delivery of participation in a formal continuing education course (a didactic and/or participatory activity presentation to review or update knowledge of new or existing concepts and techniques)~~
- delivery of a formally structured continuing education course
- general attendance at a multi-day convention type meeting (a meeting held at the national, state or regional level which involves a variety of concurrent educational experiences)
- authorship of publications (e.g., a book, a chapter of a book or an article or paper published in a professional journal)
- completion of self-study activities such as online courses and research, webinars, journal articles and downloadable books (individualized course of study which is structured and organized, but is available on an unscheduled and unsupervised basis; a method of providing feedback to the learner on performance or comprehension must be incorporated into the self-study activity)
- enrollment in a preceptor program (an independent course of study with a formally structured, preplanned and prescheduled curriculum where the participant observes and provides patient treatment using criteria and guidelines provided by the instructors; this type of study does not lead to an academic degree)
- academic service (e.g., instruction, administration or research related to undergraduate, postgraduate or graduate dental or allied dental training programs)
- presenting posters or table clinics
- participation on a state dental board, a board complaint investigation, peer review or quality care review procedures
- successful completion of Part II of the National Board Dental Examination, a recognized dental specialty examination or the National Board Dental Hygiene Examination if taken after initial licensure
- test development for written and clinical dental, dental hygiene and dental specialty examinations
- volunteering pro bono dental services or community oral health activities through a public health facility
- participation in dental research as a principal investigator or research assistant

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

Resolution No. 11 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Dental Education and Licensure

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact:

Amount One-time  Amount On-going  FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

## **POLICY ON STATE DENTAL BOARD RECOGNITION OF THE COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION**

**Background:** During its review of ADA policies on dental continuing education this year, the Council on Dental Education and Licensure (CDEL) concluded that a policy is needed to support the Commission for Continuing Education Provider Recognition (CCEPR). CCEPR was established by the 2014 ADA House of Delegates; CCEPR serves the public, the dental profession, and other healthcare providers by developing and implementing standards that promote excellence in continuing dental education to support professional competence and continuous improvement of patient care through its Continuing Education Recognition Program (CERP). Currently, 450 providers of continuing education are recognized by CCEPR.

The ADA lacks formal policy encouraging state dental boards to recognize the new CCEPR. Based on CDEL's research of current state laws, all states cite "ADA" or "CERP" as approved CE accrediting bodies, demonstrating state support. However, given that CCEPR is the Bylaws-approved name of the Commission that operates the CE recognition program, CDEL believes that as states update their statutes and regulations, language should be amended to reflect the official name of this agency.

It should be noted that the House of Delegates has similar policies supporting the Commission on Dental Accreditation (State Board Support for CODA as Responsible to Accredite Dental Education Programs (Trans.2012:463) and the Joint Commission on National Dental Examinations (Guidelines for Licensure (Trans.2012:464). Therefore, the Council recommends adoption of the following policy statement:

### **Resolution**

#### **State Dental Board Recognition of the Commission for Continuing Education Provider Recognition**

**11. Resolved,** that the American Dental Association urges all state dental boards to recognize the Commission for Continuing Dental Education Provider Recognition as a national agency responsible for the approval of continuing dental education providers, and to accept for licensure renewal purposes dentists' participation in continuing education courses offered by providers approved by the Commission for Continuing Education Provider Recognition through the Continuing Education Recognition Program (CERP).

- 1 **BOARD RECOMMENDATION: Vote Yes.**
- 2
- 3 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**
- 4 **BOARD DISCUSSION)**



Resolution No. 21 New

Report: N/A Date Submitted: August 2017

Submitted By: Joint Commission on National Dental Examinations

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

## AMENDMENT OF THE JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS STANDING RULES

**Background:** The ADA *Bylaws* state that the Joint Commission on National Dental Examinations (JCNDE) is to provide and conduct written examinations, exclusive of clinical demonstrations, for the purpose of assisting state boards in determining qualifications of dentists and dental hygienists who seek licensure to practice in any state or other jurisdiction of the United States. The JCNDE Standing Rules (*Rules*) contain important policies and procedures pertaining to JCNDE operations in support of this charge (e.g., roles of JCNDE committees). The current resolution involves proposed changes to the *Rules*, to help minimize conflicts of interest for members of the Joint Commission. More specifically, the revisions update the JCNDE's simultaneous service policy as follows (addition denoted by underlined text; there are no deletions):

A member of the Joint Commission on National Dental Examinations—including its standing and ad-hoc committees—may not simultaneously serve as a principal officer of another organization that has a role in appointing a member of the Joint Commission, including the American Dental Education Association, American Association of Dental Boards, American Dental Association, and the American Dental Hygienists' Association, nor may a member of the JCNDE simultaneously serve as a principal officer of a clinical testing agency. When such a conflict is revealed at the time of appointment, the appointing organization will be informed that the conflict exists and requested to select another individual for membership on the Joint Commission. When such a conflict arises during the term of a current commissioner, the commissioner will be asked to resolve the conflict by resigning from one of the conflicting appointments. In the event that the member resigns from the Joint Commission, the appointing organization will appoint another individual to complete the unfinished term, as specified by the American Dental Association (ADA) Bylaws and ADA Standing Rules for Councils and Commissions.

The Joint Commission recommends that the following resolution be adopted by the 2017 House of Delegates:

### Resolution

**21. Resolved,** that the *Standing Rules of the Joint Commission on National Dental Examinations* be revised as indicated in Appendix 1.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

**Appendix No. 1**

**Proposed Changes to the *Standing Rules* of the  
Joint Commission on National Dental Examinations**

**STANDING RULES**

October ~~2016~~ 2017

A publication of the Joint Commission on National Dental Examinations  
American Dental Association Building  
211 East Chicago Avenue  
Chicago, Illinois 60611-2637

The Joint Commission on National Dental Examinations operates within the limits imposed by four documents, listed here in order of precedence:

1. Bylaws of the American Dental Association
2. Bylaws of the Joint Commission on National Dental Examinations
3. Standing Rules for Councils and Commissions
4. Standing Rules of the Joint Commission on National Dental Examinations

Subject to constraints defined in these documents, the Joint Commission is free to establish its own policies and procedures for the conduct of its business. Such policies and procedures as have been adopted are compiled here.

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**ELECTION OF A PUBLIC MEMBER**

The Joint Commission is charged with electing a public member to serve as a Commissioner. Policies relating to election are as follows:

**Qualifications**

The public member shall not be a (n):

- a. Dentist
- b. Dental hygienist
- c. Dental student
- d. Dental hygiene student
- e. Faculty member of a dental school or dental hygiene program
- f. Employee of the Joint Commission
- g. Member of another health profession
- h. Professional who has represented the Joint Commission, dental profession, or dental hygiene profession for a fee in the last five years
- i. Spouse of any of the above

Not more than five percent of the public member's income shall be derived from the Joint Commission, dentistry, or dental hygiene.

It is suggested that the public member not be employed by a firm with a substantial interest in dentistry or dental hygiene, and that the public member be experienced in health issues, testing, credentialing, and/or advocating for the interests of the public. Individuals wishing to serve as the public member must disclose in their application materials any financial benefits they may be receiving from the Joint Commission's examination programs.

**Term**

The public member will serve a single four-year term.

**Identification of Nominees**

When a new public member is needed, nominations will be requested from appropriate agencies, such as state boards of dentistry and public service organizations. Each nominee will be requested to supply a summary of his or her qualifications. At least two qualified nominees will be identified prior to conducting an election.

**ROLES OF COMMITTEES**

The following four Joint Commission standing committees meet in conjunction with the annual meeting of the Joint Commission:

- a. Committee on Administration
- b. Committee on Dental Hygiene
- c. Committee on Examination Development
- d. Committee on Research and Development

Each committee is assigned a portion of the materials to be considered by the Joint Commission, and is responsible for formulating specific recommendations for Joint Commission action.

#### **Assignments**

Assignment of topics to specific committees is the responsibility of the Joint Commission Chair, but this responsibility may be delegated in part or in total to the Secretary. Listed and discussed below are examples of topics that are typically assigned to each committee.

A topic may be assigned to more than one committee. In addition, provided that it completes its assigned items, a committee may consider a topic assigned to a different committee.

#### **Committee on Administration**

This committee's responsibility relates to administration and operations for all National Board Examinations. Specific topics to be considered include:

- a. Examination security, including procedures for examination administration
- b. Examination regulations
- c. Joint Commission Bylaws and Standing Rules
- d. Finances, including an annual comparison of income and expenses

#### **Committee on Dental Hygiene**

This committee's responsibility relates primarily to the National Board Dental Hygiene Examination. Specific topics to be considered include:

- a. Examination content and specifications
- b. Test construction procedures, including nomination of test constructors and establishment of qualification requirements
- c. Information circulated to publicize or explain the testing program
- d. Portions of Examination Regulations that affect dental hygiene candidates
- e. Matters pertaining to finances, ADA and Joint Commission Bylaws, and Joint Commission Standing Rules that affect the National Board Dental Hygiene Examination

#### **Committee on Examination Development**

This committee's responsibility relates primarily to the National Board Dental Examinations. Specific topics to be considered include:

- a. Examination content and specifications
- b. Test construction procedures, including nomination of test constructors and establishment of qualification requirements
- c. Information circulated to publicize or explain the testing program
- d. Portions of Examination Regulations that affect dental candidates
- e. Matters pertaining to finances, ADA and Joint Commission Bylaws, and Joint Commission Standing Rules that affect the National Board Dental Examinations

#### **Committee on Research and Development**

This committee's responsibility relates to all National Board Examinations. Topics considered by this committee include any research and development activities related to the examinations.

## Committee Actions

A committee is expected to consider and report on all assigned topics. For most topics, committee actions are to be presented in the form of recommendations for Joint Commission action. The following are three exceptions:

- a. A decision about the manner in which a committee approaches its assignment. For example, a change in the personal data form for potential test constructors need not be reported.
- b. Identification of background materials requested to inform future deliberations may be reported as informational without an accompanying recommendation. If compilation of needed background materials requires substantial resources, however, a specific recommendation for action is appropriate.
- c. A decision not to act may be reported as an informational item. If the topic has generated substantial outside interest, however, a recommendation not to act is appropriate so as to allow the Joint Commission to affirm the committee's decision.

## Reporting

Background information prepared for committee deliberations is provided to all Commissioners and all committee members. Exceptions include, for example, the following: 1) information about a nominee to a test construction committee is provided only to the committee charged with screening nominees and 2) technical reports containing sensitive information (e.g., involving matters of test security) that are provided as background for the Committee on Research and Development.

Committee reports are provided to the Joint Commission electronically. Topics are discussed in the order they are listed on the Joint Commission's agenda, and background information related to each topic is identified. For each recommendation, the report should include a brief summary or rationale. An exception is made in that no rationale is expected for appointment of a test constructor. Instead, an alternate is named for each newly proposed test constructor.

Preparation and presentation of a committee's report is the responsibility of each committee's chair. Preparation may be delegated to a staff member assigned to the committee. If the committee chair is not a Commissioner or if, for some other reason, the committee chair is not present at the Joint Commission's annual meeting, responsibility for presenting the report may be delegated to a Commissioner who has served on that committee.

Committee reports are presented orally, stopping for action as needed. At each stop for action, the presenter represents the committee's views through his or her answers to questions. Only after ensuring that the committee's views have been represented adequately may the presenter impart any personal views.

## TEST CONSTRUCTOR SELECTION CRITERIA

The Joint Commission selects consultants to serve on its Test Construction Committees. A test constructor is appointed for a one-year term and may be reappointed to four consecutive terms. To be considered for appointment, candidates must possess appropriate qualifications and must submit a completed personal data form. Test constructor qualifications are published in the following document: *JCNDE Test Construction Committees and Member Selection Criteria*. Test constructors who have completed five years of service on a committee will not be considered for reappointment to the same committee.

**DETECTION OF IRREGULARITIES BASED ON FORENSIC ANALYSES**

The Joint Commission is responsible for protecting the integrity of National Board Examination results. One method involves forensic analyses of candidate performance to detect irregularities and aberrant response patterns. Candidate's results may be withheld or, as circumstances may warrant, reported when 1) aberrant response patterns or aberrant examination performance is detected through forensic analyses or 2) other evidence comes to light that supports the possibility that the candidate has given or received confidential information concerning examination content during or prior to the examination. Similarly, results may be withheld or reported if compelling information is available that suggests that the candidate was not testing for the intended purpose.

**LIMITED RIGHT OF APPEALS FOR EXAMINATION CANDIDATES**

The Joint Commission on National Dental Examinations (JCNDE) recognizes that strict application of the Examination Regulations for National Board Examinations may, because of unusual circumstances, impose an unusual burden on one or more candidates. In these situations, the JCNDE may consider an appeal.

Requests for an appeal pertaining to test results must be initiated within 30 days of receiving test results or, in the case of withheld results, within 30 days of receiving written notice that results are being withheld. In the event that the JCNDE has given notice that previously released results are to be invalidated or voided, the request for appeal must be submitted within 30 days of that notice. In this case, a request for appeal will stay the action to invalidate or void the results until such time as the appeal is decided or the time for submitting a request for appeal has expired. In the interim, no results will be reported. A request for an appeal must be submitted in writing and must include adequate supporting documentation. The request for an appeal must indicate the specific relief requested.

A request for an appeal will first be screened by the Chair, in consultation with the secretary. The Chair, at his/her sole discretion, may 1) grant the appeal, 2) deny the appeal, or 3) forward the appeal to the full Joint Commission for its consideration. If during the Joint Commission's deliberations credible information becomes available indicating an error was made in the decision to withhold results, the Chair in consultation with the secretary may end the deliberations and grant the appeal. At his or her discretion, the Chair may delegate the screening of appeals to another member of the Joint Commission.

In rendering a decision with respect to appeals—and particularly in situations where results have been withheld—the touchstone and foremost consideration is the validity of examination results, in alignment with the purpose of the examination. The Joint Commission strives to be fair and objective in its decision making process, as it remains true to its mission. When considering appeals, the JCNDE avoids favoritism and strives to ensure that all candidates are treated equally and fairly.

If the issue presented in an appeal is likely to recur, the JCNDE may consider a change in its Examination Regulations. The granting of an appeal will be considered a precedent only if a change in regulations is also adopted. The candidate will be notified of JCNDE action within 60 days after receipt of the written request for an appeal.

**CONFLICT OF INTEREST POLICY**

Policies and procedures used in National Board testing programs should provide for fairness and impartiality in the conduct of examinations and treatment of all candidates. Central to the fairness of the JCNDE's operations and the impartiality of its decision-making process is an organizational and personal duty to avoid real or perceived conflicts of interest. The potential for a conflict of interest arises when one's duty to make decisions in the public's interest is compromised by competing interests of a personal or private nature, including but not limited to pecuniary interests. Conflicts of interest can result in a partiality or bias which might interfere with objectivity in decision-making with respect to policy, or the evaluation of candidate appeals.

The Joint Commission strives to avoid conflicts of interest and the appearance of conflicts in decisions regarding examination policy or individual candidate appeals. Potential conflicts of interest for Commissioners include, but are not limited to:

- A professional or personal relationship or an affiliation with the individual or an organization that may create a conflict or the appearance of a conflict.
- Being an officer or administrator in a dental education program, testing agency, or board of dentistry with related decision-making influence regarding a candidate for National Board certification.

To safeguard the objectivity of the Joint Commission, it is the responsibility of any Commissioner to disclose any potential conflicts. Any member with a direct conflict of interest must recuse himself/herself from the decision making process regarding candidate appeals, or from discussions involving policies that impact the fairness and impartiality of the JCNDE's examination programs.

#### **SIMULTANEOUS SERVICE POLICY**

A member of the Joint Commission on National Dental Examinations—including its standing and ad-hoc committees—may not simultaneously serve as a principal officer of another organization that has a role in appointing a member of the Joint Commission, including the American Dental Education Association, American Association of Dental Boards, American Dental Association, and the American Dental Hygienists' Association, nor may a member of the JCNDE simultaneously serve as a principal officer of a clinical testing agency.<sup>1</sup> When such a conflict is revealed at the time of appointment, the appointing organization will be informed that the conflict exists and requested to select another individual for membership on the Joint Commission. When such a conflict arises during the term of a current commissioner, the commissioner will be asked to resolve the conflict by resigning from one of the conflicting appointments. In the event that the member resigns from the Joint Commission, the appointing organization will appoint another individual to complete the unfinished term, as specified by the American Dental Association (ADA) Bylaws and ADA Standing Rules for Councils and Commissions.

#### **ASSISTANCE TO OTHER AGENCIES**

One of the duties of the Joint Commission is to serve as a resource for the dental profession in the area of developing written examinations for licensure. This charge is fulfilled by providing assistance to state boards of dentistry and to national and international dental organizations. This policy statement describes limitations on availability.

##### **Availability**

Operation of the National Board Examinations is the Joint Commission's primary charge. Assistance is provided to state boards of dentistry or national dental organizations only upon request and only if the Joint Commission possesses the resources to fulfill the request.

If the Joint Commission is forced to select agencies to receive assistance, highest priority will be given to state boards of dentistry that accept National Board results. For dental organizations in the U.S. and its territories, assistance is limited to consultation and sharing general information about Joint Commission policies and procedures. Requests for testing services will be referred to the ADA Department of Testing Services or other organizations or individuals that provide such services.

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<sup>1</sup> This requirement applies to appointments made after 2016.



Resolution No. 30 NewReport: Board Report 7 Date Submitted: August 2017Submitted By: Board of TrusteesReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: \$85,500 Net Dues Impact: \$0.81Amount One-time                      Amount On-going \$85,500 FTE 1

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**REPORT 7 OF THE BOARD OF TRUSTEES TO THE HOUSE OF DELEGATES: PROPOSED  
NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING  
BOARDS**

**Background:** In late 2016, the Board of Trustees charged the Task Force on Specialty and Specialty Certifying Board Recognition to evaluate the process and criteria by which specialties and specialty certifying boards are recognized.

Task Force members were Dr. Charles H. Norman, III, chair, Dr. Roger Kiesling, General Dentist; Dr. Mark Zust, General Dentist; Dr. W. Roy Thompson, General Dentist; Dr. Billie Sue Kyger, General Dentist; Dr. Jill Price, CDEL Member, General Dentist; Dr. Prabu Raman, CDEL Member, General Dentist; Dr. David Halpern, CDEL Member, General Dentist; Dr. Susan Muller, American Academy of Oral and Maxillofacial Pathology; Dr. Sanjay Mallya, American Academy of Oral and Maxillofacial Radiology; Dr. Paul S. Casamassimo, American Academy of Pediatric Dentistry; Dr. Steven Daniel, American Academy of Periodontology; Dr. Robert S. Roda, American Association of Endodontists; Dr. Brett L. Ferguson, American Association of Oral and Maxillofacial Surgeons; Dr. Brent Larson, American Association of Orthodontists; Dr. Teresa A. Dolan, American Association of Public Health Dentistry; and Dr. Frank J. Tuminelli, American College of Prosthodontists.

The following principles guided the Board and its Task Force in developing the proposal to revise the specialty and specialty certifying board recognition process. The process must:

- be grounded in objective standards that protect the public, nurture the art and science of dentistry, and improve the quality of care;
- serve to reduce potential bias or conflicts of interest, or the perception of bias or conflicts of interest, in the decision-making process;
- include multiple steps, including provisions for appeal;
- be operationally similar to the Commission on Continuing Education Provider Recognition, Commission on Dental Accreditation and Joint Commission on National Dental Examinations;
- include representation from the ADA (general dentists and academics), each of the dental specialties recognized pursuant to the criteria contained in the [ADA Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists](#), and the

1 public. In addition, opportunities for input from other communities of interest should be  
2 incorporated into the process;

- 3 • build on the expertise that has been developed by the Council on Dental Education and Licensure  
4 and be grounded in the existing *ADA Requirements for Recognition of Dental Specialties and*  
5 *National Certifying Boards for Dental Specialists*. The *ADA Requirements for Recognition* were  
6 developed and are maintained by the Council of Dental Education and Licensure; they are  
7 approved by the ADA House of Delegates; and
- 8 • be financially prudent and not place an undue financial burden on the ADA or the dental specialty  
9 organizations. The proposed Commission's annual operating budget would be subject to review  
10 by the Board of Trustees and approval by the ADA House of Delegates.

11 To accomplish these principles, the establishment of a National Commission on Recognition of Dental  
12 Specialties and Certifying Boards is proposed. Establishing such a Commission reduces potential or  
13 perceived bias or conflict of interest in the decision making process for recognizing dental specialties and  
14 is intended to emulate the processes for the recognition of specialties and certifying boards in other  
15 health professions. Accordingly, a proposed *Bylaws* amendment and Rules of the National Commission  
16 on Recognition on Dental Specialties and Certifying Boards ("Rules") were drafted.

17 **Comments from Communities of Interest:** In May 2017, the Board directed that the draft *Bylaws* and  
18 Rules be circulated to the broad communities of interest for comment. The Task Force also hosted a  
19 forum for members of the Council on Dental Education and Licensure and leaders representing the  
20 recognized dental specialty organizations and certifying boards to discuss the proposal, including funding  
21 for the new Commission. In general, those commenting at the forum were in favor of the concept,  
22 although some organizations and individuals expressed concern about the composition of and financial  
23 support for the new Commission. All testimony and written comments were carefully considered. The  
24 Comments are posted for members of the House of Delegates in [ADA Connect](#).

25 **Governance:** To establish the new Commission, amendments to the ADA *Bylaws* are necessary. The  
26 proposed amendments are presented in Appendix 1 and address the following points:

- 27 • The composition of the new commission will include one (1) representative of each recognized dental  
28 specialty, an equal number of general dentists, and a consumer representing the public. Because the  
29 primary duty of the new Commission will be to grant or deny recognition to dental specialties, an  
30 equal number of general dentists and dental specialists is important to ensure objectivity and avoid  
31 perceived conflict of interest and bias. Each of the recognized dental specialty organizations will  
32 appoint its representative; the ADA Board of Trustees will appoint the general dentists. The  
33 Commission itself will appoint the consumer/public member. The terms of the inaugural Commission  
34 members will be staggered as noted in Appendix 2.
- 35 • The National Commission on Recognition of Dental Specialties and Certifying Boards will have the  
36 power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the  
37 members present and voting.
- 38 • The duties of the new agency are specific to the recognition of dental specialties and certifying boards  
39 and in accord with the *ADA Requirements for Recognition of Dental Specialties and National*  
40 *Certifying Boards for Dental Specialists*. Provisions for appealing an adverse action and submission  
41 of an annual report to the ADA House of Delegates and annual budget to the ADA Board of Trustees  
42 are also delineated.
- 43 • The *ADA Requirements for Recognition of Dental Specialties and National Certifying Boards for*  
44 *Dental Specialists* will remain the property of the ADA House of Delegates. Currently, the Council on  
45 Dental Education and Licensure has the responsibility of reviewing and proposing revisions to the  
46 *ADA Requirements for Recognition* to the House of Delegates. The new Commission would apply the  
47 House-approved *ADA Requirements for Recognition* when considering a request to grant a new

specialty. The Commission would have the final authority to grant or deny a request for recognition based on those *ADA Requirements for Recognition*; the House of Delegates would no longer have this responsibility.

Rules of the National Commission on Recognition of Dental Specialties and Certifying Boards will also be necessary. The proposed Rules will be provided to the National Commission on the Recognition of Dental Specialties and Certifying Boards for adoption, once the Commission has been established. The draft Rules establish the standing and special committees of the Commission, the roles and duties of the Commission officers and director, the appeal board composition and process as well as the specialty recognition program (Appendix 3).

**Budget and Finances:** The financial model for the new Commission calls for 50% of the Commission's direct and indirect costs to be covered by annual grants from the organizations representing the recognized specialties; the other 50% will be supported by the ADA. This principle is similar to financial models of other ADA-sponsored Commissions; Commissions are not funded solely by the ADA. All commissions have revenue sources, e.g., the Commission on Dental Accreditation assesses fees to dental education programs, the Joint Commission on National Dental Examinations assesses testing fees to exam candidates, and the Commission for Recognition of Continuing Education Providers assesses fees to continuing education providers. The total operating budget for 2018 is projected to be \$171,000 with the ADA contribution of \$85,500. The proposed Commission would be staffed by 1.0 full-time equivalent position.

Recognizing that the number of specialists in each of the nine dental specialties varies considerably, the Task Force and Board support a model calling for a minimum (base) fee to be established for all specialties with the remainder allocated among the specialties based on the number of specialists within the specialty.

**Conclusion:** The Board agrees with the Specialty Recognition Task Force that the establishment of the National Commission on Recognition of Dental Specialties and Certifying Boards will enhance the recognition program that sets requirements designed to help dentists excel throughout their careers and the public ascertain the importance of educated and board certified dental specialists. Acceptance by governmental agencies, including state dental boards and federal agencies that regulate and/or monitor dental specialty practice and advertising is likely.

Maintaining the status quo, i.e., relying on the ADA House of Delegates to determine the recognition of dental specialties, organizations and certifying boards places the Association at financial and reputational risk for perceived bias and conflict of interest in state regulatory arenas. While the process will be grounded in the existing *ADA Requirements for the Recognition of Dental Specialties and National Certifying Boards for Dental Specialists* as approved by the ADA House of Delegates, the decision to grant or deny recognition to a dental specialty must rest with a new Commission.

Thus, the Board recommends to the House of Delegates adoption of the following resolution:

### Resolution

**30. Resolved,** that ADA *Bylaws* be amended as shown in Appendix 1, establishing the ADA National Commission on Recognition of Dental Specialties and Certifying Boards.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS.**

**APPENDIX 1****PROPOSED BYLAWS**

Proposed additions are underlined and proposed deletions are ~~stricken~~

**CHAPTER XV • COMMISSIONS**

*Section 10.* NAME: The commissions of this Association shall be:

Commission on Dental Accreditation

Joint Commission on National Dental Examinations

Commission for Continuing Education Provider Recognition

National Commission on Recognition of Dental Specialties and Certifying Boards

*Section 20.* MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. COMMISSION ON DENTAL ACCREDITATION. The number of members and the method of selection of the members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation* and these *Bylaws*. Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:

(1) Four (4) members shall be selected from nominations open to all trustee districts from the active, life or retired members of this Association, no one of whom shall be a faculty member working for a school of dentistry more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency. These members shall be nominated by the Board of Trustees and elected by the House of Delegates.

(2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be members of any state board of dental examiners or jurisdictional dental licensing agency.

B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS. The Joint Commission on National Dental Examinations shall be composed of fifteen (15) members selected as follows:

a. Three (3) members shall be nominated by the Board of Trustees from the active, life or retired members of this Association and additional nominations may be made by the House of Delegates but no one of such nominees shall be a member of a faculty of a school of dentistry or a member of a state board of dental examiners or jurisdictional dental licensing agency. The House of Delegates shall elect the three (3) members from those nominated by the Board of Trustees and the House of Delegates.

b. Six (6) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a dental school.

c. Three (3) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in the dental schools accredited by this Association and shall not be members of any state board of dental examiners or jurisdictional dental licensing agency.

d. One (1) member who is a dental hygienist shall be selected by the American Dental Hygienists' Association.

e. One (1) member who is a public representative shall be selected by the Joint Commission on National Dental Examinations.

f. One (1) member who is a dental student shall be selected annually by the American Student Dental Association.

1 C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION. The Commission for  
2 Continuing Education Provider Recognition shall be composed of members selected as follows:  
3 a. Four (4) members, at least two of whom shall be general dentists, shall be selected from  
4 nominations open to all trustee districts from the active, life or retired members of this Association.  
5 These members shall be nominated by the Board of Trustees and elected by the House of  
6 Delegates.  
7 b. One (1) member who is an active, life or retired member of this Association (if eligible) shall be  
8 selected by the American Association of Dental Boards from the active membership of that body.  
9 c. One (1) member who is an active, life or retired member of this Association (if eligible) shall be  
10 selected by the American Dental Education Association from its active membership.  
11 d. One (1) member who is an active, life or retired member of this Association (if eligible) shall be  
12 selected by the American Society of Constituent Dental Executives from its active membership.  
13 e. One (1) member who is an active, life or retired member of this Association shall be selected by  
14 each sponsoring organization of the ADA recognized dental specialties.\*  
15

16 D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING  
17 BOARDS. The National Commission on Recognition of Dental Specialties and Certifying Boards shall  
18 be composed of members selected as follows:  
19 a. One (1) specialist from each dental specialty recognized by this Association or this Commission  
20 who is an active, life or retired member of this Association appointed by the sponsoring organization  
21 for that specialty.  
22 b. A number of general dentists equal to the number of members appointed pursuant to subsection  
23 D.a. of this Section who are active, life or retired members of this Association appointed by the  
24 Board of Trustees.  
25 c. A member of the general public appointed by the Commission.\*\*

26 Section 30. REMOVAL FOR CAUSE: The Board of Trustees may remove a commission member for  
27 cause in accordance with procedures established by the Board of Trustees, which procedures shall  
28 provide for notice of the charges, including allegations of the conduct purported to constitute each  
29 violation, and a decision in writing which shall specify the findings of fact which substantiate any and all of  
30 the charges, and that prior to issuance of the decision of the Board of Trustees, no commission member  
31 shall be excused from attending any meeting of a commission unless there is an opportunity to be heard  
32 or compelling reasons exist which are specified in writing by the Board of Trustees.

33 Section 40. ELIGIBILITY:

34 A. All members of commissions who are dentists must be active, life or retired members in good standing  
35 of this Association except as otherwise provided in these *Bylaws*.

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\* The Commission for Continuing Education Provider Recognition initially shall be composed of the incumbent members of the CERP Committee of the Council on Dental Education and Licensure that was retired by the 2014 House of Delegates and any new appointees to the CERP Committee of the Council on Dental Education and Licensure selected by the American Association of Dental Boards, American Dental Education Association, American Society of Constituent Dental Executives and/or a sponsoring organization of any ADA recognized dental specialty. To the extent that there exists an unfilled position on the Commission for Continuing Education Provider Recognition for an ADA appointee when the Commission is created, that position shall be treated as a vacancy and filled in accordance with the procedure set forth in CHAPTER XV. COMMISSIONS, Section 70 of these ADA *Bylaws*. These inaugural Commission members shall serve for terms that are equal in time to their unfinished terms on the retired CERP Committee. This footnote shall expire at adjournment sine die of the 2018 House of Delegates.

\*\* To achieve the desired staggering of member terms for continuity, the initial terms of the members of the National Commission on Recognition of Dental Specialties and Certifying Boards shall be as set forth in Appendix 2 that accompanied Resolution XXH-2017 that established this Commission. This footnote shall expire without further action at the adjournment sine die of the 2021 House of Delegates.

- 1 B. A member of the Joint Commission on National Dental Examinations, who was selected by the  
2 American Association of Dental Boards and who is no longer an active member of that Association,  
3 may continue as a member of the Commission for the balance of that member's term.
- 4 C. When a member of the Joint Commission on National Dental Examinations, who was selected by the  
5 American Dental Education Association, shall cease to be a member of the faculty of a member school  
6 of that Association, such membership on the Commission shall terminate, and the President of the  
7 American Dental Association shall declare the position vacant.
- 8 D. Any organizations that select members to serve on the Commission for Continuing Education Provider  
9 Recognition and offer continuing dental education courses shall be continuing education providers  
10 currently approved by that Commission.
- 11 E. No member of a commission may serve concurrently as a member of a council or another commission.
- 12 F. The Commissions of this Association shall elect their own chairs who shall be active, life or retired  
13 members of this Association.

14 **Section 50. CONSULTANTS, ADVISERS AND STAFF:**

- 15 A. CONSULTANTS AND ADVISERS. Each commission shall have the authority to nominate consultants  
16 and advisers in conformity with rules and regulations established by the Board of Trustees except as  
17 otherwise provided in these *Bylaws*. The Joint Commission on National Dental Examinations also shall  
18 select consultants to serve on the Commission's test construction committees. The Commission on  
19 Dental Accreditation shall have the power to appoint consultants to assist in developing requirements  
20 and guidelines for the conducting of accreditation evaluations, including site visitations, of predoctoral,  
21 advanced dental educational, and dental auxiliary educational programs. The Commission for  
22 Continuing Education Provider Recognition shall have the power to appoint consultants to assist in  
23 developing standards and procedures, conducting recognition reviews and conducting appeals. The  
24 National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power  
25 to appoint consultants to assist in developing procedures, conducting recognition reviews and  
26 conducting appeals.
- 27 B. STAFF. The Executive Director shall employ the staff of Commissions, in the event they are  
28 employees, and shall select the titles for commission staff positions.

29 **Section 60. TERM OF OFFICE:** The term of office of members of the commissions shall be four (4) years  
30 except that (a) the term of office of members of the Commission on Dental Accreditation selected  
31 pursuant to the *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and  
32 (b) the term of office of the dental student selected by the American Student Dental Association for  
33 membership on the Joint Commission on National Dental Examinations shall be one (1) year.  
34 The tenure of a member of a commission shall be limited to one (1) term of four (4) years except that (a)  
35 the consecutive tenure of members of the Commission on Dental Accreditation selected pursuant to the  
36 *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and (b) tenure in  
37 office of the dental student selected by the American Student Dental Association for membership on the  
38 Joint Commission on National Dental Examinations shall be one (1) term. A member shall not be eligible  
39 for appointment to another commission or council for a period of two (2) years after completing a previous  
40 commission appointment.

41 **Section 70. VACANCY:** In the event of a vacancy in the office of a commissioner, the following procedure  
42 shall be followed:

- 43 A. In the event the member of a commission, whose office is vacant, is or was a member of and was  
44 appointed or elected by this Association, the President of this Association shall appoint a member of  
45 this Association possessing the same qualifications as established by these *Bylaws* for the previous  
46 member, to fill such vacancy until a successor is elected by the next House of Delegates of this  
47 Association for the remainder of the unexpired term.
- 48 B. In the event the member of a commission whose office is vacant was selected by an organization other

1 than this Association, such other organization shall appoint a successor possessing the same  
2 qualifications as those possessed by the previous member of the commission.

3 C. In the event such vacancy involves the chair of the commission, the President of this Association shall  
4 have the power to appoint an *ad interim* chair, except as otherwise provided in these *Bylaws*.

5 D. If the term of the vacated commission position has less than fifty percent (50%) of a full four-year term  
6 remaining at the time the successor member is appointed or elected, the successor member shall be  
7 eligible for election to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated  
8 term remains to be served at the time of the appointment or election, the successor member shall not  
9 be eligible for another term.

10 *Section 80. MEETINGS OF COMMISSIONS:* Each commission shall hold at least one regular meeting  
11 annually, provided that funds are available in the budget for that purpose and unless otherwise directed  
12 by the Board of Trustees. Meetings may be held at the Headquarters Building, the Washington Office or  
13 from multiple remote locations through the use of a conference telephone or other communications  
14 equipment by means of which all members can communicate with each other. Such meetings shall be  
15 conducted in accordance with rules and procedures established by the Board of Trustees.

16 *Section 90. QUORUM:* A majority of the members of any commission shall constitute a quorum.

17 *Section 100. PRIVILEGE OF THE FLOOR:* Chairs and members of the commissions who are not  
18 members of the House of Delegates shall have the right to participate in the debate on their respective  
19 reports but shall not have the right to vote.

20 *Section 110. ANNUAL REPORT AND BUDGET:*

21 A. ANNUAL REPORT. Each commission shall submit, through the Executive Director, an annual report to  
22 the House of Delegates and a copy thereof to the Board of Trustees.

23  
24 B. PROPOSED BUDGET. Each commission shall submit to the Board of Trustees, through the Executive  
25 Director, a proposed itemized budget for the ensuing fiscal year.

26  
27 *Section 120. POWER TO ADOPT RULES:* Any commission of this Association shall have the power to  
28 adopt rules for such commission and amendments thereto, provided such rules and amendments thereto  
29 do not conflict with or limit the Constitution and Bylaws of this Association. Rules and amendments  
30 thereto, adopted by the Commission on Dental Accreditation, Joint Commission on National Dental  
31 Examinations and Commission for Continuing Education Provider Recognition ~~any commission of this~~  
32 ~~Association~~, shall not be effective until submitted in writing to and approved by majority vote of the House  
33 of Delegates of this Association, except the Joint Commission on National Dental Examinations shall  
34 have such bylaws and amendments thereto as the House of Delegates of this Association may adopt by  
35 majority vote for the conduct of the purposes and management of the Joint Commission on National  
36 Dental Examinations. The Commission on Dental Accreditation shall have the authority to make  
37 corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial  
38 corrections to the Rules of the Commission on Dental Accreditation which do not alter its context or  
39 meaning without the need to submit such editorial corrections to the House of Delegates. Such  
40 corrections shall be made only by a unanimous vote of the Commission on Dental Accreditation members  
41 present and voting. The National Commission on Recognition of Dental Specialties and Certifying Boards  
42 shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of  
43 the members present and voting.

44  
45 *Section 130. DUTIES:*

46 A. COMMISSION ON DENTAL ACCREDITATION. The duties of the Commission on Dental Accreditation  
47 shall be to:

48 a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental  
49 and allied dental educational programs.

50 b. Accredite dental, advanced dental and allied dental educational programs.

- c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a separate and distinct body of the Commission whose membership shall be totally different from that of the accrediting body of the Commission.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's articles of incorporation and rules and amendments thereto to this Association's House of Delegates for approval by majority vote.

B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS. The duties of the Joint Commission on National Dental Examinations shall be to:

- a. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dentists who seek license to practice in any state or other jurisdiction of the United States. Dental licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- b. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dental hygienists who seek license to practice in any state or other jurisdiction of the United States. Dental hygiene licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- c. Make rules and regulations for the conduct of examinations and the certification of successful candidates.
- d. Serve as a resource of the dental profession in the development of written examinations.

C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION. The duties of the Commission for Continuing Education Provider Recognition shall be to:

- a. Formulate and adopt requirements, guidelines and procedures for the recognition of continuing dental education providers.
- b. Approve providers of continuing dental education programs and activities.
- c. Provide a means for continuing dental education providers to appeal adverse recognition decisions.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's rules and amendments thereto to this Association's House of Delegates for approval by majority vote either through or in cooperation with the Council on Dental Education and Licensure.

D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS. The duties of the Commission on Recognition of Dental Specialties and Certifying Boards shall be to:

- a. Formulate and adopt procedures for the recognition of specialties and specialty certifying boards in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- b. Grant or deny specialty recognition to specialty organizations and specialty certifying boards seeking recognition in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- c. Provide a means for specialty organizations and specialty certifying boards to appeal an adverse recognition decision.
- d. Submit an annual report to the House of Delegates of this Association and interim reports on request.
- e. Submit the Commission's annual budget to the Board of Trustees of the Association.



**APPENDIX 2****Staggered Terms for Members of the Inaugural National Commission on Recognition of Dental Specialties and Certifying Boards**

The National Commission on Recognition of Dental Specialties and Certifying Boards shall be composed of members selected as follows:

- a. One (1) specialist from each dental specialty recognized by this Association or this Commission who is an active, life or retired member of this Association appointed by the sponsoring organization for that specialty.
- b. A number of general dentists equal to the number of dental specialty members who are active, life or retired members of this Association appointed by the Board of Trustees.
- c. A member of the general public appointed by the Commission.

The term of office of members of the National Commission on Recognition of Dental Specialties and Certifying Boards shall be four (4) years, except that the terms of office of the inaugural dental specialist and general dentist members of the Commission shall be staggered, based on a lottery conducted by the Commission, as follows:

<b>Term Length (years)</b>	<b># of Dental Specialists</b>	<b># of General Dentists</b>
1	2	2
2	2	2
3	3	2
4	2	3

Those members of the inaugural Commission who are assigned one-year terms shall be eligible for a new, consecutive four-year term.

**APPENDIX 3****PROPOSED RULES OF THE NATIONAL COMMISSION ON RECOGNITION OF DENTAL  
SPECIALTIES AND CERTIFYING BOARDS****Article I. COMMISSION****Section 1. POWERS:**

- A. The Commission shall be vested with full power to conduct all business of the Commission subject to the laws of the State of Illinois, the *Constitution and Bylaws* of the American Dental Association and these *Rules*.

**Section 2. COMMITTEES:**

- A. **STANDING COMMITTEES:** The Commission shall establish two (2) standing Review Committees whose membership will be both an equal number of general practitioners and dental specialists. The Review Committees shall be the Review Committee on Specialty Recognition and the Review Committee on Specialty Certifying Board Recognition.
- B. **SPECIAL COMMITTEES:** In addition to the duties of the Commission, as set forth in Chapter XV. Sections 50A and 130 of the *ADA Bylaws*, the Commission may appoint special committees of the Commission for the purpose of delegating and performing duties not otherwise assigned by these *Rules*.

**Section 3. MEETINGS:**

- A. **SPECIAL MEETINGS:** Special meetings of the Commission may be called at any time by the Chair of the Commission. The Chair shall call such meetings on his/her own initiative or at the request of a majority of the voting members of the Commission provided at least ten (10) days' notice is given to each member of the Commission in advance of the meeting. No business shall be considered except that provided in the call to the meeting unless approved by unanimous consent of the Commission present and voting.

**Article II. OFFICERS AND STAFF**

**Section 1. OFFICERS:** The officers of the Commission shall be a Chair and Vice-Chair and such other officers as the Commission may authorize. The Officers shall be elected by the members of the Commission.

**Section 2. DUTIES:** The duties of the officers are as follows:

- A. **CHAIR:** The Chair shall preside at all meetings of the Commission.
- B. **VICE-CHAIR:** If the Chair is unable to attend any given meeting of the Commission, the Vice-Chair shall preside at the meeting. If the Vice-chair is unable to preside the other members of the Commission, present and voting, shall elect by majority vote an acting chair for the purpose of presiding at that meeting only.

**Section 3. DIRECTOR:** The Director of the Commission shall keep the minutes of the meetings of the Commission, prepare an agenda for each meeting, see that all notices are duly given in accordance with the provisions of these *Rules* or as required by law, be the custodian of the Commission's records, and in general shall perform all duties incident to the office of Director.

## Article III. APPEALS

Section 1. APPEALS: The appellate body of the Commission shall be the Appeal Board which shall have the authority to appoint hearing panels to hear and decide appeals filed by sponsoring organizations or certifying boards from decisions denying or revoking recognition rendered by the Commission. Such appeals shall be heard pursuant to procedures established by the Appeal Board.

Section 2. COMPOSITION: The Appeal Board shall consists of one (1) representative selected by each of the organizations represented on the Commission, including the public, who has previously served on the Commission.\* When an appeal is initiated, the Commission's Director selects three (3) individuals one of whom shall be a general dentist from the available Appeal Board Members to serve as the hearing panel, adjudicate the appeal and issue a decision which shall be final.

Section 3. TERM OF OFFICE: The term of office of members on the Appeal Board shall be one four (4) year term.

Section 4. MEETINGS: The Appeal Board shall meet at the call of the Director of the Commission, provided at least ten (10) days' notice is given to each member of the Appeal Board in advance of the meeting. Such meetings shall be called by the Director only when an appeal to the appellate body has been duly filed by a sponsoring organization or certifying board.

Section 5. QUORUM: A majority of the voting members of the Appeal Board shall constitute a quorum.

## Section 6. VACANCIES:

- A. In the event of a vacancy in the membership of the Appeal Board, the Chair of the Commission shall appoint a member of the same organization to fill such vacancy until a successor is selected by the respective representative organization.
- B. If the term of the vacated position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is appointed, the successor member shall be eligible for a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment, the successor member shall not be eligible for another term.

## Article IV. SPECIALTY RECOGNITION PROGRAM

Section 1. RECOGNITION CRITERIA: The duty of maintaining the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties* is vested with the ADA Council on Dental Education and Licensure and the ADA House of Delegates.

Section 2. RECOGNITION PROCEDURES: The Commission, shall establish and publish specific application and evaluation procedures for the recognition of dental specialties and national certifying boards for dental specialists.

Section 3. PROCEDURES FOR EVALUATING DENTAL SPECIALTIES AND NATIONAL CERTIFYING BOARDS FOR DENTAL SPECIALISTS FOR RECOGNITION: Organizations applying for recognition shall be evaluated for compliance with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties* by the Commission on the basis of the information and data provided in the application and comments from the communities of interest.

\*The inaugural Appeal Board will be composed of one (1) general dentist appointed by the ADA Board of Trustees, one (1) representative appointed by each of the dental specialty organizations represented on the Commission and one public representative appointed by the Commission. This footnote shall expire at adjournment sine die of the 2021 House of Delegates.

Resolution No. 39 New

Report: N/A Date Submitted: September 2017

Submitted By: Council on Scientific Affairs

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

## AMENDMENT OF THE ADA POLICY ON EVIDENCE-BASED DENTISTRY

**Background:** The Council on Scientific Affairs (CSA) reviewed the Policy Statement on Evidence-Based Dentistry (*Trans.*2001:462; 2012:469) and recommends amending this policy as presented in Resolution 00. This ADA policy presents the Association's definition for the term "evidence-based dentistry" (EBD) and provides an overview of EBD as a core principle for the Association and the dental profession. Evidence-based research and principles also feature prominently in the [ADA Research Agenda, 2017-2018](#) and the [ADA Strategic Plan 2015-2019](#), with the latter emphasizing that being "science/evidence-based" is a core value for the Association.

The Council's recommendations for updating the 2012 policy statement are summarized below:

- Updating the policy's description of EBD as a "process for decision-making... that relies on systematic approaches to summarize the large volume of literature to assist patients and health care providers to translate evidence into clinical practice" (additions underscored).
- Clarifying that the ADA Center for EBD develops and disseminates evidence-based clinical practice guidelines (which were formerly referred to as "clinical recommendations").
- Removing the section on "Practicing Evidence-Based Dentistry" and other content that was considered inessential or adequately addressed elsewhere in the draft amendment to the EBD policy.

The Council strongly supports EBD as a primary concept for ADA members and clinical decision-making, and CSA continues to work in close collaboration with the ADA Center for EBD to develop evidence-based clinical practice guidelines and support evidence-based practice. The Council recommends that the House review and approve the updated policy statement on evidence-based dentistry, as presented.

## Resolution

**39. Resolved**, that the ADA Policy on Evidence-Based Dentistry (*Trans.*2001:462; 2012:469) be amended as follows (additions underscored; deletions ~~stricken~~).

## Policy Statement on Evidence Based Dentistry

**Introduction:** ~~Dentistry has evolved as a profession that has uniquely and successfully combined science with the art of healing. Building on this foundation, the dental profession has maintained a strong commitment to sound science, public service and an~~

1 ~~ethical obligation to protect the patient's health. Over the last few decades~~ In the early  
2 ~~1990s, a process for reviewing scientific evidence~~ decision-making emerged in medicine  
3 and other health fields that relies on systematic approaches to summarize the large  
4 volume of literature ~~that health care providers need to assimilate into clinical practice. to~~  
5 ~~assist patients and health care providers with translating evidence into clinical practice.~~  
6 David Sackett and colleagues defined evidence-based medicine as "the conscientious,  
7 explicit and judicious use of current best evidence in making decisions about the care of  
8 individual patients. The practice of evidence-based medicine means integrating individual  
9 clinical expertise with the best available external clinical evidence from systematic  
10 research."<sup>1</sup>

11 Simply stated, evidence-based medicine is "the integration of the best research evidence  
12 with clinical expertise and patient values."<sup>2</sup> (Sackett et al. Evidence-Based Medicine. New  
13 York: Churchill Livingstone; 2000). With rapidly evolving science and technology,  
14 dentistry has also faced the complex demands of integrating and effectively implementing  
15 changes in treatment modalities that can arise from new scientific evidence.

16 To address these challenges, the dental profession has endorsed an evidence-based  
17 approach to clinical practice and oral health care, which is commonly known as evidence-  
18 based dentistry (EBD). The American Dental Association (ADA) continues to pursue a  
19 leadership role in the field of EBD to help clinicians interpret and apply the best available  
20 evidence in everyday practice.

21 **Definition of Evidence-Based Dentistry:** The ADA defines the term "*evidence-based*  
22 *dentistry*" as follows: "Evidence-based dentistry is" an approach to oral health care that  
23 requires the judicious integration of systematic assessments of clinically relevant  
24 scientific evidence, relating to the patient's oral and medical condition and history, with  
25 the dentist's clinical expertise and the patient's treatment needs and preferences."<sup>3,4</sup>  
26 (*Trans*.2001:462)

27 In adopting this definition for EBD, the ADA also recognizes that treatment  
28 recommendations should be determined for each patient by his or her dentist, and that  
29 patient preferences should be considered in all decisions. Dentist experience and other  
30 circumstances, such as patients' characteristics, additionally should also be considered in  
31 treatment planning and determining treatment needs. EBD does not provide a "cookbook"  
32 that dentists must follow, nor does it establish a standard of care. The EBD process must  
33 not be used to interfere in the dentist/patient relationship, nor is it to be used as a cost-  
34 containment tool by third-party payers.

35 **ADA Center for Evidence-Based Dentistry:** The Association supports the concept of  
36 evidence-based dentistry developed through systematic examination of the best available  
37 scientific data. In 2007, the Association established the ADA Center for Evidence-Based  
38 Dentistry to provide leadership in implementing ~~ADA programs and initiatives~~ related to  
39 EBD.

40 To realize its vision of disseminating the best available evidence and helping practitioners  
41 implement EBD, the ADA Center for Evidence-Based Dentistry works in collaboration  
42 with the Council on Scientific Affairs to convene expert panels that review the collective  
43 research evidence and develop evidence-based clinical practice  
44 guidelines ~~recommendations~~ on key clinical issues. The Association will continue  
45 developing evidence-based clinical ~~recommendations~~ practice guidelines and working  
46 with collaborative groups to conduct systematic reviews, critically appraising the reviews  
47 and policies developed by other organizations, and developing mechanisms for  
48 translating and disseminating information to the membership.

**Practicing Evidence-Based Dentistry:** The goal of EBD is to help practitioners provide the best care for their patients. This process uses clinical and methodological experts to synthesize all of the evidence relative to a defined “question of interest,” and is published as a systematic review. The evidence is integrated with clinical experience and other factors relevant to specific patient needs and preferences. This characteristic of the EBD process is clearly explained in the classical definition of evidence-based medicine as “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research” (Sackett DL, Rosenberg WMC, Gray JAM, Haynes RB, Richardson WS, 1996 Jan 13. Evidence based medicine: what it is and what it isn't BMJ 312:71-2). Simply stated, evidence-based medicine is “the integration of the best research evidence with clinical expertise and patient values” (Sackett et al. Evidence-Based Medicine. New York: Churchill Livingstone; 2000). Though this process was originally developed in medicine, its principles apply to all health care fields, including dentistry, and they are followed rigorously by the ADA Center for EBD.

**EBD Resources:** Detailed information on EBD, evidence-based clinical recommendations, practice guidelines, systematic reviews, EBD terminology, courses/workshops, critical summaries of systematic reviews and other resources are available on the website of the ADA Center for Evidence-Based Dentistry (<http://ebd.ada.org/>). Concise, user-friendly EBD resources from the ADA Center for EBD and other organizations are useful informational resources that can assist practitioners with integrating the best available evidence with clinical expertise and the needs and preferences of the individual dental patient.

## References

1. Sackett DL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. BMJ 1996 Jan 13;312(7023):71-2.
2. Sackett DL, Straus SE, Richardson WS, et al. (eds.). *Evidence-Based Medicine: How to Practice and Teach EBM* (2<sup>nd</sup> ed.). Edinburgh: Churchill Livingstone, 2000.
3. American Dental Association. *Transactions* 2001; 462.
4. Frantsve-Hawley J, Meyer DM. The evidence-based dentistry champions: a grassroots approach to the implementation of EBD. J Evid Based Dent Pract 2008; 8:64-69.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

Resolution No. 40 New

Report: N/A Date Submitted: September 2017

Submitted By: Council on Scientific Affairs

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

### 1 RESCISSION OF THE ADA POLICY ON ACUPUNCTURE

2

3 **Background:** At its July 2017 meeting, the Council on Scientific Affairs (CSA) reviewed the 1999 ADA

4 Policy on Acupuncture (*Trans.*1973:688; 1999:975) and recommends that the 2017 House of Delegates

5 rescind this policy. The Council concluded that the 1999 ADA policy is redundant with--and already

6 covered by--the proposed, updated ADA Policy on Complementary and Alternative Medicine (CAM),

7 which is also being forwarded to the 2017 House of Delegates for review and approval.

8 In its review of the 1999 Policy on Acupuncture, the Council agreed that establishing a broader, updated

9 Association policy on CAM would express the ADA's current stance with regard to acupuncture therapy,

10 which is considered a common CAM service by the [National Center for Complementary and Integrative](#)

11 [Health](#) at the National Institutes of Health. The Council recommends that the House review and approve

12 the rescission of the policy statement on acupuncture.

### 13 Resolution

14 **40. Resolved,** that the ADA Policy on Acupuncture (*Trans.*1973:688; 1999:975) be rescinded.

15 **BOARD RECOMMENDATION: Vote Yes.**

16 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

**WORKSHEET ADDENDUM  
COUNCIL ON SCIENTIFIC AFFAIRS  
ADA POLICY TO BE RESCINDED**

1 **Acupuncture** (*Trans.* 1973:688; 1999:975)

2 **Resolved**, that a major and coordinated research effort is needed to provide a valid scientific basis for the  
3 use of acupuncture in dentistry.



Resolution No. 41 New

Report: N/A Date Submitted: September 2017

Submitted By: Council on Scientific Affairs

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

# AMENDMENT OF THE ADA POLICY ON UNCONVENTIONAL DENTISTRY

**Background:** The Council on Scientific Affairs (CSA) reviewed the reviewed the ADA Policy Statement on Unconventional Dentistry (*Trans.*2001:460) and recommends amending this policy as presented in Resolution 41.

The Council's recommendations for amending this 2001 ADA policy are summarized below:

- Revising the policy's title and content to focus more broadly on "complementary and alternative medicine" (CAM): The Council recommends updating this policy to focus more broadly on CAM interventions, which would cover a wider range of CAM interventions (e.g., probiotics, herbal/dietary supplements, homeopathic interventions/products, as well as acupuncture or acupressure therapy).
- Emphasizing that standards of evidence of treatment effectiveness apply to all treatments: The Council recommended adding information from a 2005 NIH/IOM report that appropriately calls for the "same principles and standards of evidence of treatment effectiveness [to] apply to all treatments, whether currently labeled as conventional medicine or CAM."
- Provide context that all treatments need reliable scientific evidence, and CAM interventions do not belong to any distinct or "special" category of health care interventions: The Council's draft amendment of the 2001 policy emphasizes that:
  - a. CAM interventions should be "tested using similar research standards and rigor as is required for any type of health care intervention."
  - b. The amended policy concludes that "[w]ithin this context, the notion of CAM as a specific subset of interventions that belong to a specific discipline can be considered questionable."

Expanding this ADA policy to address CAM interventions would provide for a broader ADA policy stance that would extend to: (a) provider-administered forms of CAM, which would include the various types of acupuncture treatment (e.g., electro-acupuncture, acupressure, laser acupuncture); and (b) self-administered CAM [e.g., herbal therapy, use of homeopathic medicines, relaxation techniques, meditation]. The Council recommends that the House review and approve the updated policy statement addressing Complementary and Alternative Medicine, as presented.

## Resolution

**41. Resolved**, that the ADA Policy on Unconventional Dentistry (*Trans*.2001:460) be amended as follows (additions underscored; deletions ~~stricken~~).

### **Policy Statement on Complementary and Alternative Medicine ~~Unconventional~~ Dentistry**

~~Unconventional diagnostic and treatment approaches to oral health care have attracted interest among some patients and practitioners in recent years. These diagnostic and treatment approaches have been variously described as “alternative,” “holistic,” “integrative,” “biological,” “environmental” or “complementary,” although each term means something slightly different. For the purposes of this statement, “unconventional dentistry” is defined as encompassing scientifically unproven practices and products that do not conform to generally accepted dental practices or “conventional” methods of evaluation, diagnosis, prevention and/or treatment of diseases, conditions and/or dysfunctions relating to the oral cavity and its associated structures.~~

In September 2002, the National Center for Complementary and Alternative Medicine partnered with the National Institutes of Health (NIH) and the Agency for Healthcare Research and Quality to commission the Institute of Medicine (IOM) to convene a study committee to investigate scientific, policy and practice questions arising from the use of complementary and alternative medicine (CAM) therapies by the American public.<sup>1</sup>

The IOM committee’s final report<sup>1</sup> describes the current use of CAM in the United States, the populations using them, a summary of current practices and policies, and the development of conceptual framework linked to research and decision-making. One of the key messages from the cited report states:

“The committee recommends that the same principles and standards of evidence of treatment effectiveness apply to all treatments, whether currently labeled as conventional medicine or CAM. Implementing this recommendation requires that investigators use and develop as necessary common methods, measures, and standards for the generation and interpretation of evidence necessary for making decisions about the use of CAM and conventional therapies.”<sup>1</sup>

Historically, dentistry has evolved as a strong and respected profession based on sound science, a moral commitment of service to the public, and an ethical obligation to protect the health of the patient. The ADA strongly supports this tradition of dentistry as a profession rooted in constantly evolving scientific information and an ethical duty to act for the benefit of others.

The dental community has always been open to emerging diagnostic and treatment approaches that over the years have improved the oral health of the public, the health of the dental team and the practice of dentistry. The ADA, consistent with its ~~object to encourage~~ commitment to evidence-based dentistry and the improvement of the oral health of the public ~~and to promote the art and science of dentistry~~, supports those diagnostic and treatment approaches that allow both patient and dentist to make informed choices among safe and effective options. The provision of dental care should be based on sound scientific principles and demonstrated clinical safety and effectiveness.

~~With the explosion of unrefereed information about oral health issues made possible by the Internet, the Association believes that the need for systematic evaluation of diagnostic and treatment efficacy and safety to assist practitioners in responding to patient inquiries is~~

greater than ever. The dental profession advocates an evidence-based approach to oral health care that requires the judicious integration of systematic assessments of clinically relevant scientific evidence, relating to the patient's oral and medical condition and history, with the dentist's clinical expertise and the patient's treatment needs and preferences. The ADA supports the scientific exploration needed to discover new diagnostic and treatment approaches and techniques, and encourages advocates of unconventional dentistry to pursue scientifically valid, systematic assessment of diagnostic and treatment efficacy and safety. The ADA is open to the idea of integrating new therapies in clinical practice, along with those that have been already tested and shown to be safe and effective in improving patient outcomes. However, the ADA also acknowledges that interventions which are considered CAM are usually understudied interventions that require further scientific testing and investigation to draw reliable conclusions about their safety, effectiveness and potential benefits beyond placebo.

Health care interventions, whether or not considered CAM, should be subject to testing using similar research standards and scientific rigor to provide a strong, evidence-based foundation for their safety and appropriate use. Within this context, the notion of CAM as a specific subset of interventions that belong to a specific discipline can be considered questionable.

#### **References**

1. Institute of Medicine (US) Committee on the Use of Complementary and Alternative Medicine by the American Public. *Complementary and Alternative Medicine in the United States*. Washington (DC): National Academies Press; 2005:2. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK83799/>. Accessed June 12, 2017.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

Resolution No. 42 NewReport: N/A Date Submitted: September 2017Submitted By: Council on Scientific AffairsReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

**AMENDMENT OF THE ADA POLICY ON USE OF LABORATORY ANIMALS IN RESEARCH**

**Background:** In its review of the 2006 ADA Policy on Laboratory Animals in Research (*Trans.*1964:254; 2006:329), the Council on Scientific Affairs (CSA) recommended that the 2017 House of Delegates consider revising this policy to address the use of laboratory animals in research and training (additions underscored), and to express support for “all reasonable efforts that would ensure the humane treatment of laboratory animals in research and training, in accordance with applicable legislation and guidelines.” The Council also proposes amendments to the 2006 policy to promote the substitution and use of alternative, non-animal test methodologies whenever possible. The Council recommends that the House review and approve the updated policy statement on use of laboratory animals in research and training, as presented.

**Resolution**

**42. Resolved**, that the ADA Policy on Use of Laboratory Animals in Research (*Trans.*1964:254; 2006:329) be amended as follows (additions underscored; deletions ~~stricken~~).

**Policy Statement on Use of Laboratory Animals in Research and Training**

**Resolved**, that the following statements regarding the use of laboratory animals in research be adopted as an affirmation of policy: The American Dental Association favors all reasonable efforts that would ensure the humane treatment of laboratory animals in research and training, in accordance with applicable laws, guidelines and regulations, but opposes the enactment of ~~restrictive~~ legislation, guidelines and regulations that would ~~hamper investigation or impede the progress of research~~, and be it further

**Resolved**, that the American Dental Association encourages researchers and dental material manufacturers to ~~find~~ replace non-animal models with non-animal methodologies testing modalities for dental materials and techniques whenever the non-animal alternatives testing modalities would accomplish the same purpose.

**BOARD RECOMMENDATION: Vote Yes.****BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

Resolution No. 43 NewReport: N/A Date Submitted: September 2017Submitted By: Council on Scientific AffairsReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: Not Applicable

**RESCISSION OF THE ADA POLICY ON STANDARDIZED NUMBERING SYSTEM FOR DIAMOND BURS**

**Background:** The Council on Scientific Affairs (CSA) reviewed the 2005 ADA Policy Statement on Standardized Numbering System for Diamond Burs (*Trans.*2005:321), and concluded that this policy should be recommended for rescission. The Council determined that the intent of the original ADA policy, adopted in 1990, was to establish and standardize a number coding system that could be used to identify diamond burs. Since then, the International Organization for Standardization (ISO) adopted a universal identification system for diamond burs, and the ADA was represented on the ISO subcommittee that developed the system ([ISO 6360-4](#)) in 2004.

This ADA policy was updated in 2005 to encourage “manufacturers and distributors to follow the International Organization for Standardization number coding system for diamond-bur instruments.” The Council determined that the ADA’s encouragement and promotion of the ISO number coding system is fulfilled primarily through the ADA’s standards development and active support of national and international standards. Additionally, the Council concluded that the 2005 policy is out-of-date and no longer a matter of significant concern or relevance to ADA members. The Council recommends that the House review and approve the rescission of the policy statement on standardized numbering system for diamond burs.

**Resolution**

**43. Resolved**, that the ADA Policy, Standardized Numbering System for Diamond Burs (*Trans.*2005:321), be rescinded.

**BOARD RECOMMENDATION: Vote Yes.****BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

**WORKSHEET ADDENDUM  
COUNCIL ON SCIENTIFIC AFFAIRS  
ADA POLICY TO BE RESCINDED**

1 **Standardized Numbering System for Diamond Burs** (*Trans.2005:321*)

2 **Resolved**, that the American Dental Association encourages manufacturers and distributors to  
3 follow the International Organization for Standardization number coding system for diamond-bur  
4 instruments.

Resolution No. 45 NewReport: N/A Date Submitted: September 2017Submitted By: Ninth Trustee DistrictReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0.5

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

**OTC PRODUCT LABELING OF PH**

The following resolution was submitted by the Ninth Trustee District and transmitted on August 23, 2017, by Ms. Michelle Nichols-Cruz, governance manager, Michigan Dental Association.

**Background:** Management of a patient's risk for oral disease includes management of oral acidity. Patients with increased caries rate often present with conditions such as xerostomia from medications or medical conditions, gastric reflux and/or a high acid diet, each of which can lower the oral pH.

Often dentists and dental team members recommend use of over-the-counter (OTC) fluoride rinses and anti-cavity products. Unfortunately, few manufacturers provide labeling to help consumers identify the pH of these OTC products.

On August 2, 2017, the ADA wrote the Food and Drug Administration asking them to begin the public rulemaking process for updating over-the-counter oral health drug products including anti-caries drug products and oral health care drug products (Appendix 1). The sponsors of this resolution recognize that regulation of product labeling is the purview of the Federal Government and we value that the ADA is a respected voice for oral health advocacy with manufacturers. We further believe providing information on the pH of these OTC products would allow consumers to better identify recommended products and help promote oral health literacy and improve outcomes from at-home management of oral acidity.

Attached is a document from the Kois Center in Seattle, Washington that provides limited information on the pH of a few rinses and is not intended to be comprehensive (Appendix 2). In fact, it exemplifies the problem in that it is so difficult to find information on the pH of many OTC products, even after directly contacting the manufacturer. It is not the intent of this resolution to imply that basic rinses are superior to those that are acidic. We recognize that there are products that have low pH as part of their mechanism of action while others are neutral. Which product to use should be case specific, based on a patient's needs and consultation with their healthcare provider. The intent of this resolution is simply to state that there are very real reasons that providers would recommend a product based on its pH and that consumers need to have a way to find detailed product information to guide them in their purchasing decisions.

**Resolution**

**45. Resolved, that** the ADA supports and encourages manufacturers to provide product labeling to include information on pH level for over-the-counter anti-caries and fluoride rinses.

**BOARD COMMENT:** The ADA filed a Citizen's petition in July with the FDA urging the agency to expedite the OTC monograph process and specifically highlighted the need for revision and completion of those monographs that directly affect Dentistry. The ADA also sent letters to the Majority and Minority leaders in the US Senate requesting that the Congress approve the bill supporting the changes to the OTC Monograph process. The most effective way to take action, related to regulatory matters, is via a direct letter from the ADA to the FDA, which can be done when the agency puts out a call for data and comments. At that point, the ADA can add the any pH related question to the list of comments provided to the FDA.

From a more scientific basis, it is important to note that the current ADA/ANSI standard for mouthrinses states that products will meet the standard if they have pH between 3-10. This is based on the need for an environment to allow the fluoride atoms to bind to hydroxyapatite, making pH one of the important factors when manufacturers develop such products under the standards. The current labeling guidance from the DMEPA reflects the standard.

**BOARD RECOMMENDATION: Vote No.**

**Vote: Resolution 45**

ASAI	Yes	CROWLEY	No	KWASNY	Yes	NORBO	No
BITTER	No	FISCH	No	KYGER	No	ROBINSON	No
BLACK	No	GEHANI	No	MARRON-TARRAZZI	No	SABATES	No
COHLMIA	No	JEFFERS	Yes	MCDUGALL	No	STEVENS	No
COLE	No	KLEMMEDSON	No	MITCHELL	No	THOMPSON	Yes



August 2, 2017

Scott Gottlieb, M.D.  
Commissioner  
Food and Drug Administration  
10903 New Hampshire Avenue  
Silver Spring, MD 20993

Re: FDA Monographs for Over-the-Counter Oral Health Drug Products

Dear Commissioner Gottlieb:

On behalf of our 161,000 members, we respectfully submit this petition for the Food and Drug Administration (FDA) to begin the public rulemaking process for updating several over-the-counter (OTC) drug monographs for oral health drug products.

- OTC Anticaries Drug Products (21 CFR Part 355) (Rev. 1995)
- OTC Oral Healthcare Drug Products (21 CFR Part 356) (Pending)
- OTC Oral Wound Healing Drug Products (21 CFR Part 356) (Pending)
- OTC Nailbiting and Thumbsucking Drug Products (21 CFR 310.536) (Rev. 1993)

We also ask FDA to revisit the drug monograph for OTC pain relievers that can sometimes be used in lieu of opioid analgesics to manage post-operative dental pain.

- OTC Internal Analgesic Drug Products (21 CFR Part 343) (Rev. 2009)

Drug monographs specify the conditions and procedures that, if followed, would allow new OTC drug products to be marketed without prior FDA approval (e.g., antigingivitis/antiplaque products, oral antiseptics, oral wound healing products, toothache relief products, etc.). They govern the allowable formulation(s) and concentration(s) of active ingredients, and specify the requirements for laboratory testing, package sizing, labeling (e.g., warning statements, directions for use, etc.), and more.

Drug monographs free the FDA from having to review every new OTC drug product the agency would ordinarily consider safe and effective and correctly branded. They are also intended to inspire confidence that these products meet generally accepted standards of safety and quality.

Unfortunately, many of the oral health-related OTC drug monographs have not kept pace with latest science-based testing standards. As a result, consumers are buying a new generation of OTC oral health products whose safety, identity, strength, quality, and purity are based on decades old science.

For example, the monograph for OTC anticaries drug products (products that aid in the prevention of dental cavities) has not been updated since 1995.<sup>1</sup> Newer and better tests are

available to evaluate the safety, identity, strength, quality, and purity of these products (e.g., one minute fluoride release test in fresh and aged samples). However, the FDA monograph requires that these products still be evaluated using decades old tests that are outdated and no longer necessary (e.g., caries reduction studies in animals).

As you consider moving forward with the public rulemaking process, it may be helpful to look to the ADA Seal of Acceptance program for guidance. Dentists and consumers recognize the ADA Seal as the gold standard for testing and rating the quality of dental products.

The ADA Seal of Acceptance program began in 1931 to help consumers and dental professionals make informed decisions about the safety and efficacy of consumer products. The ADA Seal is awarded to consumer products that pass the ADA's rigorous screening and testing processes. Like the OTC drug monograph process, product submissions must include data from clinical and/or laboratory studies that demonstrate safety and efficacy according to product category requirements developed by the ADA Council on Scientific Affairs.

We would all benefit from knowing that the oral health-related drug products sold OTC have met the latest and best available scientific standards for safety, identity, strength, quality, and purity. Updating these drug monographs would be an important step in that direction.

Again, we urge you to begin the public rulemaking process for updating the OTC monographs for these oral health-related drug categories. If you have any questions, please contact Mr. Robert J. Burns at 202-789-5176 or [burnsr@ada.org](mailto:burnsr@ada.org).

Sincerely,

/s/

Gary L. Roberts, D.D.S.  
President

/s/

Kathleen T. O'Loughlin, D.M.D., M.P.H.  
Executive Director

/s/

Jeffrey A. Platt, D.D.S., M.S.  
Chair, Council on Scientific Affairs

/s/

Marcelo Araujo, D.D.S., M.S., Ph.D.  
Vice President, Science Institute

GLR:KTO:JAP:MA:rjb

<sup>1</sup> 21 CFR Part 355.



ALWAYS

## RINSE pH VALUES

Product	pH
CTx4 Treatment Rinse	10.4
CTx3 Maintenance Rinse	8.33
Therabreath Oral Rinse	8.20
ACT Anticavity Fluoride Rinse	7.95
Cepacol Mouthrinse	7.79
PerioSciences AO ProRinse	7.75
OraCare	7.55
BreathRX Anti-Bacterial Tongue Spray	7.30
SB12	7.20
Oxyfresh Mouthrinse	7.17
SmartMouth	7.11
CloSYS Rinse	7.10
Biotene Dry Mouth Oral Rinse	7.09
Colgate Optic White	6.95
CloSYS Alcohol-Free Oral Rinse	6.85
Oasis Moisturizing Mouthwash for Dry Mouth	6.49
Colgate Total Advance	6.31
BreathRx Anti-Bacterial Mouth Rinse	6.21
BreathRx Anti-Bacterial Breath Spray	6.20
ProFRESH Chlorine Dioxide Oral Rinse	6.15
Smile Guard Orthodontic Brace Relief Rinse with Fluoride	6.10
Listerine Zero Mouthwash	6.02
Listerine Whitening Vibrant White Pre-Brush Rinse	5.66
ACT Restoring Mouthwash with Fluoride	5.56
Scope	5.55
Peridex	5.48
Listerine Total Care Mouthwash	5.44
Crest 3D White Multi-Care Whitening Rinse	5.40
Crest Pro-Health Clinical Deep Clean	5.18
Chlorhexidine Alcohol-Free	5.10
Fluoridex Daily Renewal	5.10
Listerine Antiseptic Mouthwash	4.88
BreathRx Antibacterial Rinse	4.74
Oral-B Anticavity Rinse	4.72
Biotene Mouthwash	4.64
Oral-B Antibacterial Rinse	4.62
BreathRx Antibacterial Mouth Spray	4.53
Healthy White Bleach Agent	4.50
Crest Pro-Health	4.27
Peroxyd Antiseptic Oral Cleanser	3.90
Tom's of Maine Wicked Fresh Mouthwash	3.89
The Natural Dentist Anti-Gingivitis Rinse	3.30



Basic &gt; 7



Neutral = 7



Acidic &lt; 7



PRODUCTS

TREATMENT RINSE

- CariFree CTx4 Treatment Rinse
  - 2x per day for one month



Resolution No. None N/AReport: Board Report 10 Date Submitted: September 2017Submitted By: Board of TrusteesReference Committee: C (Dental Education, Science and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 3: 10% increase in assessment of member value

How does this resolution increase member value: See Background

**REPORT 10 OF THE BOARD OF TRUSTEES: ADA LIBRARY AND ARCHIVES ADVISORY BOARD  
ANNUAL REPORT**

**Background:** In November 2013, the ADA House of Delegates approved the ADA Library and Archives Transition Plan, including the establishment of a volunteer board to oversee operations of the ADA Library and Archives. An engaged and functioning advisory board is considered a best practice for library management. The ADA Library and Archives Advisory Board serves in an advisory capacity to the Board of Trustees.

At its September 2017 meeting, the Board of Trustees approved the appended Annual Report of the Library and Archives Advisory Board for transmittal to the 2017 House of Delegates.

**Resolutions**

This report is informational and no resolutions are presented.

**BOARD RECOMMENDATION: Vote Yes to Transmit.**

**BOARD VOTE: UNANIMOUS. BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO BOARD DISCUSSION)**

## Appendix 1

# ADA Library & Archives Advisory Board

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Asai, Rickland D., 2018, Board of Trustees, 11th District  
 Aminoshariae, Anita, 2017, Ohio, Council on Scientific Affairs  
 Booth, H. Austin, 2017, New York, Special Librarian  
 Braun, Thomas, 2017, Pennsylvania, Council on Scientific Affairs  
 Fisch, Judith M., 2019, Board of Trustees, 1st District  
 Glickman, Gerald, 2017, Texas, Council on Dental Education and Licensure  
 Hammer, Christine L., 2017, Maryland, at-large Member  
 Korzeb, Jennifer, 2018, Massachusetts, Council on Dental Education and Licensure  
 Mahler, Harvey J., 2017, Illinois, at-large Member

Nickisch Duggan, Heidi, director  
 Fleming, Anna, electronic resources & research services librarian  
 Matlak, Andrea, archivist & metadata librarian  
 O'Brien, Kelly, informationist  
 Pontillo, Laura, coordinator

**Bylaws Areas of Responsibility**

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The areas of responsibility for the ADA Library & Archives Advisory Board (LAAB) are as follows:

- Creating and developing the mission and strategic plan of the ADA Library & Archives.
- Ensuring that the ADA Library & Archives remain relevant to the ADA strategic plan.
- Providing input during the annual ADA budgeting process on library funding, priorities and needs.
- Adopting policies and rules regarding library governance, assets and use; developing, approving, and codifying all policies, based on input from the library staff; also delegating procedural work to the library staff.
- Regularly planning and evaluating the library's service program.
- Evaluating the library facility to ensure that it continues to meet ADA member and ADA staff needs.
- Launching a marketing plan for the promotion of the ADA Library & Archives to ADA members; ADA component and constituent societies; the local dental and medical communities; and affiliated dental organizations.
- Conducting the business of the library in an open and ethical manner in compliance with all applicable laws and regulations and with respect for the association, staff and public.

**Advancing ADA Strategic Goals and Objectives: Agency Programs, Projects, Results and Success Measures**

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**Objective 1:** Grow Active, Full Dues Paying Membership

**Initiative/Program:** Scientific Support/Utilization of Library Content

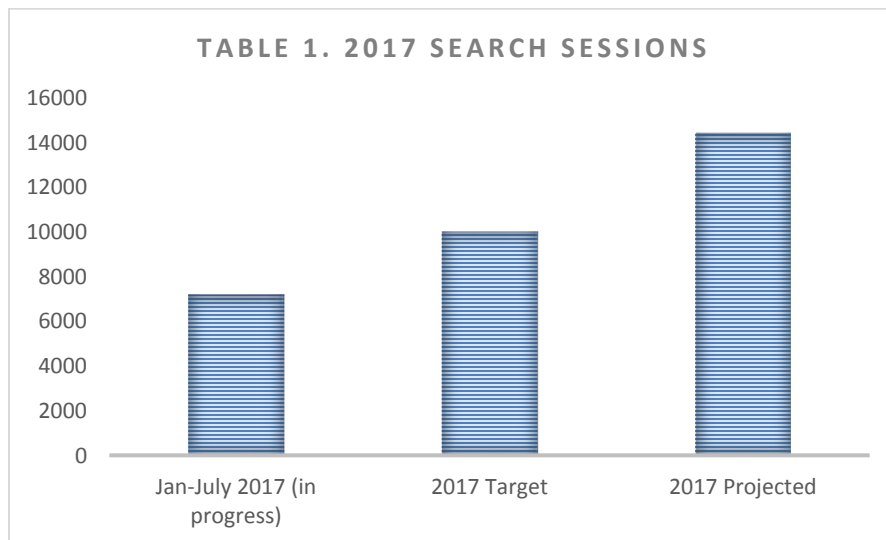
**Success Measure:** Search Sessions

**Target:** 10,000

**Range:** 9,500-10,500

**Outcome:** On target; likely to exceed

Usage statistics from the first half of 2017 (January-July) show increased use of the Library's electronic resources (journals, databases, eBooks). Projecting to the end of 2017, ADA members and staff are anticipated to conduct approximately 14,000 online searches (well over the target of 10,000), as users become more aware of the library's growing electronic resources (Table 1).



**Objective 2:** Grow Active, Full Dues Paying Membership

**Initiative/Program:** Scientific Support/Utilization of Library Content

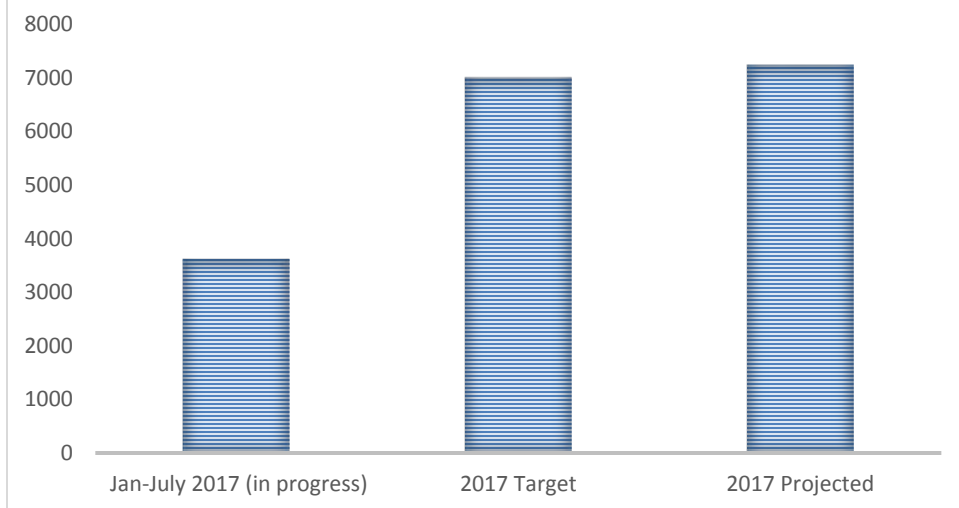
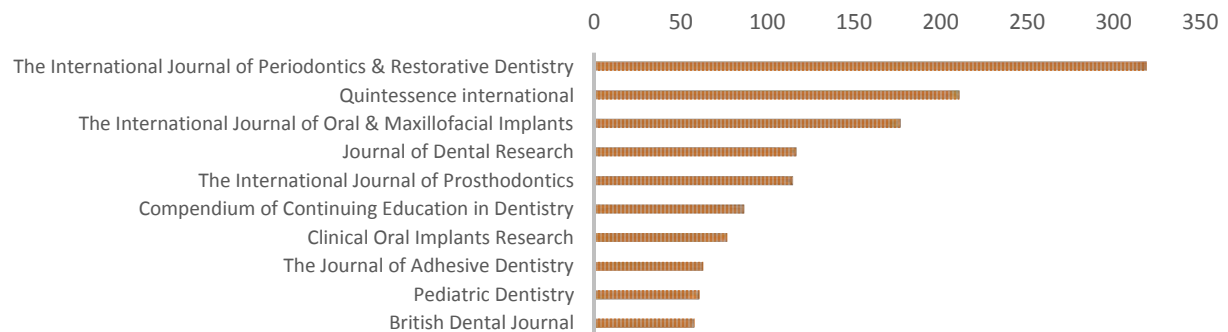
**Success Measure:** Full-Text Downloads

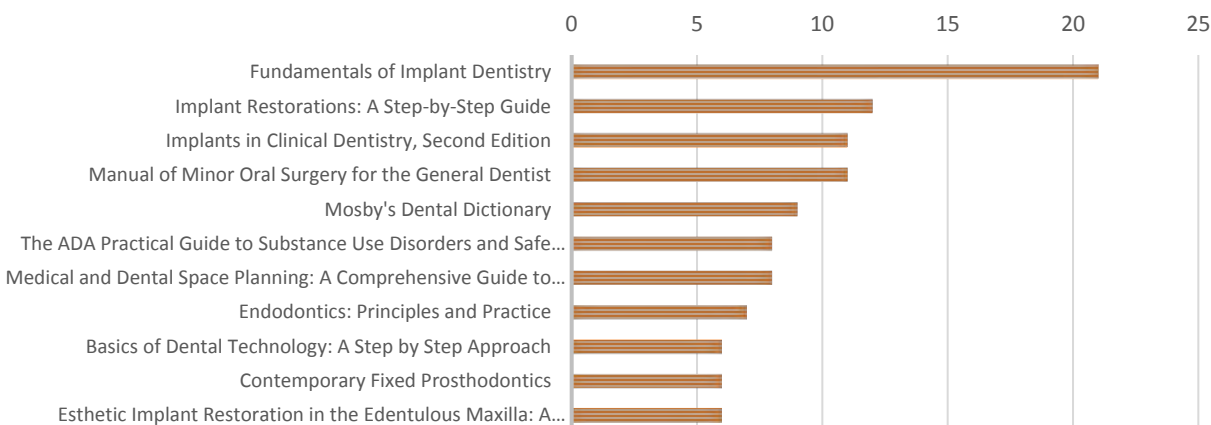
**Target:** 7,000

**Range:** 6,500-7,500

**Outcome:** On target

Downloads are more difficult to predict because ADA staff and members tend to search for known items (resulting in one download per search) and ask for staff assistance when conducting more open research (to answer a clinical question, for instance). As a result, ADA Library & Archives staff search more broadly, thus increasing the total search numbers but selecting fewer full-text downloads than the typical user might (Table 2). ADA Library & Archives service goals influence sending only the most relevant full-text downloads combined with abstracts and citations to prompt user evaluation.

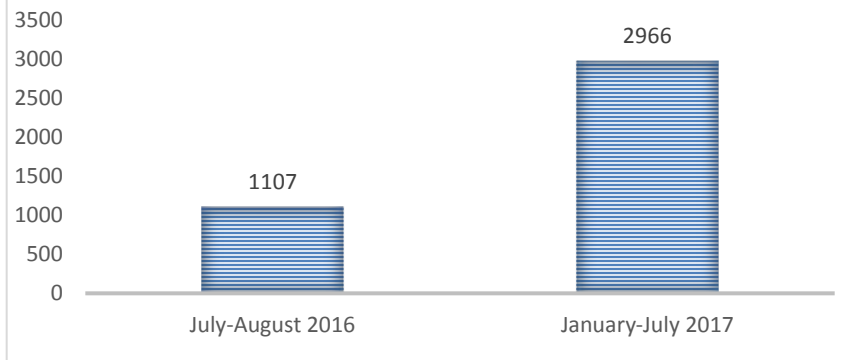
**TABLE 2. 2017 FULL-TEXT DOWNLOADS****TABLE 3. TOP EJOURNAL TITLE USAGE IN  
FULL-TEXT DOWNLOADS  
JAN-JULY 2017**

**TABLE 4. TOP EBOOK TITLE USAGE  
JAN-JULY 2017**

## Emerging Issues and Trends

Libraries continue to maximize resources through the expanded use of digital and electronic means to convey information to their patrons. The ADA Library & Archives continually reviews these rapid changes in order to remain relevant to ADA Members and the profession. The LAAB is committed to:

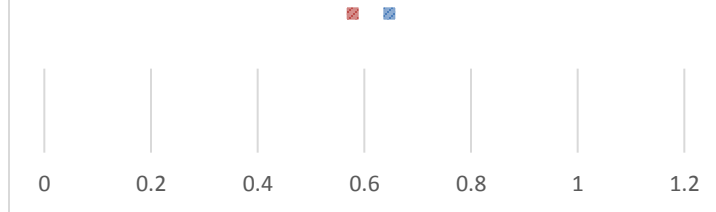
- Providing efficient searching using current eResources and making the Library & Archives a 24/7 knowledge center. This is partially accomplished by the implementation of DISCOVERY and OpenAthens, an identity access management tool that allows members to access subscribed electronic content 24/7.

**TABLE 5. OPEN ATHENS USAGE SINCE  
IMPLEMENTATION  
2016-2017**

- Maintaining and developing a comprehensive collection of information sources for ADA members in various formats. The reorganized staff roles allow for faster, more robust reference assistance and user education, expert searching, and new means of engaging with members.



**TABLE 6. FULL-TEXT EJOURNALS  
AVAILABLE FOR MEMBER ACCESS  
2016-2017**



- Continuous support of evidence-based dentistry (EBD). The ADA Library & Archives has an experienced informationist and acquired most of the databases required to support robust EBD clinical guideline development and systematic reviews, and provide education and access to evidence-based clinical tools and drug information.
- Developing new success measures that emphasize impact on policy outcomes, impact on clinical practice, and the research productivity of ADA members and staff. Recent acquisitions such as DISCOVERY and OpenAthens supplement available COUNTER-compliant usage statistics and provide a means to more accurately count use and identify future areas of need.
- Developing online tutorials, instructional videos, and CE courses for members to assist in their acquisition of evidence-based clinical research materials.

## Policy Review

The Library and Archives Collection Development Policy was last revised in 2016 to broaden its application to address the full collection which is primarily, but not exclusively, digital/electronic.

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## Legislative, Health, Governance and Related Matters

Resolution No. 1 New

Report: N/A Date Submitted: May 2017

Submitted By: 2017 Task Force To Evaluate The Business of the House of Delegates

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: None

How does this resolution increase member value: Not Applicable

## REPORT OF THE 2017 TASK FORCE TO EVALUATE THE BUSINESS OF THE HOUSE OF DELEGATES

**Background:** The 2016 House of Delegates reconstituted its task force to evaluate recent changes to the House schedule.<sup>1</sup> In order to fulfill its charge, the task force reviewed responses to the 2016 survey of House attendees.

**HOD Schedule:** The 2016 House involved the first significant changes to the House schedule in recent years. Specifically, the fourth session (typically held on Tuesday) was eliminated. In order to assure adequate time was available for House deliberations during the second and third sessions (Monday morning and afternoon), as many non-deliberative features of the House meeting as possible were moved to the first session (Friday). The result was that the House not only finished its work on Monday; it adjourned at approximately 3:30 pm. This strongly indicates that reference committee hearings were utilized as intended and delegates did not feel the need for long debate on the House floor.

The task force concluded that the changes in 2016 were successful and notes that changes this year in the officer election processes should free up even more time for House work during the second and third sessions. (The House will recall that the elections will be conducted from the House floor, using the same voting devices used for House business.) The task force did consider recommending to the Speaker that the speech of the incoming president should also be moved to Friday but concluded (based on the survey) that there is not sufficient support for such a move. The task force also noted that such a shift could burden the House with too many speeches in one session.

The task force also considered streamlining the trustee installation ceremony by either eliminating the gathering of trustees on the stage and recognizing the trustees from the floor or by not including trustee spouses on the stage. While the task force believes that the ADA may well move in this direction in the future, and the task force encourages this, the survey indicates that there is not adequate support for these steps at this time. Accordingly, the task force is not recommending any additional changes in the House schedule.

Finally, the task force considered whether it should offer any suggestions relating to the timing of reference committee hearings. The task force was advised that this topic fell outside the scope of the task force's work and recognizes that the reference committee schedule falls within the duties and discretion of the Speaker. In any case, according to the survey of House members, the reference

<sup>1</sup> The 2017 task force consists of: Dr. Judee Tippet-Whyte, (chair); Dr. Deborah S. Bishop, Alabama; Dr. Prabha Krishnan, New York; Dr. William E. Lee, Kentucky; Dr. Chad R. Leighty, Indiana; Dr. Debra A. Peters, Michigan; Dr. Nipa R. Thakkar, Pennsylvania. In addition, the Speaker of the House, Dr. Glen Hall, Texas, acted as a consultant to the task force.

committee schedule received a 95% overall satisfaction score for each of the last two years. In light of this and due to the need to allow delegates to plan their schedules for reference committee day, the need to finish the hearings early enough to allow completion of the reports in a timely manner and the lack of feasible alternatives, the task force is not making any recommendations on this point. The task force was informed by the Speaker that he and staff consider the reference committee schedule every year and adjust it as appropriate.

**Late-Filed Resolutions:** Last year, the task force proposed a resolution to minimize late-filed resolutions. The proposal called for resolutions filed within fifteen days of the opening of the House to require a two-thirds vote to be introduced. The task force further proposed that resolutions filed too late to be referred to a reference committee would require unanimous consent to be introduced. The resolution failed.

The task force continues to believe that a key to the efficient and effective operation of the House is to minimize late-filed resolutions. Resolutions received close to the start of the House hinder the ability of delegates to fully consider important issues and to make needed inquiries to fully understand proposals. The result is that much time is spent on the House floor in uninformed debate or time is wasted in caucus seeking additional information.

Nevertheless, the task force recognizes that its proposed requirement for unanimous consent for resolutions filed after the close of the first session of the House presented too great a barrier to action. Accordingly, the task force is proposing this year only that a two-thirds affirmative vote be required for any resolution filed less than fifteen days before the opening of the House.

Currently, only a trustee district or the ASDA delegation may submit a resolution within 15 days of the opening of the House. Bylaws, Chapter V., Section 130. The right is absolute; no vote or any House action is required for the submission of such a resolution. This is what the task force proposes to change by *requiring* a two-thirds vote of delegates present and voting to allow the introduction of new business less than 15 days prior to the opening of the House of Delegates. Once allowed to be introduced, the normal voting requirements for adoption would apply. (For example, a resolution proposing a new policy would require a simple majority and a *Bylaws* amendment would require a two-thirds vote to be adopted.)

This would allow all delegates to be fully informed and prepared to debate the resolutions. At the same time, important new business would still be able to be brought forward, provided that two-thirds of the House agrees that it needs to be heard that year. Failing that, the maker can bring the proposal forward the following year. *The task force wishes to make clear that the limits on new business, both as currently exist and as proposed, do not apply to amendments to or substitute resolutions for pending resolutions or to resolutions proposed by reference committees.*

### Resolution

**1. Resolved**, that effective with the close of the 2017 House of Delegates, CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER, A. STANDING RULES AND REPORTS, e. INTRODUCTION OF NEW BUSINESS*, of the ADA *Bylaws* be amended as follows (additions underscored; deletions ~~stricken through~~):

#### *Section 130: RULES OF ORDER*

e. INTRODUCTION OF NEW BUSINESS. No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless except~~ when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting. ~~No new business shall be introduced into the House of Delegates at the last meeting of a session except when~~

such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two thirds (2/3) affirmative vote of the delegates present and voting. The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference Committee recommendations shall not be deemed new business

**BOARD COMMENT:** The Board thanks the task force for its work, but is not generally in favor of requiring supermajorities to take action. The Board believes that the requirement of a supermajority in order to introduce new business unduly burdens the districts, especially those which do not meet in advance of the House meeting. Accordingly, the Board proposes that new business be allowed to be introduced upon a vote by a simple majority. Accordingly, the Board proposes the following Board substitute:

**1B. Resolved,** that effective with the close of the 2017 House of Delegates, CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER, A. STANDING RULES AND REPORTS, e. INTRODUCTION OF NEW BUSINESS,* of the ADA *Bylaws* be amended as follows (additions highlighted; deletions double strike out):

*Section 130: RULES OF ORDER*

e. INTRODUCTION OF NEW BUSINESS. No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless except when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two thirds (2/3) affirmative vote~~ majority vote of the delegates present and voting. ~~No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two thirds (2/3) affirmative vote of the delegates present and voting.~~ The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

**BOARD RECOMMENDATION : Vote Yes on the Substitute.**

**Vote: Resolution 1B**

ASAI	No	CROWLEY	Yes	KWASNY	Yes	NORBO	Yes
BITTER	Yes	FISCH	Yes	KYGER	Yes	ROBINSON	Yes
BLACK	Yes	GEHANI	Yes	MARRON-TARRAZZI	Yes	SABATES	Yes
COHLMIA	Yes	JEFFERS	Yes	MCDUGALL	Yes	STEVENS	Yes
COLE	Yes	KLEMMEDSON	Yes	MITCHELL	Yes	THOMPSON	Yes

Resolution No. 3 NewReport: N/A Date Submitted: August 2017Submitted By: Council on Ethics, Bylaws and Judicial AffairsReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**AMENDMENT TO CHAPTER I, SECTION 20.A. OF THE ADA BYLAWS:  
THE MEANING OF EQUIVALENT DEGREE**

**Background:** The 2016 House of Delegates adopted Resolution 79H-2016, a major revision to Chapter I of the ADA *Bylaws*, via the consent calendar. In the intervening period following the passage of the amendments, some concerns about the amendments have been raised.

**The meaning of “equivalent degree.”** The amendments to Chapter I of the ADA *Bylaws* did away with the requirement that members be licensed dentists. Instead, Chapter I merely states that “[a]ny person holding a D.D.S., D.M.D. or equivalent degree” is eligible for membership upon meeting some additional eligibility requirements. One of the concerns that has been expressed is that holding any dentally-related degree could be deemed sufficient to meet this membership requirement. That is not the case given the specialized meaning that the term “equivalent degree” has in this context.

The term “equivalent degree” as used in Chapter I of the ADA *Bylaws* means equivalency to D.D.S. and D.M.D. degrees when considering the degree holder’s eligibility to sit for licensure examinations. If an individual holding the non-D.D.S. or D.M.D. degree is allowed by his or her state dental board to sit for that jurisdiction’s licensure examination without any additional academic or clinical training, that degree is considered to be “equivalent” to a D.D.S. or a D.M.D. degree. If, however, the state dental board requires the holder of a non-D.D.S. or D.M.D. degree to undertake additional educational or clinical training in order to sit for a licensure examination, the non-D.D.S. or D.M.D. degree is not considered to be an “equivalent degree.”

Because the term “equivalent degree” has been used for years in Chapter I of the ADA *Bylaws*, it was assumed that the specialized meaning of the term was understood. The number of comments received from constituents makes it clear that is not the case. In order to remove concern with respect to this issue and further clarify the *Bylaws*, the Council believes that an amendment to Section 20.A. of Chapter I defining the meaning of “equivalent degree” is appropriate. The amendment proposed by the Council follows:

**Resolution**

**3. Resolved,** that Section 20.A. of Chapter I of the ADA *Bylaws*, scheduled to go into effect at the close of the 2017 House of Delegates, be amended as follows (additions underscored):

Section 20. MEMBERSHIP ELIGIBILITY

1           A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree\* shall be  
2           eligible to be an active member of this Association if he or she meets the following  
3           qualifications:

4           \* As used in these *Bylaws*, the term "equivalent degree" means a dental degree that the  
5           jurisdiction involved deems sufficient to allow the degree holder to sit for licensure examination in  
6           the jurisdiction without any additional training.

7           **BOARD RECOMMENDATION: Vote Yes.**

8           **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
9           **BOARD DISCUSSION)**

Resolution No. 4 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Ethics, Bylaws and Judicial Affairs

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**AMENDMENT TO CHAPTER I, SECTION 20.A. OF THE ADA BYLAWS:  
LICENSURE REQUIREMENT BY STATUTE FOR CONSTITUENT MEMBERSHIP**

**Background:** The 2016 House of Delegates adopted Resolution 79H-2016, a major revision to Chapter I of the ADA *Bylaws*, via the consent calendar. In the intervening period following the passage of the amendments, some concerns about the amendments have been raised.

**Licensure is required by statute for constituent membership.** The Council has been advised by the New York State Dental Association ("NYSDA") that, pursuant to the laws and regulations of the State of New York, only licensed and registered dentists are permitted to be members of NYSDA. Consequently, the NYSDA bylaws must continue to require licensure and registration as a requirement for NYSDA membership. The New York laws and regulations make it impossible for NYSDA to amend its bylaws so that they do not conflict with or limit the amended Chapter I of the ADA *Bylaws*.

The Council believes that this concern can be addressed by an amendment to Chapter I of the ADA *Bylaws* that states that a constituent is allowed to require licensure and/or registration as a qualification for membership if the laws and regulations of the constituent's jurisdiction require only licensed or registered dentists to be members of the constituent. Such an amendment will allow the NYSDA bylaws to remain compliant with the relevant laws and regulations of the State of New York while also conforming to the requirements of the amended Chapter I of the ADA *Bylaws* that becomes effective at the close of the 2017 House of Delegates. Consequently, the Council proposes the following amendment to Chapter I:

**Resolution**

**4. Resolved**, that Section 20.A. of Chapter I of the ADA *Bylaws*, scheduled to go into effect at the close of the 2017 House of Delegates, be amended as follows (additions underscored, deletions ~~stricken through~~):

**Section 20. MEMBERSHIP ELIGIBILITY**

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be an active member of this Association if he or she meets the following qualifications:

a. Is a member in good standing of this Association as that term is defined in these *Bylaws*: and



1           b. Is licensed and/or registered to practice dentistry where the laws and regulations of a  
2           constituent's jurisdiction require licensure and/or registration in order to be a member of  
3           the constituent\*; and

4           **bc.** Is a member in good standing of the constituent and component\* where the member  
5           either resides, is employed or practices, unless:

6                     1. the individual is employed by or is serving on active duty in one of the federal  
7                     dental services\*\* on a full-time basis and is not otherwise employed or practicing  
8                     dentistry within the jurisdiction of a constituent or component;

9                     2. the individual is employed or practicing dentistry in a country other than the United  
10                    States and is a graduate of a dental school accredited by the Commission on Dental  
11                    Accreditation; or

12                    3. the individual is otherwise ineligible for active membership in a constituent or  
13                    component where the individual resides, is employed or practices.

14                    \_\_\_\_\_  
15                    \*As used herein, the term "constituent" means a dental association organized in a state or territory of  
16                    the United States or in Washington, D.C. that is chartered by the ADA House of Delegates. The term  
17                    "component" means a local dental association that may be created within the boundaries of a  
18                    constituent by the constituent.

19                    \_\_\_\_\_  
20                    \*\* The term "federal dental services" as used herein shall mean the dental departments of the Air Force,  
21                    the Army, the Navy, the Public Health Service, the department of Veterans Affairs and other federal  
22                    agencies.

23           **BOARD RECOMMENDATION: Vote Yes.**

24           **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
25           **BOARD DISCUSSION)**

Resolution No. 5 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Ethics, Bylaws and Judicial Affairs

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**AMENDMENT TO CHAPTER I OF THE ADA BYLAWS:  
ADDITION OF SECTION 30. REVIEW OF LICENSURE STATUS**

**Background:** The 2016 House of Delegates adopted Resolution 79H-2016, a major revision to Chapter I of the ADA *Bylaws*, via the consent calendar. In the intervening period following the passage of the amendments, some concerns about the amendments have been raised. The revised chapter passed by the 2016 House accompanies this resolution as **Appendix 1**.

**Status of License at Time of Membership.** Several comments have been received that the removal from the ADA *Bylaws* of the eligibility requirement of licensure impacts the ability of a constituent to consider the status of an individual's dental license when an application to join the ADA tripartite is received. The comments have indicated that constituents wish to have the discretion to deny membership to an individual if a review of the individual's licensure records indicate that his or her license has been suspended or revoked.

The Council has discussed those comments received on this topic and is of the belief that there will be few instances where dentists who have had their licenses suspended or revoked will thereafter apply for ADA membership. The cost of joining the ADA, a constituent and a component is not insignificant; that a dentist who has been barred by state dental board action from earning a livelihood by the practice of dentistry will be willing and able to pay membership dues is judged by the Council to be exceedingly rare. However rare the instances may be, however, the Council understands that the ADA constituents should have the right to withhold membership from a dentist who has committed illegal or unethical acts. Constituents have the right to suspend or revoke the membership of members who have the committed those same acts pursuant to Chapter XII of the ADA *Bylaws*, and there is no reason to deny constituents that right when individuals initially seek to become members of the ADA and its constituents and components.

Based on the foregoing, the Council proposes the following amendment to Chapter I of the ADA *Bylaws*:

**Resolution**

**5. Resolved**, that Chapter I of the ADA *Bylaws*, scheduled to go into effect at the close of the 2017 House of Delegates, be amended by the addition of a new Section 30 as follows (additions underscored):

Section 30. REVIEW OF LICENSURE STATUS. A constituent may conduct a review of the licensure status of an applicant for membership to determine if the applicant's license to practice

1        dentistry (if any) has been suspended or revoked for any of the reasons listed in Chapter XII,  
2        Section 20. of these ADA Bylaws and, if so, the constituent has the discretion to deny  
3        membership to the applicant.

4        and be it further

5        **Resolved**, that current Sections 30. through 50. of Chapter I of the ADA *Bylaws* be renumbered  
6        accordingly.

7        \_\_\_\_\_  
8        **Note:** To be consistent with the numbering scheme of the proposed ADA *Bylaws* that are before the  
9        2017 House of Delegates for adoption, the citation to Chapter XII., Section 20. will become Chapter X,  
10       Section 20. If the resolution proposing adoption of the amended ADA *Bylaws* is passed by the House.

11       **BOARD RECOMMENDATION: Vote Yes.**

12       **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
13       **BOARD DISCUSSION)**

**APPENDIX 1****CHAPTER I • MEMBERSHIP**

Section 10. CLASSIFICATION. The members of this Association shall be classified as follows:

- Active Members
- Life Members
- Retired Members
- Student Members
- Honorary Members
- Provisional Members
- International Members

Section 20. MEMBERSHIP ELIGIBILITY

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be an active member of this Association if he or she meets the following qualifications:

- a. Maintains membership in good standing in this Association as that term is defined in these Bylaws; and
- b. Is a member in good standing of the constituent and component\* where the member either resides, or is employed or practices; or if not a member of such constituent and component is:
  - 1. employed by or is serving on active duty in one of the federal dental services\*\* on a full time basis and is not otherwise employed or practicing dentistry within the jurisdiction of a constituent or component; or
  - 2. employed or practicing dentistry in a country other than the United States and is a graduate of a dental school or a graduate of a training program accredited by the Commission on Dental Accreditation; or
  - 3. otherwise ineligible for active membership in a constituent or component where the individual resides, is employed, or practices.

An individual qualifying pursuant to subsections b.1 through 3 shall be referred to as a "direct member."

B. LIFE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be a life member of this Association if he or she meets the following qualifications:

- a. Has been an active and/or retired member in good standing of this Association for at least thirty (30) consecutive years or a total of at least forty (40) non-consecutive years;
- b. Reached the age of at least sixty-five (65) during the previous calendar year; and
- c. Maintains membership in good standing in a constituent and component, if such exists, and in this Association.
- d. A member may also qualify for life member status by having been a member of the National Dental Association for twenty-five (25) years and subsequently holding membership in this Association for at least ten (10) years and having reached the age of at least sixty-five (65) during the previous calendar year.

C. RETIRED MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be a retired member of this Association if he or she meets the following qualifications:

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\* As used herein, the term "constituent" means a dental association organized in a state or territory of the United States or in Washington, D.C. that is chartered by the ADA House of Delegates. The term "component" means a local dental association that may be created within the boundaries of a constituent by the constituent.

\*\* The term "federal dental services" as used herein shall mean the dental departments of the Air Force, the Army, the Navy, the Public Health Service, the department of Veterans Affairs and other federal agencies.

- 1 a. Has submitted to the individual's component and constituent or, if a direct member, to this
- 2 Association, an affidavit attesting that the individual does not receive or earn income from any
- 3 dentally-related activity; and
- 4 b. Maintains membership in good standing in a constituent and component, if such exists, and in
- 5 this Association.

6 D. STUDENT MEMBER. Any person shall be eligible to be a student member of this Association if the

7 individual meets the following qualifications:

- 8 a. Is enrolled as a predoctoral student of a dental school accredited by the Commission on Dental
- 9 Accreditation of this Association; or
- 10 b. Is enrolled as a predoctoral student in a dental school listed in the World Directory of Dental
- 11 Schools compiled by the FDI World Dental Federation; or
- 12 c. Holds a D.D.S., D.M.D. or an equivalent degree and is engaged full-time in an advanced training
- 13 course of not less than one academic year's duration in an accredited school or residency
- 14 program.
- 15 d. Student membership shall not be considered in the calculation of membership tenure needed to
- 16 achieve life membership.

17 E. HONORARY MEMBER. Any person shall be eligible to be an honorary member of this Association

18 if he or she meets the following qualifications:

- 19 a. Has made outstanding contributions to the advancement of the art and science of dentistry; and
- 20 b. Be elected an honorary member by the Board of Trustees.

21 F. PROVISIONAL MEMBER. An individual is a provisional member of this Association if he or she

22 meets one of the following alternative qualifications:

- 23 a. Has received a D.D.S. or D.M.D. degree within the past twenty-four (24) months from a dental
- 24 school accredited by the Commission on Dental Accreditation of this Association and is not
- 25 eligible for tripartite or any other direct category of membership because he or she has not
- 26 established a place of practice. The provisional membership awarded under this alternative shall
- 27 terminate December 31 of the second full calendar year following the year in which the degree
- 28 was awarded; or
- 29 b. Is a graduate of an unaccredited dental school who has been licensed within the past twenty-four
- 30 (24) months to practice dentistry in a jurisdiction in which there is a constituent and has not
- 31 established a place of practice. The provisional membership awarded under this alternative shall
- 32 terminate December 31 of the second full calendar year following the year in which the license
- 33 was awarded.

34 G. INTERNATIONAL MEMBER. An individual who is ineligible for any other classification of

35 membership and:

- 36 a. Is practicing dentistry or is employed in a dentally-related field in a country other than the United
- 37 States;
- 38 b. Has been classified as an international member upon application to the Board of Trustees
- 39 according to the specifications in the *Governance and Organizational Manual of the American*
- 40 *Dental Association* ("the *Governance Manual*"); and
- 41 c. Maintains membership in good standing in this Association.

42 Section 30. PRIVILEGES. Members shall receive such privileges and benefits as are listed in the

43 *Governance Manual*.

44 Section 40. DUES AND SPECIAL ASSESSMENTS. Except for International members, the dues of

45 members shall be the amount established annually by the House of Delegates in accordance with the

46 procedure set forth in the these *Bylaws*. In addition to annual dues, members shall pay any outstanding

1 special assessment that may be levied by the House of Delegates in accordance with the procedure set  
2 forth in the *Governance Manual*.

3 Section 50. DEFINITION OF "IN GOOD STANDING."

4 A. To be in good standing, a member is required to meet the following criteria:

5 a. The member's payments of dues and special assessments, if any, are current if such payment is  
6 required; and

7 b. Any additional criteria that may be imposed by the member's constituent or component.

8 B. A member under a disciplinary sentence of suspension shall be designated as "in good standing  
9 temporarily under suspension" until the disciplinary sentence has terminated.

10 Section 60. LAPSE OF MEMBERSHIP AND REINSTATEMENT.

11 A. LAPSE OF MEMBERSHIP. Any member whose dues and any special assessment have not been  
12 paid by March 31 of the current year or shall otherwise fail to meet the eligibility requirements for  
13 membership shall cease to be a member of this Association.

14 B. REINSTATEMENT. Reinstatement of membership may be secured on payment of outstanding  
15 dues and any special assessment of this Association and on meeting the remaining eligibility  
16 requirements for membership.

17 Section 70. WAIVER OF DUES AND SPECIAL ASSESSMENTS. Members may be eligible for a full or  
18 partial waiver of the current year's dues and/or special assessments as set forth in the *Governance*  
19 *Manual*.

Resolution No. 6 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Ethics, Bylaws and Judicial Affairs

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

# **AMENDMENT TO SECTION 4.A. OF THE ADA PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT**

**Background:** Section 4.A. of the *ADA Principles of Ethics and Code of Professional Conduct* (“the *ADA Code*”), under Principle 4: Justice, requires fairness in patient selection. It states:

## **4.A. PATIENT SELECTION**

While dentists, in serving the public, may exercise reasonable discretion in selecting patients for their practices, dentists shall not refuse to accept patients into their practice or deny dental service to patients because of the patient’s race, creed, color, sex or national origin.

The commentary on the ethical principle of Justice also explains that the principle embraces the concepts of fairness and providing care without prejudice:

*This principle expresses the concept that professionals have a duty to be fair in their dealings with patients, colleagues and society. Under this principle, the dentist’s primary obligations include dealing with people justly and delivering dental care without prejudice.*

In response to an Ethics Hotline inquiry, the Council on Ethics, Bylaws and Judicial Affairs (“the Council”) examined whether the existing language of Section 4.A. of the *ADA Code* is sufficiently inclusive of sexual orientation and gender identity.

**Analysis:** The issue of discrimination based upon gender identity and sexual orientation has emerged relatively recently in American society. The Council is concerned that the vagueness of the term “sex” presently used in Section 4.A. of the *ADA Code* may not be considered by practitioners to embrace sexual orientation and gender identity. This leaves open the possibility that members of the LGBT community may have their access to dental care limited by the unintentional and/or innocent but uninformed discriminatory actions of oral healthcare professionals.

The Council’s concern finds support in data that has been collected and reported. According to a 2014 report by the National Women’s Law Center, “Studies have found LGBT individuals . . . may be refused care or treated in a discriminatory manner because of their sexual orientation, gender identity . . . Approximately 8% of LGB individuals, nearly 27% of transgender and gender-nonconforming individuals .

... report being denied needed health care outright.”<sup>1</sup> Additionally, Healthy People 2020, a federal interagency program with the mission of providing “science-based, 10-year national objectives for improving the health of all Americans,”<sup>2</sup> recognizes health disparities confront the LGBT community and sets as one of its goals “[i]mprov[ing] the health, safety, and well-being of lesbian, gay, bisexual and transgender (LGBT) individuals.”<sup>2</sup>

In considering whether to recommend amending the language of Section 4.A. to be more inclusive, the Council also reviewed how other professional societies and entities address this issue. The American Medical Association, for example, in discussing patient selection, asserts that “Physicians must . . . uphold ethical responsibilities not to discriminate against a prospective patient on the basis of race, gender, sexual orientation, or gender identity . . .”<sup>3</sup> The American Bar Association also has amended its Model Rules of Professional Responsibility section on discrimination to include “gender identity,” reasoning that “[g]ender identity” is relevant as a new societal awareness of the individuality of gender has changed the traditional binary concept of sexuality.” Other organizations that have taken similar action include the American Osteopathic Association, the American College of Healthcare Executives and the American Academy of Physician Assistants.

Based on the considerations summarized above, the Council determined that recommending the amendment of the language of Section 4.A. of the ADA *Code* to explicitly state that gender, sexual orientation and gender identification are within the scope of the section is the correct course of action and comports with the ADA *Code* statement that “[q]ualities of honesty, compassion, kindness, integrity, fairness and charity are part of the ethical education of a dentist and practice of dentistry and help to define the true professional.”<sup>3</sup>

Consequently, the Council recommends that that the 2017 House of Delegates adopt the following resolution:

#### Resolution

**6. Resolved**, that Section 4.A. of the ADA *Principles of Ethics and Code of Professional Conduct* be amended as follows (additions underscored, deletions ~~stricken through~~):

#### **4.A. PATIENT SELECTION**

While dentists, in serving the public, may exercise reasonable discretion in selecting patients for their practices, dentists shall not refuse to accept patients into their practice or deny dental service to patients because of the patient’s race, creed, color, ~~sex~~ gender, sexual orientation, gender identity or national origin.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS.**

<sup>1</sup> <http://nwlc.org/resources/health-care-refusals-harm-patients-threat-lgbt-people-and-individuals-living-hiv-aids/> Last visited 3/6/17.

<sup>2</sup> <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health> Last visited 3/6/17.

<sup>3</sup> <https://www.ama-assn.org/about-us/code-medical-ethics>. Visited March, 2017.



Resolution No. 7 New

Report: N/A Date Submitted: August 2017

Submitted By: Council on Ethics, Bylaws and Judicial Affairs

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

# AMENDMENT OF THE ADA BYLAWS PURSUANT TO 118H-2014

**Background:** During testimony on a proposed amendment to the ADA *Bylaws* before Reference Committee D (Legislative, Health, Governance and Related Matters) in 2014, it was noted that the last comprehensive revision of the *Bylaws* occurred approximately 70 years ago, in the late 1940s. The Committee received considerable testimony urging that a comprehensive review and rewrite of the *Bylaws* be commissioned (*Trans.*2014:445). Heeding that testimony, Reference Committee D proposed Resolution 118. After debate and amendment from the floor of the House of Delegates, the following resolution was adopted as 118H-2014:

**Resolved**, that the Council on Ethics, Bylaws and Judicial Affairs, in consultation with other appropriate ADA agencies, perform a complete review and rewrite of the ADA *Constitution and Bylaws*, and be it further

**Resolved**, that the Council on Ethics, Bylaws and Judicial Affairs provide a report on its progress to the 2015 House of Delegates.

**Analysis:** The work of the Council on Ethics, Bylaws and Judicial Affairs (“the Council” or “CEBJA”), with the assistance of the *Bylaws* Rewrite Task Force (“the Task Force”) composed of current and former CEBJA members, on the directive of 118H-2014 has been completed. That work has culminated in the proposed amended ADA *Bylaws* that accompany this report as **Appendix 1**.<sup>\*</sup> Also included with this report are the proposed *Governance and Organizational Manual of the American Dental Association* (“the *Governance Manual*”) and material inserted into the *Manual of the House of Delegates* (**Appendix 2** and **Appendix 3**, respectively). In this report, **Appendices 1-3** are collectively referred to as “the *Bylaws* material.”

At the outset, two important facts should be noted about the *Bylaws* material. The first is that the *Governance Manual*, like the ADA *Bylaws*, is amendable only by the House of Delegates. That is also true for the *Rules of the House of Delegates*, *Operations of the House of Delegates*, *Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates* and *Standing*

<sup>\*</sup> For the sake of completeness, **Appendix 1** includes the amended Chapter I (Membership) that was adopted by the 2016 House of Delegates by the passage of Resolution 79H-2016, to take effect at the close of the 2017 House of Delegates. Only Chapters II through XV are presented for adoption by this report and the accompanying resolution, although three amendments to Chapter I have also been separately forwarded to this House for its consideration. Similarly, the *Governance Manual*, **Appendix 2**, includes Chapter I already adopted by the House of Delegates.

1 *Committees of the House of Delegates* (all sections of the *Manual of the House of Delegates*).

2 Consequently, despite the fact that provisions have been removed from the *Bylaws* in the proposed  
3 revisions, the removed material is still under the control and authority of the House of Delegates. In  
4 addition, as will be discussed in more detail below, even though certain provisions have been judged to be  
5 procedural or operational in nature and thus removed from the *Bylaws*, they are deemed important enough  
6 to still carry with them the requirement of an affirmative vote of two-thirds of the delegates present and  
7 voting to amend.

8  
9 A complete summary of the steps taken by the Council and the Task Force leading to the creation of the  
10 *Bylaws* material proposed for adoption is included in correspondence authored by the Council and the Task  
11 Force that accompanies the responses to each of the almost two hundred comments received as a result of  
12 stakeholder review of the initial drafts of the proposed *Bylaws*. That correspondence and the comments and  
13 responses are posted on the House of Delegates site in ADA Connect. Rather than repeat that summary  
14 here, this report will highlight only the more significant aspects of that work.

15  
16 With a few exceptions, the Council and the Task Force approached the effort of reviewing and revising the  
17 ADA *Bylaws* with the understanding that the work undertaken should consist of (1) identifying for removal  
18 those portions of the current ADA *Bylaws* that are unnecessary or outdated or contain operational or  
19 procedural matters so that the rewritten ADA *Bylaws* consist of only the fundamental principles that  
20 represent the framework of the ADA's governance, and (2) constructing a governance and operational  
21 manual to house the procedural and operational matters removed from ADA *Bylaws* during the review  
22 process.

23  
24 The review and rewriting of the ADA *Bylaws* have already resulted in several amendments being proposed  
25 and adopted by the House of Delegates in 2015 and 2016. These revisions include:

- 26  
27 • Resolution 79H-2016 (*Trans.*2016:350) adopted amendments to *Bylaws* Chapter I proposed by  
28 the Council on Membership in collaboration with CEBJA that significantly streamlined that portion  
29 of the ADA *Bylaws*. Among other things, the amendments reduced the number of membership  
30 categories and removed the requirement that ADA members be licensed dentists; instead,  
31 Chapter I now calls for members to have "a D.D.S., D.M.D. or equivalent degree;"\*
- 32  
33 • Operational and procedural matters excised from Chapter I of the ADA *Bylaws*, still important to  
34 the day-to-day membership functions of the Association, have been placed into Chapter I of the  
35 *Governance Manual* that was also adopted by the House of Delegates as a part of 79H-2016;
- 36  
37 • Two chapters of the ADA *Bylaws*, then Chapters XIX (Alliance of the American Dental  
38 Association) and XXI (Construction), were deleted entirely by passage of Resolutions 4H-2015  
39 (*Trans.*2015:276) and 5H-2015 (*Trans.*2015:270); and
- 40  
41 • Portions of Chapter X of the ADA *Bylaws* (Councils) concerning the duties of ADA councils were  
42 substantially simplified by the passage of 6H-2015 (*Trans.*2015:279).

43  
44 Wishing to be transparent in the task of rewriting the ADA *Bylaws* and desiring feedback from groups that  
45 might approach the rewriting of the ADA *Bylaws* differently, following completion of the initial draft of the  
46 *Bylaws* material, the Task Force and Council, in April 2017, forwarded the *Bylaws* material to several  
47 stakeholder groups for review and comment. A survey tool for collecting comments on the *Bylaws*  
48 material was created and delivered to the stakeholder groups together with chapter by chapter  
49 comparisons between the current and the proposed amended *Bylaws*. These comparison documents  
50 provided the text of the current *Bylaws* interlineated with strikeouts and underlining to show each of the

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\* Resolution 3 is before the 2017 House of Delegates seeks to amend Chapter I of the ADA *Bylaws* to provide a definition of the term "equivalent degree." Resolution 4 and 5 also propose amendments to other aspects of the revised *Bylaws* Chapter I.

amendments made to arrive at the proposed *Bylaws*, set out in side-by-side columns. Commentary was provided to alert reviewers to the movement of text to, for example, the *Governance Manual* or another *Bylaws* chapter. Copies of the *Governance Manual* and the revised *Manual of the House of Delegates* were also made available for review in the survey.

Approximately thirteen hundred surveys were distributed to delegates and alternate delegates, council leadership, constituent executive directors and current and former members and officers of the Board of Trustees. The survey enjoyed a 65% open rate and 31% of the individuals who received the survey started it. Of the individuals that started the survey, 35% fully completed the survey. Twenty-five percent (25%) of the individuals who started the survey provided one or more comments to the proposed *Bylaws* amendments; the other 75% found no reason to comment on any of the proposed revisions.

Following the period for comments that ended in the latter part of May, the comments were compiled and each comment was reviewed by the Task Force. Where appropriate, the proposed *Bylaws* material was amended accordingly and the revision was noted in a response to the comment. In other instances, the Task Force did not believe that revisions to the proposed *Bylaws* were required; that decision was also noted in responses to the comments. Thereafter, the comments and the revised *Bylaws* material was transmitted to CEBJA for review. CEBJA conducted that review and, with certain adjustments, gave its final approval to the revised documents. **Appendices 1-3** accompanying this report reflect that further work of the Task Force and Council.

Each of the comments received during the review period discussed above is reported verbatim in a report that is available for review on [ADA Connect](#). Alongside each comment, a response that summarizes the discussions of the Task Force and the Council on the comment is provided together with a notation of any action taken in response to the comment received. The House of Delegates can, therefore, ascertain what action was taken by the Task Force and the Council to each of the comments received. Also provided on ADA Connect is a comparison of the current and proposed *Bylaws* (less Chapter I).

As presented to the House of Delegates, the proposed *Bylaws* and related material contains the following significant revisions:

- Chapter III of the current *Bylaws* is eliminated, with its provisions either being incorporated into Chapter II or moved to the *Governance Manual*.
- Originally slated to be moved to the *Governance Manual*, Chapter IV of the current *Bylaws* remains as Chapter IV in the proposed ADA *Bylaws*, but the language has been revised to make the chapter a single section. Thus, the structure and purpose of the trustee districts remain in the *Bylaws*.
- The constituent representational requirements and reallocation process contained in current ADA *Bylaws* Chapter V have been moved to the *Manual of the House of Delegates*. Other portions of current Chapter V have been moved to other areas of the amended *Bylaws*, the *Manual of the House of Delegates* or the *Governance Manual*. It is important to note, however, that the provisions relating to the reallocation process, election and selection, certification and terms of delegates and alternate delegates still require a two-thirds (2/3) affirmative vote of those delegates present and voting to amend, even though some of those provisions have been removed from the *Bylaws*.
- Chapter VI of the current *Bylaws* containing the Association's conflict of interest policies has been deleted from the *Bylaws* and moved to the *Governance Manual*.
- The nomination process for trustees contained in current Chapter VII of the *Bylaws* has been significantly simplified. Because a trustee serves as the representative of the constituents making up a trustee district, it has been made clear that trustees are elected within the trustee districts to serve on the Board of Trustees.

- 1 •The provisions in Chapter VII of the *Bylaws* relating to the New Dentist Committee have been  
2 removed from the amended *Bylaws*; it is proposed that these provisions be treated similarly to those  
3 for other committees of the Board of Trustees and included in the *Organization and Rules of the*  
4 *Board of Trustees*. Because the *Organization and Rules of the Board of Trustees* is under the  
5 authority of the Board, Resolution 7 contains a resolving clause that urges the Board to maintain the  
6 same eligibility, selection and appointment criteria, operational procedures and New Dentist  
7 Committee duties as presently set forth in Chapter VII, Section 140 of the current *ADA Bylaws*.  
8
- 9 •Several provisions relating to elective officers found in Chapter VIII of the current *Bylaws* have been  
10 relocated to other areas of the *Bylaws* or moved to the *Governance Manual*.  
11
- 12 •The listing of the councils of the ADA have been retained in Chapter VIII of the proposed *Bylaws*; a  
13 two-thirds (2/3) affirmative vote of those delegates present and voting is still required to establish or  
14 abolish a council. The provisions relating to council composition and the selection, nomination and  
15 election of volunteers to serve on councils, although moved to the *Governance Manual* in the  
16 proposed *Bylaws* revision, still carry the requirement of a two-thirds (2/3) to amend. The listing of the  
17 subject matters for which councils are responsible has also been moved to the *Governance Manual*.  
18
- 19 •Current *Bylaws* Chapters XII and XIII have been combined, with significant segments being moved to  
20 the *Governance Manual* together with the *ADA Procedures for Member Disciplinary Hearings and*  
21 *Appeals and the Issuance of Reminders of Obligation*, currently appendices to the *ADA Bylaws*.  
22
- 23 •Current Chapter XIV (American Dental Association Foundation) has been eliminated from the *Bylaws*.  
24 Some of the removed provisions appear in Chapter III (House of Delegates), Section 50.G and  
25 Chapter V (Board of Trustees), Section 90.P of the proposed *Bylaws*; the rest have been judged to be  
26 unnecessary.  
27
- 28 •Current *Bylaws* Chapter XV has been streamlined, with operational and procedural material being  
29 removed to the *Governance Manual*. The chapter has also been relocated to Chapter IX,  
30 immediately following the *Bylaws* provisions relating to councils. Similarly to councils, the ADA's  
31 commissions are still listed in the *Bylaws*. The composition of the commissions and the provisions  
32 relating to the selection, nomination and election of volunteers to serve on commissions, although  
33 moved to the *Governance Manual* in the proposed *Bylaws* revision, still carry the requirement of a  
34 two-thirds (2/3) vote to amend.  
35
- 36 •Currently, Chapter XV, Section 120 of the *ADA Bylaws* gives the Commission on Dental Accreditation  
37 ("CODA") the authority make corrections in punctuation, grammar, spelling, name changes, gender  
38 references and similar editorial corrections in its rules without House of Delegates approval on a  
39 unanimous vote of CODA members present and voting where the corrections made do not alter the  
40 context or meaning of the rules. The proposed *Bylaws* material gives that same authority to all ADA  
41 commissions (see, Chapter IX, Section L. of the *Governance Manual*.  
42
- 43 •Chapter XVI and XVII of the current *Bylaws* are eliminated, with the provisions being moved to other  
44 areas of the *Bylaws* or removed to the *Governance Manual*.  
45
- 46 •A new Chapter XIV is proposed, codifying the various procedural manuals kept by the Association.  
47
- 48 •A new Chapter XV is proposed, identifying the *Standard Code of Parliamentary Procedure* as the  
49 Association's parliamentary authority.  
50

51 The Task Force and Council believe that the directive of the House of Delegates in 118H-2014 to conduct  
52 a review and rewriting of the *ADA Bylaws* has been completed in the most thorough and transparent way  
53 possible. The Task Force and Council therefore present the following resolution for the consideration of  
54 the House of Delegates with a recommendation to adopt:

**Resolution**

**7. Resolved**, that Chapters II through XX of the current ADA *Bylaws* be deleted in their entirety and that Chapters II through XVI of the version of the ADA *Bylaws* set forth in Appendix I be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further

**Resolved**, that the Appendices I, II and III of the current ADA *Bylaws* be deleted in their entirety, and be it further

**Resolved**, that Chapters II through XIX of the *Governance and Organizational Manual of the American Dental Association* as set forth in Appendix 2 be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further

**Resolved**, that the amendments indicated to the *Operation of the House of Delegates, Rules of the House of Delegates, Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates and Standing Committees of the House of Delegates*, contained the *Manual of the House of Delegates* (Appendix 3), be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further

**Resolved**, that the Board of Trustees is urged to adopt a New Dentist Committee charter to be placed in the *Organization and Rules of the Board of Trustees*, with such charter containing the same set of eligibility, selection and appointment criteria, operational procedures and duties as presently set forth in Chapter VII, *Section 140* of the current ADA *Bylaws*.

**BOARD RECOMMENDATION: Vote Yes.**

**BOARD VOTE: UNANIMOUS.**

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

### ADA BYLAWS CHAPTER I • MEMBERSHIP

Section 10. CLASSIFICATION. The members of this Association shall be classified as follows:

- Active Members
- Life Members
- Retired Members
- Student Members
- Honorary Members
- Provisional Members
- International Members

Section 20. MEMBERSHIP ELIGIBILITY

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be an active member of this Association if he or she meets the following qualifications:

- a. Maintains membership in good standing in this Association as that term is defined in these Bylaws; and
- b. Is a member in good standing of the constituent and component\* where the member either resides, or is employed or practices; or if not a member of such constituent and component is:
  - 1. employed by or is serving on active duty in one of the federal dental services\*\* on a full time basis and is not otherwise employed or practicing dentistry within the jurisdiction of a constituent or component; or
  - 2. employed or practicing dentistry in a country other than the United States and is a graduate of a dental school or a graduate of a training program accredited by the Commission on Dental Accreditation; or
  - 3. otherwise ineligible for active membership in a constituent or component where the individual resides, is employed, or practices.

An individual qualifying pursuant to subsections b.1 through 3 shall be referred to as a "direct member."

B. LIFE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be a life member of this Association if he or she meets the following qualifications:

- a. Has been an active and/or retired member in good standing of this Association for at least thirty (30) consecutive years or a total of at least forty (40) non-consecutive years;
- b. Reached the age of at least sixty-five (65) during the previous calendar year; and
- c. Maintains membership in good standing in a constituent and component, if such exists, and in this Association.
- d. A member may also qualify for life member status by having been a member of the National Dental Association for twenty-five (25) years and subsequently holding membership in this Association for at least ten (10) years and having reached the age of at least sixty-five (65) during the previous calendar year.

C. RETIRED MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be a retired member of this Association if he or she meets the following qualifications:

- a. Has submitted to the individual's component and constituent or, if a direct member, to this Association, an affidavit attesting that the individual does not receive or earn income from any dentally-related activity; and
- b. Maintains membership in good standing in a constituent and component, if such exists, and in this Association.

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\* As used herein, the term "constituent" means a dental association organized in a state or territory of the United States or in Washington, D.C. that is chartered by the ADA House of Delegates. The term "component" means a local dental association that may be created within the boundaries of a constituent by the constituent.

\*\* The term "federal dental services" as used herein shall mean the dental departments of the Air Force, the Army, the Navy, the Public Health Service, the department of Veterans Affairs and other federal agencies.

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

D. STUDENT MEMBER. Any person shall be eligible to be a student member of this Association if the individual meets the following qualifications:

- a. Is enrolled as a predoctoral student of a dental school accredited by the Commission on Dental Accreditation of this Association; or
- b. Is enrolled as a predoctoral student in a dental school listed in the World Directory of Dental Schools compiled by the FDI World Dental Federation; or
- c. Holds a D.D.S., D.M.D. or an equivalent degree and is engaged full-time in an advanced training course of not less than one academic year's duration in an accredited school or residency program.
- d. Student membership shall not be considered in the calculation of membership tenure needed to achieve life membership.

E. HONORARY MEMBER. Any person shall be eligible to be an honorary member of this Association if he or she meets the following qualifications:

- a. Has made outstanding contributions to the advancement of the art and science of dentistry; and
- b. Be elected an honorary member by the Board of Trustees.

F. PROVISIONAL MEMBER. An individual is a provisional member of this Association if he or she meets one of the following alternative qualifications:

- a. Has received a D.D.S. or D.M.D. degree within the past twenty-four (24) months from a dental school accredited by the Commission on Dental Accreditation of this Association and is not eligible for tripartite or any other direct category of membership because he or she has not established a place of practice. The provisional membership awarded under this alternative shall terminate December 31 of the second full calendar year following the year in which the degree was awarded; or
- b. Is a graduate of an unaccredited dental school who has been licensed within the past twenty-four (24) months to practice dentistry in a jurisdiction in which there is a constituent and has not established a place of practice. The provisional membership awarded under this alternative shall terminate December 31 of the second full calendar year following the year in which the license was awarded.

G. INTERNATIONAL MEMBER. An individual who is ineligible for any other classification of membership and:

- a. Is practicing dentistry or is employed in a dentally-related field in a country other than the United States;
- b. Has been classified as an international member upon application to the Board of Trustees according to the specifications in the *Governance and Organizational Manual of the American Dental Association* ("the *Governance Manual*"); and
- c. Maintains membership in good standing in this Association.

Section 30. PRIVILEGES. Members shall receive such privileges and benefits as are listed in the *Governance Manual*.

Section 40. DUES AND SPECIAL ASSESSMENTS. Except for International members, the dues of members shall be the amount established annually by the House of Delegates in accordance with the procedure set forth in the these *Bylaws*. In addition to annual dues, members shall pay any outstanding special assessment that may be levied by the House of Delegates in accordance with the procedure set forth in the *Governance Manual*.

Section 50. DEFINITION OF "IN GOOD STANDING."

A. To be in good standing, a member is required to meet the following criteria:

- a. The member's payments of dues and special assessments, if any, are current if such payment is required; and
- b. Any additional criteria that may be imposed by the member's constituent or component.

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

B. A member under a disciplinary sentence of suspension shall be designated as “in good standing temporarily under suspension” until the disciplinary sentence has terminated.

### Section 60. LAPSE OF MEMBERSHIP AND REINSTATEMENT.

A. LAPSE OF MEMBERSHIP. Any member whose dues and any special assessment have not been paid by March 31 of the current year or shall otherwise fail to meet the eligibility requirements for membership shall cease to be a member of this Association.

B. REINSTATEMENT. Reinstatement of membership may be secured on payment of outstanding dues and any special assessment of this Association and on meeting the remaining eligibility requirements for membership.

Section 70. WAIVER OF DUES AND SPECIAL ASSESSMENTS. Members may be eligible for a full or partial waiver of the current year's dues and/or special assessments as set forth in the *Governance Manual*.

## CHAPTER II • CONSTITUENTS AND COMPONENTS

### Section 10. ORGANIZATION:

A. A constituent may be organized and chartered, subject to the approval of the House of Delegates, upon application of at least one hundred (100) dentists, practicing in any state or other jurisdiction of the United States. These dentists must be active, life or retired members of the Association in good standing. Only one chartered constituent shall exist in each state and territory of the United States and in the District of Columbia. A constituent shall take its name from the jurisdiction where it is located.

B. The constituents chartered by this Association are set forth in the *Governance Manual*. The provisions of Chapter II of the *Governance Manual* shall be amendable only by a two-thirds (2/3) affirmative vote of the delegates present and voting provided that the proposed amendment(s) shall have been presented in writing at a previous session or a previous meeting of the same session of the House of Delegates.

Section 20. CONSTITUTION AND BYLAWS: Each constituent shall adopt and maintain a constitution and bylaws which shall not be in conflict with, or limit, the *Constitution and Bylaws* of this Association. Each constituent shall keep a current version of its constitution and bylaws on file with the Executive Director of this Association.

### Section 30. POWERS AND DUTIES:

A. A constituent shall assume such powers and duties that are consistent with the laws of the jurisdiction under which it is organized and shall not be in conflict with the *Constitution and Bylaws* of this Association and that are necessary for fulfilling the object and purpose of the constituent, including a plan for organizing its members into local geographically based components.

B. The governance and organizational documents of any component authorized by a constituent under this section of the *Bylaws* shall be consistent with the laws of the jurisdiction in which the component is organized and shall not be in conflict with the *Constitution and Bylaws* of this Association.

C. Each constituent shall have the duty to provide for a method for the collection of dues and special assessments.

### Section 40. MEMBERSHIP:

A. The active, life and retired membership of each constituent, except as otherwise provided in these *Bylaws*, shall consist solely of members in good standing of this Association who either live, practice or are employed within the jurisdiction of the constituent.

B. MULTIPLE JURISDICTIONS. A member, if not a direct member of this Association, shall hold active, life or retired membership in only a single constituent and, if one exists, in a component of that constituent. A member may hold one or more other membership categories in other jurisdictions where the member either resides, practices or is employed.

C. TRANSFER FROM ONE JURISDICTION TO ANOTHER. A member who has changed the location of the member's residence, practice or place of employment from the jurisdiction of one constituent to that of



## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

another constituent may maintain active membership in the constituent in which membership is held for the calendar year following that of the member's transfer from the jurisdiction of such constituent. The same privilege shall apply to a member who is separated from a federal dental service. A member shall be permitted to maintain membership in the constituent and component to which the member belonged upon retirement from active practice or employment for the period of retirement regardless of where the member may establish residence.

**Section 50. CODE OF ETHICS:** A constituent or component may adopt a code of ethics governing the professional conduct of its members in addition to the *Principles of Ethics and Code of Professional Conduct* of this Association. Such a code of ethics shall not be in conflict with, or limit, the *Principles of Ethics and Code of Professional Conduct* of this Association.

**Section 60. RIGHT OF HEARING AND APPEAL:** Disputes arising between constituents or between a constituent and one or more of its components may be referred to the Council on Ethics, Bylaws and Judicial Affairs of this Association for hearing and decision pursuant to the procedures set forth in the *Governance Manual* even though a disciplinary penalty is not involved.

### CHAPTER III • HOUSE OF DELEGATES

**Section 10. MEMBERS.**

**A. VOTING MEMBERS.** The voting members of the House of Delegates shall be composed of the officially certified delegates of the constituents and of the federal dental services, who shall be active, life or retired members and officially certified delegates of the American Student Dental Association.

**B. ALTERNATE DELEGATES.** Each constituent and each federal dental service may select from among its active, life and retired members up to the same number of alternate delegates as delegates. The American Student Dental Association may select from among its active members up to the same number of alternate delegates as delegates.

**C. NON-VOTING MEMBERS.** The elective and appointive officers and trustees of this Association shall be members of the House of Delegates without the power to vote and shall not serve as delegates. Past presidents of this Association shall be members of the House of Delegates without the power to vote unless designated as delegates.

**D. ELECTION OR SELECTION.** A constituent's delegates shall be elected or, in the case of a constituent's alternate delegates elected or selected by one or more of the following methods:

1. By the membership at large of that constituent;
2. By the constituent's governing legislative body or in the case of alternate delegates, selected by the constituent's board of directors, at the discretion of the constituent; and
3. By a component with respect to the delegates representing that component.

Each federal dental service and the American Student Dental Association may establish its own method for electing or selecting delegates, except that the American Student Dental Association shall select its five (5) delegates from its even numbered regions in even numbered years, and the odd numbered regions in odd numbered years, with their alternate delegates selected from the opposite groups of regions.

**E. TERM, CERTIFICATION AND CREDENTIALING.** The terms, and process for certifying and credentialing delegates and alternate delegates shall be as set forth in the *Manual of the House of Delegates*.

**Section 20. PROXY VOTING PROHIBITED.** Proxy voting by delegates is explicitly prohibited; however, an alternate delegate may vote when substituted for a voting member in accordance with procedures established by the Committee on Credentials, Rules and Order.

**Section 30. REPRESENTATION.** Each constituent, each federal dental service and the American Student Dental Association shall be entitled to representation as set forth in the *Manual of the House of Delegates*. The House of Delegates may, by a two-thirds (2/3) affirmative vote of the delegates present and voting suspend the representation of a constituent in the House of Delegates upon a determination

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188 by the House that the constitution or bylaws of the constituent conflicts or limits the *Constitution* or *Bylaws*  
189 of this Association. Such suspension shall not be effective until the House of Delegates has voted that  
190 the constituent is in violation and has one year after notification of the specific violation to correct its  
191 constitution or bylaws.

192 *Section 40. POWERS:* In addition to possessing legislative and policy-making power, the House of  
193 Delegates shall have the supreme authoritative power to:

194 A. Determine the policies which shall govern this Association in all of its activities.

195 B. Enact, amend and repeal the *Constitution and Bylaws* and the *Governance Manual*.

196 C. Adopt and amend the *Principles of Ethics and Code of Professional Conduct*

197 D. Grant, amend, suspend or revoke charters of constituents.

198 E. Suspend the representation of a constituent in the House of Delegates in accordance with the  
199 procedures set forth in the *Manual of the House of Delegates*.

200 F. Create special committees.

201 G. Establish branch offices.

202 H. Levy special assessments.

203 I. Approve all memorials, resolutions or opinions issued in the name of the American Dental Association.

204 *Section 50. DUTIES:* It shall be the duty of the House of Delegates to:

205 A. Elect the elective officers.

206 B. Install the members of the Board of Trustees elected by the trustee districts.

207 C. Elect the members of the councils and commissions except as otherwise provided by these *Bylaws*.

208 D. Receive and act upon reports of the committees of the House of Delegates.

209 E. Adopt an annual budget and establish the dues of active members for the following year.

210 F. Serve as the court of appeal from decisions of the Council on Ethics, Bylaws and Judicial Affairs  
211 involving disputes arising between constituents or between a constituent and a component, as provided in  
212 of these *Bylaws*.

213 G. Provide sufficient support to the ADA Foundation in addition to non-Association funding to assure the  
214 continued viability of the Foundation's research activities.

215 *Section 60. TRANSFER OF POWERS AND DUTIES OF THE HOUSE OF DELEGATES:* The powers  
216 and duties of the House of Delegates, except the power to amend, enact and repeal the *Constitution and*  
217 *Bylaws* or the *Governance Manual*, and the duty of electing the elective officers and installing the  
218 members of the Board of Trustees, may be transferred to the Board of Trustees of this Association in time  
219 of extraordinary emergency, as set forth in the *Governance Manual*.

220 *Section 70. SESSIONS.*

221 A. ANNUAL MEETING. The House of Delegates shall meet annually pursuant to an official call as  
222 required by the *Governance Manual*.

223 B. SPECIAL SESSIONS. A special session of the House of Delegates shall be called upon the request of  
224 the Board of Trustees or the House of Delegates in accordance with the procedures set forth in the  
225 *Governance Manual*.

226 *Section 80. QUORUM:* A quorum for the transaction of business at any meeting shall consist of twenty-  
227 five percent (25%) of the voting members of the House of Delegates, representing at least twenty-five  
228 percent (25%) of the constituents, the federal dental services and the American Student Dental  
229 Association combined.

230 *Section 90. OFFICERS:*

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A. SPEAKER OF THE HOUSE OF DELEGATES. The Speaker of the House of Delegates shall:

1. Preside at all meetings of the House of Delegates;
2. With the assistance of the Secretary of the House of Delegates, determine the order of business for all meetings subject to the approval of the House of Delegates;
3. Appoint tellers to assist in determining the result of any action taken by vote; and
4. Perform such other duties as custom and parliamentary procedure require.

In the absence of the Speaker the office shall be filled by the President.

B. SECRETARY. The Executive Director of this Association shall serve as Secretary of the House of Delegates. The Secretary of the House of Delegates shall serve as the recording officer of the House of Delegates and the custodian of its records, and shall cause a record of the proceedings of the House to be published as the official transactions of the House. In the absence of the Secretary of the House of Delegates the Speaker shall appoint a Secretary of the House of Delegates *pro tem*.

*Section 100.* RULES OF ORDER. Except as otherwise stated in this Chapter, the conduct of business at any meeting of the House of Delegates shall be subject to the following:

A. STANDING RULES. The *Standing Rules of the House of Delegates* shall be set forth in the *Manual of the House of Delegates*.

B. PARLIAMENTARY PROCEDURE. The parliamentary procedure governing the House of Delegates shall be the rules contained in the parliamentary authority of this Association where applicable and not in conflict with these *Bylaws*, the *Governance Manual* or the *Standing Rules of the House of Delegates*.

*Section 110.* COMMITTEES:

A. STANDING COMMITTEES. The standing committees of the House of Delegates shall be the Committee on Constitution and Bylaws, the Committee on Credentials, Rules and Order and such Reference Committees as shall in the determination of the Speaker of the House of Delegates be necessary to complete the business of the House of Delegates. The composition and duties of the standing committees of the House of Delegates shall be as stated in the *Manual of the House of Delegates*.

B. SPECIAL COMMITTEES. The composition of special committees formed by the House of Delegates shall be determined by the Speaker of the House of Delegates. The duties of any special committee shall be as specified by the House of Delegates, but may only include duties not otherwise assigned by these *Bylaws*. Any special committee created by the House of Delegates shall exist until the duties assigned to it are fulfilled or until adjournment *sine die* of the House of Delegates session immediately following the session at which it was appointed, whichever first occurs.

*Section 120.* METHOD OF ELECTION: Elective officers and members of councils and committees shall be elected by ballot, except that when there is only one candidate, such candidate may be declared elected by the Speaker of the House of Delegates. The Secretary shall provide facilities for voting.

1. When one is to be elected, and more than one has been nominated, the majority of the ballots cast shall elect. In the event no candidate receives a majority on the first ballot, the candidate with the fewest votes shall be removed from the ballot and the remaining candidates shall be balloted upon again. This process shall be repeated until one (1) candidate receives a majority of the votes cast.

2. When more than one is to be elected, and the nominees exceed the number to be elected, the votes cast shall be non-cumulative, and the candidates receiving the greatest number of votes shall be elected.

## CHAPTER IV • TRUSTEE DISTRICTS

In order to provide representation for members on the Board of Trustees, the constituents and the federal dental services shall be organized into trustee districts as follows:

### DISTRICT 1

Connecticut State Dental Association, The

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278	Maine Dental Association
279	Massachusetts Dental Society
280	New Hampshire Dental Society
281	Rhode Island Dental Association
282	Vermont State Dental Society
283	<u>DISTRICT 2</u>
284	New York State Dental Association
285	<u>DISTRICT 3</u>
286	Pennsylvania Dental Association
287	<u>DISTRICT 4</u>
288	Air Force Dental Corps
289	Army Dental Corps
290	Delaware State Dental Society
291	District of Columbia Dental Society, The
292	Maryland State Dental Association
293	Navy Dental Corps
294	New Jersey Dental Association
295	Public Health Service
296	Puerto Rico, Colegio de Cirujanos Dentistas de
297	Veterans Affairs
298	Virgin Islands Dental Association
299	<u>DISTRICT 5</u>
300	Alabama Dental Association
301	Georgia Dental Association
302	Mississippi Dental Association, The
303	<u>DISTRICT 6</u>
304	Kentucky Dental Association
305	Missouri Dental Association
306	Tennessee Dental Association
307	West Virginia Dental Association
308	<u>DISTRICT 7</u>
309	Indiana Dental Association
310	Ohio Dental Association
311	<u>DISTRICT 8</u>
312	Illinois State Dental Society
313	<u>DISTRICT 9</u>
314	Michigan Dental Association
315	Wisconsin Dental Association
316	<u>DISTRICT 10</u>
317	Iowa Dental Association
318	Minnesota Dental Association
319	Nebraska Dental Association, The
320	North Dakota Dental Association
321	South Dakota Dental Association

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322 DISTRICT 11  
323 Alaska Dental Society  
324 Idaho State Dental Association  
325 Montana Dental Association  
326 Oregon Dental Association  
327 Washington State Dental Association

328 DISTRICT 12  
329 Arkansas State Dental Association  
330 Kansas Dental Association  
331 Louisiana Dental Association, The  
332 Oklahoma Dental Association

333 DISTRICT 13  
334 California Dental Association

335 DISTRICT 14  
336 Arizona Dental Association  
337 Colorado Dental Association  
338 Hawaii Dental Association  
339 Nevada Dental Association  
340 New Mexico Dental Association  
341 Utah Dental Association  
342 Wyoming Dental Association

343 DISTRICT 15  
344 Texas Dental Association

345 DISTRICT 16  
346 North Carolina Dental Society, The  
347 South Carolina Dental Association  
348 Virginia Dental Association

349 DISTRICT 17  
350 Florida Dental Association

### 351 **CHAPTER V • BOARD OF TRUSTEES**

352 *Section 10. COMPOSITION:* The Board of Trustees shall consist of one (1) trustee from each trustee  
353 district. Such trustees, the President-elect and the two Vice Presidents shall constitute the voting  
354 members of the Board of Trustees. The President, the Treasurer and the Executive Director of the  
355 Association, except as otherwise provided in the *Bylaws*, shall be non-voting members of the Board of  
356 Trustees.

357 *Section 20. TERM OF OFFICE:* The term of office of a trustee shall be four (4) years.\* Except as  
358 otherwise provided in these *Bylaws*, the tenure of a trustee shall be limited to one (1) term.

359 *Section 30. ELECTION:* Trustee nominations shall be by an elective process, the rules of which shall be  
360 determined by each trustee district. Each trustee district's election process shall result in a single  
361 nominee for trustee by each trustee district.

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\* The term "year" in the context of holding an office or position means the period of time commencing with the adjournment *sine die* of an annual meeting of the House of Delegates and ending with the adjournment *sine die* of the next successive annual meeting of the House of Delegates.

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- 362 *Section 40. INSTALLATION:* The installation of trustee nominees shall be as provided in the *Governance*  
363 *Manual.*
- 364 *Section 50. REMOVAL FOR CAUSE:* The House of Delegates may remove a trustee for cause in  
365 accordance with procedures set forth in the *Governance Manual.*
- 366 *Section 60. VACANCY:* In the event of a vacancy in the office of trustee due to change in eligibility to hold  
367 office, resignation, incapacity or removal, an active, life or retired member may be appointed by the  
368 President to fill the unexpired term of the vacancy. The appointment shall be made by the President with  
369 the advice and consent of the former trustee's district.
- 370 *Section 70. POWERS:* The Board of Trustees shall be the managing body of the Association, vested with  
371 power to:
- 372 A. Conduct all business of the Association, subject to the laws of the State of Illinois, the Articles of  
373 Incorporation, the *Constitution and Bylaws* and the mandates of the House of Delegates. The power of  
374 the Board of Trustees to act as the managing body of the Association shall not be construed as limiting  
375 the power of the House of Delegates to establish policy with respect to the governance of this Association  
376 in all its activities, except for areas expressly reserved in these *Bylaws* as powers and/or duties of the  
377 Board of Trustees.
- 378 B. Establish rules and regulations not conflicting with these *Bylaws* for its governance.
- 379 C. Direct the President to call a special session of the House of Delegates.
- 380 D. By unanimous consent of the members of the Board of Trustees present and voting at a regular or  
381 special session, declare the existence of a time of extraordinary emergency.\*
- 382 E. Cause *The Journal of the American Dental Association* to be published as the official publication of the  
383 Association, including appointment of an editor and an editorial board nominated by the editor.
- 384 F. Cause to be published such other publications as may be deemed advisable.
- 385 G. Cause to be published in or omitted from any official publication of the Association any article relating  
386 to ADA policies, advocacy efforts or legislative agendas.
- 387 H. Establish *ad interim* policies when the House of Delegates is not in session and when such policies are  
388 essential to the management of the Association provided, however, that all such policies must be  
389 presented for review and consideration by the House of Delegates at its next session.
- 390 I. Remove a council member for cause in accordance with procedures established by the Board of  
391 Trustees in the *Organization and Rules of the Board of Trustees.*
- 392 J. Elect honorary members.
- 393 K. Appoint its members to committees that shall have the power to perform any duty that the Board of  
394 Trustees may lawfully delegate.
- 395 L. Monitor and guide the activities of all councils and special committees.
- 396 M. Notwithstanding any other provision in the *Bylaws*, authorize pilot programs of limited scope, subject to  
397 the provisions on pilot programs in the *Governance Manual.*
- 398 *Section 80. DUTIES:* It shall be the duty of the Board of Trustees to:
- 399 A. Provide for the purchase, sale, mortgage, maintenance and supervision of all properties or offices of  
400 this Association.
- 401 B. Appoint the Executive Director and, when necessary, an interim Executive Director.
- 402 C. Determine the date and place for convening annual House of Delegates and scientific sessions and  
403 provide for the management and general arrangements for each.

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\* The existence of a time of extraordinary emergency may also be declared by the House of Delegates pursuant to the procedure set forth in the *Manual of the House of Delegates.*

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- 404 D. Cause the Treasurer, the Executive Director and employees of the Association entrusted with  
405 Association funds to be bonded by a surety company.
- 406 E. Cause all accounts of the Association to be audited by a certified public accountant at least once a  
407 year.
- 408 F. Prepare and propose a budget to the House of Delegates for each ensuing fiscal year, including a  
409 recommendation for the dues of active members.
- 410 G. Establish recommended qualifications for the offices of Treasurer and Speaker of the House of  
411 Delegates.
- 412 H. Submit to the House of Delegates nominations for membership to the councils and commissions,  
413 except as otherwise provided in these *Bylaws*.
- 414 I. Except as otherwise provided in these *Bylaws*, act upon commission and committee nominations for  
415 consultants.
- 416 J. Review the reports of councils and special committees of the Association and to make  
417 recommendations concerning such reports to the House of Delegates.
- 418 K. Submit an annual report of its activities to the House of Delegates.
- 419 L. Appoint special committees of the Association in accordance with these *Bylaws*.
- 420 M. Render a final judgment on what constitutes a conflict of interest.
- 421 N. Establish dues for the international member category.
- 422 O. Ask that the ADA Foundation provide the Board of Trustees with a request for any funding in  
423 furtherance of Chapter III, Section 50.G of these *Bylaws* so said request can be considered during the  
424 Association's annual budgeting activities.
- 425 P. Perform such other duties as are provided for in these *Bylaws*.
- 426 *Section 90. MEETINGS:*
- 427 A. REGULAR MEETINGS. The Board of Trustees shall hold a minimum of three regular meetings each  
428 year. The number and dates of regular meetings to be held for the ensuing year shall be determined in  
429 advance by the Board of Trustees.
- 430 B. SPECIAL MEETINGS. Special meetings of the Board of Trustees may be called at any time either by  
431 the President or at the request of five voting members of the Board, provided notice is given to each  
432 member in advance of the meeting.
- 433 C. PLACE OF MEETINGS: Regular or special meetings may be held in a single geographic location or  
434 from multiple remote locations through the use of suitable communications equipment. Such meetings  
435 shall be conducted in accordance with rules and procedures established by the Board of Trustees.
- 436 *Section 100. QUORUM:* A majority of the voting members of the Board of Trustees shall constitute a  
437 quorum.
- 438 *Section 110. OFFICERS:*
- 439 A. CHAIR AND SECRETARY. The officers of the Board of Trustees shall be the President who shall be  
440 the Chair, and the Executive Director who shall be the Secretary. In the absence of the President, the  
441 office of Chair shall be filled by the President-elect and, in the absence of the President-elect, by the First  
442 or Second Vice President in that order. In their absence, the Secretary or the Secretary's designee shall  
443 preside over the election of a Chair *pro tem* from among the voting members of the Board of Trustees  
444 then present. In the absence of the Secretary, the Chair shall appoint a Secretary *pro tem*.
- 445 B. DUTIES.
- 446 a. CHAIR. The Chair shall preside at all meetings of the Board of Trustees. The Chair may cast a vote  
447 only in instances where there is a tie vote and the tie does not by itself determine the outcome of the  
448 vote.

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

b. SECRETARY. The Secretary shall serve as the recording officer of the Board of Trustees and as the custodian of its records. The Secretary shall cause a record of the proceedings to be published as the official transactions of the Board.

### CHAPTER VI • ELECTIVE OFFICERS

*Section 10.* TITLE: The elective officers of this Association shall be President, President-elect, First Vice President, Second Vice President, Treasurer and Speaker of the House of Delegates, as provided in the *Constitution*.

*Section 20.* ELIGIBILITY: The eligibility requirements for serving as an elective officer are as set forth in the *Governance Manual*.

*Section 30.* NOMINATIONS: Nominations for an elective officer for election by the House of Delegates shall be in accordance with the procedures contained in the *Governance Manual*.

*Section 40.* ELECTIONS: The elective officers shall be elected as specified in Chapter III of these *Bylaws*.

*Section 50.* TERM OF OFFICE:

A. The President, President-elect, First Vice President and Second Vice President shall serve for a term of one (1) year, or until their successors are elected and installed.

B. The terms of office of the Speaker of the House of Delegates and the Treasurer shall be three years, or until a successor is elected and installed. The Speaker of the House of Delegates and the Treasurer shall be limited to two (2) consecutive terms.\*

*Section 60.* INSTALLATION: The installation of elective officers shall be as provided in the *Governance Manual*

*Section 70.* REMOVAL FOR CAUSE: The House of Delegates may remove an elective officer for cause by a two-thirds (2/3) affirmative vote of the delegates present and voting in accordance with the procedures contained in the *Governance Manual*. An elective officer may also be removed upon a finding of a violation of the member conduct policy in accordance with these *Bylaws* and the procedures adopted thereunder.

*Section 80.* VACANCIES: Vacancies in an elective office shall be filled as follows:

A. PRESIDENT: The President-elect shall become President for the unexpired portion of the term. In the event the office of President becomes vacant for the second time in the same term or at a time when the office of President-elect is also vacant, the First Vice President shall become President for the unexpired portion of the term.

B. PRESIDENT-ELECT: Should the office of President-elect become vacant by reason other than the President-elect succeeding to the office of the President earlier than the next annual session, the office of President for the ensuing year shall be filled at the next annual session of the House of Delegates in the same manner as that provided for the nomination and election of elective officers, except that the ballot shall read "President for the Ensuing Year."

C. FIRST VICE PRESIDENT: The Second Vice President shall become the First Vice President for the unexpired portion of the term.

D. SECOND VICE PRESIDENT: By majority vote of the Board of Trustees.

E. SPEAKER OF THE HOUSE OF DELEGATES: The President, with approval of the Board of Trustees, shall appoint an interim Speaker who shall serve until the House of Delegates can elect a Speaker of the House of Delegates for a three (3) year term. Service as an interim Speaker shall not count toward the term of office limitation for Speaker of the House.

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\* In order to stagger the terms of the Speaker of the House and the Treasurer, the term of the Speaker of the House for 2015-2018 shall be extended for one (1) year, and shall end at the adjournment *sine die* of the 2019 House of Delegates. This footnote shall expire at the adjournment *sine die* of the 2019 House of Delegates.



## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

F. TREASURER: Filled with an interim Treasurer by a majority vote of the Board of Trustees until the process of inviting applications, screening and nominating candidates and electing a new Treasurer has been completed by the Board of Trustees and the House of Delegates. Service as an interim Treasurer shall not count toward the term of office limitation for Treasurer.

G. TEMPORARY INCAPACITY OF THE PRESIDENT: Whenever the Board of Trustees is notified by the President or determines by majority vote that the President is unable to discharge the duties of his or her office due to temporary incapacity, the President-elect shall assume the duties of the office of President, as Acting President, until the President satisfies the voting members of the Board of Trustees that he or she is prepared to resume the duties of the office of President.

### Section 90. DUTIES:

#### A. PRESIDENT. It shall be the duty of the President to:

- a. Serve as the primary official representative of this Association in its contacts with governmental, civic, business and professional organizations for the purpose of advancing the objectives and policies of this Association.
- b. Serve as Chair and, except as otherwise provided in these *Bylaws*, a non-voting member of the Board of Trustees.
- c. Call special sessions of the House of Delegates and the Board of Trustees as provided in these *Bylaws* and/or the *Governance Manual*.
- d. Appoint the members of all committees of the House of Delegates except as otherwise provided in the *Governance Manual*.
- e. Fill vacancies in the office of trustee and other vacancies as provided in these *Bylaws*.
- f. Submit an annual report to the House of Delegates.
- g. Review travel reimbursements for the Treasurer.
- h. Perform such other duties as may be provided in these *Bylaws* and/or the *Governance Manual*.

#### B. PRESIDENT-ELECT. It shall be the duty of the President-elect to:

- a. Assist the President as requested.
- b. Serve as a non-voting member of the House of Delegates.
- c. Serve as a member of the Board of Trustees.
- d. Succeed to the office of President at the next annual session of the House of Delegates following election as President-elect.
- e. Succeed immediately to the office of President in the event of vacancy not only for the unexpired term but also for the succeeding year.

#### C. FIRST VICE PRESIDENT. It shall be the duty of the First Vice President to:

- a. Assist the President as requested.
- b. Serve as a non-voting member of the House of Delegates.
- c. Serve as a member of the Board of Trustees.
- d. Succeed to the office of President, as provided in these *Bylaws*.

#### D. SECOND VICE PRESIDENT. It shall be the duty of the Second Vice President to:

- a. Assist the President as requested.
- b. Serve as a non-voting member of the House of Delegates.
- c. Serve as a member of the Board of Trustees.

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

d. Succeed to the office of First Vice President at the next annual session of the House of Delegates following election as Second Vice President.

e. Succeed immediately to the office of First Vice President in the event of vacancy in that office not only for the unexpired term but also for the succeeding term.

E. SPEAKER OF THE HOUSE OF DELEGATES. The Speaker shall preside at the meetings of the House of Delegates and shall perform such duties as custom and parliamentary procedure require. The Speaker shall serve as the parliamentarian of the Board of Trustees but shall not be a member of the Board of Trustees.

F. TREASURER. It shall be the duty of the Treasurer to:

a. Serve as custodian of all monies, securities and deeds belonging to the Association which may come into the Association's possession.

b. Hold, invest and disburse all Association monies, securities and deeds, subject to the direction of the Board of Trustees.

c. Design a budgetary process and develop budgets in concert with the Board of Trustees.

d. Oversee Association finances, including providing information on the finances of the Association to the Budget Reference Committee, House of Delegates and the membership and reporting on financial matters to the Board of Trustees on a quarterly basis.

e. Review travel reimbursements for the elective officers (except for the Treasurer), trustees and Executive Director.

f. Serve as a non-voting member of the House of Delegates.

g. Serve as a non-voting member of the Board of Trustees.

h. Perform such other duties as may be provided in these *Bylaws*.

### CHAPTER VII • APPOINTIVE OFFICER

*Section 10.* TITLE: The appointive officer of this Association shall be an Executive Director, as provided in the *Constitution*.

*Section 20.* APPOINTMENTS: A member in good standing or an individual who is not eligible for membership may be appointed as Executive Director by the Board of Trustees.

*Section 30.* TERM OF OFFICE AND SALARY: The appointive officer serves at the pleasure of the Board of Trustees, subject to a services agreement negotiated between the Board of Trustees and the appointive officer. The Board shall determine the salary of the appointive officer, if any, and the duration of the services agreement with the appointive officer, provided, however, that the duration of the agreement shall not to exceed three (3) years. The services agreement between the Board of Trustees and the appointive officer may, subject to the discretion of the Board of Trustees and the agreement of the appointive officer, be renewed or renegotiated when it expires. Notwithstanding the services agreement with the appointive officer, the Board of Trustees may, in its discretion, terminate the services of the appointive officer at any time.

*Section 40.* DUTIES: The Executive Director shall be the principal agent of the Board of Trustees and the elective officers and, under their direction, shall be the chief operating officer of this Association. In this capacity, the Executive Director shall:

A. Preserve and protect the *Constitution and Bylaws* and the standing rules of this Association;

B. Facilitate the activities of the officers and trustees of this Association in carrying out their respective administrative responsibilities under these *Bylaws*;

C. Engage the staff of this Association and direct and coordinate their activities;

D. Provide leadership in the formulation and recommendation of new policies to the Board of Trustees and elective officers;

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577 E. Oversee the management of Association policies that have been adopted by the Board of Trustees  
578 and/or the House of Delegates;

579 F. Direct the publication of the official transactions of the House of Delegates and reports of officers,  
580 councils and committees;

581 G. Assist the Board of Trustees in monitoring and providing guidance to all Association councils,  
582 commissions and committees;

583 H. Maintain effective internal and external relationships with all officers and trustees of this Association,  
584 the leadership of related dental organizations, and representatives from other leading public and private  
585 organizations that interact with this Association; and

586 I. Perform such other duties as are prescribed by these *Bylaws* and/or the *Governance Manual*.

587 *Section 50. VACANCY:* A vacancy in the office of Executive Director shall be filled in accordance with the  
588 procedures set forth in the *Governance Manual*.

### 589 CHAPTER VIII • COUNCILS

590 *Section 10. ESTABLISHMENT OF COUNCILS:* The House of Delegates shall establish councils as set  
591 forth below, each of which shall have the areas of responsibility, composition, and operation that are set  
592 forth in the *Governance Manual*. The councils of this Association are:

593 Council on Advocacy for Access and Prevention

594 Council on Communications

595 Council on Dental Benefit Programs

596 Council on Dental Education and Licensure

597 Council on Dental Practice

598 Council on Ethics, Bylaws and Judicial Affairs

599 Council on Government Affairs

600 Council on Members Insurance and Retirement Programs

601 Council on Membership

602 Council on Scientific Affairs

603 *Section 20. COMPOSITION, SELECTION NOMINATION AND ELECTION OF MEMBERS.* The  
604 composition, selection and nomination and election procedures as set forth in the *Governance Manual*  
605 shall be amendable only on a two-thirds (2/3) affirmative vote of the delegates present and voting.

606 *Section 30. DUTIES:* Each council established by the House of Delegates pursuant to this Chapter of the  
607 *Bylaws* shall have the following duties with respect to the subject matters for which each council is  
608 responsible as listed in the *Governance Manual*:

609 A. Define, develop and oversee programming and projects that support and advance the strategic plan of  
610 the Association;

611 B. Consider and investigate emerging issues;

612 C. Respond to directives received from the House of Delegates or the Board of Trustees;

613 D. Propose new policies and rescission of and amendments to existing policies for consideration by the  
614 House of Delegates; and

615 E. Collaborate with external and internal agencies, upon direction or approval of the ADA President, on  
616 initiatives or issues that are within the responsibility of the council and communicate appropriate  
617 information to the Association membership.

### 618 CHAPTER IX • COMMISSIONS

619 *Section 10. NAME:* The Association shall have the following commissions:

620 Commission on Dental Accreditation

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

621 Joint Commission on National Dental Examinations

622 Commission for Continuing Education Provider Recognition

623 *Section 20. MEMBERSHIP AND OPERATION:* The composition and operation of the commissions shall  
624 be as set forth in the *Governance Manual*.

625 *Section 30. DUTIES:*

626 A. COMMISSION ON DENTAL ACCREDITATION. The duties of the Commission on Dental Accreditation  
627 shall be to:

628 a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental  
629 and allied dental educational programs.

630 b. Accredite dental, advanced dental and allied dental educational programs.

631 c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a  
632 separate and distinct body of the Commission whose membership shall be totally different from that of  
633 the accrediting body of the Commission.

634 d. Submit an annual report to the House of Delegates of this Association and interim reports, on  
635 request, and the Commission's annual budget to the Board of Trustees of the Association.

636 e. Submit the Commission's articles of incorporation and rules and amendments thereto to this  
637 Association's House of Delegates for approval by majority vote.

638 B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS. The duties of the Joint Commission  
639 on National Dental Examinations shall be to:

640 a. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of  
641 assisting state boards of dental examiners in determining qualifications of dentists who seek license to  
642 practice in any state or other jurisdiction of the United States. Dental licensure is subject to the laws of  
643 the state or other jurisdiction of the United States and the conduct of all clinical examinations for  
644 licensure is reserved to the individual board of dental examiners.

645 b. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of  
646 assisting state boards of dental examiners in determining qualifications of dental hygienists who seek  
647 license to practice in any state or other jurisdiction of the United States. Dental hygiene licensure is  
648 subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical  
649 examinations for licensure is reserved to the individual board of dental examiners.

650 c. Make rules and regulations for the conduct of examinations and the certification of successful  
651 candidates.

652 d. Serve as a resource of the dental profession in the development of written examinations.

653 C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION. The duties of the  
654 Commission for Continuing Education Provider Recognition shall be to:

655 a. Formulate and adopt requirements, guidelines and procedures for the recognition of continuing  
656 dental education providers.

657 b. Approve providers of continuing dental education programs and activities.

658 c. Provide a means for continuing dental education providers to appeal adverse recognition decisions.

659 d. Submit an annual report to the House of Delegates of this Association and interim reports, on  
660 request, and the Commission's annual budget to the Board of Trustees of the Association.

661 e. Submit the Commission's rules and amendments thereto to this Association's House of Delegates for  
662 approval by majority vote either through or in cooperation with the Council on Dental Education and  
663 Licensure.

664 **CHAPTER X • SPECIAL COMMITTEES**

## APPENDIX 1 (RESOLUTION 7) REFERENCE COMMITTEE D

*Section 10. APPOINTMENT AND TERM:* Special committees of this Association may be created at any session of the House of Delegates or, when the House is not in session, by the Board of Trustees, for the purpose of performing duties not otherwise assigned. Special committees shall serve until adjournment *sine die* of the next annual session of the House of Delegates or upon completion of their assignment, whichever is sooner. The appointment of the members of a special committee, their number, tenure and funding shall be set forth in the resolution creating such committee.

*Section 20. PRIVILEGE OF THE FLOOR:* Chairs and members of special committees who are not members of the House of Delegates shall have the right to participate in the debate on their respective reports but shall not have the right to vote.

### CHAPTER XI • PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT, MEMBER CONDUCT POLICY AND JUDICIAL PROCEDURES

*Section 10. PROFESSIONAL AND ORGANIZATIONAL CONDUCT:*

A. MEMBERS: The professional conduct of a member of this Association shall be governed by the *Principles of Ethics and Code of Professional Conduct* of this Association and by the codes of ethics of the constituents and components within whose jurisdiction the member practices, or conducts or participates in other professional dental activities. The organizational conduct of a member of this Association shall be governed by the Member Conduct Policy of the Association.

B. TRANSFERS OF MEMBERSHIP: A member who is unsuccessful in transferring membership from one constituent to another shall be entitled to a hearing, the conduct of which will be subject to the judicial procedures contained in the *Governance Manual*.

*Section 20. DISCIPLINE OF MEMBERS:* A member may be disciplined in accordance with the procedures set forth in the *Governance Manual* for (1) having been found guilty of a felony, (2) having been found guilty of violating the dental practice act of a state or other jurisdiction of the United States, (3) having been discharged or dismissed from practicing dentistry with one of the federal dental services under dishonorable circumstances, (4) violating the *Bylaws*, the *Principles of Ethics and Code of Professional Conduct*, or the bylaws or code of ethics of the constituent or component of which the accused is a member, or (5) violating the Member Conduct Policy of the Association.

### CHAPTER XII • FINANCES

*Section 10. FISCAL YEAR:* The fiscal year of the Association shall begin January 1 of each calendar year and end December 31 of the same year.

*Section 20. GENERAL FUND:* The General Fund shall consist of all monies received other than those specifically allocated to other funds by these *Bylaws*. This fund shall be used for defraying all expenses incurred by this Association not otherwise provided for in these *Bylaws*.

*Section 30. OTHER FUNDS:* The Association may establish other funds, at the direction of the Board of Trustees, in accordance with the procedures in the *Governance Manual*.

*Section 40. APPROVAL OF ANNUAL BUDGET.* The proposed annual budget shall be submitted by the Board of Trustees to the members of the House of Delegates at least thirty (30) days prior to the opening meeting of the annual session, shall be referred to a reference committee on budget for hearings at the annual session and then shall be considered for approval as a special order of business. In the event the budget as submitted is not approved, all recommendations for changes shall be referred to the Board of Trustees to prepare and present a revised budget. This procedure shall be repeated until a budget for the ensuing fiscal year shall be adopted.

*Section 50. APPROVAL OF THE DUES OF ACTIVE MEMBERS.* The dues of active members of this Association shall be established by the House of Delegates as the last item of business at each annual session. The resolution to establish the dues of active members for the following year shall be proposed at each annual session by the Board of Trustees in conformity with these *Bylaws* and the procedures set forth in the *Governance Manual*, may be amended to any amount and/or reconsidered by the House of Delegates until a resolution establishing the dues of active members is adopted by a sixty percent (60%) affirmative vote of the delegates present and voting.

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### Section 60. SPECIAL ASSESSMENTS:

A. LEVYING: Special assessments may be levied by the House of Delegates upon active, life and retired members of this Association as provided in these *Bylaws* for the purpose of funding a specific project of limited duration. Such an assessment may be levied at any annual or special session of the House of Delegates by a two-thirds (2/3) affirmative vote of the delegates present and voting provided that the notice requirements contained in the *Governance Manual* have been fulfilled. Any resolution to levy a special assessment that does not meet the notice requirements set forth in the *Governance Manual* may be adopted by a unanimous vote of the House of Delegates, provided the resolution has been presented in writing at a previous meeting of the same session. Debate on a resolution to levy a special assessment shall proceed in accordance with the procedures found in the *Governance Manual*. The House of Delegates may amend the main motion to levy a special assessment only if the amendment is germane and adopted by a two-thirds (2/3) affirmative vote of the delegates present and voting.

B. ACCOUNTING OF FUNDS: Revenue from a special assessment and any earnings thereon shall be deposited in a separate fund as provided in this Chapter.

## CHAPTER XIII • INDEMNIFICATION

Each trustee, officer, council member, committee member, employee and other agent of the Association shall be held harmless and indemnified by the Association against all claims and liabilities and all costs and expenses, including attorney's fees, reasonably incurred or imposed upon such person in connection with or resulting from any action, suit or proceeding, or the settlement or compromise thereof, to which such person may be made a party by reason of any action taken or omitted to be taken by such person as a trustee, officer, council member, committee member, employee or agent of the Association, in good faith. This right of indemnification shall inure to such person whether or not such person is a trustee, officer, council member, committee member, employee or agent at the time such liabilities, costs or expenses are imposed or incurred and, in the event of such person's death, shall extend to such person's legal representatives. To the extent available, the Association shall insure against any potential liability hereunder.

## CHAPTER XIV • PROCEDURAL MANUALS OF THE ASSOCIATION

Section 10. NAMES: The Association shall have and maintain at least the following procedural manuals:  
*Governance Manual*;  
*Manual of the House of Delegates*;  
*Organization and Rules of the Board of Trustees*; and  
*Standing Rules of Councils and Commissions*.

### Section 20. PURPOSE:

The manuals are maintained as a guide to the operations of the Association. Their purpose is to further define and provide for implementation of the provisions of the *Constitution and Bylaws*. The provisions in the procedural manuals may not change or limit any provision of the *Constitution and Bylaws* but take precedence over the rules contained in the Association's parliamentary authority.

### Section 30. AMENDMENTS:

A. The *Governance Manual* is under the authority of the House of Delegates and shall be amended by a resolution of the House of Delegates. Such resolution shall require a majority vote of the members of the House of Delegates present and voting unless the section of the *Manual* under consideration requires otherwise.

B. The *Operation of the House of Delegates*, *Rules of the House of Delegates*, *Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates*, *Standing Committees of the House of Delegates* and *Election Commission and Campaign Rules* published in the *Manual of the House of Delegates* are amendable by a majority vote of the members of the House present and voting unless the section of the *Manual of the House of Delegates* under consideration requires otherwise.

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763 C. The *Organization and Rules of the Board of Trustees* is under the authority of the Board of Trustees  
764 and shall be amended by a Board of Trustees resolution.

765 D. The *Standing Rules for Councils and Commissions* is under the authority of the Board of Trustees and  
766 shall be amended by a majority vote of the members of the Board of Trustees.

### 767 CHAPTER XV • PARLIAMENTARY AUTHORITY

768 The parliamentary authority of this Association shall be the current edition of the *American Institute of*  
769 *Parliamentarians Standard Code of Parliamentary Procedure*.

### 770 CHAPTER XVI • AMENDMENTS

771 *Section 10. PROCEDURE:* These *Bylaws* may be amended at any session of the House of Delegates by  
772 a two-thirds (2/3) affirmative vote of the delegates present and voting, provided the proposed  
773 amendments shall have been presented in writing at a previous session or a previous meeting of the  
774 same session.

775 *Section 20. AMENDMENT AFFECTING THE PROCEDURE FOR CHANGING THE DUES OF ACTIVE*  
776 *MEMBERS:* An amendment of these *Bylaws* affecting the procedure for changing the dues of active  
777 members may be adopted only if the proposed amendment has been presented in writing at least thirty  
778 (30) days prior to the first day of the session of the House of Delegates at which it is to be considered.  
779 Notice of such a resolution shall be sent electronically to each constituent not less than thirty (30) days  
780 before such session and shall be announced to the general membership in an official publication of the  
781 Association at least fifteen (15) days in advance of the annual session.

782 Amendments affecting the procedure for changing the dues of active members may also be adopted by a  
783 unanimous vote provided that the proposed amendment has been presented in writing at a previous  
784 meeting of the same session.

**GOVERNANCE AND ORGANIZATIONAL MANUAL**  
**OF THE**  
**AMERICAN DENTAL ASSOCIATION**

**Preface**

This *Governance and Organizational Manual of the American Dental Association* (the “*Governance Manual*”) contains the general governance, organizational policies and processes of the American Dental Association and is under the authority of the ADA House of Delegates. The material contained herein shall be amendable by the House of Delegates upon majority vote unless otherwise specified herein. Additionally, any amendment seeking to change a provision that requires a supermajority vote requires a vote by the same supermajority of delegates present and voting to adopt; amendment of this paragraph of the Governance Manual Preface shall require a two-thirds affirmative vote of delegates present and voting.

For convenience to members, where applicable, the material in the *Governance Manual* is organized to follow the same order of presentation found in the *ADA Constitution and Bylaws*.

The terms used in the *Governance Manual* shall have the same meaning as set forth in the *ADA Constitution and Bylaws*.

**CHAPTER I. MEMBERSHIP MATTERS**

A. Membership Privileges and Benefits. The following is a list of privileges and benefits for each class of membership identified in the *ADA Bylaws*.

1. Active Members. Active members shall receive the following privileges and benefits, including:

- a. An annual membership card;
- b. A no cost subscription to *The Journal of the American Dental Association*;
- c. The entitlement to attend any ADA scientific session or meeting; and
- d. Such other benefits and services as the ADA may from time to time make available to active members.
- e. Active members in good standing are eligible for election as a delegate or alternate delegate to the ADA House of Delegates and are also eligible for election or appointment to any office or agency of the ADA, except as may be otherwise provided in the *ADA Bylaws* or this *Governance Manual*.

Active members under a disciplinary sentence of suspension or probation are not entitled to hold elective or appointive office, including delegate and alternate delegate, in the ADA or the members’ constituents or components. Also, such suspended or probated active members may not vote or otherwise participate in the selection or election of officers or other officials of the ADA or the members’ components and constituents.

2. Retired Members. Retired members shall receive the same privileges and benefits as active members, including:

- a. An annual membership card;
- b. A no cost subscription to *The Journal of the American Dental Association*;
- c. The entitlement to attend any ADA scientific session or meeting; and



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- d. Such other benefits and services as the ADA may from time to time make available to retired members.
- e. Retired members in good standing are eligible for election as a delegate or alternate delegate to the ADA House of Delegates and are also eligible for election or appointment to any office or agency of the ADA, except as may be otherwise provided in the *ADA Bylaws* or this *Governance Manual*.

Retired members under a disciplinary sentence of suspension or probation are not entitled to hold elective or appointive office, including delegate and alternate delegate, in the ADA or the members' constituents or components. Also, such suspended or probated retired members may not vote or otherwise participate in the selection of officers or officials of the ADA or the members' components and constituents.

3. Life Members. Except as noted, life members shall receive the same privileges and benefits as active members, including:

- a. An annual membership card;
- b. A no cost subscription to *The Journal of the American Dental Association*;
- c. The entitlement to attend any ADA scientific session or meeting; and
- d. Such other benefits and services as the ADA may from time to time make available to life members.
- e. Life members in good standing are eligible for election as a delegate or alternate delegate to the ADA House of Delegates and are also eligible for election or appointment to any office or agency of the ADA, except as may be otherwise provided in the *ADA Bylaws* or this *Governance Manual*.

Life members under a disciplinary sentence of suspension or probation are not entitled to hold elective or appointive office, including delegate and alternate delegate, in the ADA or the members' constituents or components. Also, such suspended or probated life members may not vote or otherwise participate in the selection of officers or officials of the ADA or the member' components and constituents.

- f. Life members who also meet the eligibility requirements for retired membership shall qualify for retired life membership. Retired life members shall receive all the privileges and benefits of active members, except that retired life members shall not receive a no cost print subscription to *The Journal of the American Dental Association* but shall receive a no cost subscription to the electronic version of *The Journal of the American Dental Association*. A reduced rate print subscription to *The Journal of the American Dental Association* is also available.

4. Student Members. Student members shall receive the following privileges and benefits, including:

- a. An annual membership card;
- b. A paid subscription to *The Journal of the American Dental Association*;
- c. The entitlement to attend any ADA scientific session or meeting; and
- d. Such other benefits and services as the ADA may from time to time make available to student members.
- e. Student members in good standing are eligible for election as a delegate or alternate delegate of the American Student Dental Association to the ADA House of Delegates.

Student members under a disciplinary sentence of suspension or probation are not entitled to serve as a delegate and alternate delegate of the American Student Dental Association to the ADA House of Delegates.

5. Provisional Members. Except as noted, provisional members shall receive the same privileges and benefits as active members, including:

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- a. An annual membership card;
- b. A no cost subscription to *The Journal of the American Dental Association*;
- c. The entitlement to attend any ADA scientific session or meeting; and
- d. Such other benefits and services as the ADA may from time to time make available to provisional members.
- e. Provisional members in good standing are eligible for election as a delegate or alternate delegate to the ADA House of Delegates and for election or appointment to any office or agency of the ADA, except as may be otherwise provided in the ADA *Bylaws* or this *Governance Manual*.

Provisional members under a disciplinary sentence of suspension or probation are not entitled to hold elective or appointive office, including delegate and alternate delegate, in the ADA. Also, such suspended or probated provisional members may not vote or otherwise participate in the selection of officers or officials of the ADA.

- f. Provisional members shall not be entitled to appeal a denial of active membership in the Association.

### 6. Honorary Members. Honorary members shall receive the following privileges and benefits, including:

- a. An annual membership card;
- b. A no cost subscription to the electronic version of *The Journal of the American Dental Association* with a reduced rate print subscription to *The Journal of the American Dental Association* available;
- c. The entitlement to attend any ADA scientific session or meeting; and
- d. Such other benefits and services as the ADA Board of Trustees may from time to time make available to honorary members.
- e. Honorary members are not entitled to hold elective or appointive office, including delegate and alternate delegate, in the ADA or the honorary members' constituents or components or to vote or otherwise participate in the selection of officers or officials of the ADA.

### 7. International Members. International members shall receive such products and services as may be authorized from time to time by the Board of Trustees in collaboration with the Council on Membership.

## B. Dues, Special Assessments and Related Financial Matters.

1. Dues. Under the ADA *Bylaws*, the House of Delegates has the duty to annually set the dues of active members for the ensuing year. Dues are due and payable on January 1, except where a member has opted to pay dues in installments pursuant to a plan offered by the member's constituent, in which case, dues are paid according to the plan's requirements.

The schedule of annual dues for each of the membership categories specified in the ADA *Bylaws* is as follows:

#### a. Active Members:

- i. From degree award through conclusion of the 1<sup>st</sup> full year following an award of a D.D.S. or D.M.D. degree the member is exempt from the payment of dues.
- ii. 2<sup>nd</sup> full year following degree award: Twenty-five percent (25%) of active member dues as set by the House of Delegates pursuant to ADA *Bylaws*;
- iii. 3<sup>rd</sup> full year following degree award: Fifty percent (50%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*;

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- iv. 4<sup>th</sup> full year following degree award: Seventy-five percent (75%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*; and
- v. 5<sup>th</sup> full year following degree award and thereafter: One hundred percent (100%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*.
- vi. Members becoming active members after July 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall pay fifty percent (50%) of any annual dues then in effect. Those members becoming active members after October 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall be exempt from the payment of the any annual dues then in effect.
- b. Retired Members: Twenty-five percent (25%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*.
- c. Life Members:
- i. Seventy-five percent (75%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*.
- ii. Life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of dues.
- d. Student Members: Pre-doctoral student members: Five Dollars (\$5.00). Post-doctoral students and residents: Thirty Dollars (\$30.00).
- e. Provisional Members: The obligation of provisional members to pay dues is the same as for active members.
- f. Honorary Members: Honorary members shall be exempt from the payment of dues.
- g. International Members: The amount as set from time to time by the Board of Trustees. The Board of Trustees can, however, deviate from the established dues rate for international members in order to:
- i. promote international membership in the ADA in a selected jurisdiction; and
- ii. recognize economic circumstances in those least developed countries eligible for special fee criteria as established by the FDI World Dental Federation.
2. Special Assessments. Pursuant to the ADA *Bylaws*, the House of Delegates has the power to levy special assessments. Any special assessment for a calendar year is due and payable on January 1, except where a member has opted to pay in installments pursuant to a plan offered by the member's constituent, in which case, the special assessment is paid according to the plan's requirements.
- The schedule of special assessment allocation for each of the membership categories specified in the ADA *Bylaws* is as follows:
- a. Active Members:
- i. From degree award through conclusion of the 1st full year following an award of a D.D.S. or D.M.D. degree the member is exempt from the payment of any special assessment then in effect.
- ii. 2<sup>nd</sup> full year following degree award: Twenty-five percent (25%) of any special assessment then in effect;
- iii. 3<sup>rd</sup> full year following degree award: Fifty percent (50%) of any special assessment then in effect;

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- iv. 4<sup>th</sup> full year following degree award: Seventy-five percent (75%) of any special assessment then in effect; and
- v. 5<sup>th</sup> full year following degree award and thereafter: One hundred percent (100%) of any special assessment then in effect.
- vi. On a one-time only basis, those members becoming active members after July 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall pay fifty percent (50%) of any special assessment then in effect. On a one-time only basis, those members becoming active members after October 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall be exempt from the payment of any special assessment then in effect.
- b. Retired Members: Twenty-five percent (25%) of any special assessment then in effect.
- c. Life Members:
- i. Seventy-five percent (75%) of any special assessment then in effect.
- ii. Life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of special assessments.
- d. Student Members: Pre-doctoral, post-doctoral students and residents are exempt from the payment of special assessments.
- e. Provisional Members: The obligation of provisional members to pay any special assessment then in effect is the same as for active members.
- f. Honorary Members: Honorary members are exempt from the payment of special assessments.
- g. International Members: International members are exempt from the payment of special assessments.
3. Acceptance of Back Dues and Special Assessments. For purposes of establishing continuity of active membership to qualify for life membership, back dues and any special assessment, except as otherwise provided in the *Bylaws*, shall be accepted for not more than the three (3) years of delinquency prior to the date of application for such payment. The rate of such dues and/or any special assessment, except as otherwise provided in the *Bylaws*, shall be in accordance with Chapter I, Section 40 of the *Bylaws*.
- For the purpose of establishing continuity of active membership in order to qualify for life membership, an active member, who had been such when entering upon active duty in one of the federal dental services but who, during such federal dental service, interrupted the continuity of active membership because of failure to pay dues and/or any special assessment and who, within one year after separation from such military or equivalent duty, resumed active membership, may pay back dues and any special assessment for any missing period of active membership at the rate of dues and/or any special assessment current during the missing years of membership.
4. Limited Dues and Special Assessment Reduction Programs. Notwithstanding the foregoing policies on dues and special assessments, the following limited dues reduction programs are available in certain circumstances:
- a. New Graduate Dues Reduction Deferral. For dentists who are engaged full-time in an advanced training program of not less than one academic year's duration, post-doctoral or residency program while eligible for the new graduate active member dues and special assessment reduction program outlined above, the applicable reduced dues rate shall be deferred until

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completion of post-doctoral or residency program. Commencing at the start of the calendar year after the dentist completes the program, the dentist shall recommence paying dues and any special assessment for active members at the reduced dues rate where the dentist left off in the progression. During the period such dentist is engaged full-time in an advanced training course of not less than one (1) academic year's duration, post-doctoral or residency program, the dues and special assessment provisions for post-doctoral students and residents shall apply.

- b. First Time Member Ineligible for New Graduate Dues Reduction. A dentist who has never been an active member of this Association and is ineligible for dues and special assessment reduction as a new graduate under the provisions of the *Governance Manual*, shall pay fifty percent (50%) of active member dues and any special assessment in the first year of membership, and shall pay one hundred percent (100%) of active member dues and any special assessment in the second year and each year thereafter.
  - c. Active Membership Promotion. The Board of Trustees may authorize limited dues reduction, up to fifty percent (50%) of active member dues and any special assessment then in effect for the purpose of promoting active membership in target U.S. markets through marketing campaigns recommended by the Council on Membership. This reduction of active member dues and any special assessments shall be on a one-time only basis for these members.
  - d. Financial Hardship Waivers. Any members who have suffered a significant financial hardship that prohibits them from payment of their full dues and/or any special assessment may be excused from the payment of twenty-five percent (25%), fifty percent (50%), seventy-five percent (75%) or all of the current year's dues and/or any special assessment as determined by their constituents and components. The constituents and components shall certify the reason for the waiver, and the constituents and components shall provide the same proportionate waiver of their dues as that provided by this Association.\*
  - e. Temporary Activation to Federal Service. An active member in good standing who is temporarily called to active duty with a federal dental service on a non-career basis shall be exempt from the payment of dues to this Association during such federal dental service duty, but not to exceed a period of three years.
  - f. Full-Time Work for Humanitarian Organization. An active member who is serving the profession by working full-time for a humanitarian organization and is receiving neither income nor a salary for such humanitarian service other than a subsistence amount which approximates a cost of living allowance shall be exempt from the payment of dues and any special assessment then in effect through December 31 following completion of such service provided that such humanitarian service is being performed continuously for not less than one (1) year and provided further that such member does not supplement such subsistence income by the performance of services as a member of the faculty of a dental or dental auxiliary school, as a dental administrator or consultant, or as a practitioner of any activity for which a license to practice dentistry or dental hygiene is required.
5. Calculating Percentage Dues or Special Assessments. In establishing the dollar rate of dues or special assessments expressed as a percentage of active member dues or special assessments, computations resulting in fractions of a dollar shall be rounded up to the next whole dollar.

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\* Members with disabilities who were granted dues and any special assessment disability waivers prior to the 2007 House of Delegates may continue to receive such waivers provided they are unable to practice dentistry within the definition of the *Bylaws* and they submit through the members' respective component and constituent, if such exist, to this Association, a medical certificate attesting to the disability and a certificate from said component and constituent, if such exist, attesting to the disability, upon request of the Association, during the exemption period.

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- 255 C. Interim Services for Applicants. A dentist who has submitted a complete application for active  
256 membership in this Association and the appropriate constituent and component, if such exist, may  
257 on a one-time, interim basis: receive complimentary copies of *The Journal of the American Dental*  
258 *Association* and the *ADA News*, have access to the ADA.org member-only content areas and  
259 purchase items at the member rate through the ADA Catalog. Such interim services shall terminate  
260 when the membership application has been processed or within six (6) months of the application  
261 submission, whichever is sooner. Applicants shall have no right of appeal from a denial of  
262 membership in the Association.  
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### CHAPTER II. CONSTITUENTS AND COMPONENTS

A. Amendment of Chapter II. The entirety of this Chapter II is amendable by a two-thirds (2/3) affirmative vote of delegates present and voting provided that the proposed amendment(s) shall have been presented in writing at a previous session or a previous meeting of the same session of the House of Delegates.

#### B. Constituents.

1. Chartered Constituents. The Executive Director of the Association is authorized to issue a charter to each constituent denoting its name and territorial jurisdiction. At the time of adoption of this *Governance Manual*, the following are chartered as constituents of this Association:

Alabama Dental Association  
Alaska Dental Society  
Arizona Dental Association  
Arkansas State Dental Association  
California Dental Association  
Colorado Dental Association  
Connecticut State Dental Association, The  
Delaware State Dental Society  
District of Columbia Dental Society, The  
Florida Dental Association  
Georgia Dental Association  
Hawaii Dental Association  
Idaho State Dental Association  
Illinois State Dental Society  
Indiana Dental Association  
Iowa Dental Association  
Kansas Dental Association  
Kentucky Dental Association  
Louisiana Dental Association, The  
Maine Dental Association  
Maryland State Dental Association  
Massachusetts Dental Society  
Michigan Dental Association  
Minnesota Dental Association  
Mississippi Dental Association, The  
Missouri Dental Association  
Montana Dental Association  
Nebraska Dental Association, The  
Nevada Dental Association  
New Hampshire Dental Society  
New Jersey Dental Association  
New Mexico Dental Association  
New York State Dental Association  
North Carolina Dental Society, The  
North Dakota Dental Association  
Ohio Dental Association  
Oklahoma Dental Association  
Oregon Dental Association

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Pennsylvania Dental Association  
Puerto Rico, Colegio de Cirujanos Dentistas de  
Rhode Island Dental Association  
South Carolina Dental Association  
South Dakota Dental Association  
Tennessee Dental Association  
Texas Dental Association  
Utah Dental Association  
Vermont State Dental Society  
Virgin Islands Dental Association  
Virginia Dental Association  
Washington State Dental Association  
West Virginia Dental Association  
Wisconsin Dental Association  
Wyoming Dental Association

### 2. Privilege of Representation.

- a. Delegates. Each state constituent and the District of Columbia Dental Society shall be entitled to a minimum of two (2) delegates in the House of Delegates. Each territorial constituent and each federal dental service shall be entitled to a minimum of two (2) delegates in the House of Delegates if its total membership is equal to or greater than the size of the smallest state constituent; otherwise the territorial constituent or federal dental service shall receive one (1) delegate. The remaining number of delegates shall be allocated as set forth in the *Manual of the House of Delegates (House Manual)*.
- b. Alternate Delegates. Each constituent and each federal dental service may select from among its active, life and retired members up to the same number of alternate delegates as delegates and shall designate the delegate whom the alternate shall replace in the case of absence.

### 3. Transfer from One Constituent to Another. A member shall be entitled to apply for a transfer of membership from one constituent to another consistent with the provisions of the *Bylaws* and this *Governance Manual*.

- a. A member who is unsuccessful in transferring membership from one constituent to another shall be entitled to a hearing (by either the component or constituent), on the decision denying the member's application for transfer of membership and to appeal to the constituent to which transfer is sought, if applicable, and thereafter to the ADA Council on Ethics, Bylaws and Judicial Affairs as provided in the *Bylaws* and in accordance with the procedures contained in this *Governance Manual*.

### 4. Multiple Jurisdictions. While a member may hold active, life or retired membership in only one constituent, other membership classifications may be held in other constituents with the consent of the constituents involved. A member is required to maintain membership in the constituent, if accepted therein, in whose jurisdiction the member maintains or practices dentistry at a secondary or "branch" office. In order to meet the requirement of tripartite membership, a member must also maintain membership in one component of each constituent to which the member belongs, if such exist. If such a member is accused of unethical conduct and disciplinary proceedings are brought, then those proceedings shall be instituted in the component or constituent where the alleged unethical conduct occurred. A disciplinary ruling affecting membership in one component or constituent shall affect membership in all components and constituents to which the member belongs and in the Association. A member shall have the right of appeal as provided in the *Bylaws*



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and subject to the judicial rules and procedures contained in this *Governance Manual*. Such member shall pay dues in this Association and any special assessments levied by this Association only through the constituent where the member is classified as an active, life or retired member. A member will be counted for delegate allocation purposes only where the member is classified as an active, life or retired member.

### C. Components.

1. Organization. Components may be organized in conformity with a plan approved by the constituent of which they shall be recognized entities provided, however, that the active, life or retired members of each component shall consist of dentists who are members in good standing of their respective constituents and of this Association. The plan adopted by the constituent may or may not limit active membership in a component to dentists who reside or practice within the geographic area of that component. Each component shall adopt and maintain a constitution and bylaws, which shall not be in conflict with, or limit, the *Constitution and Bylaws* of this Association or that of its constituent, and shall file a copy thereof and any changes which may be made thereafter with the Executive Director of this Association.

2. Powers. A component shall have the power to:

- a. Select its active, life and retired members in accordance with and subject to the provisions of Chapter II of the *Bylaws* and this *Governance Manual*.
- b. Discipline any of its members in accordance with and subject to the provisions of Chapter X of the *Bylaws* and this *Governance Manual*.
- c. Establish committees, councils and commissions of the component; to designate their powers and duties; and to adopt reasonable eligibility requirements for service thereon.
- d. Adopt a code of ethics not in conflict with the Principles of Ethics and Code of Professional Conduct of this Association or code of ethics of its constituent.

3. Duties. A component shall have the duty to:

- a. Provide for its financial support;
- b. Establish bylaws, rules and regulations, not in conflict with, or limiting, the *Constitution and Bylaws* of this Association or that of its constituent; and

4. Privileges of Membership. An active, life or retired member of a component in good standing shall have the opportunity of enjoying all privileges of component membership except as otherwise provided by the *Bylaws*.

5. Transfer from One Component to Another. A member who has changed residence or location of practice or employment within the jurisdiction of a constituent so that the member no longer fulfills the membership requirements of the component of which he or she is a member may maintain active membership in that component for the calendar year following such change of residence or practice location.

A member who is required to transfer membership from one component to another and whose application for transfer of membership is denied shall be entitled to a hearing, by either the component or its constituent, on the decision denying the member's application for transfer of membership and to appeal to the member's constituent, if applicable, and then to the ADA Council on Ethics, Bylaws and Judicial Affairs as provided in the *Bylaws* and in accordance with the procedures contained in this *Governance Manual*.

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### CHAPTER III. HOUSE OF DELEGATES.

#### A. Convening Sessions of the House of Delegates.

1. Declaration of Extraordinary Emergency. The existence of a time of extraordinary emergency may be declared by mail vote of the current members of the House of Delegates on recommendation of at least four (4) of the elective officers.\* A mail vote to be valid shall consist of ballots received from not less than twenty-five percent (25%) of the current members of the House of Delegates. A majority of the votes cast within thirty (30) days after the mailing of the ballot shall decide the vote. The existence of a time of extraordinary emergency may also be declared by the Board of Trustees pursuant to the provisions set forth in the *Governance Manual*.
2. Special Sessions. A special session of the House of Delegates shall be called by the President on a three-fourths (3/4) affirmative vote of the members of the Board of Trustees or on written request of delegates representing at least one-third (1/3) of the constituents and not less than one-fifth (1/5) of the number of officially certified delegates of the last House of Delegates. The time and place of a special session shall be determined by the President, provided the time selected shall be not more than forty-five (45) days after the request was received. The business of a special session shall be limited to that stated in the official call except by unanimous consent.
3. Official Call of Sessions of the House of Delegates.
  - a. Annual Session. The Executive Director of the Association shall direct that an official notice of the time and place of each annual session be published in The Journal of the American Dental Association. The Executive Director of the Association shall also send an official notice of the time and place of the annual session to each member of the House of Delegates at least thirty (30) days before the opening of such annual session.
  - b. Special Session. The Executive Director of the Association shall send an official notice of the time and place of each special session and a statement of the business to be considered to every officially certified delegate and alternate delegate of the last House, not less than fifteen (15) days before the opening of such special session.

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\* As used with respect to the calling of an emergency session of the House of Delegates, the term "mail vote" shall mean any vote permitted pursuant to the Illinois Not for Profit Corporation Act, including an electronic vote.

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### CHAPTER V. BOARD OF TRUSTEES

- A. Eligibility. A trustee must be an active, life or retired member, in good standing, of this Association and an active, life or retired member of one of the constituents of the trustee district which the trustee is elected or appointed to represent.
- B. Nomination, Declaration of Election and Installation Procedure. The name of each nominee for the office of trustee brought forward by the nominee's trustee district shall be read to the House of Delegates by the Speaker of the House of Delegates. Because there is only a single nominee provided by each trustee district, following the reading of names, the Speaker of the House of Delegates shall declare the nominees elected. The newly elected trustees shall be installed by the President or the President's designee.
- C. Removal. The House of Delegates may remove a trustee for cause in accordance with procedures established by the House of Delegates. The procedures shall provide for notice of the charges alleged and an opportunity for the accused to be heard in his or her defense. A two-thirds (2/3) affirmative vote of the delegates present and voting is required to remove a trustee from office.
- D. Vacancy. A trustee district may specify in writing to the Association's Executive Director how its nominee shall be chosen. In the event an appointment to fill the vacancy has not been made by the time of the next meeting of the House of Delegates following the occurrence of the vacancy, then a nominee to fill the vacancy shall be selected by the affected trustee district's caucus and the nominee's name shall be forwarded to the Secretary of the House of Delegates. Election and installation of the successor trustee shall be as stated in the *Bylaws* and as earlier set forth in this chapter of the Governance Manual. If the term of the vacated trustee position has less than fifty percent (50%) of a full four-year term remaining at the time the successor trustee is appointed or elected, the successor trustee shall be eligible for election to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election, the successor trustee shall not be eligible for another term.
- E. Powers.
1. The Board of Trustees shall report to the House of Delegates for approval any interim actions taken with respect to councils and special committees, consistent with the exercise of its power to supervise, monitor and guide, on an interim basis, the activities of all councils and special committees, including the establishment of rules and procedures that authorize the transaction of business by ballot without a meeting.
  2. Consistent with the exercise of its power to authorize limited scope pilot programs, approve guidelines relating to the conduct of the program when authorizing a pilot program. No pilot program authorized by the Board of Trustees shall exceed a period of three years without approval by the House of Delegates. The Board of Trustees shall annually report to the House of Delegates on any authorized pilot program during the program's duration.
- F. Duties. The Board shall perform the following activities as part of its management responsibilities:
1. Provide guidelines and directives to govern the Treasurer's custody, investment and disbursement of Association funds and other property.
  2. Notice of the Board of Trustee's proposed budget and a resolution containing the Board of Trustee's recommendation for active member dues required by the ADA *Bylaws* shall be sent electronically to each constituent and posted on ADA Connect or its equivalent for the House of Delegates not less than thirty (30) days before the first scheduled meeting of the House of Delegates to permit prompt, adequate notice by each constituent to its delegates and alternate

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delegates to the House of Delegates. The resolution containing the Board of Trustee's recommendation for active member dues shall be also announced to the general membership in an official publication of the Association at least fifteen (15) days in advance of the commencement of the annual session of the House of Delegates.

3. Act upon applications for active membership from applicants practicing in dependencies of the United States in which no constituent exists or who are employed by the federal dental services.
  4. Review the periodic delegate allocations to the House of Delegates performed pursuant to the methodology set forth in the *Manual of the House of Delegates*.
  5. Establish administrative agencies of this Association as may be necessary to implement the Association's programs and, through the Executive Director of the Association under whose jurisdiction such administrative agencies shall operate, assign the duties and receive reports required of such agencies.
- H. Call for Special Meetings. Special meetings of the Board of Trustees may be called by the President or at the request of five (5) voting members of the Board of Trustees for matters of the Association requiring immediate attention.

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### CHAPTER VI. ELECTIVE OFFICERS OF THE ASSOCIATION

A. Eligibility. Only an active, life or retired member, in good standing, of this Association shall be eligible to serve as an elective officer. Trustees and elective officers may not apply for the office of Treasurer while serving in any of those offices, except that the Treasurer may apply for a second term as set forth elsewhere in this chapter of the *Governance Manual*.

B. Nominations.

1. President-Elect and Second Vice President. Nominations for the offices of President-elect and Second Vice President shall be made in accordance with the order of business. Candidates for these elective offices shall be nominated from the floor of the House of Delegates by a simple declaratory statement, which may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted.

2. Treasurer. The search for Treasurer shall be announced in an official publication of the Association in November of the final year of the incumbent Treasurer's term, together with the recommended qualifications for that position as provided in the *Bylaws*. Candidates for the office of Treasurer shall apply by submitting a standardized Treasurer *Curriculum Vitae* form to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. Each candidate's application shall be reviewed by the Board of Trustees. At least sixty (60) days prior to the convening of the House of Delegates the Executive Director shall provide all members of the House of Delegates, with each candidate's standardized Treasurer *Curriculum Vitae* and the determination of the Board of Trustees as to whether the candidate meets the recommended qualifications for the office of Treasurer. No other candidate shall be nominated from the floor of the House of Delegates. Nominations shall be made in accordance with the order of business. Each nomination may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted. No further nominations for the office of Treasurer shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Treasurer when the House of Delegates meets, the term of the incumbent Treasurer shall be extended by one (1) year. Should the incumbent Treasurer be unwilling or unable to serve an additional one (1) year term, the office of Treasurer shall be filled in accordance with the vacancy provisions of this chapter of the *Governance Manual*. Under these circumstances, former Treasurers of this Association not otherwise eligible to serve as Treasurer due to term limits will be eligible to serve as Treasurer until the House of Delegates can elect a Treasurer.

3. Speaker of the House of Delegates. The search for Speaker of the House shall be announced in an official publication of the Association in November of the final year of the incumbent Speaker of the House's term. Candidates for the office of Speaker of the House shall apply by submitting a curriculum vitae along with a statement supporting their qualifications to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. At least sixty (60) days prior to the convening of the House of Delegates the Executive Director shall provide all members of the House of Delegates with each candidate's curriculum vitae and statement of qualifications for the office of Speaker of the House. If no candidate has applied and submitted the required documentation, then the Association shall inform all delegates of this circumstance and the period to apply shall be extended to thirty (30) days prior to the convening of the House of Delegates. Only candidates who have applied and submitted the required documentation shall be nominated from the floor of the House of Delegates. If thirty (30) days prior

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to the convening of the House of Delegates no candidate has applied and submitted the required documentation then the Association shall inform all delegates of this circumstance and also inform them that nominations shall be permitted from the floor of the House of Delegates. Nominations for the office of Speaker of the House shall be made in accordance with the order of business. Each nomination may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted. If there are no candidates for the office of Speaker of the House nominated when the House of Delegates meets, the term of the incumbent Speaker of the House shall be extended by one (1) year. Should the incumbent Speaker of the House be unwilling or unable to serve an additional one (1) year term, the office of Speaker of the House shall be filled in accordance with the vacancy provisions of this chapter of the *Governance Manual*. Under these circumstances, former Speakers of the House not otherwise eligible to serve as Speaker due to term limits will be eligible to serve as Speaker until the House of Delegates can elect a Speaker of the House.

- C. Term of Office. The two consecutive three year term limit for the offices of Treasurer and Speaker of the House of Delegates shall not apply in the case of a former Treasurer or Speaker of the House, who may serve until the House of Delegates can elect a Speaker of the House of Delegates, in the event of a vacancy as described elsewhere in this chapter of the *Governance Manual*.<sup>\*</sup> Serving any portion of a three (3) year term shall be considered service of a full three (3) year term.
- D. Installation. The elective officers shall be installed at the last meeting of the annual session of the House of Delegates. The President-elect shall be installed as President at the next annual session of the House following election. The Second Vice President shall be installed as First Vice President at the next annual session of the House following election.
- E. Removal. The House of Delegates may remove an elective officer for cause in accordance with procedures established by the House of Delegates. The procedures shall provide for notice of the charges alleged and an opportunity for the accused to be heard in his or her defense. A two-thirds (2/3) affirmative vote of the delegates present and voting is required to remove a trustee from office.
- F. Vacancies in Elective Offices. Vacancies in elective offices shall be filled as specified in the ADA *Bylaws*.

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<sup>\*</sup> In order to stagger the terms of the Speaker of the House and the Treasurer, the term of the Speaker of the House for 2015-2018 shall be extended for one (1) year, and shall end at the adjournment *sine die* of the 2019 House of Delegates. This footnote shall expire at the adjournment *sine die* of the 2019 House of Delegates.

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### CHAPTER VII. APPOINTIVE OFFICER.

A. In addition to those duties set forth in the *Bylaws*, it shall be the duty of the Executive Director to:

1. Assist the Board of Trustees in supervising, monitoring and providing guidance to all Association councils, commissions and committees in regard to their administrative functions and specific assignments;

2. Systematize the preparation of council, commission and committee reports; and

3. Encourage collaboration and the exchange of information concerning mutual interests and issues between councils, committees and commissions.

B. Upon the occurrence of a vacancy in the office of Executive Director, an interim Executive Director, whose duties shall be as defined in the *ADA Bylaws*, shall be appointed by the Board of Trustees within forty-five (45) days of the occurrence of the vacancy. While any active, life or retired member in good standing may be appointed to serve as interim Executive Director, the Board of Trustees may appoint any qualified individual who is not eligible for membership in the Association, except that any current officer or member of the Board of Trustees shall not be eligible for appointment as the interim Executive Director. The interval of service and salary, if any, of the interim Executive Director shall be at the discretion of the Board of Trustees.



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### CHAPTER VIII. COUNCILS

#### A. Members, Selections, Nominations and Elections.

##### 1. Composition. The composition of the councils of this Association shall be as follows:

###### a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of sixteen (16) members selected as follows:

###### i. Nominations.

(a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*

(b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

###### ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.

###### b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of sixteen (16) members who shall be selected from nominations open to all trustee districts, and the current recipient of the Gold Medal Award for Excellence in Dental Research.

###### c. Remaining Councils. The remaining councils of this Association shall each be composed of seventeen (17) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms.

##### 2. Nominations and Election. Nominations for all councils shall be made by the Board of Trustees except as otherwise provided in the *Bylaws* or this *Governance Manual*. Members of councils shall be elected by the House of Delegates in accordance with the election procedure set forth in Chapter III of the *ADA Bylaws*.

##### 3. Removal for Cause. The Board of Trustees may remove a council member for cause in accordance with procedures established by the Board of Trustees. Those procedures shall provide for notice of the charges, including allegations of the conduct purported to constitute each violation and a decision in writing which shall specify the findings of fact which substantiate any and all of the

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\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

charges. Prior to issuance of the decision by the Board of Trustees, no council member shall be excused from attending any meeting of a council unless there is an opportunity to be heard or compelling reasons exist which are specified in writing by the Board of Trustees.

4. Amendment. The entirety of this Section A of Chapter VIII. is amendable by a two-thirds (2/3) affirmative vote of delegates present and voting provided that the proposed amendment(s) shall have been presented in writing at a previous session or a previous meeting of the same session of the House of Delegates.

### B. Eligibility.

1. All members of councils must be active, life or retired members in good standing of this Association except as otherwise provided in the *Bylaws* or this *Governance Manual*.
2. No member of a council may serve concurrently as a member of another council or commission.
3. A member shall not be eligible for appointment to another council or commission for a period of two (2) years after completing a previous council or commission appointment.
4. The elective and appointive officers and the trustees of this Association shall not serve as members of councils.
5. A member of the Council on Dental Education and Licensure who was selected by the American Association of Dental Boards or the American Dental Education Association but ceases to be an active member of that body may continue as a member of the Council for the balance of that member's term.
6. A member of the Council on Dental Education and Licensure who was selected by the American Dental Education Association but ceases to be a member of the faculty of a member school of that body shall cease to be a member of the Council on Dental Education and Licensure and the President shall declare the position vacant.
7. To be eligible to serve on the Council on Scientific Affairs, the current recipient of the Gold Medal Award for Excellence in Dental Research shall be an active, life or retired member in good standing of this Association if that individual qualifies for membership in the Association.

- C. Chairs. One member of each council shall be selected annually by each council from among its members to serve as chair, with written notification to the Board of Trustees. Every other year, the chair of the Council on Dental Education and Licensure shall be selected from among the members of the Council nominated by the Board of Trustees pursuant to the procedures contained in this chapter of the *Governance Manual*.

### D. Consultants and Staff.

1. Consultants: Each council shall have the authority to appoint consultants in conformity with rules and regulations established by the Board of Trustees except as otherwise provided in the *Bylaws* or this *Governance Manual*. The councils shall inform the Board in writing of the selection of consultants.
2. Staff: The Executive Director shall employ the staff of councils, in the event they are employees, and shall select the titles for council staff positions.

- E. Term of Office. The term of office of members of councils shall be four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. The tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. The current recipient of the Gold Medal Award for Excellence in Dental

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Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

F. Vacancy. In the event of a vacancy in the membership of any council, the President shall appoint a member of the Association possessing the same qualifications as established by the *Bylaws* or this *Governance Manual* for the previous member, to fill such vacancy until a successor is elected by the next House of Delegates for the remainder of the unexpired term. In the event such vacancy involves the chair of the council, the President shall have the power to appoint an *ad interim* chair. In the event it is the current recipient of the Gold Medal Award for Excellence in Dental Research who cannot serve on the Council on Scientific Affairs, the President, in consultation with the Board of Trustees, shall have the power to appoint a prominent research scientist who shall serve until the award is bestowed on the next honoree.

If the term of the vacated council position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is appointed or elected, the successor member shall be eligible for election to a new four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election, the successor member shall not be eligible for another term.

G. Meetings of Councils. Each council shall hold at least one regular meeting annually, provided that funds are available in the budget for that purpose and unless otherwise directed by the Board of Trustees. Meetings may be held in the Headquarters Building, the Washington Office or from multiple remote locations through the use of a conference telephone or other communications equipment by means of which all members can communicate with each other. Such meetings shall be conducted in accordance with rules and procedures established by the Board of Trustees.

H. Quorum. Except as otherwise provided in the *Bylaws* or this *Governance Manual*, a majority of the members of any council shall constitute a quorum.

I. Privilege of the Floor. Chairs and members of councils who are not members of the House of Delegates shall have the right to participate in the debate on their respective reports but shall not have the right to vote.

J. Annual Report and Budget.

1. Annual Report: Each council shall submit, through the Executive Director, an annual report to the House of Delegates and a copy thereof to the Board of Trustees.
2. Proposed Budget: Each council shall submit to the Board of Trustees, through the Executive Director, a proposed itemized budget for the ensuing fiscal year.

K. Areas of Responsibility.

1. Council on Advocacy for Access and Prevention. The areas of subject matter responsibility of the Council shall be:
  - a. Oral Health Literacy;
  - b. Oral Disease Prevention and Intervention;
  - c. Access to Oral Healthcare; and
  - d. Community Oral Health Advocacy.
2. Council on Communications. The areas of subject matter responsibility of the Council shall be:
  - a. Advise on the management of the Association's reputation;
  - b. Develop, recommend and maintain ADA strategic communications plans;
  - c. Advise ADA agencies on branding;

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- 706 d. Advise on prioritization and allocation of communications resources; and  
707 e. Advise on communications and marketing for constituents and components, upon request.
- 708 3. Council on Dental Benefit Programs. The areas of subject matter responsibility of the Council shall  
709 be:
- 710 a. Administration and financing of all dental benefit programs including both commercial and public  
711 programs;  
712 b. Dental Quality Alliance;  
713 c. Monitoring of quality reporting activities of third party payers;  
714 d. Peer review programs;  
715 e. Code sets and code taxonomies including but not limited to procedure and diagnostic codes;  
716 f. Electronic and paper dental claim content and completion instructions; and  
717 g. Standards pertaining to the capture and exchange of information used in dental benefit plan  
718 administration and reimbursement for services rendered.
- 719 4. Council on Dental Education and Licensure. The areas of subject matter responsibility of the  
720 Council shall be:
- 721 a. Dental, advanced dental and allied dental education and accreditation;  
722 b. Recognition of dental specialties and interest areas in general dentistry;  
723 c. Dental anesthesiology and sedation;  
724 d. Dental admission testing;  
725 e. Licensure;  
726 f. Certifying boards and credentialing for specialists and allied dental personnel; and  
727 g. Continuing dental education.
- 728 5. Council on Dental Practice. The areas of subject matter responsibility of the Council shall be:
- 729 a. Dental Practice, including:
- 730 - Dental practice management;  
731 - Practice models and economics;  
732 - Scope of practice;  
733 - Impact of and compliance with regulatory mandates; and  
734 - Assessment of initiatives directed to the public and the profession;
- 735 b. Allied Dental Personnel, including:
- 736 - Utilization, management and employment practices; and  
737 - Liaison relationships with organizations representing allied dental personnel;
- 738 c. Dentist Health and Wellness, including:
- 739 - Dental professional well-being, wellness and ergonomics;  
740 - Patient safety and wellness; and  
741 - Liaison relationships with state well-being programs and related national organizations;
- 742 d. Dental Informatics and Standards for Electronic Technologies; and  
743 e. Activities and Resources Directed to the Success of the Dental Practice and the Member.
- 744 6. Council on Ethics, Bylaws and Judicial Affairs. The areas of subject matter responsibility of the  
745 Council shall be:
- 746 a. Ethics and professionalism, including disciplinary matters relating thereto;  
747 b. The *Constitution and Bylaws* of this Association, including:
- 748 - Review of the constitutions and bylaws of constituents and components to ensure consistency  
749 with the Association's *Bylaws*; and  
750 - Correct punctuation, grammar, spelling and syntax, change names and gender references and  
751 delete moot material where such revisions do not alter the material's context or meaning in the

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752 *Bylaws and the Governance Manual* upon the unanimous vote of the Council members present  
753 and voting; and  
754 c. Hold hearings and render decisions in disputes arising between constituents or between a  
755 constituent and component.

- 756 7. Council on Government Affairs. The areas of subject matter responsibility of the Council shall be:  
757 a. Encourage the improvement of the health of the public and to promote the art and science of  
758 dentistry in matters of legislation and regulations by appropriate activities;  
759 b. Formulate and recommend legislation, regulatory activity, policies and governmental programs  
760 relating to dentistry and oral health for submission to Congress;  
761 c. Serve and assist as liaison with those agencies of the federal government which employ dental  
762 personnel or have dental care programs, and formulate policies which are designed to advance  
763 the professional status of federally employed dentists; and  
764 d. Disseminate information which will assist the constituents and components involving legislation  
765 and regulation affecting the dental health of the public.

- 766 8. Council on Members Insurance and Retirement Programs. The areas of subject matter  
767 responsibility of the Council shall be:  
768 a. Insurance and retirement plan products and resources; and  
769 b. Risk management education programs and resources.

- 770 9. Council on Membership. The areas of subject matter responsibility of the Council shall be:  
771 a. Membership recruitment and retention and related issues;  
772 b. Monitor and provide support and assistance for the membership activities of constituents and  
773 components; and  
774 c. Membership benefits and services.

- 775 10. Council on Scientific Affairs. The areas of subject matter responsibility of the Council shall be:  
776 a. Science and scientific research, including:  
777 -Evidence-based dentistry;  
778 -Evaluation of professional products;  
779 -Promulgation of a biennial research agenda; and  
780 -Promotion of student involvement in dental research;  
781 b. Scientific aspects of the dental practice environment related to the health of the public, dentists  
782 and allied health personnel;  
783 c. Standards development for dental products;  
784 d. The safety and efficacy of concepts, procedures and techniques for use in the treatment of  
785 patients;  
786 e. Liaison relationships with scientific regulatory, research and professional organizations and  
787 science-related agencies of professional healthcare organizations; and  
788 f. The ADA Seal of Acceptance program.  
789

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### CHAPTER IX. COMMISSIONS

#### A. Members, Selections, Nominations and Elections.

1. Commission on Dental Accreditation. The number of and the method of selection of members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation*. Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:
  - a. Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. None of the nominees shall be a faculty member working for a school of dentistry more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency. These members shall be nominated by the Board of Trustees and elected by the House of Delegates.
  - b. Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a member of a faculty of a school of dentistry.
  - c. Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Association of Dental Boards. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.
2. Joint Commission on National Dental Examinations. The Joint Commission on National Dental Examinations shall be composed of fifteen (15) members selected as follows:
  - a. Three (3) members shall be nominated by the Board of Trustees from the active, life or retired members of this Association. Additional nominations of active, life or retired members may be made by the House of Delegates. None of the ADA nominees shall be a member of a faculty of a school of dentistry or a member of a state board of dental examiners or jurisdictional dental licensing agency. The House of Delegates shall elect the three (3) members from those nominated by the Board of Trustees and the House of Delegates.
  - b. Six (6) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a member of a faculty of a school of dentistry.
  - c. Three (3) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.
  - d. One (1) member who is a dental hygienist shall be selected by the American Dental Hygienists' Association.
  - e. One (1) member who is a public representative shall be selected by the Joint Commission on National Dental Examinations.
  - f. One (1) member who is a dental student shall be selected annually by the American Student Dental Association.

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- 831 3. Commission for Continuing Education Provider Recognition. The Commission for Continuing  
832 Education Provider Recognition shall be composed of sixteen (16) members selected as follows:
- 833 a. Four (4) members shall be selected from nominations of active, life or retired members of this  
834 Association, with the nominations open to all trustee districts. At least two (2) of the members  
835 nominated shall be general dentists, who shall be selected from nominations open to all trustee  
836 districts from the active, life or retired members of this Association. These members shall be  
837 nominated by the Board of Trustees and elected by the House of Delegates.
- 838 b. One (1) member who is active member of the American Association of Dental Boards and also, if  
839 eligible, an active, life or retired member of this Association shall be selected by the American  
840 Association of Dental Boards.
- 841 c. One (1) member who is active member of the American Dental Education Association and also, if  
842 eligible, an active, life or retired member of this Association shall be selected by the American  
843 Dental Education Association.
- 844 d. One (1) member who is an active member of the American Society of Constituent Dental  
845 Executives and also, if eligible, an active, life or retired member of this Association shall be  
846 selected by the American Society of Constituent Dental Executives.
- 847 e. One (1) member who is an active, life or retired member of this Association shall be selected by  
848 the sponsoring organization of each ADA recognized dental specialty.\*
- 849 4. Amendment. The entirety of this Section A of IX is amendable by a two-thirds (2/3) affirmative vote  
850 of delegates present and voting provided that the proposed amendment(s) shall have been  
851 presented in writing at a previous session or a previous meeting of the same session of the House  
852 of Delegates.
- 853 B. Removal for Cause. The Board of Trustees may remove a commission member for cause in  
854 accordance with procedures established by the Board of Trustees, which procedures shall provide  
855 for notice of the charges, including allegations of the conduct purported to constitute each violation,  
856 and a decision in writing which shall specify the findings of fact which substantiate any and all of the  
857 charges. Prior to issuance of the decision of the Board of Trustees, no commission member shall be  
858 excused from attending any meeting of a commission unless there is an opportunity to be heard or  
859 compelling reasons exist which are specified in writing by the Board of Trustees.
- 860 C. Eligibility.
- 861 1. All members of commissions who are dentists must be active, life or retired members in good  
862 standing of this Association except as otherwise provided in the *Bylaws*.

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\* The Commission for Continuing Education Provider Recognition shall be composed initially of the incumbent members of the CERP Committee of the Council on Dental Education and Licensure that was retired by the 2014 House of Delegates and any new appointees to the CERP Committee of the Council on Dental Education and Licensure selected by the American Association of Dental Boards, American Dental Education Association, American Society of Constituent Dental Executives and/or a sponsoring organization of any ADA recognized dental specialty. To the extent that there exists an unfilled position on the Commission for Continuing Education Provider Recognition for an ADA appointee when the Commission is created, that position shall be treated as a vacancy and filled in accordance with the procedure set forth in the section on Vacancies in this Chapter of the *Governance Manual*. These inaugural Commission members shall serve for terms that are equal in time to their unfinished terms on the retired CERP Committee. This footnote shall expire at adjournment *sine die* of the 2018 House of Delegates.

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2. A member of the Joint Commission on National Dental Examinations selected by the American Association of Dental Boards who ceases to be an active member of that organization may continue as a member of the Joint Commission on National Dental Examinations for the balance of that member's term.
  3. If a commission member of the Joint Commission on National Dental Examinations selected by the American Dental Education Association ceases to be a member of the faculty of a member school of that organization, the membership on the Joint Commission on National Dental Examinations shall terminate, and the President of this Association shall declare the position vacant.
  4. Any organizations that select members to serve on the Commission for Continuing Education Provider Recognition and offer continuing dental education courses must be recognized as a continuing education provider by the commission.
  5. No member of a commission may serve concurrently as a member of a council or another commission.
  6. A member shall not be eligible for appointment to another commission or council for a period of two (2) years after completing a previous commission or council appointment.
- D. Chairs. Commissions shall elect their own chairs. To be eligible to serve as chair of a commission, the commission member must be an active, life or retired member of this Association.
- E. Consultants, Advisers and Staff.
1. Consultants and Advisers. Each commission shall have the authority to nominate consultants and advisers in conformity with rules and regulations established by the Board of Trustees except as otherwise provided in the *Bylaws* or this *Governance Manual*. The Joint Commission on National Dental Examinations also shall select consultants to serve on the commission's test construction committees. The Commission on Dental Accreditation shall have the power to appoint consultants to assist in developing requirements and guidelines for the conducting of accreditation evaluations, including site visitations, of predoctoral, advanced dental educational, and dental auxiliary educational programs. The Commission for Continuing Education Provider Recognition shall have the power to appoint consultants to assist in developing standards and procedures, conducting recognition reviews and conducting appeals.
  2. Staff. The Executive Director shall employ the staff of commissions, in the event they are employees, and shall select the titles for commission staff positions.
- F. Term of Office and Tenure.
1. Term of Office. The term of office of members of the commissions of this Association shall be four (4) years except that (a) the term of office of members of the Commission on Dental Accreditation selected pursuant to the *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and (b) the term of office of the dental student selected by the American Student Dental Association for membership on the Joint Commission on National Dental Examinations shall be one (1) year.
  2. Tenure. The tenure of a member of a commission shall be limited to one (1) term of four (4) years except that (a) the tenure of members of the Commission on Dental Accreditation selected pursuant to the *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and (b) tenure in office of the dental student selected by the American Student Dental Association for membership on the Joint Commission on National Dental Examinations shall be one (1) term.



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G. Vacancy: In the event of a vacancy in the office of a member of a commission, the following procedure shall be followed:

1. In the event the member of a commission whose office is vacant is or was a member of and was appointed or elected by this Association, the President of this Association shall appoint a member of this Association to fill that vacancy. The appointed member shall possess the same qualifications as established in this *Governance Manual* for the previous member, and the appointed member shall fill the vacancy until a successor is elected by the next House of Delegates of this Association for the remainder of the unexpired term.
2. In the event the member of a commission whose office is vacant was selected by an organization other than this Association, such other organization shall appoint a successor. The appointed member shall possess the same qualifications as those possessed by the previous member of the commission.
3. In the event such vacancy involves the chair of a commission, the President of this Association shall have the power to appoint an *ad interim* chair, except as otherwise provided in the *Bylaws* or this *Governance Manual*.
4. If the term of the vacated office of a member of a commission has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is appointed or elected to fill the vacancy, the successor member shall be eligible for election to a new four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election of a successor member to fill the vacancy, the successor member shall not be eligible for another term.

H. Meetings of Commissions. Each commission shall hold at least one regular meeting annually, provided that funds are available in the budget for that purpose and unless otherwise directed by the Board of Trustees. Meetings may be held at the Headquarters Building, the Washington Office or from multiple remote locations through the use of a conference telephone or other communications equipment by means of which all members can communicate with each other. Such meetings shall be conducted in accordance with rules and procedures established by the Board of Trustees.

I. Quorum. A majority of the members of any commission shall constitute a quorum.

J. Privilege of the Floor. Chairs and members of the commissions of this Association who are not members of the House of Delegates shall have the right to participate in the debate on their respective reports but shall not have the right to vote.

K. Annual Report and Budget.

1. Annual Report. Each commission shall submit, through the Executive Director, an annual report to the House of Delegates and a copy thereof to the Board of Trustees.
2. Proposed Budget. Each commission shall submit to the Board of Trustees, through the Executive Director, a proposed itemized budget for the ensuing fiscal year.

L. Power to Adopt Rules: Any commission of this Association shall have the power to adopt rules for such commission and amendments thereto, provided such rules and amendments thereto do not conflict with or limit the *Constitution and Bylaws* of this Association. Rules and amendments thereto, adopted by any commission of this Association, shall not be effective until submitted in writing to and approved by majority vote of the House of Delegates of this Association, except the Joint Commission on National Dental Examinations shall have such bylaws and amendments thereto as the House of Delegates of this Association may adopt by majority vote for the conduct of the

## **APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D**

948 purposes and management of the Joint Commission on National Dental Examinations. Commissions  
949 shall have the authority to make corrections in punctuation, grammar, spelling, name changes,  
950 gender references, and similar editorial corrections to their Rules which do not alter context or  
951 meaning without the need to submit such editorial corrections to the House of Delegates. Such  
952 corrections shall be made only by a unanimous vote of the commission adopting such editorial  
953 correction.  
954

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### 955 **CHAPTER X. SPECIAL COMMITTEES.**

956 If duties are assigned to a special committee that are assigned under the *Bylaws* to more than one (1)  
957 council, commission or other agency, members of the relevant councils, commissions or other agencies  
958 shall be appointed to serve on that special committee. Duties assigned by the *Bylaws* or this *Governance*  
959 *Manual* solely to a single council, commission or other agency should be assigned to that council,  
960 commission or other agency with the necessary funding to accomplish the task.  
961

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### CHAPTER XI. PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT, MEMBER CONDUCT POLICY AND JUDICIAL PROCEDURES.

#### A. Disciplinary Matters.

1. Member Conduct Subject to Discipline. A member may be disciplined for (1) having been found guilty of a felony, (2) having been found guilty of violating the dental practice act of a state or other jurisdiction of the United States, (3) having been discharged or dismissed from practicing dentistry with one of the federal dental services under dishonorable circumstances, (4) violating the *Bylaws*, the *Principles of Ethics and Code of Professional Conduct*, or the bylaws or code of ethics of the constituent or component of which the accused is a member, or (5) violating the Association's *Member Conduct Policy*.
2. Disciplinary Penalties. A member may be disciplined for any of the offenses enumerated in this *Governance Manual* as follows:
  - a. Censure. Censure is a disciplinary sentence expressing in writing severe criticism or disapproval of a particular type of conduct or act.
  - b. Suspension. Suspension means all membership privileges except continued entitlement to coverages under insurance programs are lost during the suspension period. Suspension shall be unconditional and for a specified period at the termination of which full membership privileges are automatically restored. A subsequent violation shall require a new disciplinary procedure before additional discipline may be imposed.
  - c. Expulsion. Expulsion, or removal from the membership rolls of this Association and any constituent or component, is an absolute discipline and may not be imposed conditionally except as otherwise provided herein.
  - d. Probation. Probation, to be imposed for a specified period and without loss of privileges with the exception of holding or seeking an elective or appointive office, may be administratively and conditionally imposed when circumstances warrant in lieu of a suspended disciplinary penalty. Probation shall be conditioned on good behavior. Additional reasonable conditions may be set forth in the decision for the continuation of probation. In the event that the conditions for probation are found to have been violated by the constituent that brought the original misconduct complaint, after a hearing on the probation violation charges in accordance with procedures set forth in the *ADA Procedures for Member Disciplinary Hearings and Appeals*, the original disciplinary penalty shall be automatically reinstated; except that when circumstances warrant the original disciplinary penalty may be reduced to a lesser penalty. There shall be no right of appeal from a finding that the conditions of probation have been violated.
  - e. Removal from Office. If the member holds any ADA office, disciplinary action may include removal from office as a trustee, delegate, alternate delegate or elective officer for the remaining term may be imposed in addition to, or in lieu of, any of the penalties enumerated above.
3. Reminder of Obligation. In appropriate circumstances, a constituent or component or, in the case of direct members, this Association, may issue a Reminder of Obligation to a member where the member may have committed a relatively minor infraction of the *ADA Member Conduct Policy* or engaged in conduct to which the *ADA Member Conduct Policy* might apply. The same is true of the *Bylaws*, the *Principles of Ethics and Code of Professional Conduct* or the bylaws or code of ethics of a constituent or component of which the accused is a member. Such a Reminder of Obligation is not a disciplinary penalty but is a private administrative action. No record of the issuance of a Reminder of Obligation shall be placed in the member's membership records.

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- B. Hearings on Charges Related to the ADA Bylaws and the Principles of Ethics and Code of Professional Conduct. Any member charged with violating the ADA Bylaws, the *Principles of Ethics and Code of Professional Conduct* or the Association's *Member Conduct Policy* shall be afforded the right to a fair and impartial hearing conducted in accordance with the procedures set forth in this *Governance Manual*. For a member of a constituent, disciplinary proceedings may be instituted by either the member's component or constituent. For a direct member, disciplinary proceedings may be instituted by the Association's Council on Ethics, Bylaws and Judicial Affairs.
1. Initial Disciplinary Hearings on Charges Relating to the ADA Bylaws or the Principles of Ethics and Code of Professional Conduct. The following procedures are to be followed by a component or constituent or this Association bringing charges of *Bylaws* or ethics violations:
- a. Notice. An organization bringing charges against a member alleging a violation of either the ADA *Bylaws* or the *Principles of Ethics and Code of Professional Conduct* shall issue a notice of charges that will meet the following specifications:
- i. Charges Brought. The notice of charges will contain a detailed statement of all disciplinary charges brought against the accused member, including (a) an official certified copy of any alleged conviction or determination of guilt that is the basis for the disciplinary action, (b) description of the section(s) of the *Bylaws* or the ethical provisions alleged to have been violated, and/or (c) a description of the conduct alleged to constitute each violation.
- ii. Time of Hearing. The notice of charges shall contain notification of the date, time and place that a hearing on the charges will be held.
- iii. Delivery of Notice. The notice of charges shall be sent to the accused member by certified mail, return receipt requested. The notice of charges shall be addressed to the accused member's last known address and mailed not less than twenty-one (21) days prior to the date set for the hearing.
- b. Hearing. Any member accused of violating either the ADA *Bylaws* or the *Principles of Ethics and Code of Professional Conduct* is entitled to a hearing before a hearing body of the entity bringing the charges.
- i. Purpose. The purpose of a disciplinary hearing is to provide the accused member with the opportunity to present a defense to the charges brought against the member.
- ii. Representation by Counsel. The organization bringing the charges must allow the accused member to be represented by legal counsel at any hearing convened under these procedures.
- iii. Continuances. An accused member is entitled to one (1) hearing postponement. The postponement cannot exceed thirty (30) days. Additional requests for postponement may be granted or denied by the hearing body in its reasonable discretion.
- c. Decision. Every decision of a hearing body that imposes a penalty will be in writing. The written decision will contain the following:
- i. Statement of Charges. The decision shall set forth a statement of the charge(s) made against the member;
- ii. Facts and Verdict. The decision shall state the facts that support the charge(s) and the verdict arrived at by the hearing body;

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- 1047           iii. Penalty. The decision shall state the penalty imposed and, if the penalty is to be suspended  
1048           during a period of probation, the length of the probationary period and any other conditions  
1049           included in the probation; and
- 1050           iv. Delivery of Decision. The decision is to be sent to the following:
- 1051               (a) The accused member by certified mail, return receipt requested, and addressed to the  
1052               accused member's last known address.
- 1053               (b) The secretary of the accused member's component, if any;
- 1054               (b) The secretary of the accused member's constituent, if applicable;
- 1055               (c) The chair of the American Dental Association Council on Ethics, Bylaws and Judicial  
1056               Affairs; and
- 1057               (d) The Executive Director of this Association.
- 1058           d. Notice of Right to Appeal. Every written decision issued by a hearing body that imposes a  
1059           penalty will be accompanied by a separate notice stating that the accused member has a right to  
1060           appeal the decision. The notice of right to appeal will direct the member to the section of this  
1061           *Governance Manual* dealing with appeals from disciplinary decisions relating to violations of the  
1062           *ADA Bylaws* or the *Principles of Ethics and Code of Professional Conduct*.
- 1063           e. Finality of Decision. A decision will not become final while an appeal of the decision is pending or  
1064           until the thirty (30) day period for filing a notice of appeal has expired.
- 1065               i. Non-Appeal of Decision Containing Sentence of Expulsion. If a decision includes a sentence  
1066               of expulsion and a notice of appeal is not received within the thirty (30) day period within  
1067               which to appeal, the accused member's constituent will notify all parties of the failure of the  
1068               accused member to file an appeal. The sentence of expulsion will take effect on the date the  
1069               parties receive such notice. The component and constituent shall each determine what  
1070               portion of their current dues and special assessments, if any, shall be returned to the  
1071               expelled member. Dues and special assessments paid to this Association will not be  
1072               refunded to an expelled member.
- 1073           2. Appeals from Disciplinary Decisions Relating to the ADA Bylaws and the Principles of Ethics and  
1074           Code of Professional Conduct. The following procedures shall be followed in any appeal from a  
1075           decision issued as a result of a disciplinary hearing on charges relating to the *ADA Bylaws* or the  
1076           *Principles of Ethics and Code of Professional Conduct*:
- 1077               a. Right to Appeal.
- 1078                   i. Disciplinary Decision of a Component. Any member shall have the right to appeal a  
1079                   disciplinary decision issued by the member's component that imposes a penalty. That appeal  
1080                   shall be made to member's constituent by filing a notice of appeal in affidavit form with the  
1081                   secretary of the constituent.
- 1082                   ii. Disciplinary Decision of a Constituent. Any member or component shall have a right to appeal  
1083                   a disciplinary decision that is adverse to it that is issued by a constituent. That appeal shall be  
1084                   made to the Council on Ethics, Bylaws and Judicial Affairs of this Association by filing a  
1085                   notice of appeal in affidavit form with the Chair of the Council on Ethics, Bylaws and Judicial  
1086                   Affairs.
- 1087               iii. Disciplinary Decision Adverse to a Direct Member. A direct member of this Association shall  
1088               have the right to appeal a disciplinary decision of a hearing panel of the Council on Ethics,

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- 1089 Bylaws and Judicial Affairs that imposes a penalty of censure, suspension, expulsion, or  
1090 probation. That appeal shall made to the full Council on Ethics, Bylaws and Judicial Affairs of  
1091 this Association by filing a notice of appeal in affidavit form with the Chair of the Council on  
1092 Ethics, Bylaws and Judicial Affairs. Members of the hearing panel that issued the decision  
1093 being appealed shall have no right to vote on the Council's decision in such an appeal.
- 1094 b. Time to Appeal. An appeal from any decision shall not be valid unless the appeal is filed within  
1095 thirty (30) days of the date the decision appealed from was issued.
- 1096 c. Time for the Filing of Briefs on Appeal. Briefs in appeals brought under this Article II must be  
1097 filed in accordance with the following schedule:
- 1098 i. Appellant's Initial Brief. If being filed, an initial brief supporting an appeal must be filed within  
1099 sixty (60) days of the issue date of the decision being appealed.
- 1100 ii. Reply Brief. If being filed, a reply brief must be filed within ninety (90) days of the issue date  
1101 of the decision being appealed.
- 1102 iii. Rejoinder Brief. If being filed, a rejoinder brief must be filed within one hundred five (105)  
1103 days of the issue date of the decision being appealed.
- 1104 d. Time for Appellate Hearing. No hearing shall be held within one hundred fifty (150) days of the  
1105 issue date of the decision being appealed or forty-five (45) days after the last brief in the appeal  
1106 was filed, whichever is later. Omission of briefs will not alter the date for the hearing of an appeal  
1107 unless otherwise agreed to by the parties and the chair of the body hearing the appeal.
- 1108 e. Conduct of Appellate Hearing. The following procedure shall be used in processing appeals:
- 1109 i. Appellate Hearings. If the requirements of subsections a. and b. of this section relating to  
1110 appeals from disciplinary decisions relating to the *ADA Bylaws* and the *Principles of Ethics*  
1111 *and Code of Professional Conduct* are met, the party bringing the appeal shall be entitled to a  
1112 hearing.
- 1113 ii. Parties to an Appeal. The parties to an appeal are the accused member and the entity that  
1114 brought the charges against the accused member. In appeals to the Council on Ethics,  
1115 Bylaws and Judicial Affairs of this Association, the constituent which heard the first appeal, if  
1116 any, may, at its option, participate in the appeal.
- 1117 iii. Right to be Represented by Counsel. The parties to an appeal shall be entitled to be  
1118 represented by counsel in the appeal.
- 1119 iv. Appearance at Hearing not Required. A party to an appeal is not required to attend a hearing  
1120 in an appeal brought pursuant to this section.
- 1121 v. Option to Conduct Telephonic Hearings. Upon the request by a party and the concurrence of  
1122 all other parties, the body hearing the appeal may permit one or more of the parties to an  
1123 appeal to participate in the hearing remotely via telephone or other suitable means. The  
1124 decision whether to allow remote participation in an appeal hearing is discretionary with the  
1125 body hearing the appeal and granting such a request can be subject to meeting reasonable  
1126 terms and conditions set by the hearing body.
- 1127 vi. Hearing Notice. A body that receives a notice of appeal shall notify the constituent or  
1128 component (or components) concerned or, where applicable, the hearing panel of the Council  
1129 on Ethics, Bylaws and Judicial Affairs, and the accused member of the time and place of the  
1130 appeal hearing. Such notice shall be sent by certified mail, return receipt requested, to the

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- 1131 last known address of each party to the appeal. The hearing notice should be mailed not less  
1132 than thirty (30) days prior to the hearing date.
- 1133 vii. Hearing Continuances. Granting of hearing continuances shall be at the discretion of the  
1134 hearing body.
- 1135 viii. Prehearing Matters. All communications with a hearing body shall be in writing. All parties to  
1136 the appeal shall receive copies of such communications via the same method of delivery as  
1137 used with the hearing body. Prehearing requests shall be granted at the discretion of the  
1138 hearing body. In appeals to this Association's Council on Ethics, Bylaws and Judicial Affairs,  
1139 the Council chair has the authority to rule on requests from the parties for continuances and  
1140 other prehearing procedural matters with advice from legal counsel of this Association. The  
1141 Council chair may consult with the Council before rendering prehearing decisions.
- 1142 ix. Briefs. Each party to an appeal shall be entitled to submit a brief in support of the party's  
1143 position. The briefs of the parties shall be submitted to the secretary of the constituent or the  
1144 Chair of the Council on Ethics, Bylaws and Judicial Affairs of this Association, as appropriate,  
1145 in accordance with the prescribed briefing schedule. A copy of any brief filed in the appeal  
1146 must be delivered to every other party in the appeal at the same time as the filing of the brief.  
1147 The party initiating the appeal may choose to rely on the record and/or on an oral  
1148 presentation and not file a brief.
- 1149 x. Record of Disciplinary Proceedings. Upon notice of an appeal, the entity that issued the  
1150 decision being appealed shall provide to the body hearing the appeal and to the accused  
1151 member a transcript, or an officially certified copy of the minutes, of the hearing accorded the  
1152 accused member. Certified copies of any affidavits or other documents submitted as  
1153 evidence to support or refute the charges against the accused member in the disciplinary  
1154 hearing and any other material considered by the body issuing the decision being appealed  
1155 will accompany the transcript or minutes. Where the body conducting the hearing resulting in  
1156 the decision being appealed does not transcribe the hearing, the accused member, at the  
1157 accused's own expense, is entitled to arrange for transcription of the hearing by a court  
1158 reporter.
- 1159 xi. Appellate Jurisdiction. The body to which a decision has been appealed shall be required to  
1160 review the decision appealed from to determine whether the evidence before the component,  
1161 constituent or body which brought the charges against the accused member supports that  
1162 decision or warrants the penalty imposed. The body hearing the appeal shall not be required  
1163 to consider additional evidence unless there is a clear showing that a party to the appeal will  
1164 be unreasonably harmed by failure to consider the additional evidence.
- 1165 xii. Decisions on Appeals. Every decision on appeal shall be in writing and must clearly state the  
1166 conclusion of the hearing body and the reasons for that conclusion. The body hearing the  
1167 appeal shall have the discretion to:
- 1168 (a) Uphold the decision of the entity that brought charges against the accused member;
- 1169 (b) Reverse the decision of the entity that brought the charges and thereby exonerate the  
1170 accused member;
- 1171 (c) Deny an appeal where it fails to satisfy the requirements for appealing disciplinary  
1172 decisions in this *Governance Manual*;



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- 1173 (d) Refer the case back to the body that brought the charges for new proceedings, if the  
1174 rights of the accused member under all applicable bylaws were violated or if adopted  
1175 disciplinary procedures were not followed to the detriment of the accused;
- 1176 (e) Remand the case back to the agency that issued the charges for further proceedings  
1177 when the record in the appeal is insufficient to enable the body hearing the appeal to  
1178 form a conclusion concerning the correctness of the decision being appealed; or
- 1179 (f) Modify the decision of the agency that issued the charges against the accused member  
1180 by reducing the penalty imposed.
- 1181 xiii. Delivery of the Appeal Decision to the Parties. Within thirty (30) days of the date on which a  
1182 written decision on appeal is approved by the entity conducting the appeal, a copy of the  
1183 written decision shall be sent by certified mail, return receipt requested, to the last known  
1184 address of each of the following: the accused member; the secretary of the component of  
1185 which the accused is a member, if applicable; the secretary of the constituent of which the  
1186 accused is a member, if applicable; the Chair of the Council on Ethics, Bylaws and Judicial  
1187 Affairs of this Association; and the Executive Director of this Association.
- 1188 C. Member Conduct Hearings. The following procedures will be followed by the Council on Ethics,  
1189 Bylaws and Judicial Affairs in cases involving allegations of violations of the *Member Conduct Policy*  
1190 of the Association:
- 1191 1. Charges. Any member of the Association or the Association's staff has the right to bring charges  
1192 alleging a violation or violations of the Association's Member Conduct Policy. Charges must meet  
1193 the following specifications:
- 1194 a. In writing. The charges must be in writing;
- 1195 b. Identify Violation. The charges must include an identification of the provision(s) of the  
1196 Association's *Member Conduct Policy* alleged to have been violated;
- 1197 c. Include Description. Include a detailed description of the conduct alleged to constitute the  
1198 violation; and
- 1199 d. Delivery of Charges. The charges must be sent to the chair of the Council on Ethics, Bylaws and  
1200 Judicial Affairs of this Association.
- 1201 2. Preliminary Investigation.
- 1202 a. Selection. Upon receipt of a charge alleging violation of the *Member Conduct Policy*, the Chair of  
1203 the Council on Ethics, Bylaws and Judicial Affairs will select an investigatory panel of three (3)  
1204 members of the Council.
- 1205 b. Ineligible Council Member. The Council member from the Trustee District of the member  
1206 accused of violating the *Member Conduct Policy* is ineligible to serve on the investigatory panel.  
1207 The investigatory panel will conduct a preliminary investigation of the charges alleged and  
1208 determine whether the allegations made in the charges sufficiently state a violation of the  
1209 *Member Conduct Policy*.
- 1210 3. Notice of Determination of Investigatory Panel.
- 1211 a. No Violation. If, upon preliminary investigation, the investigatory panel determines that the  
1212 charges do not sufficiently state a violation of the *Member Conduct Policy*, the Association  
1213 member or Association staff member bringing the charges will be advised in writing of the

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- 1214 investigatory panel's determination. The investigatory panel's decision will be final and without  
1215 right of appeal.
- 1216 b. Possible Violation. If the investigatory panel determines that the charge does sufficiently state a  
1217 violation of the *Member Conduct Policy*, the charging individual and accused member shall be  
1218 notified in writing. The notice of possible violation shall conform to the following specifications:
- 1219 i. Specification of Charges. The notice of possible violation shall provide a specification of the  
1220 charges brought against the accused member;
- 1221 ii. Hearing Notice. The notice of possible violation shall specify the time and place of hearing on  
1222 the charges brought against the accused member;
- 1223 iii. Manner of Delivery. The notice of possible violation shall be sent via certified mail, return  
1224 receipt requested, to the last known addresses of the charging individual and the accused  
1225 member; and
- 1226 iv. Time of Notice Mailing. The notice of possible violation shall be mailed not less than twenty-  
1227 one (21) days prior to the date set for the hearing.
- 1228 4. Hearing. In the event of finding of a possible violation of the *Member Conduct Policy*, the accused  
1229 member shall be entitled to a hearing before a panel of three (3) members of the Council on Ethics,  
1230 Bylaws and Judicial Affairs.
- 1231 a. Hearing Panel Make Up. Members of the investigatory panel that investigated the allegations  
1232 against the accused member and the Council member from the accused's trustee district are  
1233 ineligible to sit on the hearing panel.
- 1234 b. Purpose. The purpose of the hearing is to provide the accused member with an opportunity to  
1235 present a defense to the charges brought against him or her.
- 1236 c. Representation by Counsel. The accused member is entitled to be represented by legal counsel  
1237 at the member conduct hearing.
- 1238 d. Continuances. An accused member is entitled to one (1) hearing postponement. The  
1239 postponement cannot exceed thirty (30) days. Additional requests for postponement may be  
1240 granted or denied at the discretion of the chair of the Council on Ethics, Bylaws and Judicial  
1241 Affairs, who may but need not consult with the Council or the hearing panel on the request.
- 1242 5. Decision. Any member conduct hearing panel decision shall conform to the following specifications:
- 1243 a. Requirement of Written Decision. Every decision of a member conduct hearing panel will be in  
1244 writing. The written decision will state:
- 1245 i. The charges lodged against the member;
- 1246 ii. The relevant facts;
- 1247 iii. The verdict arrived at by the hearing body; and
- 1248 iv. The penalty imposed or recommended and, if the penalty is to be suspended during a period  
1249 of probation, the length of the probationary period and any other conditions included in the  
1250 probation.
- 1251 b. Mailing of Decision. Every hearing panel decision must be sent, by certified mail, return receipt  
1252 requested, within ten (10) days of the written decision being approved by the hearing panel, to  
1253 the last known address of each of the following:

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- 1254 I. The accused member;
- 1255 ii. The charging individual;
- 1256 iii. The secretary of the accused member's component, if any;
- 1257 iv. The secretary of the accused member's constituent, if applicable;
- 1258 v. The Chair of the American Dental Association Council on Ethics, Bylaws and Judicial Affairs;
- 1259 vi. The Executive Director of this Association; and, if applicable
- 1260 vii. The Election Commission of the Association.
- 1261 6. Notice of Right to Appeal. A written notice to the accused member informing the accused member
- 1262 of his or her right to appeal the decision of the hearing panel must accompany the copies of the
- 1263 decision sent pursuant to these procedures.
- 1264 7. Finality of Decision. A decision will not become final while an appeal of the decision is pending or
- 1265 until the thirty (30) day period for filing notice of appeal has expired.
- 1266 8. Non-Appeal of Decision Containing Sentence of Expulsion. If a decision includes a sentence of
- 1267 expulsion and no notice of appeal is received within the thirty (30) day period within which to
- 1268 appeal, the Council on Ethics, Bylaws and Judicial Affairs shall notify all parties and the accused
- 1269 member's constituent and, if appropriate, component, of the failure of the accused member to file
- 1270 an appeal. The sentence of expulsion will take effect on the date the notice is received. The
- 1271 disciplined member's component and constituent shall each determine what portion of their current
- 1272 dues and special assessments, if any, shall be returned to the expelled member. Dues and special
- 1273 assessments paid to this Association will not be refunded to an expelled member.
- 1274 D. Member Conduct Appeals. The following procedures shall be followed in any appeal from a decision
- 1275 issued as a result of a member conduct hearing pursuant to the procedures in this *Governance*
- 1276 *Manual*:
- 1277 1. Right to Appeal. Any member shall have the right to appeal a disciplinary decision issued by a
- 1278 member conduct hearing panel that imposes a penalty to the full Council on Ethics, Bylaws and
- 1279 Judicial Affairs by filing an appeal in affidavit form with the chair of the Council on Ethics, Bylaws
- 1280 and Judicial Affairs of this Association.
- 1281 2. Time to Appeal. An appeal from any member conduct decision under the procedures of this
- 1282 *Governance Manual* will not be valid unless the appeal is filed within thirty (30) days of the date the
- 1283 decision appealed from was issued.
- 1284 3. Time for Filing Briefs on Appeal. Briefs in member conduct appeals brought under the procedures
- 1285 of this *Governance Manual* will be filed according to the following schedule:
- 1286 a. Appellant's Initial Brief. If being filed, an initial brief supporting an appeal must be filed within
- 1287 sixty (60) days after the date the decision being appealed was issued.
- 1288 b. Reply Brief. If being filed, a reply brief supporting the decision appealed from must be filed by
- 1289 the Association member or staff member who lodged the member conduct complaint within
- 1290 ninety (90) days after the decision being appealed was issued.
- 1291 c. Rejoinder Brief. If being filed, a rejoinder brief supporting an appeal must be filed within one
- 1292 hundred five (105) days after the date the decision being appealed was issued.
- 1293 4. Time for Appellate Hearing. No hearing on an appeal will be held within one hundred fifty (150)
- 1294 days of the date the decision appealed from was issued or forty-five (45) days after the last brief in

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the appeal was filed, whichever is later. Omission of briefs will not alter the hearing date unless otherwise agreed to by the parties and the chair of the body hearing the appeal.

5. Conduct of Appellate Hearing. The accused member shall be entitled to a hearing on an appeal, provided that such appeal meets the requirements of this section of the *Governance Manual*. The appeal hearing shall be conducted in accordance with the following parameters:
- a. Council Members Hearing the Appeal. Members of the investigatory and hearing panels involved in the action being appealed and the Council representative from the accused member's Trustee District shall be recused from and will not take part in the appeal.
  - b. Parties to the Appeal. In any appeal of a decision under the *Member Conduct Policy*, the parties to such an appeal shall be the accused member and the Association member or the Association staff member who brought the charges.
  - c. Representation by Counsel. In any appeal, the accused member is entitled to be represented by legal counsel.
  - d. Attendance at Hearing. A party need not appear for the appeal to be heard by the Council on Ethics, Bylaws and Judicial Affairs.
  - e. Option to Conduct Telephonic Hearing. Upon the request by a party and the concurrence of all other parties, the Council on Ethics, Bylaws and Judicial Affairs may permit one or more of the parties to an appeal to participate in the hearing remotely via telephone or other suitable means. The decision whether to allow remote participation in an appeal hearing is discretionary with the Council and granting such a request can be subject to meeting reasonable terms and conditions set by the Council.
  - f. Hearing Notice. The Council on Ethics, Bylaws and Judicial Affairs shall notify the accused member; the Association member or Association staff member bringing the charges; the secretary of the accused member's component, if applicable; and the secretary of the accused member's constituent, if applicable of the time and place of the appeal hearing. The hearing notice will be sent by certified mail, return receipt requested, to the last known addresses of the parties to the appeal and the other entities receiving notice. The notice of hearing is to be mailed not less than thirty (30) days prior to the hearing date.
  - g. Hearing Continuances. The granting of continuances shall be at the discretion of the Chair of the Council on Ethics, Bylaws and Judicial Affairs.
  - h. Prehearing Matters. All prehearing communications will be in writing and a copy of each communication shall be sent to every other party in the same manner sent to the Council of Ethics, Bylaws and Judicial Affairs. Prehearing requests shall be granted at the discretion of the Chair of the Council on Ethics, Bylaws and Judicial Affairs. The Council Chair has the authority to rule on requests from the parties for continuances and other prehearing procedural matters with advice from legal counsel of this Association. The Council Chair may consult with the Council before rendering prehearing decisions.
  - i. Briefs. Each party to an appeal shall be entitled to submit a brief in support of the party's position. The briefs of the parties shall be submitted to the Chair of the Council on Ethics, Bylaws and Judicial Affairs of this Association in accordance with the prescribed briefing schedule. A copy of each brief filed in an appeal must be delivered to the opposing party in the appeal at the same time as the filing of the brief. The party initiating the appeal may choose to rely on the record and/or an oral presentation and not file a brief.

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j. Record of Hearing. Upon receiving a notice of an appeal, the hearing panel of the Council on Ethics, Bylaws and Judicial Affairs that presided over the initial hearing shall furnish a transcript or an officially certified copy of the minutes of the hearing being appealed to the Council on Ethics, Bylaws and Judicial Affairs and the parties to the appeal. The transcript or minutes shall be accompanied by certified copies of any affidavits or other documents submitted as evidence to support the charges against the accused member or submitted by the accused as part of the accused's defense. If the hearing panel did not provide for transcription of the hearing, any party shall be entitled to arrange for the services of a court reporter to transcribe the hearing.

k. Appellate Jurisdiction. The Council on Ethics, Bylaws and Judicial Affairs is required to review the decision appealed from to determine whether the evidence before the hearing panel supports that decision or warrants the penalty(ies) imposed. The Council on Ethics, Bylaws and Judicial Affairs shall not be required to consider additional evidence unless there is a clear showing that a party to the appeal will be unreasonably harmed by failure to consider the additional evidence.

### 6. Decision on Appeals.

a. Appeals not Involving Recommended Probation, Suspension, Expulsion and/or Removal of a Trustee or Elective Officer.

i. Written Decision. In any appeal that does not involve the recommended probation, suspension, expulsion and/or removal from office of a trustee or elective officer, the decision of the Council on Ethics, Bylaws and Judicial Affairs shall be reduced to writing. The decision must clearly state the conclusion of the Council and the reasons for reaching that conclusion.

ii. Permissible Penalties. The Council shall have the discretion to:

(a) Uphold the decision of the hearing panel;

(b) Reverse the decision of the hearing panel and thereby exonerate the accused member;

(c) Deny an appeal that fails to satisfy the requirements the procedures for appeals of member conduct decisions in this *Governance Manual*;

(d) Refer the case back to the hearing panel for new proceedings, if the rights enumerated under all applicable policies and procedures were not accorded the accused;

(e) Remand the case back to the member conduct hearing panel for further proceedings when the appellate record is insufficient in the opinion of the Council on Ethics, Bylaws and Judicial Affairs to enable it to render a decision; or

(f) Modify the decision of the hearing panel by reducing the penalty imposed.

iii. Final Decision. The decision of the Council on Ethics, Bylaws and Judicial Affairs in an appeal not involving a recommended probation, suspension, expulsion and/or removal of a trustee or elective officer shall be final and non-appealable.

iv. Delivery of the Appeal Decision to the Parties. Within thirty (30) days of the date on which a final decision on appeal is approved by the Council on Ethics, Bylaws and Judicial Affairs, a copy of the written decision shall be sent by certified mail, return receipt requested, to the last known address of each of the following: the accused member; the Association member or Association staff member bringing charges; the secretary of the component of which the accused is a member, if applicable; the secretary of the constituent of which the accused is a

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1379 member, if applicable; the Election Commission of the Association; and the Executive  
1380 Director of this Association.

1381 b. Appeals Involving Recommended Probation, Suspension, Expulsion and/or Removal of a  
1382 Trustee or Elective Officer.

1383 i. Written Decision. In any appeal that involves the recommended probation, suspension,  
1384 expulsion or removal of a trustee or elective officer, the decision of the Council on Ethics,  
1385 Bylaws and Judicial Affairs shall be reduced to writing. The decision must clearly state the  
1386 conclusion of the Council and the reasons for reaching that conclusion.

1387 ii. Permissible Penalties. The Council shall have the discretion to:

1388 (a) Recommend upholding the decision of the hearing panel;

1389 (b) Reverse the recommended decision of the hearing panel and thereby exonerate the  
1390 accused member;

1391 (c) Recommend denial of an appeal that fails to satisfy the requirements of the member  
1392 conduct hearing procedures of this *Governance Manual*;

1393 (d) Refer the case back to the hearing panel for new proceedings, if the rights enumerated  
1394 under all applicable procedures were not accorded the accused;

1395 (e) Remand the case back to the hearing panel for further proceedings when the appellate  
1396 record is insufficient in the opinion of the Council on Ethics, Bylaws and Judicial Affairs to  
1397 enable it to render a decision; or

1398 (f) Modify the decision of the hearing panel by reducing the penalty imposed, except in  
1399 cases in which the reduced penalty is probation, suspension and/or removal from office,  
1400 the Council's decision shall be a recommendation.

1401 iii. Final Decision. The decision of the Council on Ethics, Bylaws and Judicial Affairs shall be  
1402 final and non-appealable only in cases where the Council's decision does not result in the  
1403 recommendation of a sentence of probation, suspension, expulsion and/or removal from  
1404 office.

1405 iv. Delivery of the Appeal Decision in Cases not Involving Recommended Probation,  
1406 Suspension, Expulsion and/or Removal from Office. Within thirty (30) days of the date on  
1407 which a final decision that does not recommend probation, suspension, expulsion and/or  
1408 removal from office is approved by the Council on Ethics, Bylaws and Judicial Affairs, a copy  
1409 of the decision shall be sent by certified mail, return receipt requested, to the last known  
1410 address of each of the following: the accused trustee or elective officer; the Association  
1411 member or Association staff member preferring charges; the secretary of the component of  
1412 which the trustee is a member, if applicable; the secretary of the constituent of which the  
1413 trustee or elective officer is a member, if applicable; the Election Commission and the  
1414 Executive Director of this Association.

1415 v. Delivery of the Appeal Decision in Cases Involving Recommended Probation, Suspension,  
1416 Expulsion and/or Removal from Office. Within thirty (30) days of the date on which a decision  
1417 that recommends probation, suspension, expulsion and/or removal from office of a trustee or  
1418 elective officer is approved by the Council on Ethics, Bylaws and Judicial Affairs, a copy  
1419 thereof shall be sent by certified mail, return receipt requested, to the last known address of  
1420 each of the following: the accused trustee or elective officer; the Association member or  
1421 Association staff member preferring charges; the Election Commission, the secretary of the

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

component of which the trustee or elective officer is a member, if applicable; the secretary of the constituent of which the trustee or elective officer is a member, if applicable; and the Executive Director of this Association.

vi. Right to Respond. When a decision recommends that a trustee or elective official be sentenced to probation, expulsion, suspension and/or removal from office, that trustee or elected official has the right to respond in writing to the decision and recommendation. The response of the trustee or elective official must be delivered to the chair of the Council on Ethics, Bylaws and Judicial Affairs within thirty (30) days from the date the decision and recommendation was issued. The chair of the Council on Ethics, Bylaws and Judicial Affairs will forward the decision and recommendation, along with any response received from the trustee or elected official, to the Speaker of the House of Delegates, the Election Commission and the Association's Executive Director.

vii. Consideration of Decision by House of Delegates. Any decision that recommends probation, suspension, expulsion and/or removal from office of a trustee or elective officer shall be considered by the House of Delegates.

Consideration of Recommended Probation, Suspension, Expulsion and/or Removal from Office of Trustees or Elective Officers by House of Delegates. The House of Delegates shall decide whether to accept or reject any recommendation of a sentence of probation, suspension, expulsion and/or removal from office made pursuant to the provisions of this section of the *Governance Manual* against Trustees or Elected Officers of this Association. Delegates and alternate delegates who participated in any portion of the procedures that resulted in such recommendation shall be recused from deliberations under this section. A two-thirds (2/3) affirmative vote of the delegates present and voting is required to impose a disciplinary sentence of expulsion from membership or removal from office, suspension or probation.

D. Enforcement of Sentences. After all appeals are exhausted or after the time for filing an appeal has expired, a sentence of censure, suspension, expulsion and/or removal from office meted out to any member by decisions rendered pursuant to the procedures in this *Governance Manual*, including those instances when the disciplined member has been placed on probation, shall be enforced by such individual's component and constituent, if such exist, and this Association.

E. Non-Compliance. In the event of a failure of technical compliance with the procedural requirements contained in this *Governance Manual*, the entity hearing the appeal shall determine the effect of such non-compliance.

F. Reminders of Obligation. Because Reminders of Obligation are private administrative actions and not disciplinary penalties, copies of such Reminders of Obligation shall only be kept by the Council on Ethics, Bylaws and Judicial Affairs for a period of six (6) months after issuance following which such copies shall be destroyed.

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

### CHAPTER XII. FINANCIAL MATTERS

- A. Installment Payments of Dues and Special Assessments. Any constituent or component may establish a plan for the installment payment of dues and special assessments for active, life and provisional members. This Association may establish a plan for the installment payment of dues and special assessments for active and life members who are direct members of the Association. Any such installment plan shall require:
1. Monthly installment payments that conclude with the current dues and any special assessment amount being paid by December 15; and
  2. The expeditious transfer of installments of member dues and any special assessments collected to this Association and any applicable constituent or component.
  3. Any installment plan adopted under this provision of the *Governance Manual* may impose a reasonable transaction fee upon the member. Transaction fees collected shall be prorated between this Association and the constituent and component, if any, based on the amount of dues and special assessment collected on each organization's behalf.
- B. Establishment of Funds. At the direction of the Board of Trustees, other funds may be created for activities and programs requiring separate accounting records to meet governmental and administrative requirements. Such funds shall consist of monies and other assets received or allocated in accordance with the purpose for which they are established. Such funds shall be used for defraying all expenses incurred in their operation, shall serve only as separate accounting entities and continue to be held in the name of the American Dental Association as divisions of the General Fund.
- C. Special Assessments:
1. Notice. Notices of resolutions proposing a special assessment shall be sent electronically to each constituent and posted on ADA Connect or its equivalent for the House of Delegates not less than thirty (30) days before such session. Notices of resolutions proposing special assessments shall also be announced to the general membership in an official publication of this Association at least fifteen (15) days in advance of the session. The specific project to be funded by the proposed assessment, the time frame of the project, and the amount and duration of the proposed assessment shall be clearly presented in giving notice to the members of this Association.
  2. Amendments and Number of Assessments Permitted. The House of Delegates may consider only one (1) specific project to be funded by a proposed assessment at a time. However, if properly adopted by the House of Delegates, two (2) or more special assessments may be in force at the same time.



**APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D**

1494 **CHAPTER XIII. INDEMNIFICATION.** [Reserved]  
1495

**APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D**

1496 **CHAPTER XIV. PROCEDURAL MANUALS OF THE ASSOCIATION.** [Reserved]  
1497

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

1498 **CHAPTER XV. PARLIAMENTARY AUTHORITY** [Reserved]  
1499

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

1500 **CHAPTER XVI. AMENDMENTS** [Reserved]  
1501

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

**CHAPTER XVII. CONFLICT OF INTEREST.** It is the policy of this Association that individuals who serve in elective, appointive or employed offices or positions do so in a representative or fiduciary capacity that requires loyalty to the Association. At all times while serving in such offices or positions, these individuals shall further the interests of the Association as a whole. In addition, they shall avoid:

1. placing themselves in a position where personal or professional interests may conflict with their duty to this Association.
2. using information learned through such office or position for personal gain or advantage.
3. obtaining by a third party an improper gain or advantage.

As a condition for selection, each nominee, candidate and applicant shall complete a conflict of interest statement as prescribed by the Board of Trustees, disclosing any situation which might be construed as placing the individual in a position of having an interest that may conflict with his or her duty to the Association. Candidates for offices of President-elect, Second Vice President, Treasurer, Speaker of the House, nominees for office of trustee, and nominees to councils and commissions shall file such statements with the Secretary of the House of Delegates to be made available to the delegates prior to election. As a condition of appointment, consultants, advisers and staff of Councils, Commissions and Special Committees, and each person nominated or seeking such positions, shall file conflict of interest statements with the executive director of this Association.

While serving in any elective, appointive or employed office or position, the individual shall comply with the conflict of interest policy applicable to his or her office or position, shall complete and file a conflict of interest statement for each year of service, and shall promptly report any situation in which a potential conflict of interest may arise.

The Board of Trustees shall approve any additional compliance activities that will implement the requirements of this Chapter. The Board of Trustees shall render a final judgment on what constitutes a conflict of interest.

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

### 1527 CHAPTER XVIII. SCIENTIFIC MEETINGS.

- 1528 A. Object: The scientific session of this Association is established to foster the presentation and  
1529 discussion of subjects pertaining to the improvement of the health of the public and the science and art  
1530 of dentistry.
- 1531 B. Time and Place: The scientific session of the Association shall be held annually at a time and place  
1532 selected by the Board of Trustees. Such selection shall be made at least one (1) year in advance.
- 1533 C. Trade and Laboratory Exhibits: Products of the dental trade and dental laboratories and other  
1534 products may be exhibited at each scientific session under the direction of the Board of Trustees and  
1535 in accordance with rules and regulations established by that body.
- 1536 D. Admission: Admission to meetings of the scientific sessions shall be limited to members of this  
1537 Association who are in good standing and to others admitted in accordance with rules and regulations  
1538 established by the Board of Trustees.  
1539

## APPENDIX 2 (RESOLUTION 7) REFERENCE COMMITTEE D

### CHAPTER XIX. PUBLICATIONS.

- A. The Journal of the American Dental Association. *The Journal of the American Dental Association*, hereinafter referred to as *The Journal*, shall be published with a frequency and at a subscription rate that shall be determined by the Board of Trustees. The object of *The Journal* shall be to report, chronicle and evaluate activities of scientific and professional interest to members of the dental profession. Except as otherwise provided in the powers of the Board of Trustees in the *ADA Bylaws*, the editor of *The Journal* shall have the authority to determine its editorial content, including scientific-based content, and shall, with the assistance of an editorial board, establish and maintain a written editorial policy for *The Journal*.
- B. Other Journals. The Association may publish or cause to be published other journals in the field of dentistry subject to the direction and regulations of the Board of Trustees.
- C. Official Transactions: The official transactions of the House of Delegates and the Board of Trustees and the reports of officers, councils and committees shall be published under the direction of the Executive Director.
- D. Member Directory: This Association shall cause to be published a directory of members of the Association.

# 2016 Manual of the House of Delegates and Supplemental Information

## 15<sup>th</sup> Annual Session

\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_-\_\_\_\_\_, 20\_\_\_\_

**EDITOR'S NOTE:** This version of the *Manual of the House of Delegates* is submitted to present the revisions (noted by underscoring for additions and strike outs for deletions) that require approval of the House of Delegates to the sections of the Manual entitled "Operation of the House of Delegates," "Rules of the House of Delegates," "Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates" and "Standing Committees of the House of Delegates" and how those revisions will be presented in the Manual of the House of Delegates. Certain other conforming revisions to other sections of the Manual that do not require House approval are also noted in the document. Because the 2017 edition of the Manual was not available at the time that the revisions needed to be documented, an earlier version of the Manual was used for illustrative purposes, and references to specific venues, dates and times have been deleted.

**ADA** American  
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America's leading  
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# **Table of Contents**

**OMITTED**

# **Manual of the House of Delegates**

# Introduction

The House of Delegates, as the legislative and governing body, is the supreme authority in the American Dental Association. As such, it speaks for more than 159,000 members of the Association and for the dental profession in the United States. This manual has been prepared so that all who participate in the annual sessions of the House of Delegates may have a better understanding of the methods and rules under which it operates.

The House of Delegates is composed of officially certified delegates of the 53 constituent dental societies; two officially certified delegates from each of the five federal dental services; and five student members of the American Student Dental Association. Currently, the House of Delegates has 480 voting members. The number of voting members is determined by the methodologies set forth elsewhere in this *Manual*.

It is the responsibility of a delegate to:

- Be informed of the business to be transacted at the convention
- Act, first, in the best interest of the profession and Association as a whole; and second, in the best interest of the constituency they represent
- Report to their constituency on the actions taken at the convention and the reasons for these actions

According to the *American Institute of Parliamentarians Standard Code of Parliamentary Procedure* (AIPSC), **"It is not wise for**

delegates to be instructed by their constituents to take specific actions on items of business. The delegates should be free to weigh the pros and cons and vote according to what appears to be the wisest course for the organization. The members who the delegates represent may be unaware of the full range of arguments and information to be presented at the convention and cannot know the final wording of the proposed action, if amended."

Since the House of Delegates meets only once a year, it is obvious that many important issues must be considered and decisions made at the annual session. The volume and complexity of the issues which are placed before the House of Delegates make it impossible to handle them without having a well-established routine for the conduct of business. This routine demands the close cooperation of the members of the House, the officers and members of the Board of Trustees, and the Headquarters Office Staff.

In the following pages there is information relating generally to the organization and operation of the House of Delegates and specifically to the 20\_\_ annual session of the House of Delegates. A careful reading of this material will give every member of the House of Delegates a more informed view of the activities which lead to the establishment of policy for the American Dental Association and for the dental profession in the United States.

# General Information for Delegates and Alternates

## House of Delegates Information and Resource Office

An Information and Resource Office will be open \_\_\_\_\_ through \_\_\_\_\_, and will be located in the \_\_\_\_\_, Level \_\_, \_\_\_\_\_. This office will be open to delegates, alternates, constituent society officers and staff. The office will be equipped with computers with printing capability; a copy machine; and general information about the meetings of the House of Delegates and related activities. Everyone is urged to use the Information and Resource Office when drafting resolutions or testimony. Individuals having resolutions for submission to the House of Delegates will be directed to the Headquarters Office where *final* resolution processing will occur.

## Credentials for Delegates and Alternates

Official credentials will be transmitted electronically to all delegates and alternate delegates certified prior to \_\_\_\_\_. Any delegates and alternate delegates certified after this date will need to be credentialed by the Committee on Credentials, Rules and Order at Delegate Registration. Proof of credentialing must be presented to the Committee on Credentials, Rules and Order at the time of registration.

## Registration

For the convenience of those who attend meetings of the House of Delegates and have not registered in advance, special registration facilities will be provided for the following: delegates, alternate delegates, officers and members of the Board of Trustees; chairs and members of councils and commissions; and officers, executive directors and staff of constituent and component societies. Former presidents, former trustees, former officers, and the representatives from the American Hospital Association and American Medical Association and honorary members may pick up their registration and meeting materials in a section adjacent to the special registration facilities. Those eligible for special registration may also register their spouses and other members of their families.

If registration for the meeting is completed in advance (prior to \_\_\_\_\_), registration

materials (name badges, badge holders, and tickets) will be mailed prior to the annual session. Otherwise, these materials will be included with the meeting materials (meeting cards) that are distributed at Delegate Registration.

The Delegate Registration facilities will alternate between the \_\_\_\_\_, Level \_\_, \_\_\_\_\_, and the \_\_\_\_\_ Convention Center, \_\_\_\_\_. The hours will be maintained during the meeting as follows:

All others attending ADA 201\_\_—America's Dental Meeting® are required to register at the on-site registration desk located at the \_\_\_\_\_ Convention Center, \_\_\_\_\_.

Badges are required in order to gain admittance to the visitors' gallery in the House of Delegates.

## Admittance Cards for Delegates

Each delegate will receive five numbered, varicolored admission cards in addition to an official badge. The properly numbered card must be presented to the doorkeeper for each meeting in order to gain admission to the floor of the House of Delegates. The badge will not admit you without the proper card. The loss of admission cards should be reported promptly to the Committee on Credentials, Rules and Order.

## Seating of Alternate Delegates

Delegates wishing to substitute alternate delegates from their delegation for themselves during a meeting of the House of Delegates must complete the appropriate delegate-alternate substitution form at Delegate Registration. Delegates are required to sign the form and surrender their admission cards for the meeting or meetings not attended before admission cards will

be issued to alternate delegates by the Committee on Credentials, Rules and Order.

Substitution of alternate delegates may be made during all four meetings of the House of Delegates.

### Access to Floor

Access to the floor of the House of Delegates is limited to officers and members of the House of Delegates, the elective and appointive officers of the Association, the former presidents, the members of the Board of Trustees, the chairs of the councils and commissions, the secretaries and executive directors of constituent societies, the executive director and president of the American Student Dental Association, an officially designated representative from each of the American Hospital Association and American Medical Association and members of the Headquarters Office staff. Council and commission chairs are responsible for requesting floor access for any non-delegate council or commission member who desires to speak during debate on the report of the council or commission consistent with the *Bylaws* and the Rules of the House of Delegates.

Alternate delegates, former officers and former trustees do not have the privilege of access to the floor, but will be seated in a special area reserved for them.

### Visitors at House Meetings

Anyone may attend meetings of the House of Delegates as a visitor upon display of the ADA 2016—America's Dental Meeting badge. Visitors are not permitted access to the floor of the House, but must be seated in the section reserved for visitors.

### Schedule of House Meetings

The annual session of the House of Delegates is scheduled for \_\_\_\_ days, \_\_\_\_ through \_\_\_\_\_. Meetings of the House will be held on \_\_\_\_\_ afternoon and all day \_\_\_\_\_ until business is completed. \_\_\_\_\_ is devoted to the hearings of the reference committees. Special meetings of the House of Delegates may be called by vote of the House. All meetings of the House of Delegates will be held in the \_\_\_\_\_ Convention Center, \_\_\_\_\_. Hearings of the reference committees will be held in various rooms of the \_\_\_\_\_.

The following is the daily schedule of the House of Delegates for 201\_\_.

\_\_\_\_\_. The first meeting will be devoted to matters relating to the organization of the House, presentation of the reports of the President, the Board of Trustees, councils, commissions and the resolutions of the constituent societies. Nominations for the elective offices, as well as further nominations to councils and commissions will be presented during this meeting. Resolutions received in the Headquarters Office before the House officially convenes this first meeting will be posted on ADA Connect, and will be referred to a reference committee. Resolutions received after the House convenes will be accepted as new business but will not be referred to a reference committee.

\_\_\_\_\_. No meeting of the House of Delegates is scheduled. The reference committees will hold open hearings in various rooms of the \_\_\_\_\_. The personnel of the standing and reference committees for the 201\_\_ House of Delegates and the rooms in which hearings will be held are listed beginning on page \_\_\_\_ of this manual. All members of the Association are privileged to attend and participate in the hearings of the reference committees.

\_\_\_\_\_. No meeting of the House of Delegates is scheduled. Trustee district delegations will hold caucus meetings.

Elections will be held \_\_\_\_\_ afternoon, with from \_\_\_\_\_ to \_\_\_\_\_.

If a second ballot is needed for a contested officer election, the Speaker will designate a time on \_\_\_\_\_ for credentialed delegates to vote.

\_\_\_\_\_. The second regular meeting of the House of Delegates will convene at \_\_\_\_\_ a.m. This meeting is devoted to acting upon the reports of the reference committees and initial consideration of the preliminary annual budget.

\_\_\_\_\_ p.m. The third, and final, meeting of the House of Delegates will convene at \_\_\_\_\_ p.m. This meeting will be devoted to completion of the reports of the reference committees, the installation of new officers, adoption of the final budget and establishing the dues for 201\_\_.

## **New Delegate and Alternate Delegate Orientation**

The Speaker of the House of Delegates will conduct an orientation session prior to the first meeting of the House of Delegates for newly elected delegates and alternate delegates. The purpose of this orientation is to help familiarize new members of the House with the

parliamentary process (AIPSC) followed at the ADA meeting, including the proper use of motions. All delegates and alternate delegates who did not serve in the House during the last session are strongly encouraged to attend this Orientation.

Additionally, ADA Legal Counsel will give an attorney-client briefing if necessary.

# Operation of the House of Delegates

## Officers

The House of Delegates has two officers, chair and secretary. The Chair is the Speaker of the House of Delegates who is elected every three years by the House of Delegates. The Speaker may not be a member of the Board of Trustees. The Secretary of the House is the Executive Director of the Association.

The Speaker presides at all meetings and the Secretary serves as the recording officer and custodian of the records.

## Duties of the Speaker of the House of Delegates

In addition to the duties recited in the ADA Bylaws, the Speaker of the House of Delegates shall (1) preside at all meetings of the House of Delegates; (2) with the assistance of the Secretary of the House of Delegates, determine the order of business for all meetings subject to the approval of the House of Delegates; (3) appoint tellers to assist in determining the result of any action taken by vote; and (4) perform such other duties as custom and parliamentary procedure require. The decision of the Speaker shall be final unless an appeal from such decision shall be made by a member of the House, in which case final decision shall be by majority vote. In addition, following adjournment of the Standing Committee on Constitution and Bylaws, the Speaker and the Chair of the Council on Ethics, Bylaws and Judicial Affairs shall be responsible for reviewing and either approving or redrafting any new resolutions or changes to resolutions that propose amendments to the Constitution and Bylaws, in accordance with provisions in the Standing Committee section of the Manual of the House of Delegates.

## Duties of House of Delegates and Board of Trustees

The House of Delegates serves as the legislative body of the Association while the Board of Trustees serves as the administrative body. The duties of both are clearly defined in the *Bylaws*.

The powers and duties of the House of Delegates, as defined in Chapter III, Sections 40 and 50, of the *Bylaws*, make it the supreme authoritative body of the Association. As such it can enact legislation; determine policies; enact, amend and repeal the *Constitution and Bylaws*,

the Governance Manual and the ADA *Principles of Ethics and Code of Professional Conduct*; create special committees; approve memorials in the name of the Association; and serve as the court of appeals for decisions of the Council on Ethics, Bylaws and Judicial Affairs involving disputes arising between constituent societies or between constituent and component societies. The House of Delegates also has the duty of electing the President-elect, the Second Vice President, the Speaker of the House of Delegates, the Treasurer, the members of the Board of Trustees and members of the councils and commissions. It also approves the annual budget and serves as the final court of appeal in decisions except those decisions involving discipline of members.

The powers and duties of the Board of Trustees, as defined in Chapter IV, Sections 90 and 100, of the *Bylaws*, make it the managing body of the Association with full powers to conduct all business. In general, the Board of Trustees carries out the policies of the House of Delegates and has the power to establish *ad interim* policies when the House of Delegates is not in session and when such policies are essential to the management of the Association. Such policies must be presented for review and consideration by the House of Delegates at its next session.

The Board of Trustees also provides for the purchase, sale, mortgage, maintenance and supervision of the Headquarters Office and all other property or offices owned or operated by this Association; appoints the Executive Director; prepares the annual budget; supervises financial affairs; appoints the chairs of councils as defined in the *Bylaws*; selects the time and place of the annual session; and reviews all reports and makes recommendations on them to the House of Delegates.

At the annual session, the Board of Trustees presents reports on its activities to the House of Delegates and makes recommendations on the programs of the Association.

## Recommendations to House of Delegates

Recommendations which involve Association policy come to the House of Delegates from several different sources: the President of the Association, the Board of Trustees, the councils



and commissions, the constituent and component societies, individual delegates and, occasionally, from other organizations.

The President is charged by the *Bylaws* with making an annual report to the House of Delegates. In this report the President may make **recommendations dealing with the Association's** programs or with problems of the dental profession.

The Board of Trustees reports annually to the House of Delegates on its activities during the past year. The number of reports presented to the House varies each year depending on the issues facing the profession. However, the Board will present at least two reports. The first will deal with Association affairs and administrative resolutions relating to such matters as nominations to councils and commissions. The other report will address financial affairs and the recommended budget for fiscal year 201\_\_.

The reports of the Board of Trustees will be presented at the first meeting of the House on \_\_\_\_\_. All reports or comments on resolutions are presented on resolution worksheets.

The ten councils and three commissions are charged in the *Bylaws*, Chapter VII, Section 20 and Chapter VIII, Section 30, with making recommendations to the House on the matters under their jurisdiction.

The constituent societies frequently direct resolutions on the establishment of policy to the House of Delegates. Component societies, when seeking similar action, usually address their resolutions to the House of Delegates through their constituent societies.

Occasionally, the House of Delegates will receive a recommendation on policy from an outside organization, such as an international or specialty group in the field of dentistry or from a civic or philanthropic organization. Acceptance of such resolutions for consideration by the House of Delegates will be determined by the Speaker subject to the approval of the House.

The employed staff of the Association may also make recommendations to the House of Delegates but only through an appropriate agency such as the Board of Trustees or an individual council or commission.

In these ways, the House of Delegates receives many recommendations for consideration each year and its task is to act on them in the

best way to meet the changing needs of the Association and of the profession.

In accordance with a 2012 action of the House of Delegates, reports and resolutions to be considered by the House of Delegates will be available in electronic format only (with the exception of Reference Committee Reports and Agendas). While the publication *Annual Reports and Resolutions* contains the annual reports of all councils and commissions, every resolution, regardless of source, appears on a resolution worksheet accompanied by the appropriate background information.

Resolution worksheets are provided to members of the House of Delegates in an electronic format only via postings on the House of Delegates community of ADA Connect. The first set of worksheets will be posted **after the Board's** \_\_\_\_\_ session, and the second set of worksheets will be posted shortly after the **Board's** \_\_\_\_\_ session. Any resolutions received after the second posting of worksheets will be posted on ADA Connect as they are processed. At the adjournment of the first meeting of the House, all members will have received (via ADA Connect) every item of business (worksheets) to be referred to a reference committee. Any business received after that meeting will be deemed New Business and posted on ADA Connect.

Every report and resolution which is not published in *Annual Reports and Resolutions* will be included in the publication *Supplement to Annual Reports and Resolutions*, which is compiled after the House of Delegates session and serves primarily as a resource document.

A thorough advance study of the various reports and resolutions will provide an essential background for a full understanding of activities as they occur in the House of Delegates.

## Quorum

Twenty-five percent (25%) of the voting members of the House of Delegates, representing at least twenty-five percent (25%) of the constituent societies, the American Student Dental Association and the federal dental services, shall constitute a quorum for the transaction of business at any meeting.

# Rules of the House of Delegates

The following are the standing rules of the House of Delegates.

## **Certification of Delegates and Alternate Delegates**

The executive director or equivalent chief executive officer of each constituent, the ranking administrative officer of each federal dental service, and the secretary of the American Student Dental Association shall file with the Executive Director of this Association, at least sixty (60) days prior to the first day of the annual session of the House of Delegates, the names of the delegates and alternate delegates designated by the constituent, service or association. The Executive Director of this Association shall provide each delegate and alternate delegate with credentials which shall be presented to the Committee on Credentials, Rules and Order of the House of Delegates. In the event of a contest over the credentials of any delegate or alternate delegate, the Committee on Credentials, Rules and Order shall hold a hearing and report its findings and recommendations to the House of Delegates for final action.

Amendment of this section of the Rules of the House of Delegates shall be by a two-thirds (2/3) affirmative vote of the delegates present and voting.

## **Terms of Delegates and Alternate Delegates**

The term of a delegate or alternate delegate elected or selected pursuant to the provisions contained in the *Rules of the House of Delegates* commences from the time such delegate or alternate delegate is certified pursuant to these Rules until another delegate or alternate delegate elected or selected in place of such delegate or alternate delegate is certified.

Amendment of this section of the Rules of the House of Delegates shall be by a two-thirds (2/3) affirmative vote of the delegates present and voting.

## **Seating of Delegations**

The Secretary shall arrange for the seating of delegations in the House of Delegates in accordance with the following formula: the delegations shall be seated in accordance with the number assigned to their trustee districts in the

*Bylaws*, provided that in each successive year, the first four delegations at the head of the list will be returned to the end of the list for the next annual session.

The secretary and executive director of a constituent society may be seated with the constituent society delegation on the floor of the House of Delegates even though they are not official delegates. It is not permissible to **designate an "acting" secretary or executive** director of a constituent society so that he or she may be seated on the floor of the House under the standing rule, unless that person is designated **as "acting" secretary or executive** director for the remaining portion of the annual session.

Delegates representing the American Student Dental Association shall be seated as a single delegation along with the president and executive director of ASDA.

## **Speaking Privileges**

The right to speak to issues before the House of Delegates is held—in addition to delegates—by officers of the Association, trustees of the Association and former presidents of the. Chairs and members of councils and commissions who are not members of the House of Delegates shall have the right to participate in debate on their respective reports but shall not have the right to vote. Secretaries and executive directors of constituent societies; council and commission directors; and those members of the administrative staff holding general supervisory positions may be present on the floor of the House of Delegates and shall be privileged to speak when called upon as a resource.

## **Presentation by President-elect**

The President-elect may make a formal presentation at the first meeting of the House of Delegates for the purpose of outlining his or her goals and objectives for the ensuing year.

## **Rules of Order**

The rules contained in the current edition of the American Institute of Parliamentarians *Standard Code of Parliamentary Procedure* (AIPSC) govern the deliberations of the House of Delegates in all cases in which they are applicable and not in conflict with the standing rules, ~~or the *Bylaws*, or the *Governance Manual*.~~

## Meeting Schedule and Order of Business

Consistent with procedures established in the *Manual of the House of Delegates*, the Speaker and Secretary of the House are responsible for the day-to-day business of the House. Included are selection of the on-site location and facilities and determination of times for convening and adjourning each meeting, the order of business and the agenda, subject to the approval of the House. Any substantive consolidation or expansion of the meeting schedule can take place only with the prior approval of the House. The sequencing of resolutions, for House action, will be organized by the Resolutions Committee (*see* Standing Committees).

## Items of Business

An item of business becomes the property of the House of Delegates and subject to House action in accordance with the appropriate order of business and agenda schedule when such item is received in writing by the American Dental Association Executive Director (Secretary of the House) subject to the following conditions:

1. Reports and resolutions from Association agencies, constituent and component societies, trustee districts and individual delegates are governed by the Association *Bylaws* and the *Manual of the House of Delegates*.
2. Resolutions from dental agencies not part of the American Dental Association may become items of business at the discretion of the House if received in writing by the Executive Director (Secretary of the House) at least 15 days in advance of a session.

## Reports

All reports of councils and commissions, except supplemental reports, are available on ADA Connect to each delegate and alternate delegate at least 14 days in advance of the opening of the annual session. All supplemental reports are available electronically via ADA Connect to each delegate before such reports are considered by the House.

## Resolutions to Amend the Rules of the House of Delegates

The standing rules are internal policy of the House of Delegates on how it conducts its business.

Since the House does not reaffirm existing policy, the standing rules do not have to be approved at each annual session. If an amendment to the standing rules is offered, it will be accepted and considered in the same manner as all other resolutions. The resolution will be referred to a reference committee where it will be debated and considered before the House is asked to take action. The resolution will be reported to the House as a priority item at the beginning of the second meeting. The standing rules may be amended by a majority vote of the delegates present and voting. If the House adopts the resolution, the amendment will govern the balance of that session as well as future sessions.

## Suspension of the Standing Rules

In accordance with the *Standard Code*, a motion to suspend rules is an incidental motion that permits the House of Delegates to vote to suspend procedural rules that interfere with the accomplishment of a particular action. Rules may be suspended only for a specific purpose and for the limited time necessary to accomplish the proposed action. A two-thirds affirmative vote of the delegates present and voting is required to adopt a motion to suspend the standing rules.

## Referral of Reports and Resolutions

Prior to each session of the House of Delegates, the Speaker of the House shall prepare a list of recommended referrals to reference committees (in the form of the All Inclusive General Index to resolution worksheets), such list to be available on ADA Connect before the opening meeting of the House of Delegates and be subject to amendment or approval on vote of the House of Delegates.

## Resolutions on the Appropriation of Funds

Any resolution proposing an appropriation of funds, except those relating to the annual budget, shall be referred to the Board of Trustees for a report at the same session on the availability of funds for the purpose specified.

## Resolutions on Creation of New Programs

Any resolutions submitted to the House of Delegates which call for creation of new programs, special committees or studies must be accompanied by estimates of the financial impact

on the Association and the potential source of funds. The Executive Director of the Association will assist in determining the cost estimates of such new programs.

### Consideration of Budget

The proposed annual budget shall be submitted to the members of the House of Delegates at least 30 days prior to the opening meeting of the annual session. In the event the proposed budget as submitted is not approved, all recommendations for changes adopted by the House of Delegates shall be referred to the Board of Trustees to prepare and present a revised, proposed budget.

Recommendations for changes shall be made in the form of fully debatable motions which shall be individually considered and acted upon by the House of Delegates. To be in order, the proper wording for such a motion must be:

**"I move that the proposed budget be returned to the Board of Trustees for revision with the recommendation that..."**

If any recommendations for changes in the proposed budget receive House approval, they shall be identified as House Budget Recommendation 1, House Budget Recommendation 2, etc.

House approval of any recommendations for changes automatically returns the proposed budget to the Board of Trustees for revision and subsequent resubmission to the House of Delegates for approval or further recommendations for modification. This procedure will be repeated until a preliminary budget for the ensuing fiscal year is adopted.

This preliminary budget includes all items that the Board of Trustees and House of Delegates have approved, but it remains a preliminary budget since it does not incorporate any programs that may subsequently be adopted by the House at this session which require additional funding. The final budget is established and adopted by the House of Delegates through its approval of the preliminary budget plus the changes made as a result of actions by the House of Delegates. The Board of Trustees will present this final budget, which will include the preliminary budget plus any additions made as a result of action by the House of Delegates, to the House at the last meeting of the annual session.

### Special Assessments

For the purpose of funding a specific project of limited duration, a mechanism has been established to allow a special assessment to be levied by the House of Delegates, in accordance with Chapter XI, Section 60, of the *Bylaws*. Such an assessment may be levied at any annual or special session of the House of Delegates by a two-thirds (2/3) affirmative vote of the delegates present and voting, provided the appropriate notification requirements have been met. A resolution (main motion) setting forth a special assessment may be amended by the House of Delegates only if the amendment is germane and adopted by a two-thirds (2/3) affirmative vote of the delegates present and voting. The resolution proposing a special assessment may fund only one specific project at a time. However, if properly adopted by the House, two or more special assessments may be in force at the same time. A resolution proposing a special assessment that does not meet the 30-day notice required by the *Bylaws* may be adopted by a unanimous vote of the House of Delegates, provided the resolution has been presented in writing at a previous meeting of the same session.

### Introduction of New Business

No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, unless submitted by a trustee district or the American Student Dental Association. No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a trustee district or the American Student Dental Association and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting. The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

Any resolution that the Speaker refers to a reference committee must be made available to all members of the House before adjournment of the first meeting. For this reason, resolutions received in the Headquarters Office before the House officially convenes its first meeting will be processed, referred to a reference committee, and made available to all members of the House at that meeting. Resolutions received after the first

meeting has convened will not be referred to a reference committee. They will be accepted as new business, posted on ADA Connect, and taken up when the Speaker calls for new business.

## **Presentation of Resolutions and Other Items of Business**

Only a delegate has the right to present a motion. Therefore, within the limitation of the rule on the introduction of new business at the House of Delegates, any delegate may present amendments and substitute resolutions, as well as appropriate procedural and other matters, from the floor. It is customary, though not mandatory, that amendments or substitute resolutions be presented on behalf of a constituent society or a trustee district. Such items of business must be presented as far in advance as possible to the Secretary of the House of Delegates so that electronic copies may be made available to members of the House.

Resolutions which (1) merely reaffirm or restate existing Association policy, (2) commend or congratulate an individual or organization, or (3) memorialize an individual shall not be introduced in the House of Delegates.

A resolution becomes the property of the American Dental Association when submitted to the ADA House of Delegates for consideration. If adopted by the House of Delegates, this Association shall be the sole owner of the resolution which shall constitute "work made for hire" under copyright laws. This Association shall have the exclusive right to seek copyright registration for the resolution and to secure copyrights and retain ownership of such copyrights in its own name.

## **Seconding of Motions**

Following the proper movement of a motion, a second is not required.

## **Action on Motions Recommended by Reference Committee**

A reference committee request for action on an item of business (resolution) shall be brought to the floor of the House for debate in the form of a main motion. The main motion should present the substantive proposal to the House for consideration and action, with a recommendation that precisely reflects the position of the reference committee on that particular resolution. House of Delegates procedure requires the reference committee chair to make the appropriate main

motion immediately following the reading of the resolution and the portion of the reference committee report related to that resolution. (It should be noted that the content of the resolution is actually part of the main motion.)

The main motion may be to adopt the resolution, adopt in lieu of, refer or any other action deemed appropriate by the reference committee. A motion is rejected by that motion failing to receive the vote necessary for adoption. This is in contrast to the method used by some other organizations, such as legislative bodies, which have a complex series of screenings to evaluate the merit of any proposed legislation. Therefore, any resolution or proposal able to survive the screening mechanism of these organizations is always presented in a favorable manner, since it takes a majority of those involved in the screening process to bring the legislation to the floor for vote. Reference committees are the only screening mechanism in the legislative process of the ADA House of Delegates. Reference committees cannot **"pigeonhole" any resolution presented to them** even though that resolution has the support of only a single delegate. Therefore, to aid the House in its deliberations, the main motion **together with the committee's recommendation** should reflect the majority opinion of the members of the reference committee.

Following the presentation of a main motion by the chair of the reference committee (whether that be to adopt, adopt in lieu of, refer or any other), the motion is subject to all the specified rules which govern main motions as outlined in the parliamentary authority of the House of Delegates (AIPSC).

After any main motion regarding a resolution is presented, debate is opened and any subsidiary motion including motions to amend (or substitute) may be applied to it in order of precedence as outlined in the AIPSC.

To avoid confusion, it must be emphasized that motions usually considered to be subsidiary may be, and are in fact, main motions when presented by reference committee chairs in cases such as those outlined in the previous paragraphs. Otherwise, those motions (as listed in the AIPSC) are subsidiary motions when presented from the floor and are subject to the particular rules which commonly apply to them.

If a main motion to adopt a resolution passes or fails, the vote of the House disposes of the resolution.

If a motion to adopt a resolution in lieu of other resolutions passes, the remaining resolutions are not acted on directly but are now moot.

If a motion to adopt a resolution in lieu of other resolutions fails, the Speaker will announce that any delegate may propose the adoption of any one of the underlying resolutions in lieu of the remaining resolutions. This process will be repeated until one of the resolutions is adopted in lieu of the others or until none of them are adopted. If no delegate moves one of the remaining resolutions in lieu of the others, they all become moot.

If a main motion other than to adopt is presented and it passes, the resolution is disposed of in the manner presented (referred to a committee or whatever).

If a main motion other than to adopt is presented (e.g., a motion to refer) and it fails, a motion to adopt the resolution is then in order and is usually made by a delegate who favors adoption of the resolution. This resolution is now before the House for debate, amendment and action.

### **Motions to Vote Immediately**

A motion to vote immediately on all pending motions shall not be used in the House of Delegates. The motion to vote immediately may be used so long as it applies only to the immediately pending motion. A motion to vote immediately shall not be made in conjunction with the proposal of another motion or debate on a pending motion.

### **Motion to Table**

A motion to table shall not be used in the House of Delegates since it stops debate and could force the delegates to vote without full information.

### **Motion to Recommit or Refer to an Agency**

When the House of Delegates wishes to recommit or refer a pending resolution to a council or to the Board of Trustees for study and report at the next annual session, the motion to be used to accomplish this purpose is the motion to refer to a committee. In order to give members of the House additional opportunities to provide information about the subject matter of the referred resolution, the Office of the Executive Director is encouraged to post all referred resolutions with the name of the primary agency

responsible for addressing the referral in the House of Delegates community of ADA Connect.

A motion to postpone definitely to the next session should not be used since it is not permissible to postpone a question beyond the end of the convention.

### **Closed Session**

A closed session is any meeting or portion of a meeting of the House of Delegates with limited attendance in order to consider a highly confidential matter. A closed session may be held if agreed upon by general consent of the House or by a majority of the delegates present at the meeting at which the closed session would take place. In a closed session, attendance is limited to officers of the House, delegates and alternate delegates, and the elective and appointive officers, trustees and general counsel of the Association. In consultation with the Secretary of the House, the Speaker may invite other persons with an interest in the subject matter to remain during the closed session. In addition to senior management, this is likely to include members and staff of the council(s) or commission(s) involved with the matter under discussion and executive directors of constituent societies and the American Student Dental Association. No official action may be taken nor business conducted during a closed session.

Immediately after a closed session, the Speaker will inform the delegates that they may present a motion to request permission to review information which was discussed in the closed session, with the information being discussed only with those members present at the session. This provision is not applicable to an attorney-client session.

*Attorney-Client Session.* An attorney-client session is a form of closed session during which an attorney acting in a professional capacity provides legal advice, or a request is made of the attorney for legal advice. During these sessions, the legal advice given by the attorney may be discussed at length, and such discussion is “privileged.” The requests, advice, and any discussion of them are protected, which means that opponents in litigation, media representatives, or others cannot legally compel their disclosure. The purpose of the privilege is to encourage free and frank discussions between an attorney and those seeking or receiving legal advice. The privilege can be lost (waived) if details about the attorney-client session are

revealed to third parties. Once the privilege has been waived, there is a danger that all privileged communications on the issues covered in the attorney-client session, regardless of when or where they took place, may become subject to disclosure. For attorney-client sessions, the Speaker and Secretary shall consult with the General Counsel regarding attendance during the session. No official action may be taken nor business conducted during an attorney-client session.

In accordance with the above information, all those participating in an attorney-client session shall refrain from disclosing information about the discussion held during the attorney-client session. In certain cases, a decision may be made to come out of the attorney-client session for purposes of conducting a non-privileged discussion of the same or related subject matter. The difference will be that during the non-privileged session there will be no discussion of any legal advice requested by attendees during the attorney-client session or about any of the legal advice given by legal counsel. It is such requests for legal advice, legal advice given, and discussion of the legal advice during the attorney-client session that are protected by the privilege and that shall not be disclosed or discussed outside of the attorney-client session.

### **Dues of Active Members**

The dues of active members are established by the House of Delegates as the last item of business at each annual session. A resolution will be proposed at each annual session by the Board of Trustees in conformity with Chapter XI, Section 50, of the ADA *Bylaws*. Notice of such a resolution will be sent electronically to each state society and posted on ADA Connect or its equivalent not less than thirty (30) days before the first session of the House of Delegates at which it is to be considered. This will enable the constituent societies to promptly notify their delegates and alternate delegates of the resolution. The resolution will also be announced to the general membership in an official publication of the Association at least fifteen (15) days in advance of the annual session. The resolution establishing the dues of active members for the following year may be amended to any amount and/or reconsidered by the House of Delegates until a resolution establishing the dues of active members is adopted. The resolution establishing the dues of active members requires a sixty

percent (60%) affirmative vote of the members present and voting for adoption.

### **Amendments to Constitution and Bylaws**

The House of Delegates is governed in its amendment of the *Constitution and Bylaws* by the provisions of the *Constitution and Bylaws*. An amendment affecting the procedure for changing the dues of active members may be adopted by the House only if the proposed amendment has been presented in writing at least 30 days before the first day of the session of the House of Delegates at which it is to be considered. Notice of such a resolution shall be sent electronically to each constituent society not less than 30 days before such session. This will enable the constituent societies to promptly notify their delegates and alternate delegates of the resolution. The resolution will also be announced to the general membership in an official publication of the Association at least 15 days in advance of the annual session. Amendments affecting the procedure for changing the dues may also be adopted by unanimous vote of the members present and voting provided the proposed amendment is presented in writing at a previous meeting of the same session of the House of Delegates at which it is to be considered.

A resolution to amend the procedure for changing the dues of active members that complies with the notice requirements of Chapter XV, Section 20, of the *Bylaws* may be submitted to the House of Delegates and may be amended by a majority vote of the delegates present and voting. If such resolution contains a percentage or dollar amount pertaining to dues, that amount may be amended to any other amount. This traditional procedure will continue to permit the House of Delegates to freely amend a resolution affecting the procedure for changing the dues of active members and facilitate the efforts of the House and the Board of Trustees in balancing revenues and expenses in the annual budget for the ensuing year.

Otherwise, the *Bylaws* may be amended at any session of the House of Delegates by a two-thirds affirmative vote of the delegates present and voting, providing the proposed amendments shall have been presented in writing at a previous session or a previous meeting of the same session. It should be noted the annual "session" is composed of three "meetings."

The *Constitution* may be amended by a two-thirds affirmative vote of the members of the House of Delegates, provided that the proposed amendments have been presented in writing at any previous session of the House.

The *Constitution* may also be amended at any session of the House by a unanimous vote, provided the proposed amendments have been presented in writing at a previous meeting of such session.

## Voting Procedures

The method of voting in the House of Delegates is usually determined by the Speaker of the House who may call for a voice vote, show of hands (voting cards), standing vote, roll call of the delegations, electronic voting or such other means that the Speaker deems appropriate. The House may also, by majority vote, determine for itself the method of voting that it prefers.

Only votes cast by voting members of the House of Delegates either for or against a pending motion shall be counted. Abstentions shall only be counted in determining if a quorum is present.

Proxy voting is explicitly prohibited; however, an alternate delegate may vote when substituted for a voting member in accordance with procedures established by the Committee on Credentials, Rules and Order.

If the result of a vote is uncertain or if a division is called for, the Speaker may use the electronic voting method or may call for a standing vote. If a standing vote, the count will be made by tellers appointed by the Speaker and reported to the Secretary. It is essential that voters remain standing until the Speaker has indicated that the count is completed. The same procedure is then followed for recording the negative vote.

The Committee on Credentials, Rules and Order is charged with supervising the count of votes in the House of Delegates.

## Nomination Procedures

Nominations for President-elect and Second Vice President are made from the floor of the House of Delegates at the first meeting by a simple declaratory statement and may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted.

The nominations of members of the Board of Trustees will be made at the first meeting. The details of the nomination procedure are set forth in the *Governance Manual*.

The nominations for membership to councils and commissions by the Board of Trustees shall also be made at the first meeting. The nomination of council and commission members is governed by the provisions of Chapters ~~VII, Section~~, and ~~Chapter VIII, Section~~, respectively, of the ~~Bylaws~~ *Governance Manual*.

No additional nominations will be accepted after the first meeting.

## Election Procedures

Only properly certified delegates are permitted to participate in the elections of the House of Delegates. Contested elections are held under the supervision of the Committee on Credentials, Rules and Order. The polls will be open for the regular election on \_\_\_\_\_, from \_\_\_\_\_ to \_\_\_\_\_. The method of voting will be \_\_\_\_\_. Voting shall occur in \_\_\_\_\_ of the \_\_\_\_\_ Convention Center. Results will be announced \_\_\_\_\_.

In the event more than two candidates are vying for an office and a run-off election is necessary, the polls will open again on \_\_\_\_\_ at a time designate by the Speaker. Voting machines/ballots will be used, if a second ballot is needed.

If one of such candidates receives a majority of the votes cast for the office being sought, such candidate will be elected. If none of the more than two candidates for an office receives a majority of the votes cast, in accordance with ~~ADA Bylaws, Chapter~~ \_\_\_\_\_, ~~Section~~ \_\_\_\_\_ the procedures contained in Chapter III of the *Governance Manual* and in this *Manual*, the candidate with the fewest votes shall be removed from the ballot and the remaining candidates shall be balloted upon again on \_\_\_\_\_.

The No. 6 officer election card should be presented at the polling location at the designated time of voting on \_\_\_\_\_. In the event a second election is necessary, the No. 6 card should again be presented.

## Election Protocol for a Tie Vote

In the event of a tie vote for an elected officer position, the following protocol will be followed.

A. For a two candidate contest resulting in a tie vote, the House of Delegates shall continue balloting during the second (and third) meetings



of the House, until one candidate receives a majority of the votes cast.

B. If, in a contest of more than two candidates, the two candidates with the greatest number of votes have an equal number of votes, the House of Delegates shall conduct a second balloting with the candidate who received the fewest number of votes being removed from the ballot in an attempt to secure a majority vote. The balloting will continue with the candidate having the fewest number of votes removed from the ballot each time until a candidate receives a majority of the votes cast.

C. If, in a contest of more than two candidates, the two candidates with the fewest number of votes have an equal number of votes, the House of Delegates shall conduct a second balloting in an attempt to secure either a majority vote or eliminate one or more candidate(s) with the fewest votes.

- In a contest of three candidates, if, following the second balloting, the two candidates with the fewest number of votes continue to have an equal number of votes, and no candidate receives a majority of the votes cast, the balloting will continue with all three candidates in an attempt to secure either a majority vote or eliminate one candidate with the fewest votes. In the event that subsequent balloting results in a two candidate contest with a tie vote, the same procedure as outlined in A. above shall be followed.
- In a contest of four or more candidates, if, following the second balloting, the two

candidates with the fewest number of votes continue to have an equal number of votes, the balloting will continue with those candidates having the fewest number of votes removed from the ballot. The balloting will continue with the candidate having the fewest number of votes being removed from the ballot each time until a candidate receives a majority of the votes cast. In the event that subsequent balloting results in a two candidate contest with a tie vote, the same procedure as outlined in A. above shall be followed.

## **Installation of New Officers and Trustees**

Installation ceremonies for new officers and trustees shall take place on Monday afternoon as the first item of business with the time specified by the Speaker of the House.

## **Distribution of Material in House of Delegates**

No material may be distributed in the House of Delegates without obtaining permission from the Secretary of the House. Material to be distributed must relate to subjects and activities that are proposed for House action or information.

~~Materials to be distributed on behalf of any member's candidacy for office shall be limited to printed matter on paper only and nothing else.~~

# **Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates**

## **A. Goal of Delegate Apportionment**

The allocation of the remaining delegates over the minimum number of delegates allocated to each constituent and the District of Columbia Dental Society shall be made pursuant to the delegate allocation methodology set forth in this Section of the House of Delegates Manual. The goals of the delegate apportionment scheme adopted by the ADA is to (i) achieve as close to proportional representation of active, life and retired members of the Association as possible while providing for the minimum representational requirements set forth in the Governance and Organizational Manual of the American Dental Association (Governance Manual); (ii) providing for representation of the American Student Dental Association; and (iii) maintaining the size of the House of Delegates as close to 473 delegates as possible while meeting the other goals recited in this herein.

## **B. Delegate Allocation Methodology**

Commencing in 2014, based on the representational requirements and goals set forth in this Manual and in the Governance Manual, delegates shall be allocated according to the allocation methodology set forth below. Thereafter, to account for membership fluctuations, delegate allocations shall be reviewed and delegates shall be reallocated by the Secretary of the House of Delegates every four (4) years among the Association's constituents, the five (5) federal dental services and the American Student Dental Association in accordance with that same methodology. Delegate allocations shall be based on the Association's year-end membership records for the second calendar year preceding the year in which the delegate allocations become effective. The review of delegates shall take place as soon as possible after the membership numbers on which the delegate allocations are based are available and the Secretary of the House of Delegates shall publish the new delegate allocations expeditiously thereafter to the constituent dental societies, the five (5) federal dental services and the American Student Dental Association. The delegate allocations shall also be

published in this Manual. The delegate allocation methodology is as follows:

**1. The Target Delegate Number.** For purposes of allocating delegates, the target number of delegates to be used in calculating the allocation is four hundred seventy-three (473). From that target number two delegates will be deducted for each constituent except that only a single delegate will be deducted from each of the Colegio de Cirujanos Dentistas de Puerto Rico and the Virgin Islands Dental Association unless the number of members in either of those societies is equal to or greater than the number of members in the smallest state constituent, in which case a minimum of two (2) delegates will be deducted from the target delegate number for that entity. One delegate is deducted from the target delegate number for each of the five (5) dental services, except that a minimum of two (2) delegates will be deducted for any federal dental service where the number of members is equal to or greater than the number of members in the smallest state constituent. In addition, five (5) delegates will be deducted from the target delegate number for the American Student Dental Association. For purposes of the delegate allocation methodology set forth in the Manual of the House of Delegates, the remaining number of delegates in the target number of delegates following the deductions of delegates listed above from the target number of delegates shall be referred to as the "net delegate allocation pool."

**2. Allocation to the American Student Dental Association.** Five (5) delegates shall be allocated to the American Student Dental Association regardless of the number of members.

**3. Determination of the True Proportional Delegate Counts for each Constituent and each Federal Dental Service.** Divide each constituent's and each federal dental

service's total membership by the total membership of the Association. Multiply the resulting percentage of membership for each constituent and federal dental service by the target number of delegates set forth in paragraph a. of this Subsection less the number of delegates allocated to the American Student Dental Association in paragraph b. of this Allocation Methodology. The resulting true proportional delegate numbers will be used later in the delegate allocation methodology.

#### **4. Determination of Constituents and Federal Dental Services that Qualify to Receive More than the Minimum Delegate Allocation.**

- a. Divide the total constituent and federal dental service membership of the Association by the target number of delegates set forth in section B.1. of this apportionment methodology less the number of delegates allocated to the American Student Dental Association in section B.2. of this methodology. Compare the resulting number against the membership numbers for the Colugo de Cirujanos Dentistas de Puerto Rico, Virgin Islands Dental Association and Public Health Service if they received a single delegate pursuant to the review performed in section B.1. of this apportionment methodology. If the membership numbers of any of those entities are less than the result of the calculation, allocate the number of delegates deducted from the target delegate allocation number for each such entity and exclude those entities from the remaining steps of the delegate allocation methodology.
- b. Take the result of the calculation performed in section B.4.a. of this apportionment methodology and multiply it by two (2). Compare the resulting number against the membership numbers for each constituent society and each federal dental service for which two (2) delegates were deducted from the target delegate allocation number in section B.1. of this methodology. If the membership of any of those constituent societies and federal dental services are less than that number, allocate the number of delegates deducted from the target delegate allocation number for each such entity and exclude those entities from the

remaining steps of the delegate allocation methodology.

#### **5. Calculation of Non-Minimum Membership Total.**

Subtract the total membership numbers of each constituent and federal dental service identified as being excluded from the remaining steps of the delegate allocation methodology from the total membership of the Association. The resulting non-minimum membership total will be used in the remaining delegate allocation methodology steps.

#### **6. Allocation of Remaining Delegates.**

- a. Divide each remaining constituent's and federal dental service's membership by the non-minimum membership total determined in section 5, above, to arrive at their percentages of the non-minimum membership total.
- b. Calculate the remaining number of delegates to be allocated by subtracting from the target number of delegates listed in section 1. of this allocation methodology the delegates allocated to the American Student Dental Association in section 2 of this methodology and the delegates allocated by the minimum allocation steps in sections B.4.a. and B.4.b., above.
- c. For each remaining constituent and federal dental service, multiply its percentage of the non-minimum membership total determined by the calculation in section B.6.a., above, and the remaining number of delegates to be allocated as determined by the calculation in section B.6.b. of this allocation methodology. Round the result to the nearest whole number.
- d. For each remaining constituent and federal dental service, multiply the result obtained in section B.3. above by the target number of delegates specified in section B.1., above, less the number of delegates allocated to the American Student Dental Association pursuant to paragraph B.2.

of this methodology and round the result to the nearest whole number.

e. For each remaining constituent and federal dental service, subtract the result obtained in section B.6.d. of this allocation methodology from the result obtained in section B.6.c. hereof. If the result is negative, use the result obtained in section B.6.d. as that constituent's allocated delegate total. If the result is zero or positive, use the result obtained in section B.6.c. of this methodology as that constituent's allocated delegate total.

## **7. Finalize the Delegate Allocation.**

Add together the final delegate allocations for the constituents, federal dental services and the American Student Dental Association determined through the calculations of sections B.2., B.4.a., b.4.b. and B.6.e. of this allocation methodology. The result is the total delegates allocated. The total delegates allocated should vary no more than five percent (5%) from the target number of delegates set forth in paragraph B.1. of this Subsection.

## **8. Calculating the Fairness Ratio.**

Divide each constituent's and each federal dental service's percentage of total delegates (the constituent's allocated delegates divided by the total delegates allocated as determined by the calculation set forth in subparagraph B.6.e of this methodology) by its percentage of total membership as calculated in B.3., above. Except for those constituents that only receive the minimum number of allocated delegates, the resulting "fairness ratio" should deviate by a small amount on either side of 1, with 1 representing a perfectly proportional delegate allocation. The fairness ratio for constituents and federal dental services that receive only the minimum allocation of delegates may deviate from 1 to a larger degree because those constituents and federal dental services may be over-represented.

(2/3) affirmative vote of the House of Delegates present and voting upon a determination by the House of Delegates that the constitution or bylaws of the constituent violate the Constitution or Bylaws of this Association. Any such suspension shall not be in effect until the House of Delegates has voted that the constitution or bylaws of the constituent violate the Constitution or Bylaws of this Association and the constituent has one (1) year following notification of the specific violation within which to correct the violation.

## **8. Amendment.**

Amendment of this section of the *Manual of the House of Delegates* shall be by a two-thirds (2/3) affirmative vote of the delegates present and voting.

## **C. SUSPENSION OF THE REPRESENTATION OF A CONSTITUENT**

The representation of a constituent in the House of Delegates may be suspended by a two-thirds

# Standing Committees of the House of Delegates

## Standing Committees of the House of Delegates

In order to conduct its business, the House of Delegates uses three standing committees: (1) the Committee on Credentials, Rules and Order; (2) the Committee on Constitution and Bylaws; and (3) the Resolutions Committee. The Committee on Credentials, Rules and Order is composed of nine members of the House of Delegates appointed by the President. The Committee on Constitution and Bylaws is composed of not more than eight nor less than six members of the Council on Ethics, Bylaws and Judicial Affairs appointed by the President in consultation with the Speaker of the House of Delegates and the Council Chair. The Resolutions Committee is composed of the Speaker and the Secretary of the House of Delegates and the chairs of the reference committees authorized by Chapter III, Section 110, of the *Bylaws*. These committees are largely concerned with procedural matters. The following is a description of their specific duties.

### *Committee on Credentials, Rules and Order.*

This standing committee of the House of Delegates consists of nine (9) members from the officially certified delegates and alternate delegates, who are appointed by the President at least sixty (60) days in advance of each session. It is the duty of the Committee to presents the agenda and recommends for approval such rules as are necessary for the conduct of the business of the House of Delegates. The report of this committee is prepared in collaboration with the officers of the House of Delegates and is presented at the opening of the first meeting of the House. In addition, this committee has the responsibility to conduct hearings and to makes recommendations on the eligibility of delegates and alternate delegates to a seat in the House of Delegates when a seat is contested, maintains a

continuous roll call and periodically reports on the roll call to the House of Delegates, determines the presence of a quorum and supervises voting and election procedures. The Committee also has the responsibility to consult with the Speaker and Secretary of the House of Delegates, on matters relating to the order of business and special rules of order as required. ~~It is composed of nine members of the House of Delegates and is on duty throughout the annual session.~~

*Committee on Constitution and Bylaws.* The Standing Committee on Constitution and Bylaws shall consist of not more than eight (8) nor less than six (6) members of the Council on Ethics, Bylaws and Judicial Affairs of this Association appointed by the President in consultation with the Speaker of the House of Delegates and the Council Chair. The Committee reviews the wording of all proposed amendments to the *Bylaws* that are submitted prior to the first meeting of each new session of the House of Delegates. The Standing Committee either approves the text of the amendment as written or redrafts the resolution to accomplish the intent of the maker in the form currently used by the House of Delegates. The Standing Committee files a report of its findings and actions at the first meeting of the House of Delegates and then adjourns. Thereafter, and until the House of Delegates adjourns *sine die*, the Speaker of the House and the Chair of the Council on Ethics, Bylaws and Judicial Affairs (CEBJA) are responsible for reviewing any new resolutions or changes to resolutions that propose amendments to the *Constitution and Bylaws*. Each reference committee is required to clear the wording of a proposed amendment either with the Standing Committee or, if the amendment is proposed after the Standing Committee adjourns, with the Speaker who, with the Chair of CEBJA, will determine whether the language of the amendment is in appropriate *Bylaws* form.

# Reference Committees of the House of Delegates

## Reference Committees

The Reference Committees of the House of Delegates each consist of nine members from the officially certified delegates and alternate delegates, appointed by the President of the Association at least sixty (60) days in advance of each annual session. The number of reference committees varies from year to year depending on the issues which are before the House of Delegates.

The following is a general description of the material assigned to each of the reference committees. The scope of the committees will vary somewhat from year to year on the basis of the assignments which are made to them by the House of Delegates.

*Committee A (Budget, Business and Administrative Matters).* This committee will consider the annual association budget for the ensuing fiscal year, the annual subsidiary report of ADA Business Enterprises, Inc.; the ADA Foundation annual report and 2017 grant request; strategic planning; and those administrative and business-related matters referred to it.

*Committee B (Dental Benefits, Practice and Related Matters).* This committee will consider the reports of the Council on Dental Benefit Programs and Council on Dental Practice; and, in general, matters relating to planning, administration and financing of dental benefit programs; dental practice management, marketing and auxiliary utilization; the dental laboratory industry; quality assurance; and dental workforce issues.

*Committee C (Dental Education, Science and Related Matters).* This committee will consider the reports of the Council on Dental Education and Licensure, Commission for Continuing Education Provider Recognition, Commission on Dental Accreditation, Joint Commission on National Dental Examinations, and Council on Scientific Affairs; and, in general, matters relating to dental, advanced dental and allied dental education; dental schools, dental specialties and certifying boards; career guidance, continuing dental education and licensure issues; dental research; dental materials, instruments and equipment; and

dental therapeutic agents.

*Committee D (Legislative, Health, Governance and Related Matters).* This committee will consider the reports of the Council on Advocacy for Access and Prevention, Council on Communications, Council on Ethics, Bylaws and Judicial Affairs and Council on Government Affairs; and, in general, matters relating to community oral health, preventive dentistry, interprofessional relations, fluoridation, and issues pertaining to the relationship of dentistry and medicine; legal and legislative advocacy, public awareness, professional communications, public information and education, state public affairs activities, state and federal legislation, the federal dental services, judicial procedures, the ADA Constitution and Bylaws, the Principles of Ethics and Code of Professional Conduct, health care policy/reform, and any other matters referred to it.

*Committee E (Membership and Related Matters).* This committee will consider the Report of the President, the reports of the Council on ADA Sessions, Council on Members Insurance and Retirement Programs, and Council on Membership; and, in general, matters relating to membership, international issues, relations between the ADA and the local and state dental societies, and any other matters referred to it.

*Note.* Any member appointed to serve on a reference committee retains the right to offer commentary during their respective district caucus deliberations. The objectivity of a reference committee is important. Such objectivity is a key component in building and maintaining trust with the delegates, House of Delegates members, and others, who speak at the hearings should feel their testimony will be received without preconceived opinions by the members of the committee.

Members of reference committees do not give up their right to participate fully in caucus proceedings, including discussion of resolutions that will be deliberated at the House of Delegates, but are requested to be mindful of such trust and objectivity when they meet in their caucuses prior to the convening of the House of Delegates.

# General Procedures for Reference Committees

## Duties

The primary duty of a reference committee is to recommend to the House of Delegates an appropriate course of action on matters which have been placed before it. This duty can best be discharged by evaluating all resolutions which it has received from the councils, the Board of Trustees and other agencies, by basing its recommendations on the best information and advice which is available and by making its decision in the best interests of the public, the Association and the dental profession.

The reference committee shall not prevent the House of Delegates from taking action on any matter which has been presented. Nor is it the **committee's duty to accept automatically and** without deliberation the opinions of its own members or, on the other hand, the opinions of those who have testified.

The reference committee fulfills its duty when it takes into consideration all of these factors and advises the House of Delegates to adopt, adopt in lieu of, not adopt, amend or refer a resolution which has been placed before it.

The reference committee has the final duty of taking action on all matters assigned to it. A **reference committee may not "pigeonhole" any** item but must refer it to the House of Delegates for final disposition.

## Authority

Reference committees have a good deal of authority but must act within the standing rules of the House of Delegates and within the framework of the *Constitution and Bylaws*. The reference committees may not only act on resolutions before them but may also propose resolutions on their own initiative dealing with matters placed before it. They may call upon the officers, members of the Board of Trustees and councils, commissions and the members of the staff when they desire to gain information. They may make **an explanation of the committee's decision before** recommending to the House of Delegates that a resolution be adopted, adopted in lieu of, not adopted, amended or replaced by a substitute resolution or referred.

## Referral of Items of Business to Reference Committees

The reference committees receive items of business for consideration by referral from the House of Delegates. Under a standing rule adopted in 1953, the Speaker of the House is authorized to prepare a preliminary list of referrals prior to the opening meeting of the House of Delegates. This preliminary list of referrals appears as the All Inclusive General Index distributed with the resolution worksheets. This list enables the reference committees to obtain in advance a good idea of the matters which they will have to consider.

At the opening meeting of the House, the preliminary list of referrals prepared by the Speaker is presented to the House for approval. If there is no objection, the list stands as presented, although the House may, at its discretion, vote a different referral to a committee.

Other items of business may be referred to a reference committee by the Speaker of the House during the course of business on Friday. A printed list of all referrals made to the reference committees will be available in the hearings of the reference committees on Saturday morning. This list, in effect, constitutes the agenda for the meetings of the reference committees.

## Conferences with Board of Trustees

In order to cooperate with the reference committees, the Board of Trustees has adopted **the following rule: "All reference committees of the House of Delegates shall be advised annually that the Board of Trustees will arrange conferences at a time suitable to both agencies in order to discuss problems of mutual concern."**

When such a conference is desired by a reference committee, the chair of the reference committee should notify the Secretary of the House of Delegates or a member of the Secretary's staff.

## Clerical Assistance

The Executive Director will be responsible for providing necessary clerical assistance to each reference committee. Those responsible for such assistance shall not participate in the substantive deliberations of the committee.

Verbatim minutes shall not be required as there is no time for transcription. The uniform format for the report should be followed precisely by each reference committee.

Those assigned to provide clerical assistance shall be instructed by the Executive Director to hold all committee deliberations in the strictest confidence.

## Conduct of Hearings

The primary duty of a reference committee is to receive and evaluate opinions and information so that it may present a well-informed recommendation to the House of Delegates. Opinions are received during the open hearing, which is conducted by the reference committee and later evaluated in a closed meeting at which **the committee's decisions are made.**

The chair of the reference committee should preside at both the hearing and the closed meeting. The chair should carry out the usual duties of maintaining order, facilitating the transaction of business and ruling on length and pertinence of discussion.

The chair should NOT permit the making of motions or the taking of formal votes at an open hearing, since the objective of the hearing is to receive information and opinions and not to make decisions of any sort which would bind the reference committee in its subsequent deliberations.

The chair should ensure that all who want to be heard are heard but should be watchful against prolonged holding of the floor by one or more persons at the expense of others who may wish to counsel with the committee. The chair, with the consent of the committee, may place reasonable limitations on discussion and debate.

All members of the American Dental Association have the right to attend reference committee hearings and participate in the discussion, whether or not they are members of the House of Delegates. Nonmembers of the Association may participate in the discussion at hearings only at the invitation of a majority of the reference committee. Participants should be aware that members of news media may attend committee hearings. At the start of the reference committee hearing, each chair shall ask members of the media and any other nonmembers, excluding component, constituent and ADA staff, to identify themselves. The committee can then make its decision on whether the nonmembers

may participate. In general, nonmembers should be permitted to take part so long as they do not interfere with the orderly conduct of the hearings.

Reference committees are expected to be available during the announced hours of a hearing.

Prior to beginning the reference committee hearing, each chair is requested to read the following statement:

All members of the American Dental Association have the right to attend and participate in the reference committee hearing, whether or not they are members of the House of Delegates. However, nonmembers of the Association may participate in the discussion at this hearing only at the invitation of a majority of the reference committee. At this time, I respectfully request that all members of the media and other nonmembers, excluding component, constituent and ADA staff, to identify themselves.

American Dental Association staff members are available at this hearing to provide information requested by members of the reference committee or through the chair by those participating in the discussion.

In accordance with the ADA Disclosure Policy, at this time anyone present at this meeting is obligated to disclose any personal, professional or business relationship that they or their immediate family may have with a company, professional organization or individual doing business with the ADA, when such company, professional organization or person is being discussed. This includes, but is not limited to insurance companies, sponsors, exhibitors, vendors and contractors.

At this hearing, you must first identify those relationships before speaking on an issue related to such conflict of interest.

## Conduct of Closed Session

After evidence and information has been received at the open hearing, the committee shall retire to a closed session to reach its decisions. The report shall be prepared only on the basis of materials dictated by the committee and the committee is solely responsible for the report.

The Executive Director shall designate members of staff to assist each reference committee to the degree that each committee



shall request such assistance. Such staff may be at closed sessions at the pleasure of the committee.

The committee is empowered to invite others into the closed session to provide resource information under such conditions as it may set, if such invitations are, in the view of the committee, necessary for the proper discharge of its duties.

When it wishes, the committee may exclude from closed session everyone except the members.

### **Amendments to *Bylaws***

Various reference committees will be asked to consider amendments to the *Bylaws*. The determination of whether or not the policy involved in the proposed amendment is desirable must be made by the reference committee that received the referral. The wording of all proposed *Bylaws* amendments, however, must have the approval of the Standing Committee on Constitution and Bylaws of the House of Delegates or, after the Standing Committee adjourns, the Speaker of the House of Delegates and the Chair of the Council on Ethics, Bylaws and Judicial Affairs. The Standing Committee adjourns after it files its report at the first meeting of the House of Delegates. Each reference committee will be provided with a copy of the Standing

**Committee's report, approving or redrafting all proposed amendments to the *Bylaws* that were submitted to the Standing Committee before it adjourned. The reference committee should refer to the Standing Committee's report for the approved language of a proposed *Bylaws* amendment. Any proposed *Bylaws* amendment that was not considered by the Standing Committee should be submitted to the Speaker who will consult with the Chair of the Council on Ethics, Bylaws and Judicial Affairs with regard to whether the language of the amendment is in appropriate *Bylaws* form. When the language of the amendment is approved, the reference committee will then incorporate the approved text of the amendment in its report, indicating that it was approved by the Standing Committee on Constitution and Bylaws or the Speaker of the House and the Chair of the Council on Ethics, Bylaws and Judicial Affairs, as appropriate. The purpose of this procedure is to give the individual reference committees the opportunity to determine whether the policy of an amendment is desirable, while reserving the technical wording of**

the amendment to the Standing Committee or the Speaker and the Chair of the Council on Ethics, Bylaws and Judicial Affairs.

### **Preparation of Report**

The report of the reference committee to the House of Delegates is nothing more than the comment and the recommendation of the committee on the material which it has had under consideration.

All recommendations to the House of Delegates must be placed in the standard resolution form. Except in very unusual cases, the use of preliminary and explanatory "**whereas**" clauses is not permitted. The committee should place this prefatory material in its comment on the resolution in the general text of its report.

Resolutions should be worded with the utmost clarity and must contain only a single topic. Resolutions containing more than one topic must be divided so that the House of Delegates can vote intelligently on a single question. The wording of a resolution is most important, since an improperly worded resolution will not give the delegates a clear and immediate idea of the question on which they are being asked to vote.

If the report of a council or commission contains no resolutions, the reference committee should merely state that it has noted the report and make such comment as it may desire.

It is not proper to recommend that the report be "**received,**" "**approved**" or "**adopted.**" If the reference committee wishes to adopt or approve some item in the report, it must draft a suitable resolution.

The report should be as brief as possible. Long sections of material which the delegates already have before them should not be repeated.

Resolutions which (1) merely reaffirm or restate existing Association policy, (2) commend or congratulate an individual or organization, or (3) memorialize an individual shall not be introduced in the House of Delegates.

### **Consent Calendar**

In an effort to best use the time of the House of Delegates, each reference committee will utilize a consent calendar. The consent calendar will include those resolutions on which there was no testimony, all positive testimony, and those on which the reference committee feels its recommendations are likely to be accepted by the House without objection. The reference

**committee's recommendations for disposing of** each resolution will follow immediately after the resolution summary in the consent calendar. Recommendations can be to adopt, not adopt, refer, or adopt in lieu of. The resolution to accept **the reference committee's recommendations shall** be presented as the consent calendar.

Any delegate has the right to object to the inclusion of any item on the consent calendar that he or she wishes to debate or oppose. Resolutions (items) removed from the reference committee consent calendar will be considered at the end of that report.

### **Signature of Report**

One copy of the report must be signed by all members of the committee and presented to the Secretary of the House of Delegates or to a **member of the Secretary's staff before it is** presented to the House of Delegates.

### **Reports of Reference Committees**

Completed reference committee reports will be made available to the chair of record of each district delegation on Sunday morning. A sufficient number of copies of each report will be provided **for each delegation's delegates, alternate** delegates, secretary, executive director and editor. Reference committee reports will be posted in the House of Delegates community of ADA Connect for downloading to personal computers.

It should be noted that all delegates must bring their copies of reference committee reports to the meetings of the House of Delegates since additional copies will not be available.

### **Presentation of Reports to House of Delegates**

The reports of the reference committees are presented by their chairs. The priority items of each reference committee report, identified and sequenced by the Resolutions Committee, will be

considered at the opening of the meeting on Monday. Following consideration of the priority items, the remainder of each reference committee report will be called for, usually, but not necessarily, in accordance with the following order:

- Committee A (Budget, Business and Administrative Matters)
- Committee B (Dental Benefits, Practice and Related Matters)
- Committee C (Dental Education, Science and Related Matters)
- Committee D (Legislative, Health, Governance and Related Matters)
- Committee E (Membership and Related Matters)

The Secretary of the House of Delegates will attempt to advise a chair shortly before the **Speaker is to call for the committee's report.**

Reports are presented at the podium located **to the Speaker's right.** Reports should be read slowly and clearly. The House will act on the report section by section, and the Speaker will indicate when the chair is to continue with the next section of the report. Background material contained in the reports of reference committees should not be read by the chair, unless the chair and members of the committee feel that it is necessary and important to do so. Page numbers and other citations should not be read since all members of the House will have copies of the report before them.

In the event of debate or discussion, the chair and members of a reference committee are free to reply to any questions or to comment. If the chair desires, a member of a council or commission, officer, member of the Board of Trustees or staff may be called to supply the information requested. However, the chair of the committee, or the designated committee member, should be prepared to comment on the position which the committee has taken.

## **Supplemental Information**

**OMITTED**

# Officers, Trustees, Council/ Commission Members

## Nominations and Elections

### Election Procedures

The following are the provisions of the ~~Bylaws~~ Governance Manual which govern the election of the elective officers, members of the Board of Trustees and members of councils of the American Dental Association (Chapter ~~V III~~, Section ~~150 B~~):

Elective officers, members of the Board of Trustees and members of councils and committees shall be elected by ~~the House of Delegates except as otherwise provided in these Bylaws. Voting shall be by ballot, except that when there is only one candidate for an office, council or committee, such candidate may be declared elected by the Speaker of the House of Delegates.~~ The Secretary shall provide facilities for voting. ~~The polls shall be open for at least one and one-half (1-1/2) hours.~~

~~a-1.~~ When one is to be elected, and more than one has been nominated, the majority of the ballots cast shall elect. In the event no candidate receives a majority on the first ballot, the candidate with the fewest votes shall be removed from the ballot and the remaining candidates shall be balloted upon again. This process shall be repeated until one (1) candidate receives a majority of the votes cast.

~~b-2.~~ When more than one is to be elected, and the nominees exceed the number to be elected, the votes cast shall be non-cumulative, and the candidates receiving the greatest number of votes shall be elected.

### Nomination and Election of Officers

Nominations of the elective officers will take place at the \_\_\_\_\_ meeting of the House of Delegates. Officers to be elected are: President-elect and Second Vice President.

The polls will be open on \_\_\_\_\_ from \_\_\_\_\_.m. to \_\_\_\_\_.m. and will be located in the \_\_\_\_\_ Convention Center, \_\_\_\_\_ Room. The method of voting will be \_\_\_\_\_. Voting machines/ballots will be used on \_\_\_\_\_, in the event a run-off election is necessary. The

Committee on Credentials, Rules and Order will announce in the House of Delegates the time at which the official roll will be closed to changes in the membership of the delegations.

Pursuant to Chapter V of the Governance Manual, the ~~The following are the provisions of the Bylaws which governs the nomination and election of the elective officers (Chapter VIII, Sections 20-40):~~

~~Section 20-A.~~ ELIGIBILITY: Only an active, life or retired member, in good standing, of this Association shall be eligible to serve as an elective officer. Trustees and elective officers may not apply for the office of Treasurer while serving in any of those offices, except that the Treasurer may apply for a second term ~~pursuant to Chapter \_\_\_\_\_, Section \_\_\_\_\_, of these the Bylaws as set forth elsewhere in this Chapter of the Governance Manual.~~

~~Section 30-B.~~ NOMINATIONS:

A-1. President-Elect and Second Vice President. Nominations for the offices of President-elect and Second Vice President shall be made in accordance with the order of business. Candidates for these elective offices shall be nominated from the floor of the House of Delegates by a simple declaratory statement, which may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted.

B-2. Treasurer. Nominations for the office of Treasurer shall be made in accordance with the order of business. The search for Treasurer shall be announced in an official publication of the Association in November of the final year of the incumbent **Treasurer's term, together with the recommended qualifications for that position as provided in Chapter VII, Section**

~~100C, of these the~~ Bylaws. Candidates for the office of Treasurer shall apply by submitting a standardized Treasurer *Curriculum Vitae* form to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. **Each candidate's** application shall be reviewed by the Board of Trustees. The Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of **the House of Delegates, with each candidate's** standardized Treasurer *Curriculum Vitae* and the determination of the Board of Trustees as to whether the candidate meets the recommended qualifications for the office of Treasurer. No other candidate shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted. No further nominations for the office of Treasurer shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Treasurer when the House of Delegates meets, the term of the incumbent Treasurer shall be extended by one (1) year. Should the incumbent Treasurer be unwilling or unable to serve an additional one (1) year term, the office of Treasurer shall be filled ~~in the same manner as provided in Chapter \_\_\_\_, Section \_\_\_\_ of these Bylaws~~ accordance with the vacancy provisions of the Bylaws. Under these circumstances, former Treasurers of this Association not otherwise eligible to serve as Treasurer due to term limits would be eligible to serve as Treasurer until the House of Delegates can elect a Treasurer.

~~E-3. Speaker of the House of Delegates.~~ The search for Speaker of the House shall be announced in an official publication of the Association in November of the final year of **the incumbent Speaker of the House's term**. Candidates for the office of Speaker of the House shall apply by submitting curriculum vitae along with a statement supporting their qualifications to the Executive Director at least one hundred twenty (120) days prior to the convening of the House of Delegates. The Executive Director shall provide all members of the House of Delegates, at least sixty (60) days prior to the convening of the House of

Delegates, **with each candidate's** curriculum vitae and statement of qualifications for the office of Speaker of the House. If no candidate has applied, then the Association shall inform all delegates of this circumstance and the period to apply shall be extended to thirty (30) days prior to the convening of the House of Delegates. If thirty (30) days prior to the convening of the House of Delegates ~~there is no remaining candidate for election~~ then the Association shall inform all delegates of this circumstance and also inform them that nominations shall be permitted from the floor of the House of Delegates. Only those candidates shall be nominated from the floor of the House of Delegates. The nominations may be followed by an acceptance speech not to exceed four (4) minutes by each candidate from the podium, according to the protocol established by the Election Commission. Seconding a nomination is not permitted. No further nominations for the office of Speaker of the House shall be accepted from the floor of the House of Delegates. If there are no eligible candidates for the office of Speaker of the House when the House of Delegates meets, the term of the incumbent Speaker of the House shall be extended by one (1) year. Should the incumbent Speaker of the House be unwilling or unable to serve an additional one (1) year term, the office of Speaker of the House shall be filled ~~in the same manner as provided in Chapter \_\_\_\_, Section \_\_\_\_ of these Bylaws~~ accordance with the vacancy provisions of this chapter of the Governance Manual. Under these circumstances, former Speakers of the House of this Association not otherwise eligible to serve as Speaker of the House due to term limits would be eligible to serve as Speaker of the House until the House of Delegates can elect a Speaker of the House of Delegates.

*Section 40. ELECTIONS:* The elective officers shall be elected in accordance with the method of election specified in the Bylaws.

## Nomination and Election of Trustees

Nomination of members of the Board of Trustees will take place at the \_\_\_\_\_ meeting of the House of Delegates. The terms of the following members of the Board of Trustees will expire with the current session.

District \_\_\_\_

District \_\_\_\_

District \_\_\_\_

District \_\_\_\_

District \_\_\_\_

The following are the provisions of the Bylaws and Governance Manual which govern the nomination and election of members of the Board of Trustees (Bylaws, Chapter VII, Sections 20-5040; Governance Manual, Chapter V, Sections A. and B.):

Section 20. QUALIFICATIONS: A trustee must be an active, life or retired member, in good standing, of this Association and an active, life or retired member of one of the constituent societies of the trustee district which the trustee is elected to represent. Should the status of any trustee change in regard to the preceding qualifications during the trustee's term of office, that office shall be declared vacant by the President and the President shall fill such vacancy as provided in Chapter VII, Section 80, of these Bylaws.

Section 30. TERM OF OFFICE: The term of office of a trustee shall be four (4) years. The tenure of a trustee shall be limited to one (1) term of four (4) years.

Section 40. NOMINATION:

A. SINGLE CONSTITUENT DISTRICT. In trustee districts consisting of a single constituent dental society, the trustee nomination procedures shall be determined by an elective process established by the constituent dental society which shall produce a single nominee for trustee. Until such time as the Speaker declares the nominee elected pursuant to Paragraph A of Section 50 of this Chapter, the nomination may be reconsidered by the duly constituted caucus of the trustee district during the appropriate annual session, provided that at no time shall more than one nominee be presented by the trustee district for election. The

~~House of Delegates may vote to reject any such nominee and thereby compel the trustee district caucus to select a different nominee.~~

~~B. MULTIPLE CONSTITUENT DISTRICTS. In multiple constituent districts, the delegates from the constituent societies of the trustee district in which the term of the trustee is to terminate, shall hold a caucus to select a nominee or nominees for the office of trustee. Such caucus shall be called by the trustee whose term is about to expire, or by the trustee's designee. The notice of the time and place of such caucus shall be reported to the Secretary of the House.~~

~~At the caucus the delegates shall nominate one (1) or two (2) candidates for the office of trustee, whose name or names shall be presented to the House of Delegates in accordance with the following rules. An action taken at a duly constituted caucus of the trustee district to nominate or select a trustee may be reconsidered at a later caucus during the appropriate annual session.~~

~~a. A person receiving the unanimous vote of the delegates present and voting at the caucus shall be the only nominee presented by the district.~~

~~b. In the event that one (1) candidate receives a majority vote, one (1) or more of the delegates voting in the minority may select another nominee and the names of both nominees shall be presented to the House of Delegates as the nominees of that district.~~

~~c. The number of votes received by each nominee in the caucus shall be reported to the House of Delegates.~~

C. NOMINATING PROCEDURE. Candidates for the office of trustee shall be nominated from the floor of the House of Delegates by a simple declaratory statement, which may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted.

Section 50. ELECTION: The trustee shall be elected by the House of Delegates according to the following rules:

~~A. If there is only one (1) nominee from a trustee district, the Speaker shall declare such nominee elected.~~

~~B. If there are two (2) nominees from a trustee district, the election shall be by ballot in accordance with Chapter V, Section 150. The nominee receiving the larger number of votes cast shall be declared elected. The method of election set forth in this paragraph shall not be used for any trustee district consisting of a single constituent dental society. A trustee district consisting of a single constituent dental society may present a single nominee to be elected pursuant to Paragraph A of this Section.~~

~~In the case of contests, election of members of the Board of Trustees will take place on Sunday, October 23. Paper ballots will be used and the polls will be open from 4 p.m. to 6 p.m.~~

Bylaws:

Section 20. TERM OF OFFICE: The term of office of a trustee shall be four (4) years. Except as otherwise provided in these Bylaws, the tenure of a trustee shall be limited to one (1) term. (Footnote omitted.)

Section 30. ELECTION: Trustee nominations shall be by an elective process, the rules of which shall be determined by each trustee district. Each trustee district's election process shall result in a single nominee for trustee by each trustee district.

Section 40. INSTALLATION: The installation of trustee nominees shall be as provided in the Governance Manual.

Governance Manual:

A. Eligibility. A trustee must be an active, life or retired member, in good standing, of this Association and an active, life or retired member of one of the constituents of the trustee district which the trustee is elected or appointed to represent.

B. Nomination, Declaration of Election and Installation Procedure. The name of each nominee for the office of trustee brought forward by the nominee's trustee district shall be read to the House of Delegates by the Speaker of the House of Delegates. Because there is only a single nominee provided by each trustee district, following the reading of names, the Speaker of the House of Delegates shall declare the nominees elected. The newly elected trustees shall be installed by the President or the President's designee.

## **Nomination and Election of Members of Councils and Commissions**

The nomination of members of councils and commissions of the Association will be presented to the House of Delegates on \_\_\_\_\_. Additional nominations may be made from the floor of the House only on \_\_\_\_\_. Election of council and commission members will be held at the \_\_\_\_\_ meeting utilizing the method of election specified in the Bylaws.

## **Conflict of Interest**

It is the policy of this Association that individuals who serve in elective, appointive or employed offices or positions do so in a representative or fiduciary capacity that requires loyalty to the Association. At all times while serving in such offices or positions, these individuals shall further the interests of the Association as a whole. In addition, they shall avoid:

- Placing themselves in a position where personal or professional interests may conflict with their duty to this Association.
- Using information learned through such office or position for personal gain or advantage.
- Obtaining by a third party an improper gain or advantage.

As a condition for selection, each nominee, candidate and applicant shall complete a conflict of interest statement as prescribed by the Board of Trustees, disclosing any situation which might be construed as placing the individual in a position of having an interest that may conflict with his or her duty to the Association. Candidates for offices of President-elect, Second Vice President, Treasurer, Speaker of the House, nominees for office of trustee, and nominees to councils and commissions shall file such statements with the Secretary of the House of Delegates to be made available to the delegates prior to election. As a condition of appointment, consultants, advisers and staff of Councils, Commissions and Special Committees, and each person nominated or seeking such positions, shall file conflict of interest statements with the executive director of this Association.

While serving in any elective, appointive or employed office or position, the individual shall comply with the conflict of interest policy applicable to his or her office or position, shall complete and file a conflict of interest statement for each year of service, and shall promptly report any situation in which a potential conflict of interest may arise.

The Board of Trustees shall approve any additional compliance activities that will

implement the requirements of this chapter. The Board of Trustees shall render a final judgment on what constitutes a conflict of interest.



# Election Commission and Campaign Guidelines

The Election Commission is composed of three members: the Immediate Past President, and the chair and vice chair of the Council on Ethics, Bylaws and Judicial Affairs. In the event that one of the members is unavailable, a replacement member will be selected by the Council on Ethics, Bylaws and Judicial Affairs from among its members. The chair of the Council on Ethics, Bylaws and Judicial Affairs serves as chair. The Speaker and the President-elect will serve as consultants to the Election Commission, without the right to vote.

The Election Commission is charged with (1) overseeing and adjudicating all issues of contested election for ADA offices; (2) meeting with all candidates to negotiate cost-effective agreements on campaign issues such as promotional activities and gifts (which are limited to campaign pins), campaign literature, travel and electronic and other communication methods; (3) receiving summaries of campaign revenues and expenses from candidates for all ADA elective offices; (4) informing anyone identified as being under a disciplinary sentence of suspension or probation for violating his or her duties to the constituent society within whose jurisdiction the member practices or to this Association that they are ineligible to seek elective or appointive office while under that disciplinary sentence; and (5) referring any dispute of eligibility to the Council on Ethics, Bylaws and Judicial Affairs.

## Guidelines Governing the Conduct of Campaigns for All ADA Offices

The following guidelines govern the announcement and conduct of campaigns for ADA elected offices. These guidelines will be distributed annually to all candidates, delegates, alternate delegates and other parties of interest.

1. Candidates shall not formally announce their intent to run for office until the final day of the annual session immediately preceding their candidacy. Prior to this formal announcement, candidates may freely campaign within their own trustee districts.
- Campaign activities outside a candidate's own**

trustee district shall begin only after the official announcement at the annual session.

2. Candidates for the office of President-elect shall limit their campaign travel to attending state and/or district annual meetings and/or leadership conferences and annual session district caucus meetings only. Candidates for the office of Second Vice President and Speaker of the House of Delegates shall limit campaign travel to attending the district caucus meetings held during the ADA annual session.
3. District caucuses and state constituent societies shall issue timely invitations to the President-elect candidates through the Office of the Executive Director. Caucuses and state meetings are requested to provide an appropriate opportunity for the candidates to meet with their members. It is recommended that such forum be structured:
  - a. to allow all candidates to make presentations;
  - b. to allow caucuses freedom to assess candidates; and
  - c. to allow each candidate to respond to questions.

President-elect candidates shall negotiate a mutually agreeable travel schedule and when mutually agreeable may utilize electronic communications (e.g., Skype) to accommodate conflicts with district schedules.

4. Candidates shall not use campaign-sponsored social functions or hospitality suite/meetings rooms on behalf of their candidacy at any regional, national or annual meeting. (This is not intended, however, to limit candidates from holding campaign meetings for the purpose of strategizing.) Campaign receptions are not to be held at the ADA Annual Session. Additionally, a district that annually hosts a reception during the ADA annual session and is sponsoring a candidate in a contested election should not host a reception prior to the officer elections; a reception may be held after the election.

5. News articles on and interviews of a Candidate are permissible if published by a **state dental journal within the candidate's** district, providing that the distribution of the journal is kept within the district, with no intentional outside distribution. Online state dental journal news articles on and interviews of a Candidate are permissible if posted in the **members' only section of the state dental association website within the candidate's** district. **Articles about a candidate's intention** to run for office are permissible. Articles about why one person would make a better candidate are not permissible. Candidates are discouraged from participating in interviews on their leadership capacity with leadership or national journals that will be published within the timeframe of their campaign.
  6. **All candidates' campaign statements and** profiles, which appear in the ADA News will **be posted on the Association's website,** ADA.org, in an area dedicated to candidates for ADA elective offices, and on ADA Connect.
  7. Candidates should not knowingly seek to have their name, photo, appearance, and writings in national trade or non-peer reviewed publications or websites during the campaign, and should avoid submitting articles in nonpeer reviewed paper or electronic publications. Candidates who are participants **on a speaker's bureau or earn revenue by** speaking nationally or regionally must agree to avoid all unnecessary self-promotion during the campaign related to national speaking engagements.
  8. The election process for the office of Treasurer may be preceded by a campaign strictly limited to visiting the district caucus meetings during the annual session. Candidates shall not be permitted to distribute any tangible election material, including but not limited to printed matters, CD-ROMs, audiovisual materials, pens, pins, stickers or other accessory items. Candidates shall not use signs, posters or any electronic means of communication including but not limited to telephones, television, radio, electronic and surface mail or the Internet. Candidates shall not attempt to raise funds to support a campaign, or to conduct any social functions, hospitality suites or other electioneering activities. **The candidates' names and** curriculum vitae, when applicable, will be submitted to the House in the first mailing/posting of the year of the election.
  9. No material may be distributed in the House of Delegates without obtaining permission from the Secretary of the House. Materials to be distributed in the House of Delegates on **behalf of any member's candidacy for office** shall be limited to printed matter on paper only and nothing else. (A single distribution per candidate for each House of Delegates will be made. However, the distribution could consist of more than one piece of printed matter as long as the materials are secured together.)
  10. No candidate will knowingly accept campaign contributions which create the appearance of conflict of interest as reflected in Chapter VI of the ADA Bylaws.
  11. Candidates for all ADA elective offices should submit a summary of campaign contributions and expenses to the Election Commission at the end of the campaign.
  12. In the event of a violation of the House-approved guidelines, the Election Commission shall post its report in the House of Delegates section on ADA Connect. Additionally, an email will be sent to all delegates and alternate delegates with a working email address on file, alerting them that the report has been posted.
- If violations of the Campaign Agreement and Guidelines are determined to have occurred, then the Election Commission, if it cannot resolve those violations between the candidates, must report those violations to the House of Delegates. The Report of the Election Commission will be given orally by the Chair of the Election Commission at the first meeting of the House. If violations occur after that meeting, and before the election, then that information must be shared with the caucuses by direct contact of the constituent executive directors or the caucus chairs.
13. Any questions regarding the Guidelines should be directed to the chair of the Election Commission for clarification

# Ethical Statement

As members of the legislative and governing body of the American Dental Association, we are to be reminded of our responsibility to act with integrity and exercise our powers and perform our duties relating to professional matters in a manner consistent with the *Principles of Ethics* and *Code of Professional Conduct* of the Association.

By acting ethically and with integrity over the course of this annual session, we can be certain

that our legislative obligations and decision making authority will be discharged in keeping **with the profession's fiduciary obligations.**

Finally, we must be mindful of our responsibility for professionalism and respect for each other in our work and deliberations. The **ADA's** Professional Conduct Policy that appears in the Manual of the House of Delegates speaks to the fact that professionalism is the standard for communications throughout this Association.

# ADA Professional Conduct Policy and Prohibition Against Harassment

The following ADA Professional Conduct Policy and Prohibition Against Harassment is provided for your information. As you are aware, the ADA, as an employer and as an organization that is volunteer-driven, must maintain an effective policy and process to prevent and remedy harassment. The ADA takes its anti-harassment policies very seriously and appreciates the efforts of all who comply with the policies. Please review the Policy carefully.

## Professional Conduct Policy and Prohibition Against Harassment

The American Dental Association (ADA) is proud of its professional and congenial work environment, and it will take all necessary steps to ensure that the work environment remains pleasant for all who work here. It is ADA policy that all ADA employees and volunteers are responsible for assuring that the work place is free from improper harassment. The ADA absolutely prohibits sexual harassment and harassment on the basis of race, color, religion, gender, national origin, age, disability, sexual orientation, status with respect to public assistance, marital status, or any other status protected by federal, state or local law. Such discriminatory harassment is unlawful and may subject the ADA and/or the individual harasser to liability. In addition, with this policy, the ADA prohibits not only unlawful harassment, but also other unprofessional and discourteous actions. Derogatory racial, ethnic, religious, age, sexual orientation, sexual or other inappropriate remarks, slurs, or jokes will not be tolerated.

Sexual harassment includes unwelcome sexual advances and requests for sexual favors, and all other verbal or physical conduct of a sexual nature when:

- submission to such conduct is made either implicitly or explicitly a condition of the **individual's employment;**
- submission to or rejection of such conduct is used as the basis for decisions affecting an **individual's employment; or**

- such conduct is sufficiently severe or pervasive to alter the conditions of employment and to create a hostile or abusive working environment.

Sexual harassment may take many forms, including, but not limited to:

- verbal harassment or abuse of a sexual nature;
- subtle pressure or abuse of a sexual nature;
- unnecessary touching of an individual, for example, patting, pinching, hugging, repeated **brushing against another employee's or volunteer's body;**
- offensive sexual flirtation, advances or propositioning;
- graphic verbal commentaries or jokes;
- sexually degrading words used to describe an individual; or
- the offensive display in the workplace of sexual objects, pictures or writings.

Each employee and volunteer must exercise his or her own good judgment to avoid engaging in conduct that may be perceived by others as harassment. Forms of harassment include, but are not limited to:

- verbal: repeated sexual innuendoes, racial or sexual epithets, derogatory slurs, off-color jokes, negative stereotyping, personally abusive remarks, propositions, threats or suggestive or insulting sounds;
- visual/non-verbal: derogatory posters, cartoons, or drawings; suggestive objects or pictures; graphic commentaries; leering; or obscene gestures;
- physical: unwanted physical contact including **touching, interference with an individual's** normal work movement or assault; and
- other: making or threatening reprisals as a result of a negative response to harassment.

ADA employees and volunteers are responsible for keeping our work environment free of all such harassment. If you believe that you have been harassed, or if you become aware of an incident of harassment, whether by an employee or a non-

employee, you should report it as soon as possible to the Executive Director and/or to the ADA Chief of People Management, 1-800-621-8099, ext. 2755 or 312-440-2755. Do not allow an inappropriate situation to continue by not reporting it, regardless of who is creating that situation.

**The ADA's Professional** Conduct Policy and Prohibition Against Harassment applies to the immediate work place as well as to ADA related activity outside the ordinary work place, such as

Annual Session and ADA-sponsored social or recreational events.

In response to every complaint, the ADA will take prompt, appropriate investigatory actions and corrective and preventative actions where necessary. All ADA volunteers should be aware that the privacy of the complaining party and the person accused of the harassment will be protected to the extent consistent with effective enforcement of this policy. The ADA will retain confidential documentation of all allegations and its investigations.

# Association Whistleblower Policy

The ADA's *Bylaws, Standing Rules, Principles of Ethics and Code of Professional Conduct* and, for its employees the Employee Handbook, (collectively, the "Rules"), require trustees, officers, council and commission members, volunteers and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. As representatives of the Association, we must practice honesty and integrity in fulfilling our responsibilities and comply with all applicable laws and regulations. For this reason trustees, officers, council and commission members, volunteers and employees with reasonable grounds are encouraged to report violations or suspected violations of the Rules in accordance with this Whistleblower Policy. Without limiting your reporting any instances of violations of the Rules, examples of matters which should be reported include awareness of false or misleading information in the Association's financial statements or other public or legal documents, situations where false information is provided to or withheld from auditors or government officials, forgery or alteration of documents, authorizing or receiving compensation for goods or services not received, falsifying the Staff Reimbursement Form, or falsifying reimbursement for medical or dental treatment.

**No Retaliation.** No trustee, officer, council and commission member, volunteer or employee who in good faith reports a violation of the Rules or the ADA's *Professional Conduct Policy and Prohibition Against Harassment* shall suffer harassment, retaliation or adverse employment consequence. Another employee who retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination of employment. However, an allegation may not be made maliciously, recklessly without foundation, or knowingly false. Such misuse of the Whistleblower Policy will be viewed as a serious disciplinary offense.

**Reporting Violations.** In the case of employees, your supervisor may be in a position to address your area of concern, but alternatively, you may contact the Chief of People Management or the Vice President (VP) in your division. VPs, supervisors and managers, trustees, officers,

council and commission members, and everyone in the case of suspected fraud, are required to report suspected violations of the Rules to the Association's designated Compliance Officer, ADA General Counsel, who has the specific responsibility to investigate all reported violations, or alternatively the Chief of People Management. You may choose to report suspected violations on a confidential basis or anonymously. Reports will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.

**Compliance Officer.** The Association's Compliance Officer is responsible for investigating and resolving reported allegations concerning violations of the Rules and shall advise the Executive Director and/or the Audit Committee of the Board of Trustees where appropriate. The Compliance Officer shall in all cases promptly notify the Audit Committee in the case of financial, accounting and auditing matters, which shall address all such reported concerns. The Chief of People Management shall also have the authority to conduct investigations with reference to the reported allegations referred to herein.

**Effect of Policy.** This policy is intended to encourage and support high ethical standards, but is not an express or implied contract of employment. In the case of employees, they continue to be employed on an at-will basis, which means that the Association or the employee may terminate the employment relationship at any time, with or without reason, and with or without notice. The Association reserves the right to change, modify or delete any provision in this Whistleblower Policy and to interpret and administer this policy in its sole discretion.



Resolution No. N/A N/AReport: Board Report 4 Date Submitted: May 2017Submitted By: Board of TrusteesReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of the tripartite clearly defined and agreed upon

How does this resolution increase member value: See Background

**REPORT 4 OF THE BOARD OF TRUSTEES TO THE HOUSE OF DELEGATES:  
GOVERNANCE REFORMS SINCE 2012**

**Background:** In 2011, the House of Delegates adopted 38H (*Trans.*2011:524), which asked the Board to conduct a comprehensive study on ADA Governance. The Board did so and in 2012 presented Board Report 3 (*Supplement* 2012:7000) to the House of Delegates. A copy of that report and the underlying report from the ADA consultants, is attached as Appendix A.

The consultant's report (known as the Westman Study) contained 80 numbered proposals. Because of the number of proposals as compared to resolutions passed, some House members gained the impression that little was done as a result of this work and grew frustrated with the lack of progress. In fact, in the five years since the governance study, the Association has made great progress in improving its governance. Much of that progress is traceable to the 2012 study, and additional changes have also been enacted.

The purpose of this report is to update the House on governance changes made since the 2012 report.

**Overview of Governance Changes:** Before detailing the 2012 study itself, a quick overview of some of the changes made and knowledge gained since 2012 will provide a sense of the progress made. Many of these changes are small, incremental steps toward better governance and small steps are often the best way to move forward. The cumulative impact of these small steps is, however, significant; we are a better run organization now than we were five years ago, more efficient and better informed. Among the changes made are:

1. The Association capped the size of the House of Delegates, ending the constant growth of that body and minimizing the risk that the Association would be unable to find locations suitable to hosting the House. For the first time in memory, this change resulted in some delegations shrinking in size.
2. In capping the size of the House, the House eliminated the specific allocation from the *Bylaws* and replaced it with a formula to develop an allocation. This avoids politicizing reallocations.
3. The Association identified the share of its revenue dedicated to supporting the cost of governance. Based on the 2012 study, the ADA spent more than \$16 million on governance, or approximately 15% of revenue. The ADA's share of governance exceeded the share spent by benchmarked associations by more than three times.



4. The Council on Annual Sessions ceased to exist and its functions transferred to a new advisory committee of the Board.
5. The Association enacted a requirement for a regular self-assessment by each council every five years. This led to the changes to the Council on Annual Sessions as well as ongoing consideration of structural changes by the Council on Members Insurance and Retirement Plans.
6. The Board, Councils and House of Delegates each conducts its business electronically, largely eliminating printed materials.
7. Bolstered use of provisional membership for greater membership success with new graduates.
8. The Association eliminated the campaign parties by candidates for president elect, resulting in substantial savings.
9. The Association eliminated paper campaign materials for candidates for president elect.
10. The Board expanded its new-member orientation to include review of comprehensive training modules and access to Board meeting materials prior to the new members assuming a seat on the Board.
11. All new Board members now attend an ASAE program on good governance.
12. A uniform new member orientation process for council members was expanded to include review of comprehensive training modules.
13. All Board committees now have formal charters, explicitly outlining duties, authority and composition.
14. The Board added House members to its Audit, Budget and Finance and Strategic Planning Committees.
15. The Board's New Dentist Committee has refocused its efforts to be an important advisory committee of the Board rather than focusing on activities.
16. The Board revamped its committee structure, establishing a Governance Committee, an IT Committee and a Strategic Planning Committee.
17. Through use of consent calendars and appropriate reliance on committees, the Board reduced the total time needed for its meetings over the year.
18. The Board adopted a new strategic plan, Members First 2020, and has focused the entire Association on its objectives.
19. Councils are now able to name their own chairs, bringing this decision down to those with the most knowledge of the candidates.
20. Councils now routinely employ consent calendars, increasing efficiencies and allowing councils to focus on the more contentious issues.
21. The format and timing of council annual reports were modified to make the reports timelier.
22. The House authorized the Board to undertake pilot studies which would otherwise contravene the *Bylaws*, in order to allow the Board to explore new ideas surrounding membership.
23. The entire budget process was overhauled so that the focus would be on programs rather than line items. This allows the Association to allocate resources to maximize impact on the Association's strategic plan goals.
24. Changes to the budget process resulted in program success measures being established and tracked.
25. The House changed the rules regarding the timing of notice for a change in dues to align with the deadline for submission of a proposed budget.
26. The Commission for Continuing Education Provider Recognition was established.
27. The relationship between the ADA and the Commission on Dental Accreditation has been refined.
28. The *Bylaws* are being overhauled as the result of ongoing work by the Council on Ethics, Bylaws, and Judicial Affairs. The duties of the councils was already changed to lessen ambiguity and aid in clarity. The goal is to shorten and simplify the *Bylaws* and bring them into conformity with best practices.
29. The House adopted the use of a consent calendar, thereby focusing debate on important and more contentious issues.
30. The House urged each state society to implement term limits for its delegates and alternate delegates.

31. The House schedule was shortened by minimizing activities less aligned with the duties of the House.
32. In 2017 Officer elections for the first time will take place electronically from the House floor.
33. The House amended the *Bylaws* to allow ASDA delegation to introduce new business just as other delegations are able to do.
34. Appropriate use of committees by both the House and the Board has increased to allow each body to better focus on key issues.
35. A business innovation fund was created to allow development of new business ideas.
36. Virtually every state society now shares the same association management platform as the ADA (Aptify) allowing greater sharing of information and meaningful interactions with members.

Of course, the changes described above relate solely to the ADA (national). Since 2012, significant changes have occurred at the state level, in California, Michigan, Pennsylvania and elsewhere. Delegates from those states are best positioned to judge the importance of the 2012 governance study to spur those reforms, but they clearly constitute part of the culture of openness to change we have experienced since then.

**The 2012 Governance Study:** The governance study directly led to significant and concrete changes such as capping the size of the House (which, until then, never decreased in size and continually grew larger) and institutionalizing self-assessments by councils and committees (which, in turn, has led to highly visible changes in the New Dentist Committee and the former Council on Annual Sessions, and incremental changes in all councils).

Frustration may arise because not all proposals are adopted and most change has consisted of small steps. The Board feels it is important for the House to understand that a willingness to consider change is an essential first step towards reform. For this reason, a failure to adopt any given proposal, while it may be important, does not diminish the importance of considering the proposal in the first place. Likewise, as noted above, incremental change efforts are often more successful than attempts to completely overhaul a governance system. The cumulative impact of incremental change has indeed been great.

The 2012 study set forth 80 specific proposals. About half of these proposals did not require House action, but were directed at the Board or staff. All of these were addressed by the Board or staff, resulting in many changes and greatly affecting operations within the Association. Of the remaining 40 proposals, the Board reviewed all of them and presented 11 resolutions to the 2012 House of Delegates. Of these resolutions, eight eventually passed in one form or another (some were amended and some held over and then adopted in some form). Other resolutions arising from the Governance Study were raised again, in later years, such as elimination of the offices of vice president, redefining the "late resolution rule", and shifting budget authority to the Board of Trustees. The eight proposals which were adopted in one form or another by the House are:

1. Creation of a "paperless" House
2. Elimination of campaign parties
3. Urging term limits for delegates
4. Urging term limits for alternate delegates
5. Adjusting the term of office of the Speaker
6. Creation of task force on councils, resulting in the following year in adoption of required, formal self-assessments by each council
7. Adjusting process and deadlines for notice of dues assessments
8. Capping the size of the House of Delegates

In addition, the 2012 Governance Study bolstered an openness to change and a desire to seek continual improvement. The ADA House and Board already possessed a willingness to consider change and the 2012 study reinforced that willingness. Virtually every change listed above, whether momentous or

1 incremental, can trace its lineage back to this attitude. This attitude is found not only among the Board,  
2 the House and its Councils, but throughout the states as well. Even among the 2012 suggestions not  
3 adopted are examples of the House's desire and willingness to consider and debate new ideas.  
4 The Board does not advocate change for change's sake, but does advocate an openness to new ideas.  
5 A refusal to be open to change, especially in our ever-changing environment, would be fatal to the  
6 Association. The House, the Board and staff should be proud of the progress made and willing to  
7 consider, to study and to debate more changes.  
8

#### 9 **Resolutions**

10 This report is informational and no resolutions are presented.

11 **BOARD RECOMMENDATION: Vote Yes to Transmit.**

12 **BOARD VOTE: UNANIMOUS.**

Resolution No. 90-99 New

Report: Board Report 3 Date Submitted: July 2012

Submitted By: Board of Trustees

Reference Committee: Governance

Total Net Financial Implication: See individual resolution Net Dues Impact:   
worksheets

Amount One-time  Amount On-going  FTE

ADA Strategic Plan Goal: Members (Required)

**REPORT 3 OF THE BOARD OF TRUSTEES TO THE HOUSE OF DELEGATES: THE GOVERNANCE STUDY OF 2012**

**Background:** In response to 38H-2011 (*Trans*:2011:524), the Board of Trustees directed its Governance Committee<sup>1</sup> to oversee a comprehensive study of the Association's governance. A detailed request for proposal was developed and a number of qualified consultants provided proposals to conduct the study. After careful deliberation, the Committee selected Westman and Associates (the Consultant) to provide suggested revisions to the governance of the ADA. Based on months of data collection and collaboration with the Committee, the Consultant provided a report to the Board of Trustees setting forth 80 suggestions for change in ADA governance. A copy of that report (the Westman Report) is provided as **Appendix 1**.

The primary goal of the Board is to seek improvement in governance effectiveness and efficiency. This means identifying and adopting best practices for various aspects of governance, avoiding duplication and other inefficiencies and clarifying the appropriate roles for the many facets of the Association's governance model. In general, the Board seeks to simplify a very complex governance model and possibly reduce costs, however, cost reduction is not the primary purpose of the study. Improving ADA's governance effectiveness is the result sought by the Board of Trustees.

The Board recognizes that one of the unique strengths of our Association is the involvement of so many volunteer leaders. Some of the suggestions from the Consultant carry the risk of a decrease in the numbers of volunteers directly involved at a given point in time as the current governance structure prescribes. The Board believes that a shift towards *ad hoc* workgroups to address specific issues negates the risk of a loss of volunteer engagement; indeed, the Board's proposal to use issue-based workgroups will allow *more* volunteers to be engaged in leadership activities. These groups would exist for a limited time to address a specific issue, thus allowing involvement by greater numbers and diversity of volunteers, including those who are reluctant to make a multi-year commitment to serve, for example, on a council. In other words, the Association must remain member driven, but we must strive to do so in the most effective and efficient manner.

With recommendations from the Governance Committee, the Board carefully considered the Report of the Consultant and offers this report to the House of Delegates.

**Key Documents and Resources:** Because the Board is conscious of the demands on the time of House members, this report provides an overview of the process and other information which is available to the

<sup>1</sup> Members of the Governance Committee were Drs. Low (chair) and Calnon (*ex officio* without vote), Dow, Engel, Faiella (*ex officio*, with vote), Seago, Summerhays, Versman, Weber, and O'Loughlin (*ex officio* without vote).

House (in addition to the Board's proposed resolutions). The Board encourages House members who seek additional detail to review the Consultant's Report and its appendices. The data is very rich. The Board is providing to the House the full report of the Consultant, including those suggestions not supported by the Board so that the House will benefit from the complete record. The Consultant's Report includes as attachments reports on 80 personal interviews, 700 survey responses, a benchmarking study of other associations, a cost analysis of ADA governance and a summary of a meeting of stakeholders from every district.

Additionally, the Governance Committee has posted in a "Governance Library" on the House ADA Connect site, a series of e-memos detailing the governance study as it was underway. Also included in that library is the Committee's request for proposal and an unofficial summary of past governance recommendations provided to the House.

**Existing ADA Policy:** Resolution 38H-2011 provides:

**38H-2011. Resolved,** that a sum of up to \$300,000 be allocated to fund a comprehensive governance study of the Association consistent with Resolution 56H-2002 and the draft RFP provided to the House by the Board of Trustees, and be it further

**Resolved,** that the results of the governance study, along with any recommended governance changes, be presented to the 2012 House of Delegates.

56H-2002 states:

**Resolved,** that the American Dental Association examine its governance structure at least every 12 years.

**The Need for Governance Reform:** In the first e-memo on this topic, our president, Dr. William Calnon, explained some reasons for undertaking a study of our governance. Following its review of the Report, the Board remains convinced these reasons remain valid:

- First, of course, is because it is the will of the House. It became obvious during the debate at the October 2011 session that there is a developing consensus that the Association needs to take a critical look at our current governance structure and process.
- The fourth goal of the Association's Strategic Plan directs us to ensure that the ADA is a financially stable organization that provides appropriate resources to enable operational and strategic initiatives. Governance is important, but we all owe a fiduciary duty to be sure our money is well spent and that we are truly maximizing our investment. The expense of our current structure to our constituent societies also must be considered.
- We live in different times, but our core governance is the same as it was 50 years ago. Certainly, there have been changes during this time, but the basics are the same. During that same time period, communications and technology are virtually all new. The pace of life and business and decision making continues to grow faster and faster. Does our governance model allow us to capitalize on these advances?
- Our demographics have changed. The newly graduated dentist today has different expectations than graduates of the past. We are also much more diverse than ever before, not only culturally and ethnically, but also in practice settings and career choices. What governance structure would support our continued relevance to our profession and the public?

The ADA Consultant explained the need in this way (Westman Report, Appendix 1, page 2):

The last such review [of governance] was completed over five years ago. Since that time there have been numerous changes impacting the ADA, including the hiring of a new executive director, the deleterious effects of a long-lasting economic downturn, increased availability and utilization of



technology, and the promulgation of new ideas and thoughts relative to association governance (e.g., the book *Race for Relevance: 5 Radical Changes for Associations*). Given these changes, and the passage of time, the ADA House of Delegates (HOD) commissioned this governance review in October, 2011, with a request that the review be completed in time for thorough consideration at the 2012 HOD meeting.

The Board and its Governance Committee entered into this process with an open mind, anxious to hear opinions of outside experts as well as all key stakeholders to ADA governance. What the Board heard fully supported the need for a governance study. This would not have been possible had the Governance Committee and the ADA Consultant not constructed an open process with multiple opportunities for input by the House and other volunteer leaders, as well as staff.

**The Process Followed in Conducting the Governance Study:** Two words best summarize the guiding principles used by the Governance Committee in conducting this study: Input and transparency.

Input from as many volunteer leaders and staff as possible was deemed essential because volunteer leaders best know ADA governance, including both its strengths and weaknesses. Therefore, to capitalize on this knowledge base, the Consultant undertook a very significant amount of work in a relatively brief time to hear what volunteer leaders had to say and to gather other important data. Specifically, the Consultant conducted:

1. One-on-one interviews with approximately 80 ADA leaders (every Board member, Council chairs, House members, constituent leaders) and senior staff.
2. A questionnaire survey of over 1,400 leaders (target participants included members of the House of Delegates, Board of Trustees, councils, committees, state constituents and staff that support governance entities; over 700 responded, an extremely high survey return rate according to the Consultant).
3. A detailed analysis of the fully burdened cost of ADA's governance (including the value of staff time).
4. A benchmarking survey to capture data concerning the governance practices of approximately 20 large associations.
5. A "Key Stakeholders" meeting in June to elicit feedback on potential recommendations from a cross section of House leaders, representing every district.

Additionally, Consultant representatives met regularly with the Governance Committee and a group of House "advisors" on the process. The Board wishes to express its thanks to all who participated and, especially to the House Advisors who so graciously gave of their time and energy to make the governance study a success. Although the recommendations set forth here are the Board's and not theirs, the House Advisors merit recognition by name: Drs. James Antoon (FL), Jill Burns (IN), Sally Cram (DC), O. Andy Elliott (KY), J. Barry Howell (IL), David Larson (PA), Michelle Mazur-Kary (ME), Alan Moore (TX), Donna Moses (GA), Bob Plage (NC), Craig Ratner (NY), Ruchi Sahota (CA), Thomas Schripsema (NM), Ron Seeley (ND), Gene Shoemaker (WI), Robert Skinner (AR), and Rodney Wentworth (WA).

Likewise, the Board expresses thanks those who freely and constructively offered their insights at the Key Stakeholders Meeting. In addition to members of the Board, participants were Drs. Douglas Auld, Darryll Beard, Jeannie Beauchamp, Gregory Bengtson, Mark Bronson, Jeffrey Cole, Daniel Davidson, Susan B. Doroshow, David A. Duncan, Hal Fair, Judith Fisch, Pat Foy, Chad Gehani, Michael Halasz, R. D. Hoffman, Jeff Hooton, Kim Jernigan, Robert Lauf, Lew Mitchell, Rhett Murray, Neil Nunokawa, Norman Palm, Alec Parker, Jill Price, Nancy Rosenthal, Danielle Ruskin, Cesar Sabates, Jonathan Shenkin, James Stephens, Zack Studstill, Deborah Weisfuse; Ms. Betty Dencler, Mary Kay Linn and Vicki Wilbers.

Transparency is another key to this study. The Governance Committee communicated throughout the study with the House of Delegates about the progress and plans for the study. In addition, the Board is committed to assuring that the House has all relevant information available to it. For that reason, the Board has provided the full Report of the Consultant as Appendix 1 to this report. This report, and its own appendices, provides far more detail about the data-gathering efforts, the survey and interview results, the costs of governance and

1 how our governance compares to that of other associations. Moreover, although the Board does not support  
2 every suggestion offered by the Consultant, it is important for the House to have access to the complete  
3 range of suggestions offered in the Report. In this report, the Board explains its position on each suggestion  
4 requiring House action and offers specific resolutions to implement some of them. The House, of course,  
5 may wish to consider some suggestions not embodied in resolutions from the Board. By offering the House  
6 access to the Consultant's full Report, that option remains open to the House.

7 Even a cursory review of the unofficial recap of prior governance reform efforts (found on ADA Connect in the  
8 Governance Study Library) demonstrates that progress towards change has been modest. The Board  
9 believes the process followed in this current governance study is more thorough and open than prior studies  
10 and hopes that this will help the House thoughtfully consider the proposals set forth here. In addition, as  
11 noted above, times have changed in many ways. From technology, to the pace of life, the demographics of  
12 the profession and the public, the general economic conditions and the Association's own finances,  
13 circumstances are much different today than in years past when other governance changes were considered.

14 **The Results of the Governance Study:** The most comprehensive study, the most accurate data and inputs,  
15 and the most inclusive and objective processes are all important, but mean little without results. The most  
16 important outcomes from this study will be the actions of the House in response to the Board's  
17 recommendations and in response its own deliberations. The Board believes that the Association has gained  
18 much insight and knowledge in addition to any specific action which may be undertaken.

19 Now, for the first time, the Association has reliable data concerning the costs of governance. The true costs  
20 must include staff time and compensation, as well as volunteer expenses. By carefully surveying staff, an  
21 accurate estimate of the total costs of governance has been created—approximately \$16 million annually  
22 (about \$6 million in volunteer costs and \$10 million in staff support). In addition, this figure has been broken  
23 down by governance entity, so data now exists concerning the cost of running any given council (or the  
24 House or the Board). The Board understands that effective and efficient governance is important and must  
25 be paid for. As we become more efficient and effective in our governance, there will be savings in costs. It is  
26 the governance structure that allows the Association to tap the skill, knowledge and passion of so many  
27 dedicated volunteers.

28 The cost implications associated with this report are somewhat misleading, because they reflect only those  
29 impacting the 2013 budget. Although effectiveness of governance, rather than costs, must be our primary  
30 consideration, long-term savings from some of the proposed reforms will be significant and ongoing.

31 Data has also been gathered of how other associations govern themselves and where the ADA falls on that  
32 spectrum. This comparison is not perfect, because the ADA is somewhat unique, and the data is self-  
33 reported. Those organizations who responded may have interpreted some issues differently from one  
34 another. This is particularly true with the overall costs of governance. As can be seen from the Consultant's  
35 Report, few other associations have developed as comprehensive an estimate of governance costs as has  
36 the ADA. Nevertheless, the information on other associations is valuable and will continue to serve as a  
37 valuable reference for us.

38 Indeed, the entire Report by the ADA Consultant should provide us with significant insights into who we are,  
39 how we operate, where role confusion may exist, where deficiencies exist, as well as ideas to more fully  
40 consider into the future. In short, the Board believes that the governance study is extremely valuable to the  
41 Association, even apart from the resolutions being proposed by the Board.

42 **The Board's Response on the Suggestions of the Consultants:** The ADA Consultant has provided the  
43 Association with 80 suggestions. Many of these suggestions relate to the day-to-day management of the  
44 Association and may be considered and implemented by Board or management action. Other suggestions  
45 are directed specifically to the House and would require House action to adopt. Again, because the Board is  
46 conscious of the time demands House members face, this report will address those consultant suggestions

that directly impact the House or require House action to implement. All such Consultant suggestions are included, regardless of whether they are supported by the Board.

Each Consultant suggestion will be followed with a Board response which will include one of the following:

- A proposed resolution to implement the suggestion;
- A statement that the Board intends to convene a task force or workgroup to study the suggestion further; or
- A statement explaining why the Board does not recommend adopting the suggestion.

The remaining suggestions from the Consultant Report—those which do not require House action--have been provided to the House in the Consultant's Report and will be fully considered by the Board in the coming months. Because of the Board's desire to provide this report to the House as early as possible, the Board has not yet fully studied each of these suggestions. For that reason, the Board will provide the House, through ADA Connect, a follow up report on its reactions to those other suggestions after they are studied and considered.

The Consultant's suggestions, as set forth in its Report, are numbered 1-80. For ease of reference, this report will retain the number assigned to each suggestion in the Consultant's Report (see Appendix 1).

**Westman Suggestion #11:** Undertake one of the following actions – descending order of consultant suggestions:

- Reduce the size of the House of Delegates by 50%, with that number capped similar to the number of the United States Congress.
- Reduce the size by 25% by 2014 and another 25% by 2016.
- Reduce the size by 25% by 2014, with that number capped.

*Board Response.* The Board appreciates the suggestion from the Consultant and notes that the size of the House and allocation of delegates is addressed in a separate Board report (Supplement to Report 3).

**Westman Suggestion #12:** Regardless of House of Delegates size, discontinue the practice of assigning delegates first to districts and secondarily to states. Instead allocate them to constituent state societies without consideration of district configuration:

- Minimum of two delegates per state
- Minimum of one delegate for the Air Force Dental Corps; Army Dental Corps; Navy Dental Corps; Public Health Service; and Veterans Affairs and the Virgin Islands Dental Association.
- Remaining delegates allocated bi-annually to constituent organizations based on their membership level on a defined date (e.g., six months before the House of Delegates meeting) as a percent of total ADA members. For example, if a state has 10% of total ADA members and there are 150 remaining delegate slots available, the state will receive 15 delegates in addition to the initial allocation of two delegates.

*Board Response.* The Board appreciates the suggestion from the Consultant and notes that the size of the House and allocation of delegates is addressed in a separate Board report (Supplement to Report 3).

**Westman Suggestion #13:** Reduce the number of alternate delegates to a minimum of two alternates and a maximum of one-third the delegation for those constituents with over six delegates.

*Board Response.* The Board does not agree with this suggestion. Constituent societies already have the right to send fewer alternate delegates than are permitted. This allows these constituent societies to save on expenditures if they desire to do so. Ultimately, the Board concludes that this is an issue of states' rights and sees no need for the Association to dictate a particular result.



**Westman Suggestion #14:** Establish term limits for delegates of three years, with the ability to serve two consecutive terms. The delegate could become eligible to serve again after sitting out at least one year for up to a maximum of 12 years' service as a delegate.

*Board Response.* The Board agrees that the use of term limits will allow the Association to expose more members to a leadership role and increase opportunities to enhance the diversity of leadership. The Board believes, however, the issue of term limits is best left to the discretion of the individual constituent society. As a result, the Board is simply urging constituent societies to consider the benefits of term limits based on their unique circumstances. Therefore, the Board proposes the following resolution:

**90. Resolved,** that all constituencies be urged to implement term limits for ADA delegates.

**Westman Suggestion #15:** Prohibit the filing of late resolutions after a certain date. For example, resolutions with a budget implication might require five months' notice in advance of the House of Delegates meeting, whereas other resolutions might require three months' notice.

*Board Response.* The Board appreciates the suggestion of the Consultant but notes that similar issues were previously raised by the Special Committee on Financial Affairs. The Board intends to take the Consultant's suggestion under consideration using information and ideas developed in prior years.

**Westman Suggestion #16:** Redefine the Late Resolutions Rule so that it can only be used in true emergencies, and if it has a budgetary requirement, then it would need a 2/3 vote to pass and must have a revenue source for the expenditure.

*Board Response.* The Board appreciates the suggestion of the Consultant but notes that similar issues were previously raised by the Special Committee on Financial Affairs. The Board intends to take the Consultant's suggestion under consideration using information and ideas developed in prior years.

**Westman Suggestion #17:** Establish a three-year term limit for alternate delegates. The delegate could become eligible to serve a second three-year term after sitting out at least one year for up to a maximum of six years' service as an alternate delegate.

*Board Response:* The Board agrees that the use of term limits will allow the Association to expose more members to a leadership role and increase opportunities to enhance the diversity of leadership. The Board believes, however the issue of term limits is best left to the discretion of the individual constituent society. As a result, the Board is simply urging constituent societies to consider the benefits of term limits based on their unique circumstances. Therefore, the Board proposes the following resolution:

**91. Resolved,** that all constituencies be urged to implement term limits for ADA alternate delegates.

**Westman Suggestion #18:** Set a limit of eight consecutive years for an individual to serve as the House of Delegates Speaker.

*Board Response.* The Board agrees with this suggestion and believes that some level of change at all levels of leadership is important. However, the Board concludes that eight years may be too many and believes that six years is an appropriate level of leadership change. Accordingly, the Board proposes the following:

**92. Resolved,** that the CHAPTER VIII. ELECTED OFFICERS, *Section 50. TERM OF OFFICE* of the ADA Bylaws be amended as shown below (additions underscored):

*Section 50. TERM OF OFFICE:* The President, President-elect, First Vice President, Second Vice President and Speaker of the House of Delegates shall serve for a term of one (1) year, except as otherwise provided in this chapter of the *Bylaws*, or until their successors are elected and installed. The Speaker of the House of Delegates shall be limited to six (6) terms in total, consecutive or

1 otherwise. The term of office of the Treasurer shall be three (3) years, or until a successor is elected  
2 and installed. The Treasurer shall be limited to two (2) consecutive terms of three (3) years each,  
3 excepting the case of a former Treasurer who has been elected Treasurer *pro tem* as provided in  
4 Chapter VIII, Section 30 of these *Bylaws*, who may serve one (1) additional year.

5 **Westman Suggestion #20:** Require that all new delegates participate in House of Delegates delegate  
6 orientation.

7 *Board Response.* The Board agrees with this suggestion and notes that a well-informed House of  
8 Delegates is essential to the future of the organization. However, the Board understands that situations  
9 may arise which could prevent attendance by a new delegate and does not wish to imply that failure to  
10 attend could result in disqualification. Accordingly, the Board suggests that all delegates and alternate  
11 delegates who did not serve in the House during the immediately preceding year shall attend, whenever  
12 possible, a new delegate orientation to be conducted by the Speaker of the House of Delegates prior to  
13 the convening of the first meeting of any House of Delegates session. This change will be reflected in the  
14 *Manual of the House of Delegates*.

15 **Westman Suggestion #21:** Assign accountability for council performance management to the Board of  
16 Trustees, as opposed to the House of Delegates. This includes authority to approve council budgets and their  
17 operating plans.

18 *Board Response.* The Board appreciates the suggestion of the Consultant but believes that the issue  
19 requires further study to fully understand its implications. Accordingly, following the close of the 2012  
20 House, the President shall form an *ad hoc* task force on council issues consisting of no more than seven  
21 Board and House members to further investigate this issue and to report back to the Board in time for the  
22 Board to forward recommendations to the 2013 House. Because there will be limited costs associated  
23 with this task force, the Board will propose later in this report a resolution regarding the task force and its  
24 primary charges. See Westman suggestion #31.

25 **Westman Suggestion #24:** Reduce the size of councils (*i.e.*, number of members) by establishing a system  
26 whereby appointments are rotated among the districts, with staggered terms to assure continuity from year-to-  
27 year. Note: it may be prudent to keep a representative from each district on selected entities that benefit from  
28 geographic representation (*e.g.*, Government Affairs).

29 *Board Response.* The Board appreciates the suggestion of the Consultant but believes that the issue  
30 requires further study. Accordingly, following the close of the 2012 House, the President will ask the *ad*  
31 *hoc* task force on council issues proposed elsewhere (see Westman Suggestions #21, 27 and 31) to  
32 further investigate this issue. In particular, the task force will be asked to address whether the current size  
33 of councils is best for the Association and, if not, what size would be appropriate and how restructuring  
34 would be accomplished.

35 **Westman Suggestion #26:** Create an executive committee structure for each council, as an alternative to  
36 reducing the number of members. This group would be empowered to meet face-to-face and make decisions  
37 between full council meetings. Each executive committee could be composed of half the district  
38 representatives (*e.g.*, odd numbered district representatives for two years and even numbered district  
39 representatives for the other two years). Each council member would serve two years on the executive  
40 committee and two years on the full committee.

41 *Board Response.* The Board thanks the Consultant for its suggestion but does not agree that action is  
42 needed. Any council already has the authority to take the action suggested. The Board assumes that  
43 each council has the best understanding of whether such a structure is needed to best fulfill its duties.

44 **Westman Suggestion #27:** Establish a requirement that the structure of councils and committees be  
45 reviewed for effectiveness, sun setting, consolidation, etc. every three years.

*Board Response.* The Board notes that the Association has existing policy calling for periodic review of councils and committees on a five-year cycle (118H-2002 and 119H-2002), but does not believe this policy has been effectively implemented in the past. Accordingly, following the close of the 2012 House, the President will ask the *ad hoc* task force on council issues proposed elsewhere in this report (see Westman Suggestions #21, 24 and 31) to further investigate this issue. In particular, the task force will be asked to review these existing policies and recommend changes to them as needed to better assure a thorough and objective review of existing council structure.

**Westman Suggestion #29:** Sunset the Communications Council.

*Board Response.* The Board appreciates the suggestion of the Consultant but does not agree with it. The Board feels that direct oversight of communications by a council is beneficial to the Association.

**Westman Suggestion #30:** Sunset the Council on Members Insurance and Retirement Programs.

*Board Response.* The Board appreciates the fine work of the Council on Members Insurance and Retirement Programs and applauds the dedication of every volunteer who has served on it. After carefully considering the Consultant's suggestion, the Board concludes the suggestion should be adopted. Because the council no longer acts as fiduciary of the retirement plans, its role has been diminished. Oversight of insurance and retirement plans can be shifted to the Council on Dental Practice, thereby streamlining our governance. Accordingly, the Board proposes the following resolution:

**93. Resolved,** that the Council on Members Insurance and Retirement Programs be sunset at the close of the 2013 House of Delegates;

and be it further

**Resolved,** that effective on the close of the 2013 House of Delegates, the following changes be made to the By Laws: CHAPTER X. COUNCILS, *Section 10.* NAME, of the *ADA Bylaws* be amended as follows (deletions ~~stricken through~~):

*Section 10.* NAME: The councils of this Association shall be:

Council on Access, Prevention and Interprofessional Relations

Council on ADA Sessions

Council on Communications

Council on Dental Benefit Programs

Council on Dental Education and Licensure

Council on Dental Practice

Council on Ethics, Bylaws and Judicial Affairs

Council on Government Affairs

~~Council on Members Insurance and Retirement Programs~~

Council on Membership

Council on Scientific Affairs

and be it further

**Resolved,** that effective at the close of the 2013 House of Delegates, the tenth paragraph of CHAPTER X. COUNCILS, *Section 20.* MEMBERS, SELECTIONS, NOMINATIONS AND



ELECTIONS, Subsection A. of the ADA *Bylaws* be deleted in its entirety of shown below (deletions stricken through):

~~Council on Members Insurance and Retirement Programs shall be composed of seventeen (17) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms.~~

and be it further

**Resolved**, that CHAPTER X. COUNCILS, *Section 120. DUTIES*, Subsection I. COUNCIL ON MEMBERS INSURANCE AND RETIREMENT PROGRAMS of the ADA *Bylaws* be deleted in its entirety, as shown below (deletions stricken through):

~~I. COUNCIL ON MEMBERS INSURANCE AND RETIREMENT PROGRAMS. The duties of the Council shall be to:~~

~~a. Evaluate on a continuing basis all Association sponsored insurance programs.~~

~~b. Examine and evaluate other insurance programs that might be of benefit to the membership.~~

~~c. Advise and recommend courses of action on insurance programs.~~

~~d. Assist constituent societies in matters related to insurance programs.~~

~~e. Advise and recommend courses of action on retirement programs.~~

~~f. Aid dentists in the management of their personal and professional risks through educational activities, informational programs and services.~~

and be it further

**Resolved**, that the remaining Subsections of *Section 120.* of CHAPTER X. of the ADA *Bylaws* be re-lettered accordingly, and be it further

**Resolved**, that CHAPTER X. COUNCILS, *Section 120. DUTIES*, Subsection F. COUNCIL ON DENTAL PRACTICE of the ADA *Bylaws* be amended by adding the following duties (additions underscored):

F. COUNCIL ON DENTAL PRACTICE. The duties of the Council shall be to:

a. Formulate and recommend policies relating to dental practice.

b. Study, evaluate and disseminate information concerning various forms of business organization of a dental practice, economic factors related to dental practice, practice management techniques, auxiliary utilization and dental laboratory services to the end that dentists may continue to improve services to the public.

c. Develop educational and other programs to assist dentists in improved practice management, including practice marketing materials and continuing education seminars, and to assist constituent and component societies and other dental organizations in the development of such programs so that dentists may continue to improve the delivery of their services to the public.

d. Encourage and develop satisfactory relations with the various organizations representing the dental laboratory industry and craft.

- 1 e. Formulate programs for establishing and maintaining the greatest efficiency, quality and  
2 service of the dental laboratory industry and craft in their relation to the dental profession.
- 3 f. Encourage and develop satisfactory relations with the various organizations representing dental  
4 auxiliaries.
- 5 g. Gather, formulate and disseminate information related to auxiliary utilization, management and  
6 employment practices.
- 7 h. Serve in a consultative capacity to those educational and promotional activities directed to the  
8 public and the profession and to assess their impact on dental practice.
- 9 i. Provide assistance, education and information on issues related to dentists' well being.
- 10 j. Encourage and coordinate the development and improvement of national and international  
11 standardization programs for dental informatics.
- 12 k. Oversee and evaluate on a continuing basis, advise and recommend courses of action on all  
13 Association sponsored insurance and retirement programs.

14 **Westman Suggestion #31:** Sunset the Membership Council.

15 *Board Response.* The Board appreciates the fine work of the Council on Membership and applauds the  
16 dedication of every volunteer who has served on it. After carefully considering the Consultant's  
17 suggestion, the Board concludes the suggestion requires further study to assure a proper focus on  
18 member value. Accordingly, following the close of the 2012 House, the President will ask the *ad hoc* task  
19 force on council issues proposed below to further investigate this issue.

20 In particular, that task force will be asked to review the bylaws responsibilities of the Council on  
21 Membership to better clarify the appropriate role of the council. For example, how should the council  
22 address retention and recruitment issues when those are primarily state and local issues? Should and  
23 can constituent society executive directors, being on the front lines of retention and recruitment, play a  
24 more direct role for the Association on these matters? How should the council address potentially  
25 conflicting priorities such as market share enhancement and total dues revenue which are implicated by  
26 some reduced dues member categories? How should the council fulfill its responsibilities for member  
27 benefit programs when many such programs are the responsibility of other Association agencies?

28 In order to allow fuller study of issues affecting councils raised in the Governance Report and because  
29 there is some financial implication to the operation of the task force, the Board is proposing establishment  
30 of a Board *ad hoc* task force, to include House members, to review these issues and to report back to the  
31 Board in sufficient time to allow the Board to submit a report to the 2013 House. Accordingly, the Board  
32 proposes the following resolution:

33 **94. Resolved**, that the President is urged to create an *ad hoc* task force of no more than seven members  
34 of the Board and House to investigate issues effecting councils raised in Report 3 of the Board of  
35 Trustees on the Governance Study of 2012 and to report back to the Board in time to allow the Board to  
36 report to the 2013 House, and be it further

37 **Resolved**, that the task force be charged with investigating issues raised in the Governance Report  
38 affecting Councils and, in particular, the following:

- 39 a. Whether (and how) to assign accountability for council performance management to the Board of  
40 Trustees, including explicit authority to approve council budgets and their operating plans  
41 (Westman Suggestion #21).
- 42 b. Whether the current size of councils is best for the Association and, if not, what size would be  
43 appropriate and how would that be accomplished (Westman Suggestion #24).

- 1 c. To review existing policies on periodic review of council structure and operations and recommend  
2 changes to them as needed to better assure a thorough and objective review of existing council  
3 structure (Westman Suggestion #27).  
4 d. To review the bylaws responsibilities of the Council on Membership to better clarify the  
5 appropriate role of the council. For example, how should the council address retention and  
6 recruitment issues when those are primarily state and local issues? Should and can constituent  
7 society executive directors, being on the front lines of retention and recruitment, play a more  
8 direct role for the Association on these matters? How should the council address potentially  
9 conflicting priorities such as market share enhancement and total dues revenue which are  
10 implicated by some reduced dues member categories? How should the council fulfill its  
11 responsibilities for member benefit programs when many such programs are the responsibility of  
12 other Association agencies? (Westman Suggestion #31.)

13 **Westman Suggestion #34:** Explore developing a super council on Professional Affairs by combining the  
14 Council on Dental Practice and the Council on Dental Education and Licensure.

15 *Board Response.* The Board does not believe such a combined council could be efficient or effective  
16 given the many and diverse responsibilities of these councils and thus makes no recommendations to the  
17 House concerning the suggestion.

18 **Westman Suggestion #39:** Evaluate the entire officer structure, including an analysis of responsibilities, skill  
19 requirements, and compensation. Focus leadership positions on more strategic roles and less on operations.

20 *Board Response.* The Board notes that some of the issues raised in this suggestion are being taken up  
21 by the Board's Compensation Committee and will not, therefore, be further addressed here. The Board  
22 may take up some of these issues in the future depending on the work of the Compensation Committee.

23 **Westman Suggestion #41:** Eliminate the Presidents campaign parties.

24 *Board Response.* The Board notes that the Election Commission is addressing this issue and there is no  
25 need to address it in this report.

26 **Westman Suggestion #42:** Require that all candidates for President-elect be off the Board of Trustees for at  
27 least a year.

28 *Board Response.* The Board does not agree with this suggestion and sees value in having the president-  
29 elect transition to that office directly from the Board of Trustees. Such a transition allows the incoming  
30 president-elect to be fully informed on the issues facing the Association. Moreover, the Board believes  
31 that the Association can and must rely on the integrity of those sitting Trustees who choose to pursue the  
32 Office of President-elect.

33 **Westman Suggestion #43:** Convert the President-Elect's position to part-time and reduce the compensation  
34 accordingly.

35 *Board Response.* The Board appreciates the suggestion of the Consultant but does not agree with it.  
36 First, the Board notes that its Compensation Committee is addressing the need for a formal job  
37 description for the President-elect (along with other positions). Second, the Board understands the need  
38 for an ADA President to have sufficient time to be fully prepared to assume the responsibilities of  
39 President. The current role of the President-elect provides this opportunity. In fact, the Board believes  
40 that the rigors of a full year as President-elect are essential to the success of a President's term in office  
41 as President. Third, in many ways, the President and President-elect are partners in their work for the  
42 Association. That relationship simply cannot be accomplished in a part-time capacity.

43 **Westman Suggestion #44:** Eliminate the two Vice President positions.



1 *Board Response.* Unlike the position in many state societies, the position of ADA vice president does not  
2 automatically succeed to the office of President-elect and then President. Moreover, the stated purpose  
3 of these positions, to represent the House, is in fact served by the President and President-elect, as well  
4 as the entire Board. The Board has been well served by many very able and dedicated Vice Presidents  
5 and thanks each of them for their service. Nevertheless, the Board concludes that the positions add  
6 complexity to our governance (by increasing the size of the Board and adding additional elections). The  
7 Board is recommending that this change take place at the close of the 2013 House (both to allow a  
8 smooth transition and because of the need for an amendment to the ADA Constitution).

9 Accordingly, the Board proposes the following resolutions, with the suggestion that the *Bylaws*  
10 amendments be referred back to the Board to be offered again in 2013, after the Constitutional changes  
11 are addressed by the 2013 House.

12 **95. Resolved**, that ARTICLE V. OFFICERS, *Section 10. ELECTIVE OFFICERS* of the *ADA Constitution*  
13 be amended to delete references to the First and Second Vice Presidents, as shown below (deletions  
14 ~~stricken through~~):

15 ARTICLE V. OFFICERS

16 *Section 10. ELECTIVE OFFICERS:* The elective officers of this Association shall be a President, a  
17 President-elect, ~~a First Vice President, a Second Vice President,~~ a Treasurer and a Speaker of the  
18 House of Delegates, each of whom shall be elected by the House of Delegates.

19 and be it further

20 **Resolved**, that CHAPTER VI. CONFLICT OF INTEREST of the *ADA Bylaws* be amended as follows  
21 (deletions ~~stricken through~~):

22 CHAPTER VI. CONFLICT OF INTEREST

23 It is the policy of this Association that individuals who serve in elective, appointive or employed offices  
24 or positions do so in a representative or fiduciary capacity that requires loyalty to the Association. At  
25 all times while serving in such offices or positions, these individuals shall further the interests of the  
26 Association as a whole. In addition, they shall avoid:

- 27 a. placing themselves in a position where personal or professional interests may conflict with their  
28 duty to this Association.
- 29 b. using information learned through such office or position for personal gain or advantage.
- 30 c. obtaining by a third party an improper gain or advantage.

31 As a condition for selection, each nominee, candidate and applicant shall complete a conflict of  
32 interest statement as prescribed by the Board of Trustees, disclosing any situation which might be  
33 construed as placing the individual in a position of having an interest that may conflict with his or her  
34 duty to the Association. Candidates for offices of President-elect, ~~Second Vice President,~~ Treasurer,  
35 Speaker of the House, nominees for office of trustee, and nominees to councils and commissions  
36 shall file such statements with the Secretary of the House of Delegates to be made available to the  
37 delegates prior to election. As a condition of appointment, consultants, advisers and staff of Councils,  
38 Commissions and Special Committees, and each person nominated or seeking such positions, shall  
39 file conflict of interest statements with the executive director of this Association.

40 While serving in any elective, appointive or employed office or position, the individual shall comply  
41 with the conflict of interest policy applicable to his or her office or position, shall complete and file a  
42 conflict of interest statement for each year of service, and shall promptly report any situation in which  
43 a potential conflict of interest may arise.

The Board of Trustees shall approve any additional compliance activities that will implement the requirements of this chapter. The Board of Trustees shall render a final judgment on what constitutes a conflict of interest.

and be it further

**Resolved**, that CHAPTER VII. BOARD OF TRUSTEES, *Section 10. COMPOSITION* of the ADA *Bylaws* be amended as shown below (additions underscored, deletions ~~stricken through~~):

*Section 10. COMPOSITION*: The Board of Trustees shall consist of one (1) trustee from each of the seventeen (17) trustee districts. Such seventeen (17) trustees, and the President-elect ~~and the two Vice Presidents~~ shall constitute the voting membership of the Board of Trustees. In addition, the President, the Treasurer and the Executive Director of the Association, except as otherwise provided in the *Bylaws* shall be *ex officio* members of the Board without the right to vote.

and be it further

**Resolved**, that CHAPTER VII. BOARD OF TRUSTEES, *Section 130. OFFICERS*, Subsection A. CHAIR AND SECRETARY of the ADA *Bylaws* be amended as follows (deletions ~~stricken through~~):

*Section 130. OFFICERS*:

A. CHAIR AND SECRETARY. The officers of the Board of Trustees shall be the President of the Association who shall be the Chair, and the Executive Director of the Association who shall be the Secretary.

In the absence of the President, the office of Chair shall be filled by the President-elect and, in his or her absence, by ~~the First or Second Vice President in that order and, in their absence,~~ a voting member of the Board shall be elected Chair *pro tem*.

In the absence of the Secretary, the Chair shall appoint a Secretary *pro tem*.

and be it further

**Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 10. TITLE* of the ADA *Bylaws* be amended as follows (deletions ~~stricken through~~):

*Section 10. TITLE*: The elective officers of this Association shall be President, President-elect, ~~First Vice President, Second Vice President,~~ Treasurer and Speaker of the House of Delegates, as provided in Article V of the *Constitution*.

and be it further

**Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 30. NOMINATIONS*, Subsection A. of the ADA *Bylaws*, be amended as follows (deletions ~~stricken through~~):

*Section 30. NOMINATIONS*:

A. Nominations for the offices of President-elect ~~and Second Vice President~~ shall be made in accordance with the order of business. Candidates ~~for these elective offices~~ shall be nominated from the floor of the House of Delegates by a simple declaratory statement, which may be followed by an acceptance speech not to exceed four (4) minutes by the candidate from the podium, according to the protocol established by the Speaker of the House of Delegates. Seconding a nomination is not permitted.

and be it further



1 **Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 50. TERM OF OFFICE* of the ADA  
2 *Bylaws* be amended as follows (deletions ~~stricken through~~):

3 *Section 50. TERM OF OFFICE:* The President, President-elect, ~~First Vice President, Second Vice~~  
4 ~~President~~ and Speaker of the House of Delegates shall serve for a term of one (1) year, except as  
5 otherwise provided in this chapter of the *Bylaws*, or until their successors are elected and installed.  
6 The term of office of the Treasurer shall be three (3) years, or until a successor is elected and  
7 installed. The Treasurer shall be limited to two (2) consecutive terms of three (3) years each,  
8 excepting the case of a former Treasurer who has been elected Treasurer *pro tem* as provided in  
9 Chapter VIII, Section 30 of these *Bylaws*, who may serve one (1) additional year.

10 and be it further

11 **Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 60. INSTALLATION* of the ADA *Bylaws*  
12 be amended as follows (deletions ~~stricken through~~):

13 *Section 60. INSTALLATION:* The elective officers shall be installed at the last meeting of the annual  
14 session of the House of Delegates. The President-elect shall be installed as President at the next  
15 annual session of the House following election. ~~The Second Vice President shall be installed as First~~  
16 ~~Vice President at the next annual session of the House following election.~~

17 and be it further

18 **Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 80. VACANCIES, Subsection A.*  
19 *VACANCY OF ELECTIVE OFFICE* of the ADA *Bylaws* be amended as follows (deletions ~~stricken~~  
20 ~~through~~):

21 *Section 80. VACANCIES:*

22 A. *VACANCY OF ELECTIVE OFFICE:* In the event the office of President becomes vacant, the  
23 President-elect shall become President for the unexpired portion of the term. In the event the office  
24 of President becomes vacant for the second time in the same term or at a time when the office of  
25 President-elect is also vacant, the ~~First Vice President~~ Board shall select by majority vote a sitting  
26 trustee to become President for the unexpired portion of the term. ~~In the event the office of First Vice~~  
27 ~~President becomes vacant, the Second Vice President shall become the First Vice President for the~~  
28 ~~unexpired portion of the term. A vacancy in the office of the Second Vice President shall be filled by~~  
29 ~~a majority vote of the Board of Trustees.~~ In the event of a vacancy in the office of Speaker of the  
30 House of Delegates, the President, with approval of the Board of Trustees, shall appoint a Speaker  
31 *pro tem*. In the event the office of President-elect becomes vacant by reason other than the  
32 President-elect succeeding to the office of the President earlier than the next annual session, the  
33 office of President for the ensuing year shall be filled at the next annual session of the House of  
34 Delegates in the same manner as that provided for the nomination and election of elective officers,  
35 except that the ballot shall read "President for the Ensuing Year." A vacancy in the office of  
36 Treasurer shall be filled by a majority vote of the Board of Trustees until the process of inviting  
37 applications, screening and nominating candidates and electing a new Treasurer has been  
38 completed by the Board of Trustees and the House of Delegates. The Treasurer *pro tem* shall be  
39 eligible for election to a new consecutive three (3) year term. The newly elected Treasurer shall be  
40 limited to two (2) consecutive terms of three (3) years each, excepting the case of a former  
41 Treasurer who has been elected Treasurer *pro tem* as provided in Chapter VIII, Section 30 of these  
42 *Bylaws*, who may serve one (1) additional year.

43 and be it further

44 **Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 90. DUTIES, Subsection C. FIRST VICE*  
45 *PRESIDENT* of the ADA *Bylaws* be deleted in its entirety as follows (deletions ~~stricken through~~):

1 ~~C. FIRST VICE PRESIDENT. It shall be the duty of the First Vice President to:~~

2 ~~a. Assist the President as requested.~~

3 ~~b. Serve as an ex officio member of the House of Delegates without the right to vote.~~

4 ~~c. Serve as an ex officio member of the Board of Trustees.~~

5 ~~d. Succeed to the office of President, as provided in this chapter of the Bylaws.~~

6 and be it further

7 **Resolved**, that CHAPTER VIII. ELECTIVE OFFICERS, *Section 90. DUTIES*, Subsection D. SECOND  
8 VICE PRESIDENT of the ADA *Bylaws* be deleted in its entirety as follows (deletions stricken through):

9 ~~D. SECOND VICE PRESIDENT. It shall be the duty of the Second Vice President to:~~

10 ~~a. Assist the President as requested.~~

11 ~~b. Serve as an ex officio member of the House of Delegates without the right to vote.~~

12 ~~c. Serve as an ex officio member of the Board of Trustees.~~

13 ~~d. Succeed to the office of First Vice President at the next annual session of the House of~~  
14 ~~Delegates following election as Second Vice President.~~

15 ~~e. Succeed immediately to the office of First Vice President in the event of vacancy not only for the~~  
16 ~~unexpired term but also for the succeeding term.~~

17 and be it further

18 **Resolved**, that the remaining Subsections of *Section 90.* of CHAPTER VIII. of the ADA *Bylaws* be re-  
19 lettered accordingly.

20 **Westman Suggestion #45:** As an alternative to eliminating both Vice President positions, eliminate one and  
21 convert the other to the Second in Line for President (i.e., the position ascends to President Elect and then  
22 President as a succession plan).

23 *Board Response.* The Board does not agree with this suggestion and feels that it does little to address  
24 the cost or complexity of our governance structure.

25 **Westman Suggestion #46:** Delineate the time and activities involved in Treasurers' responsibilities and  
26 assign them to one of the existing officers in the organization (e.g., President-Elect or one of the Vice  
27 Presidents).

28 *Board Response.* The Board does not agree with this suggestion. The Board and the Association have  
29 been very well served by those who have filled the role of Treasurer. In particular, the Board sees the  
30 need for an officer to be responsible for communicating with the House on financial matters.

31 **Westman Suggestion #48:** Create a new role for the Immediate Past President on the ADA Board of  
32 Trustees.

33 *Board Response.* The Board agrees that the Association does not adequately utilize the acquired  
34 expertise and experience of our immediate past presidents. Increasingly, relationships with outside  
35 organizations play a key role in the success of our Association. Allowing the immediate past president a  
36 formal role with the Association will allow the expansion of those relationships by having the immediate  
37 past president act as an ambassador for the Association. The Board anticipates that the immediate past  
38 president will need to attend several Board meetings per year to report to the Board and can be retained  
39 by the Association as a consultant, with the title of Immediate Past President, and with compensation  
40 equal to 50% of a trustee's stipend. Because the Board has the authority to retain consultants, no *Bylaws*

changes are necessary, but the Board is seeking the input of the House on this question by presenting the following resolution:

**96. Resolved**, that the House supports the retention by the Board of Trustees of the immediate past president to act as an ambassador of the Association.

**Westman Suggestion #49:** Delegate more fiduciary responsibilities to the Board of Trustees, such as approving the budget.

*Board Response.* The Board agrees with this suggestion, as it is in line with current best practices among non-profit entities. Our Consultant "strongly believes that this represents 'best practices' in Association governance" and notes that among benchmark associations the board has authority to approve the budget in more than 80% of the organization (Westman Report, appendix 1, page 35).

Development and approval of a budget is a management function best performed by a smaller body than the House of Delegates. While the Board applauds the efforts of delegates to take on the task of budget approval, the size of the House and the lack of involvement by the full House in the early stages of budget development make it impossible for all delegates to have a full understanding of the budget for an organization the size of the Association. This creates risk for the Association, by not placing those with the most complete knowledge—the Board—in a position to approve a final budget.

The Board's recommendation would allow the entire budget process to be shifted closer to the end of the preceding year, instead of commencing in March of the preceding year. By doing so, another risk to the Association will be better controlled by reducing the lag time in the current budget process. Moving the process until later in the year minimizes the risks of projection errors in the budget.

The Board is aware that the House may be reluctant to step away from this authority, but the Board believes that it is in the best interest of the Association as a whole. Moreover, under the Board's proposal, the House would retain the right to set the level of dues. Therefore, while the Board would establish a budget going into the House meeting, final approval of a budget by the Board of Trustees would await the close of the House and a decision on dues. If the House chose to set the dues at a level below that recommended by the Board, the Board would then revise its budget by managing to meet the revenue level associated with the dues as approved by the House of Delegates. In addition, if the House proposes a program with a financial consequence, the Board would consider such a request after the close of the House but before final approval of the budget. This too mitigates a risk by allowing the Board to fully consider new programs against existing programs and revenue and to make any adjustments that may be necessary in the budget. Of course, the Board would report to the House on all action taken by it in response to proposals from the House. In the Board's view, this reflects the appropriate roles of the House and the Board. Accordingly, the Board proposes the following resolutions:

**97. Resolved**, that CHAPTER V. HOUSE OF DELEGATES, *Section 50. DUTIES* of the ADA *Bylaws* be amended as follows (additions underscored, deletions ~~stricken through~~):

*Section 50. DUTIES:* It shall be the duty of the House of Delegates to:

A. Elect the elective officers.

B. Elect the members of the Board of Trustees.

C. Elect the members of the councils and commissions except as otherwise provided by these *Bylaws*.

D. Receive and act upon reports of the committees of the House of Delegates.

~~E. Adopt an annual budget and~~ E. Establish the dues of active members for the following year.



F. Serve as the court of appeal from decisions of the Council on Ethics, Bylaws and Judicial Affairs involving disputes arising between constituent societies or between constituent and component societies, and as provided in Chapter XIII of these *Bylaws*.

and be it further

**Resolved**, that CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER*, Subsection A. STANDING RULES AND REPORTS, paragraph c. APPROVAL OF THE ANNUAL BUDGET of the ADA *Bylaws* be deleted in its entirety as follows (deletions ~~stricken through~~):

A. STANDING RULES AND REPORTS.

a. REPORTS. All reports of elective officers, councils and committees, except supplemental reports, shall be sent to each delegate and alternate delegate at least fourteen (14) days in advance of the opening of the annual session. All supplemental reports shall be distributed to each delegate before such report is considered by the House of Delegates.

b. APPROPRIATION OF FUNDS. Any resolution proposing an appropriation of funds, shall be referred to the Board of Trustees for a report at the same session on the availability of funds for the purpose specified.

~~c. APPROVAL OF ANNUAL BUDGET. The proposed annual budget shall be submitted by the Board of Trustees to the members of the House of Delegates at least thirty (30) days prior to the opening meeting of the annual session, shall be referred to a special reference committee on budget for hearings at the annual session and then shall be considered for approval as a special order of business at the second meeting of the House of Delegates. In the event the budget as submitted is not approved, all recommendations for changes shall be referred to the Board of Trustees to prepare and present a revised budget. This procedure shall be repeated until a budget for the ensuing fiscal year shall be adopted.~~

and be it further

**Resolved**, that the remaining paragraphs d. through f. of CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER*, Subsection A. STANDING RULES AND REPORTS, be re-lettered as paragraphs c. through e., respectively.

and be it further

**Resolved**, that CHAPTER VII. BOARD OF TRUSTEES, *Section 100. DUTIES*, Subsection F. of the ADA *Bylaws* be amended as shown below (additions underscored, deletions ~~stricken through~~):

F. Develop, prepare and adopt a budget for carrying on the activities of the Association for each ensuing fiscal year, and present for action by each House of Delegates a resolution setting forth the proposed dues of active members for the following year. Notice of such a resolution shall be sent by a certifiable method of delivery to each constituent society not less than ninety (90) days before such session to permit prompt, adequate notice by each constituent society to its delegates and alternate delegates to the House of Delegates of this Association, and shall be announced to the general membership in an official publication of the Association at least sixty (60) days in advance of the annual session.

and be it further

**Resolved**, that the section entitled "Consideration of Budget" contained in the *Rules of the House of Delegates* be deleted in its entirety.

**Consideration of Budget**

The proposed annual budget shall be submitted to the members of the House of Delegates at least 30 days prior to the opening meeting of the annual session. In the event the proposed budget as submitted is not approved, all recommendations for changes adopted by the House of Delegates shall be referred to the Board of Trustees to prepare and present a revised, proposed budget.

Recommendations for changes shall be made in the form of fully debatable motions which shall be individually considered and acted upon by the House of Delegates. To be in order, the proper wording for such a motion must be:

"I move that the proposed budget be returned to the Board of Trustees for revision with the recommendation that..."

If any recommendations for changes in the proposed budget receive House approval, they shall be identified as House Budget Recommendation 1, House Budget Recommendation 2, etc.

House approval of any recommendations for changes automatically returns the proposed budget to the Board of Trustees for revision and subsequent resubmission to the House of Delegates for approval or further recommendations for modification. This procedure will be repeated until a preliminary budget for the ensuing fiscal year is adopted.

This preliminary budget includes all items that the Board of Trustees and House of Delegates have approved, but it remains a preliminary budget since it does not incorporate any programs that may subsequently be adopted by the House at this session which require additional funding. The final budget is established and adopted by the House of Delegates through its approval of the preliminary budget plus the changes made as a result of actions by the House of Delegates. The Board of Trustees will present this final budget, which will include the preliminary budget plus any additions made as a result of action by the House of Delegates, to the House at the last meeting of the annual session.

**Westman Suggestion #50:** To reduce the number of Trustees, decrease the number of districts to no more than seven and thereby the number of trustees. This could also impact the number of positions on councils and committees.

*Board Response.* The Board understands the Consultant's concern about the appropriate size of the Board and that reducing the number of trustee districts is one way to address that concern but does not believe it is practical to reduce the number of districts. For example, the Board is concerned that such a reduction would decrease the chances of having diverse interests represented on the Board and make it difficult for trustees in multiple-state districts to adequately engage each constituent society in the district.

**Westman Suggestion #54:** Implement a policy and guideline assuring that financial reports are certified by the Executive Director and Chief Financial Officer.

*Board Response.* The Board agrees with this practice and notes that the Association currently follows it.

**Westman Suggestion #55:** Articulate criteria for removal of Board of Trustee members from office.

*Board Response.* The Bylaws already provide the House with authority to remove a trustee for cause and, therefore, the Board does not believe further action is needed. See, CHAPTER VII. BOARD OF TRUSTEES, Section 70. REMOVAL FOR CAUSE.

**Westman Suggestion #58:** Require that all House of Delegates resolutions provide an explanation of how the purpose fits with a specific section of ADA's strategic plan and its mission.

*Board Response.* The worksheet currently used by the House of Delegates for proposed resolutions already contains an area where the appropriate strategic plan goal is listed. The Board agrees that both

the House and the Board need to remain mindful of the need to link actions with the strategic plan but does not believe any additional action is necessary.

**Westman Suggestion #59:** Assure each council utilizes the ADA strategic plan to develop an annual work plan (*i.e.*, objectives and anticipated milestones) at the start of term – focusing on how the council can address areas of the strategic plan that pertain to its charges.

*Board Response.* The Board believes that steps are already being taken to fully meet the intent behind this suggestion. For example, the Board notes that the Executive Director meets with each council to discuss the strategic plan and the new budget process emphasizes linkage to the strategic plan and also includes an enhanced role for councils.

**Westman Suggestion #61:** Require that the House of Delegates passes a balanced budget each year.

*Board Response.* The Board is proposing that authority to develop and approve the budget be moved to the Board and, if that proposal is adopted, this suggestion is moot. The Board does note that if budget authority is not placed with the Board, the Board would support this suggestion as comporting with the House's fiduciary duty to the Association.

As a contingency, the Board is proposing the following resolution. If the House approves the move of budget authority to the Board, the Board believes that the following resolution would be moot:

**98. Resolved,** that CHAPTER V. HOUSE OF DELEGATES, *Section 50. DUTIES* be amended as follows (additions underscored, deletions ~~stricken through~~):

*Section 50. DUTIES:* It shall be the duty of the House of Delegates to:

A. Elect the elective officers.

B. Elect the members of the Board of Trustees.

C. Elect the members of the councils and commissions except as otherwise provided by these *Bylaws*.

D. Receive and act upon reports of the committees of the House of Delegates.

E. Adopt an annual balanced or surplus budget and establish the dues of active members for the following year.

F. Serve as the court of appeal from decisions of the Council on Ethics, Bylaws and Judicial Affairs involving disputes arising between constituent societies or between constituent and component societies, and as provided in Chapter XIII of these *Bylaws*.

and be it further

**Resolved,** that CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER, Subsection A. STANDING RULES AND REPORTS Subsection c. APPROVAL OF ANNUAL BUDGET*, shall be amended as follows (additions underlined, deletions ~~stricken through~~):

c. APPROVAL OF ANNUAL BUDGET. ~~The A~~ proposed balanced or surplus annual budget shall be submitted by the Board of Trustees to the members of the House of Delegates at least thirty (30) days prior to the opening meeting of the annual session, shall be referred to a special reference committee on budget for hearings at the annual session and then shall be considered for approval as a special order of business at the second meeting of the House of Delegates. In the event the balanced or surplus budget as submitted is not approved, all recommendations for changes shall be referred to the Board of Trustees to prepare and present a revised balanced or surplus budget. This procedure shall be repeated until a balanced or surplus budget for the ensuing fiscal year shall be adopted.



**Westman Suggestion #63:** Require that all House of Delegates resolutions involving an expenditure of funds be held over for one year, unless a super majority (at least 2/3rds) seeks an immediate vote.

*Board Response.* The Board is reluctant to tie the hands of the House and therefore does not support this suggestion. The Board does note that should the House approve placing budget authority with the Board the suggestion would be moot because the House would then be urging the Board to expend funds and it would be incumbent on the Board to identify appropriate funding sources.

**Westman Suggestion #64:** Establish a goal that ADA's financial reserves grow by at least 2% annually until it reaches 50% of the operating budget.

*Board Response.* This suggestion is being addressed in a separate resolution from the Board and is not otherwise addressed in this report.

**Westman Suggestion #65:** Change the ADA Bylaws to enable a 30-day notice to members of a dues increase.

*Board Response.* The Board agrees with this suggestion and believes it will bring better order to the current budgeting process. Currently, the Board is at times forced to propose a specific dues increase in the absence of a final proposed budget. A 30 day period would eliminate that issue. Moreover, the Board notes that the existing 90 day requirement appears to be premised on the use of certified mail, a practice which no longer seems to be necessary. Accordingly, in addition to a change in the time period, the Board is proposing a change in the required manner of communication. The Board also proposes to carry over the modifications in the time period to the requirement of notice to the general membership. Finally, to be consistent, the Board is recommending a parallel change to the Bylaws provisions governing notice in the procedure for changing the dues of active members and in proposing special assessments. Accordingly, the Board proposes the following resolution:

**99. Resolved,** that CHAPTER VII. BOARD OF TRUSTEES, *Section 100. DUTIES*, Subsection F. of the ADA Bylaws be amended as follows (additions underscored, deletions ~~stricken through~~):

F. Prepare a budget for carrying on the activities of the Association for each ensuing fiscal year, and present for action by each House of Delegates a resolution setting forth the proposed dues of active members for the following year. Notice of such a resolution shall be sent electronically by a certifiable method of delivery to each constituent society and posted on ADA Connect or its equivalent for the House of Delegates not less than ~~ninety (90)~~ thirty (30) days before such session to permit prompt, adequate notice by each constituent society to its delegates and alternate delegates to the House of Delegates of this Association, and shall be announced to the general membership in an official publication of the Association at least ~~sixty (60)~~ fifteen (15) days in advance of the annual session.

and be it further

**Resolved,** that CHAPTER XVIII. FINANCES, *Section 40. SPECIAL ASSESSMENTS* of the ADA Bylaws be amended as follows:

*Section 40. SPECIAL ASSESSMENTS:* In addition to the payment of dues required in Chapter I, Section 20 of these Bylaws, a special assessment may be levied by the House of Delegates upon active, active life, retired and associate members of this Association as provided in Chapter I, Section 20 of these Bylaws, for the purpose of funding a specific project of limited duration. Such an assessment may be levied at any annual or special session of the House of Delegates by a two-thirds (2/3) affirmative vote of the delegates present and voting, provided notice of the proposed assessment has been presented in ~~writing~~ at least ~~ninety (90)~~ thirty (30) days prior to the first day of the session of the House of Delegates at which it is to be considered. Notice of such a resolution shall be sent ~~by a certifiable method of delivery electronically~~ to each constituent society and posted on ADA Connect or its equivalent for the House of Delegates not less than ~~ninety (90)~~ thirty (30) days

before such session to permit prompt, adequate notice by each constituent society to its delegates and alternate delegates to the House of Delegates of this Association, and shall be announced to the general membership in an official publication of this Association at least ~~sixty (60)~~ fifteen (15) days in advance of the session. The specific project to be funded by the proposed assessment, the time frame of the project, and the amount and duration of the proposed assessment shall be clearly presented in giving notice to the members of this Association. Revenue from a special assessment and any earnings thereon shall be deposited in a separate fund as provided in Chapter XVII, Section 30 of these *Bylaws*. The House of Delegates may amend the main motion to levy a special assessment only if the amendment is germane and adopted by a two-thirds (2/3) affirmative vote of the delegates present and voting. The House of Delegates may consider only one (1) specific project to be funded by a proposed assessment at a time. However, if properly adopted by the House of Delegates, two (2) or more special assessments may be in force at the same time. Any resolution to levy a special assessment that does not meet the notice requirements set forth in the previous paragraph also may be adopted by a unanimous vote of the House of Delegates, provided the resolution has been presented in writing at a previous meeting of the same session

and be it further

**Resolved**, that CHAPTER XXII. AMENDMENTS, *Section 20. AMENDMENT AFFECTING THE PROCEDURE FOR CHANGING THE DUES OF ACTIVE MEMBERS* be amended as follows (additions underscored, deletions ~~stricken through~~):

*Section 20. AMENDMENT AFFECTING THE PROCEDURE FOR CHANGING THE DUES OF ACTIVE MEMBERS:* An amendment of these *Bylaws* affecting the procedure for changing the dues of active members may be adopted only if the proposed amendment has been presented in writing at least ~~ninety (90)~~ thirty (30) days prior to the first day of the session of the House of Delegates at which it is to be considered. Notice of such a resolution shall be sent electronically by a certifiable method of delivery to each constituent society not less than ~~ninety (90)~~ thirty (30) days before such session to permit prompt, adequate notice by each constituent society to its delegates and alternate delegates to the House of Delegates of this Association, and shall be announced to the general membership in an official publication of the Association at least ~~sixty (60)~~ fifteen (15) days in advance of the annual session.

Amendments affecting the procedure for changing the dues of active members may also be adopted by a unanimous vote provided that the proposed amendment has been presented in writing at a previous meeting of the same session.

**Westman Suggestion #67:** Increase liaison relationships with the Hispanic Dental Association, National Dental Association, and the Society for American Indian Dentists. This could include designating a non-voting delegate position to be selected by these three organizations in the House of Delegates and/or a rotating non-voting seat on the Board of Trustees.

*Board Response.* The Board fully supports enhancing the Association's relationship with these organizations but does not support the specific suggestions for several reasons. As a preliminary matter, the Board notes that relationships with these organizations already exist. For example, our president engages in quarterly phone calls with the leaders of these organizations and, this year, each organization participated in a group meeting of leaders. The Board is concerned about limiting a special relationship to only these organizations and is concerned that other organizations would be excluded from the formal House and Board roles proposed here. For all of these reasons, the Board believes it needs to continue its efforts to enhance the relationship with these organizations but does not propose any resolution for action by the House.



**Westman Suggestion #70:** Establish student and new dentist slots, either voting or non-voting, on all or selected councils and committees, accompanied by transitioning the New Dentist Committee to a community of interest – consisting of each new dentist representative on the councils.

*Board Response.* The Board appreciates the concern about the complexity of our governance structure but believes that the Association needs to do more, not less, to assure the voice of the new dentist is heard. The Board strongly believes that its New Dentist Committee has been both effective and valuable for the Association. For that reason, the Board does not support this suggestion.

**Westman Suggestion #76:** Assure that all governance operations are largely paperless by the end of 2013.

*Board Response.* This issue is the subject of a separate resolution from the Board and is not, therefore, otherwise addressed in this report.

**Westman Suggestion #80:** Continue to undertake a compensation review for all governance positions receiving stipends and make adjustments according to prevailing market conditions and commensurate to the work involved.

*Board Response.* This issue is the subject of a separate resolution from the Board and is not, therefore, otherwise addressed in this report.

The Board of Trustees presents the following resolutions for consideration by the 2012 ADA House of Delegates.

#### Resolutions

(Resolution 90; Worksheet:7022)  
(Resolution 91; Worksheet:7023)  
(Resolution 92; Worksheet:7024)  
(Resolution 93; Worksheet:7025)  
(Resolution 94; Worksheet:7028)  
(Resolution 95; Worksheet:7030)  
(Resolution 96; Worksheet:7035)  
(Resolution 97; Worksheet:7037)  
(Resolution 98; Worksheet:7040)  
(Resolution 99; Worksheet:7042)

**BOARD RECOMMENDATION: Vote Yes to Transmit.**

# American Dental Association

## GOVERNANCE REVIEW

**Final Report  
July, 2012**

***This Report Was Prepared By:***

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# Project Overview

## ***Project Background***

The ADA has periodically undertaken independent reviews of its governance structure and operations to help assure it is meeting the needs and expectations of various stakeholders in an efficient and effective manner.

The last such review was completed over five years ago. Since that time there have been numerous changes impacting the ADA, including the hiring of a new executive director, the deleterious effects of a long-lasting economic downturn, increased availability and utilization of technology, and the promulgation of new ideas and thoughts relative to association governance (e.g., the book *Race for Relevance: 5 Radical Changes for Associations*). Given these changes, and the passage of time, the ADA House of Delegates (HOD) commissioned this governance review in October, 2011, with a request that the review be completed in time for thorough consideration at the 2012 HOD meeting.

## ***Project Objective and Desired Outcomes***

The ADA's overall objective was to develop recommendations of new models of governance process, including roles and responsibilities, communication, accountability and structures, to sustain future ADA success. This included the following specific desired outcomes:

<ul style="list-style-type: none"> <li>To improve the ADA's ability to function effectively as a member-based association with a focus on the mission, vision, and goals of the association</li> </ul>	<ul style="list-style-type: none"> <li>To clarify the roles of the HOD, Board of Trustees (BOT), and other affiliated work groups (councils, commissions, and task forces) to enable each unit to fulfill its defined function</li> </ul>
<ul style="list-style-type: none"> <li>To allow for more efficient and strategic use of its human and financial resources in order to better serve the needs of ADA member dentists</li> </ul>	<ul style="list-style-type: none"> <li>To identify weaknesses and inefficiencies in the current governance structure and recommend changes in governance structure</li> </ul>
<ul style="list-style-type: none"> <li>To reduce duplication of efforts between governing entities</li> </ul>	<ul style="list-style-type: none"> <li>To reduce the cost of governing the association</li> </ul>
<ul style="list-style-type: none"> <li>To address the size of the HOD and appropriate allocation of delegates</li> </ul>	



# Project Overview

## *Project Methodology*

Westman & Associates (W&A) has utilized a multi-faceted work plan to attain the project goal, vision, and objectives. In addition to undertaking the following specific work steps through May 31, 2012, W&A interacted with ADA staff, the Governance Committee, and a HOD Advisory Group throughout the course of its work to fine-tune project methodology, review key findings, and discuss possible future directions:

**Step 1 – Collected and Reviewed Documentation:** We collected and reviewed a wide array of documentation pertaining to the ADA, its governance structure and operations.

**Step 2 – Create a Communications Plan:** We collaborated with ADA representatives on a plan with the following communications goals:

- To share information with key people to keep them “in the loop” regarding the governance project and its progress, assuring transparency.
- To involve key leaders throughout the organization to create input, thought and discussions – looking at ADA governance with fresh eyes to see ways to improve, become more effective and/or efficient.
- To communicate preliminary and final results to the designated groups in ways/media that will make the most sense to them.
- To plan, produce and deliver a training program for volunteer leaders to help them understand, and explain the results of, the recommendations to their constituencies

Highlights of communications activities included and completed thus far:

- Bi-weekly progress status meetings with the Governance Committee.
- Interaction on a regular basis with a HOD Advisory Group regarding project progress – considering their input on various issues.
- Facilitation of status meetings (initially weekly and subsequently bi-weekly) involving W&A consultants and ADA staff.
- Three monthly e-memos to-date, with more planned over the next several months.
- Responding to questions posed on ADA Connect.



# Project Overview

## *Project Methodology (continued)*

### **Step 3 – Conducted Key Stakeholder Interviews:** We conducted:

- 24 in-person interviews with Board of Trustee Officers and members.
- Three focus groups involving ADA staff leaders.
- 48 telephone interviews with council and commission chairs and representatives of:
  - American Dental Political Action Committee
  - American Student Dental Association
  - HOD delegates
  - New Dentist Committee
  - State dental associations

These dialogues provided the consulting team with a historical perspective of ADA governance, including perceived strengths and weaknesses. We also elicited ideas for improving the governance structure and operations. Detailed results from these dialogues are presented in an appendix to this report.

### **Step 4 – Undertook Governance Administration Resource Analysis:** We undertook a multi-prong approach to analyze the current cost of governance at the ADA. Specifically, we:

- Analyzed the ADA's budget and actual results for the most recently completed fiscal year to ascertain and categorize expenses directly attributable to organizational governance.
- Administered a survey instrument to over 180 staff involved with organizational governance to ascertain how much time they spend supporting governance entities and undertaking specific governance support activities. The resulting time estimates were extended by fully burdened compensation hourly rates to arrive at staff expense totals for supporting ADA governance and various governance entities. Detailed results from this survey are presented in an appendix to this report.
- Compared the cost of governance at the ADA with data gleaned from the benchmarking survey (step 6).

# Project Overview



## *Project Methodology (continued)*

**Step 5 – Surveyed Volunteer Leaders and Key Staff:** We designed and administered an internet survey to elicit input on the ADA's governance structure and operations from all relevant stakeholders – as identified in consultation with ADA representatives. Over 1,400 ADA volunteer leaders and staff were invited to participate in the process, and 701 (nearly 50%) subsequently responded. Detailed survey results are presented in an appendix to this report.

**Step 6 – Benchmarked Comparable Associations:** We referenced W&A's database of over 1,100 associations to identify associations to include in a benchmarking initiative. Working closely with ADA representatives, we customized and administered two versions of a survey instrument to elicit feedback covering a broad array of governance topics. The "short" version included governance topics that were deemed to be highest priority by the ADA and W&A. A longer version included a much more comprehensive set of questions. Going into the process, we were pessimistic that any organization would complete the long survey version. However, we were pleasantly surprised that nine associations indeed completed the long version, and an additional 11 associations completed the short version. Detailed survey results are presented in an appendix to this report.

**Step 7 – Prepared Preliminary Report:** We prepared this report, which summarizes key findings and conclusions from all data gathering initiatives, as well as 80 suggestions for enhancing the effectiveness, efficiency, and cost efficacy of ADA governance.

**Step 8 – Facilitated a Key Stakeholders Meeting:** We convened a full-day in-person meeting with selected ADA leaders to discuss key suggestions in the preliminary report and set the stage for the Governance Committee and BOT finalizing resolutions for HOD action. This meeting included over 35 representatives from ADA governance entities (e.g., Board, House of Delegates, and councils), with each participant given the opportunity to provide feedback on all topical areas.

**Step 9 – Prepared and Submitted this Final Report:** We incorporated results from the Stakeholders Meeting in this report and made other changes based on feedback received relative to the preliminary report.



# Project Overview

## ***Report Organization***

In constructing this report, we have purposely conveyed all of our suggestions upfront for easy identification and reference (i.e., sections 2 and 3). The bulk of this report contains a series of appendices, with each one detailing the results of our core data gathering methodology. Nearly every suggestion contained in this report resulted from, or is supported by, data from one or more of these methodologies. The appendices contain a wealth of additional data that could serve as the basis for discussion and additional action for years to come. We encourage all HOD delegates to thoroughly review their contents during the course of considering the suggestions that we subsequently present.

## ***Summary Comments***

Taken as a whole, the W&A consulting team believes this governance review represents one of the most comprehensive such reviews ever undertaken on behalf of an association – certainly the most intensive and participatory process that any of the consulting team members have been associated with in over 40 years of cumulative consulting experience. This includes feedback from:

- Over 80 volunteer leaders and staff during the interview and focus group process.
- Over 180 staff in completion of a comprehensive resource analysis.
- Over 700 members in completing a detailed survey instrument.
- 20 associations in completing a benchmarking survey.
- Nearly 40 ADA leaders during a Key Stakeholders meeting.

This level of participation will hopefully serve to lend credibility to the process and set the stage for serious consideration of suggested enhancements to the ADA governance structure and operations.



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# Executive Summary

## *Overview*

As previously indicated, the consulting team utilized a variety of data gathering methodologies to complete this project (i.e., documentation review, interviews, resource analysis, leadership survey, and benchmarking). All of these were useful in gaining an understanding of ADA governance and opportunities for improvement.

Based on these methodologies, and our independent assessment, it is clear that ADA is a well-respected, high functioning organization with multiple strengths to build upon. Specific governance strengths identified by numerous ADA stakeholders include:

- The tri-partite system.
- Membership involvement at all levels (i.e., participation by rank and file members).
- Improved working relationships between the HOD, BOT, and staff.

Although these strengths should certainly be acknowledged and built upon, governance assessments such as this one invariably raise a number of concerns and ideas associated with improving efficiency, effectiveness, and cost efficacy.

Of the 80 suggestions W&A presents in this report, following are the ones W&A believes will have the most impact in addressing the ADA's desired project outcomes highlighted on page 2. Further commentary providing rationale for each suggestion appears in the subsequent report section.

# Executive Summary



## Key Suggestions

#	Suggestion	Target Implementation
9	Establish a short-term task force to enhance communications between various governance entities (i.e., appropriate vehicles, formats, and frequencies).	By end of 2015
11	<p>Undertake one of the following actions – descending order of consultant suggestions:</p> <ul style="list-style-type: none"> <li>• Reduce the size of the HOD by 50%, with that number capped similar to the number of the United States Congress.</li> <li>• Reduce the size by 25% by 2014 and another 25% by 2016.</li> <li>• Reduce the size by 25% by 2014, with that number capped.</li> </ul>	2013
12	<p>Regardless of HOD size, discontinue the practice of assigning delegates first to districts and secondarily to states. Instead allocate them to constituent state societies without consideration of district configuration:</p> <ul style="list-style-type: none"> <li>• Minimum of two delegates per state</li> <li>• Minimum of one delegate for the Air Force Dental Corps, Army Dental Corps, Navy Dental Corps, Public Health Services, the Department of Veteran Affairs, and the Virgin Islands Dental Association</li> <li>• Remaining delegates allocated bi-annually to constituent organizations based on their membership level on a defined date (e.g., six months before the HOD meeting) as a percent of total ADA members. For example, if a state has 10% of total ADA members and there are 150 remaining delegate slots available, the state will receive 15 delegates in addition to the initial allocation of two delegates.</li> </ul>	By end of 2015
13	Reduce the number of alternate delegates to a minimum of two alternates and a maximum of one-third the delegation for those constituents with over six delegates.	2013

# Executive Summary



## Key Suggestions (continued)

#	Suggestion	Target Implementation
14	Establish term limits for delegates of three years, with the ability to serve two consecutive terms. The delegate could become eligible to serve again after sitting out at least one year for up to a maximum of 12 years' service as a delegate.	2013
15, 16	Prohibit the filing of late resolutions after a certain date. For example, resolutions with a budget implication might require five months' notice in advance of the HOD meeting, whereas other resolutions might require three months' notice.  As an option, redefine the Late Resolution rule so that it can only be used in true emergencies , and if it has a budgetary requirement, then it would need a 2/3 vote to pass and must have a revenue source for the expenditure.	By end of 2015
21	Assign accountability for council performance management to the BOT, as opposed to the HOD. This includes authority to approve council budgets and their operating plans.	By end of 2015
22	Take a fresh look at the council committee structure – evaluating the type of committees, short-term task forces or work groups required to meet council charters and goals. Ask questions like "Is this what the members need now?" "Is this what the dental profession needs now and three years from now?" "Is there a better way to accomplish this same goal?" Then implement the structural changes accordingly.  This could result in: <ul style="list-style-type: none"> <li>• Sunsetting certain entities.</li> <li>• Converting selected councils or committees into short-term, specific purpose work groups with a definite timeline.</li> <li>• Determining the expertise and skill base required of each committee.</li> </ul>	2013

# Executive Summary



## Key Suggestions (continued)

#	Suggestion	Target Implementation
23	Form a task force charged with thoroughly reviewing each council and committee relative to finding ways to reduce the time spent by volunteers in council or committee work by 25% This can be done by identifying tasks more appropriately handled by staff or which are not contributing to the charter, strategy or goals.	By end of 2015
24	Reduce the size of councils (i.e., number of members) by establishing a system whereby appointments are rotated among the districts, with staggered terms to assure continuity from year-to-year. Note: it may be prudent to keep a representative from each district on selected entities that benefit from geographic representation (e.g., Government Affairs).	By end of 2015
25	Reduce the size of committees and task forces/work groups.	By end of 2015
28	Focus on using small short-term, skill-based task forces with narrow foci to address key issues – as opposed to relying on continuing councils or committees.	2013
29	Sunset the Communications Council.	2013
30	Sunset the Council on Members Insurance & Retirement Programs.	2013
35	Create an Inter-Governance Committee that includes all council chairs, vice chairs, and a BOT representative to share information across all governance entities.	2013
39	Evaluate the entire officer structure, including an analysis of responsibilities, skill requirements, and compensation. Focus leadership positions on more strategic roles and less on operations.	2013



# Executive Summary

## Key Suggestions (continued)

#	Suggestion	Target Implementation
42	Require that all candidates for President-Elect be off the BOT for at least a year.	By end of 2015
44	Eliminate the two Vice President positions.	2013
46	Delineate the time and activities involved in Treasurer responsibilities and assign them to one of the existing officers in the organization (e.g., President-Elect or one of the Vice Presidents).	2013
49	Delegate more fiduciary responsibilities to the BOT, such as approving the budget.	By end of 2015
50	To reduce the number of Trustees, decrease the number of districts to no more than seven and thereby the number of trustees. This could also impact the number of positions on councils and committees.	By end of 2015
51	Establish an Executive Committee with a defined role and scope – composed of the: <ul style="list-style-type: none"> <li>• President</li> <li>• President-Elect</li> <li>• Vice President (assuming this position remains)</li> <li>• Chairs of the Audit, Budget and Finance, and Governance committees</li> <li>• Treasurer (assuming this position remains)</li> <li>• Executive Director</li> </ul>	By end of 2015

# Executive Summary



## Key Suggestions (continued)

#	Suggestion	Target Implementation
56	Enhance education provided to all members of governance entities regarding the strategic plan (i.e., the mission, vision) through orientation sessions.	By end of 2015
58	Require that all HOD resolutions provide an explanation of how the purpose fits with a specific section of ADA's strategic plan and its mission.	By end of 2015
61	Require that the HOD passes a balanced budget each year.	2013
62	Educate the constituents and delegates of the requirement to identify a funding mechanism for all HOD resolutions involving an expenditure of funds.	2013
71	Utilize telephonic and/or web-based meetings to a greater extent for all governance entities, with a goal of reducing the number of face-to-face meetings at least 25% by fiscal year 2014 and 50% by fiscal year 2016.	2013
72	Appoint a short term task force with specific expertise and representation from each segment of the governance structure (i.e., HOD, BOT, councils, committees, and constituents) to review and recommend how ADA Connect can be utilized to a great extent to streamline governance activities, reduce governance expense, and increase communication, information sharing, and user-friendliness.	2013

# Executive Summary



## Key Suggestions (continued)

#	Suggestion	Target Implementation
76	Assure that all governance operations are largely paperless by the end of 2013.	By end of 2015
78	<p>Create a Governance Coordinator position in the staff organization reporting to the Chief of Governance and Strategy Management. Specific responsibilities would include:</p> <ul style="list-style-type: none"> <li>Assuring all governance entities are involved in and aware of strategic plan development and implementation.</li> <li>Maintaining a database of all governance entities and coordinating efforts to assure ongoing communications, self-evaluations, updating of operations manuals and job descriptions for governance entity positions, establishing and monitoring charges, etc.</li> <li>Preparing and updating operations manuals for key governance entities, including job descriptions and committee charges.</li> <li>Coordinating activity on ADA Connect for governance entities.</li> </ul>	By end of 2015
80	Continue to undertake a compensation review for all governance positions receiving stipends and make adjustments according to prevailing market conditions and commensurate to the work involved.	2013



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# Detailed Suggestions and Commentary

## Overview

During the course of our work, W&A identified numerous concerns pertaining to ADA governance and suggestions for improvement. In this report section we have accumulated and organized suggestions, along with supporting commentary, in the following sections:

- |                                     |                         |
|-------------------------------------|-------------------------|
| 1. Overall Governance Effectiveness | 7. Financial Management |
| 2. House of Delegates               | 8. Diversity            |
| 3. Councils/Committees              | 9. Technology           |
| 4. Board of Trustees - Officers     | 10. Staff Support       |
| 5. Board of Trustees – Other        | 11. Other               |
| 6. Strategic Planning               |                         |

Each suggestion has also been assigned one or more of the following codes, which correspond with specific desired project outputs identified by the ADA within the original request-for-proposal:

1. Improves ADA's ability to function effectively as a member-based association with a focus on ADA's mission, vision and goals.
2. Allows for more strategic and efficient use of human resources to better serve member needs.
3. Clarifies the roles of the HOD, BOT, and their affiliated work groups (councils, commissions and task forces) to enable each unit to fulfill its defined function.
4. Reduces duplication of efforts between governing units.
5. Addresses weaknesses and inefficiencies in the current governance structure.
6. Reduces the cost of governing the association.
7. Addresses the size of the HOD and the appropriate allocation of delegates.
8. Increases diversity and involvement in governance entities.
9. Other



# Detailed Suggestions and Commentary

## Overall Governance Effectiveness

Suggestion/Commentary	Code (1)
<p><b>Suggestion #1:</b> Determine the specific competencies/skills in high-level knowledge and understanding that are needed for all governance positions -- asking “what does the governance entity need in terms of talent and knowledge?” Use these competencies/skills to select candidates for positions in various governance entities. Keep this competency/skills listing in an operations manual for that entity.</p> <p><b>Commentary:</b> This will result in significant improvement in the quality of engagement for the volunteer. There was considerable interest in ADA basing its volunteer selection process on skills and expertise required. Interviewees indicated that council members are often chosen based on personalities and politics, or as rewards for long service at the state level. In the leadership survey, up to 85% indicated strong support for volunteers to have competencies and skills required for the position. Even though competency/skill matrices have been previously developed and communicated, they apparently are frequently ignored.</p> <p>Many benchmark associations have developed competency/skill profiles for their officer positions:</p> <ul style="list-style-type: none"> <li>• 35% of benchmark associations for the President position.</li> <li>• 45% of benchmark associations for the President-Elect position.</li> <li>• 33% of benchmark associations for the Treasurer position.</li> <li>• 47% of benchmark associations for the Director position.</li> </ul> <p>The same holds true for committees within benchmark associations:</p> <ul style="list-style-type: none"> <li>• One-third of benchmark associations require that members of their Finance Committee demonstrate specific skills/competencies.</li> <li>• Nearly 50% of benchmark associations require that members of their Audit Committee demonstrate specific skills/competencies.</li> </ul>	1,2,3,5
<p><b>Suggestion #2:</b> Develop and utilize job descriptions for governance positions (e.g., BOT officers and trustees, council and committee chairs, and delegates) based on competency and skill profiles. Keep these job descriptions in an operations manual for that entity.</p> <p><b>Commentary:</b> This is a “best practice” that W&amp;A perceives would be of benefit to the ADA. Such descriptions could be useful in justifying compensation levels paid to ADA officers and trustees. Of benchmark associations:</p> <ul style="list-style-type: none"> <li>• 80% have job descriptions for the President and President-Elect positions.</li> <li>• 100% have a job description for the Treasurer position.</li> <li>• Nearly 80% have a job description for the BOT director position.</li> <li>• 60% have a job description for the HOD delegate position.</li> </ul>	1,2,3,4,5



# Detailed Suggestions and Commentary

## Overall Governance Effectiveness (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #3:</u> Develop a database of ADA members who have expressed interest in serving in various leadership capacities – including the skills, competencies, and skills they can offer.</p> <p><u>Commentary:</u> Many associations invite interested members to complete an electronic form, with leaders subsequently drawing upon the database to select appropriate members for committees and task forces. It is especially useful in identifying “new” talent that may lead to increased diversity.</p>	1,2,5
<p><u>Suggestion #4:</u> Reevaluate the volunteer leader orientation program(s) to make sure it covers structure, functions, roles, protocols, parliamentary process, HOD operations, council operations, etc.</p> <p><u>Commentary:</u> Responses to the leadership survey strongly recommended that the orientation packet be expanded. There were also suggestions in interviews to expand the new delegate orientation program to get them up to speed on the issues and HOD practices Some segments from the BOT training could be used, as well as video segments.</p>	1,3,5
<p><u>Suggestion #5:</u> Establish written/recorded committee-specific orientation programs.</p> <p><u>Commentary:</u> This would minimize staff time associated with coaching and training each new committee member. Many associations have gone down this path. For example, approximately 50% of benchmark associations have orientation programs for members of their Finance and Audit committees. This type of orientation will give the volunteers more knowledge of the organization, staff, policies and procedures and make them more effective leaders.</p>	1,3,5



# Detailed Suggestions and Commentary

## Overall Governance Effectiveness (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #6:</u> Establish a mentoring program for all appointed and elected positions, similar to what the BOT currently employs. This would involve identifying knowledgeable members who are willing to work with a new council, commission, or committee member, HOD delegate or alternate delegate, and other volunteers. For example, “Senior” leaders could mentor “Freshman” leaders. Create either a written or web based training on how to be a mentor that would be required for each new mentor.</p> <p><u>Commentary:</u> The leadership survey asked “what additional information would have made you more effective in your leadership role?” The most frequent response was for ADA to develop a mentoring program to mentor, guide, and educate new volunteers on the organization. Interviewees suggested the implementation of a mentoring program featuring senior trustees.</p>	1,2,3,5
<p><u>Suggestion #7:</u> Collaborate with and learn from districts and states that have a strong reputation for leadership development to fine-tune leadership training at the national level.</p> <p><u>Commentary:</u> Leadership survey responses praised state and district training efforts. This is an excellent opportunity for a cooperative effort with constituent societies and districts.</p>	1,2,5
<p><u>Suggestion #8:</u> Create an operations/procedures manual for councils and their committees that covers all governance issues such as their charters, how meetings are run, how agendas are set, how they address their budgets, how to relate their work to the strategic plan, how they choose their Chairs &amp; Vice Chairs and job descriptions for the Chair and Vice Chair. Seek to have consistency between each entity in these procedures. This can be used as part of the orientation package for each new council or committee member, as well as for daily operational practices.</p> <p><u>Commentary:</u> Currently, each of the councils and committees is run differently. This manual will assure consistency in the volunteer experience and operations. It is important to have all processes and procedures documented for ease of reference on ADA Connect or elsewhere. The American Society of Association Executives has example operations manuals as a frame of reference.</p>	1,2,3,5



# Detailed Suggestions and Commentary

## Overall Governance Effectiveness (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #9:</u> Establish a short-term task force to enhance communications between various governance entities (i.e., appropriate vehicles, formats, and frequencies).</p> <p><u>Commentary:</u> 49% of respondents to the leadership survey indicated the BOT provides too little information regarding their activities, decisions made, etc. 48% of respondents indicated councils provide too little information, and 53% indicated committees provide too little. The most frequent comment about how to eliminate duplication of the governance entities was “increase communications between councils.”</p>	1,2,3,4 ,5
<p><u>Suggestion #10:</u> Educate ADA leaders and general members on the cost of governance at ADA and how it compares with other associations. This should be a metric ADA monitors, looking at measures like cost of governance per member.</p> <p><u>Commentary:</u> Such education will hopefully create a mindset and sense of urgency in making changes to reduce the cost of governance and divert the savings to more mission-specific endeavors. Specifically, the median benchmark association cost of governance was calculated to be \$1,709,090 – 4.3% of the median association actual revenues. ADA’s cost of governance was calculated to be \$16,466,505 – nearly 15% of revenue (see report section 6 for details). Although not necessarily an apples to apples comparison, even under the most generous assumptions ADA appears to spend considerably more on governance than its peers.</p>	6



# Detailed Suggestions and Commentary

## House of Delegates Suggestions

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #11:</u> Undertake one of the following actions – descending order of consultant suggestions:</p> <ul style="list-style-type: none"> <li>• Reduce the size of the HOD by 50%, with that number capped similar to the number of the United States Congress.</li> <li>• Reduce the size by 25% by 2014 and another 25% by 2016.</li> <li>• Reduce the size by 25% by 2014, with that number capped.</li> </ul> <p><u>Commentary:</u> A smaller delegate contingent would significantly reduce expenses at the state society level, enable individual delegates to be more engaged in decision-making, and theoretically will make the HOD more nimble. The current size of the HOD also disenfranchises delegates because debates go on too long and questions are called before many get a chance to speak.</p> <p>Leadership survey responses indicated that 43% fully support and 22% may support reducing the number of delegates, while only 20% leaned against or were strongly against. Written responses to “how many delegates should there be in the House” resulted in the most frequent suggestion being to cut the size in half, and numerical responses recommended 250-300 delegates. Benchmarking data also confirm that the ADA’s HOD is larger than most similar associations; the median benchmark association had 215 delegates.</p>	1,5,6,7
<p><u>Suggestion #12:</u> Regardless of HOD size, discontinue the practice of assigning delegates first to districts and secondarily to states. Instead allocate them to constituent state societies without consideration of district configuration:</p> <ul style="list-style-type: none"> <li>• Minimum of two delegates per state</li> <li>• Minimum of one delegate for the Air Force Dental Corps, Army Dental Corps, Navy Dental Corps, Public Health Services, the Department of Veteran Affairs, and the Virgin Islands Dental Association</li> <li>• Remaining delegates allocated bi-annually to constituent organizations based on their membership level on a defined date (e.g., six months before the HOD meeting) as a percent of total ADA members. For example, if a state has 10% of total ADA members and there are 150 remaining delegate slots available, the state will receive 15 delegates in addition to the initial allocation of two delegates.</li> </ul> <p><u>Commentary:</u> Given the current structure of districts, states with roughly equivalent numbers of ADA members are allocated different numbers of delegates. The suggested approach results in a more equitable distribution of delegates across state organizations. Based on W&amp;A first-hand experience with another HOD, the suggested approach also serves to motivate state organizations to recruit members in order to keep or increase the number of delegate slots available to them – especially during the months preceding the cutoff date for determining delegate levels.</p>	1,7



# Detailed Suggestions and Commentary

## House of Delegates Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #13:</u> Reduce the number of alternate delegates to a minimum of two alternates and a maximum of one-third the delegation for those constituents with over six delegates.</p> <p><u>Commentary:</u> There appears to be significant support for reducing the number of alternate delegates from both interviews and the leadership survey. Over 75% of respondents – 51% fully supporting and 25% may support – recommended reducing the number of alternate delegates. 18% suggested reducing the number to 21-30% and 31% said 31-50%.</p>	1,5,6,7
<p><u>Suggestion #14:</u> Establish term limits for delegates of three years, with the ability to serve two consecutive terms. The delegate could become eligible to serve again after sitting out at least one year for up to a maximum of 12 years' service as a delegate.</p> <p><u>Commentary:</u> This will enable greater numbers of members to serve as leaders of the organization. Additionally, it will allow more opportunities for diversity in delegates, rather than having one delegate serve 20 or more years.</p> <p>There was great support for term limits in the leadership survey and interviews. 64% of survey respondents supported term limits – 36% fully supported and 28% may support. The average number of years suggested ranged from 6-10, with the average being 7.5 years. Interviewees suggested that after a term limit has been met, delegates should sit out a year and then be eligible for an additional two years. Several benchmark associations have term limits for delegates.</p>	1,2,5,7,8
<p><u>Suggestion #15:</u> Prohibit the filing of late resolutions after a certain date. For example, resolutions with a budget implication might require five months' notice in advance of the HOD meeting, whereas other resolutions might require three months' notice.</p> <p><u>Commentary:</u> This suggestion assumes the HOD maintains the ability to approve resolutions that have a budgetary impact. Late resolutions can result in additional funding requests that have not gone through the universal criteria and Decision Lens analysis of other projects. Many interviewees were concerned about the HOD taking action on late resolutions that results in a deficit budget. This provision would allow additional time and cost analysis in order for the HOD to give it full consideration. The leadership survey showed that 81% fully support or may support a requirement that the ADA HOD approve a balanced budget, which would require this type of a provision.</p>	5.9





# Detailed Suggestions and Commentary

## House of Delegates Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #16:</u> Redefine the Late Resolutions Rule so that it can only be used in true emergencies, and if it has a budgetary requirement, then it would need a 2/3 vote to pass and must have a revenue source for the expenditure.</p> <p><u>Commentary:</u> Late resolutions have often resulted in expenses being approved outside of the proposed budget, which presents the problem of a deficit budget for ADA. Elements of this suggestion were offered by numerous interviewees. This would limit the number of late resolutions and minimize the chances of a deficit budget.</p>	1,3,5
<p><u>Suggestion #17:</u> Establish a three-year term limit for alternate delegates. The delegate could become eligible to serve a second three-year term after sitting out at least one year for up to a maximum of 6 years' service as an alternate delegate.</p> <p><u>Commentary:</u> There is support for this based on interviews and the leadership survey. 57% of respondents to the survey indicated they will or may support term limits for alternates, while only 24% lean or are strongly against and 19% are undecided or need more information. Many interviewees commented that alternates should move up to become a full delegate or discontinue service after a set number of years. The survey suggested that the total number of years a volunteer should serve as an alternate is from 6-10. The six year suggestion allows more turnover and opens opportunities for more members to serve.</p>	5,6,7
<p><u>Suggestion #18:</u> Set a limit of eight consecutive years for an individual to serve as the HOD Speaker.</p> <p><u>Commentary:</u> Many interviewees suggested that ADA should establish a term limit for the Speaker. The benchmarking survey indicated that 64% of respondents have term limits for the Speaker. The 75<sup>th</sup> percentile for years in the term is three, with the maximum being six. The leadership survey indicated that 71% either fully support or may support speaker term limits, with the suggested number of years being four to six and six being the most frequent term suggested.</p>	1,5,8



# Detailed Suggestions and Commentary

## House of Delegates Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #19:</u> Engage a parliamentarian to support the Speaker during HOD meetings.</p> <p><u>Commentary:</u> Half of all benchmark associations have a professional parliamentarian present during all HOD deliberations. Mr. Westman has personally experienced the benefits of having a parliamentarian facilitate difficult HOD dialogues.</p>	1,5
<p><u>Suggestion #20:</u> Require that all new delegates participate in HOD delegate orientation.</p> <p><u>Commentary:</u> Over 20% of benchmark associations have such a requirement. This would be a best practices process that would benefit the ADA.</p>	1,2,3,5



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #21:</u> Assign accountability for council performance management to the BOT, as opposed to the HOD. This includes authority to approve council budgets and their operating plans.</p> <p><u>Commentary</u> The BOT is better positioned to monitor and manage performance of the councils throughout the year. Because the HOD doesn't have the time to oversee councils, it is hard to monitor and to assure they are focused and making progress on their goals. W&amp;A realizes this would mean a change in the by-laws, but it is important to have an active governance oversight entity over the councils. The HOD is only in session a few days each year with a focus on reviewing new resolutions – not overseeing councils.</p>	1,3,5
<p><u>Suggestion #22:</u> Take a fresh look at the council committee structure – evaluating the type of committees, short-term task forces or work groups required to meet council charters and goals. Ask questions like "Is this what the members need now?" "Is this what the dental profession needs now and three years from now?" "Is there a better way to accomplish this same goal?" Then implement the structural changes accordingly.</p> <p>This could result in:</p> <ul style="list-style-type: none"> <li>• Sunsetting certain entities.</li> <li>• Converting selected councils or committees into short-term, specific purpose work groups with a definite timeline.</li> <li>• Determining the expertise and skill base required of each committee.</li> </ul> <p><u>Commentary:</u> Quoting from the Race For Relevance, "Decide how many committees you really need. Before redesigning your committee's function, conduct a zero-based assessment of the current committees. Analyze their performance and contributions. Sunset the marginal groups. It makes no sense to redesign a committee structure that you don't need and is not a good use of your resources."</p> <p>Specific to ADA, the council and committee structure has grown considerably over the years. The median benchmark association has 27 committees (other than Executive, Finance, Audit, Governance, and Nominating) and 10 task forces/work groups. ADA has approximately 130 such entities.</p> <p>Numerous interviewees commented that the committee structure has grown considerably over the years and merits re-evaluation. Taking a zero-based approach would allow councils to review their charges and determine the specific role they could and should serve as part of the ADA.</p>	1,2,3,5



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #23:</u> Form a task force charged with thoroughly reviewing each council and committee relative to finding ways to reduce the time spent by volunteers in council or committee work by 25% This can be done by identifying tasks more appropriately handled by staff or which are not contributing to the charter, strategy or goals.</p> <p><u>Commentary:</u> Benchmarking data indicate that many ADA governance entity members spend much more time on the business of the association than do their peers in benchmark associations. It was estimated that annually:</p> <ul style="list-style-type: none"> <li>• The Chair of ADA's Finance Committee devotes 120 hours to his/her role, whereas the median for benchmark associations was 93 hours.</li> <li>• The Chair of ADA's Audit Committee devotes 120 hours to his/her role, whereas the median for benchmark associations was 40 hours.</li> <li>• Remaining ADA Audit Committee members devote 72 hours each to their roles, whereas the median for benchmark associations was 40 hours.</li> <li>• The Chair of ADA's Governance Committee devotes 55 hours to his/her, whereas the median for benchmark associations was 40 hours.</li> <li>• Remaining ADA Governance Committee members devote 55 hours each to their roles, whereas the median for benchmark associations was 25 hours.</li> </ul> <p>The ADA committees correspondingly tend to have more meetings and meeting time annually than their peers at benchmark associations. For example, the ADA budgets 19 hours of Audit Committee meeting time annually, whereas the median for benchmark associations was 5 hours.</p>	1,2,3,4 ,5,6
<p><u>Suggestion #24:</u> Reduce the size of councils (i.e., number of members) by establishing a system whereby appointments are rotated among the districts, with staggered terms to assure continuity from year-to-year. Note: it may be prudent to keep a representative from each district on selected entities that benefit from geographic representation (e.g., Government Affairs).</p> <p><u>Commentary:</u> The median number of council members for benchmark associations is 11. Most ADA councils are currently structured with 17 members appointed by districts. There was support for reducing the number of council members in both interviews and the leadership survey. Survey respondents indicated that 21% fully support and 34% may support reducing the number of council members, while 17% lean against and 13% are strongly against it. The survey also indicated that 30% supported reducing the number of council members by reducing the number of districts, and 38% for rotating district representation on councils.</p>	2,6



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code (1)
<p><u>Suggestion #25:</u> Reduce the size of committees and task forces/work groups.</p> <p><u>Commentary:</u> Comments were made in a number of interviews about the size of committees and task forces and that they do not need as many volunteers as have been involved</p> <p>Data from benchmark associations indicate:</p> <ul style="list-style-type: none"> <li>• The median Finance Committee has 7 members, whereas ADA has 8.</li> <li>• The median Audit Committee has 5 members, whereas ADA has 8.</li> <li>• The median Governance Committee has 9 members, whereas ADA as 10.</li> <li>• The median for other committees is 10 members, whereas ADA typically has more than that.</li> <li>• The median for task forces/work groups is 8 members, whereas ADA typically has more than that.</li> </ul>	2,6
<p><u>Suggestion #26:</u> Create an executive committee structure for each council, as an alternative to reducing the number of members. This group would be empowered to meet face-to-face and make decisions between full council meetings. Each executive committee could be composed of half the district representatives (e.g., odd numbered district representatives for two years and even numbered district representatives for the other two years). Each council member would serve two years on the executive committee and two years on the full committee.</p> <p><u>Commentary:</u> This structure would allow face-to-face meetings to be only for the executive committee, substantially reducing costs. Each council would hold one or two executive committee meetings per year (face-to-face) and one or two full council meetings (electronically). Additionally, the council's executive committee could meet via phone when fast response is needed to an issue.</p>	2,6
<p><u>Suggestion #27:</u> Establish a requirement that the structure of councils and committees be reviewed for effectiveness, sun setting, consolidation, etc. every three years.</p> <p><u>Commentary:</u> The median number of councils for benchmark associations is 6 versus 11 for the ADA. There was strong support in the leadership survey for this suggestion, with 95% either fully supporting or may support. This could include a self-assessment/ evaluation every three years – utilizing ADA's Decision Now process or a survey tool offered by an external organization like Board Source. Or, in order to keep this from being staff and volunteer intensive, it could be a simple self-assessment process to include a review of each entity's charges, where it fits in the strategic plan and its effectiveness in implementing those areas, and the extent to which it is in line with the budget.</p>	1,2,3,5



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code (1)
<p><u>Suggestion #28:</u> Focus on using small short-term, skill-based task forces with narrow foci to address key issues – as opposed to relying on continuing councils or committees.</p> <p><u>Commentary</u> There was widespread support for skill-based expertise on committees, task forces and virtually all leadership positions. Structuring the committees, task forces and work groups in this manner will open the door for increased involvement of members at the constituent level. Since many will be short-term projects, it will allow a larger number of volunteers to be utilized and will be based on their skill sets. Then they can stay focused on meeting their goal and celebrate the achievement when it is complete. Additionally, younger generations have shown a preference for shorter-term commitments, and task forces will provide that alternative. This will help ensure involvement of a key segment of the membership, which are the future leaders of ADA.</p>	1,2,3,5,6
<p><u>Suggestion #29:</u> Sunset the Communications Council.</p> <p><u>Commentary:</u> The Cost of Governance analysis undertaken by W&amp;A indicates over \$340,000 of expense is associated with this council. Council functions are mainly staff oriented and do not merit the need or expense of council involvement. The council could be eliminated and a smaller BOT communications committee could be established for oversight of communications initiatives undertaken by staff. Council members should be appreciated for what they have accomplished and be allowed to sunset their operation. The new committee could meet largely electronically to review and discuss branding and marketing initiatives. Interviewees and leadership survey narrative responses ranked the Communications Council as one that should be eliminated.</p>	1,2,5,6
<p><u>Suggestion #30:</u> Sunset the Council on Members Insurance &amp; Retirement Programs.</p> <p><u>Commentary:</u> The Cost of Governance analysis undertaken by W&amp;A indicates over \$175,000 of expense is associated with this council. The function of this council is mainly staff oriented and does not merit the need or expense of being a council. This council received very low ratings in the leadership survey; less than 50% ranked it effective, and it received the most suggestions for elimination of any council.</p>	1,2,5,6



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #31:</u> Sunset the Membership Council.</p> <p><u>Commentary:</u> The Cost of Governance analysis undertaken by W&amp;A indicates over \$487,000 of expense is associated with this council. The function of this council is mainly staff oriented and does not merit the need or expense of being a council. The leadership survey narrative responses ranked the Membership Council as one that should most likely be eliminated. If situations develop that require input or analysis, a task force or ad hoc committee could be utilized and could include constituent society executive directors and officers who are on the front lines of the membership.</p>	2,4,5,6
<p><u>Suggestion #32:</u> Sunset the Information Technology Committee.</p> <p><u>Commentary</u> The Cost of Governance analysis undertaken by W&amp;A indicates over \$14,000 of expense is associated with this committee. Interview comments noted the committee is staff focused and should not be a standing committee. The work of this committee is a board management oversight responsibility and can best be undertaken by staff, specific councils or task forces that might need to address technology issues. It is unusual to have a technology committee as a standing committee.</p>	2,4,5,6
<p><u>Suggestion #33:</u> Sunset the Diversity Committee and instead rely on a short-term (i.e., six months to one year) Diversity Task Force to include members with specific expertise. The Task Force would be charged with:</p> <ul style="list-style-type: none"> <li>• Reviewing data concerning the growth of diversification – women, minorities, new dentists, etc. – in ADA governance and how it can be improved.</li> <li>• Recommending what relationship ADA should have with the Hispanic Dental Association, National Dental Association, and Society of American Indian Dentists.</li> <li>• Evaluating the Diversity Institute (i.e., leadership development training) and its role in enhancing diversity development.</li> <li>• Developing “best practices” recruiting strategies to recommend to states.</li> </ul> <p><u>Commentary</u> The Cost of Governance analysis undertaken by W&amp;A indicates over \$155,000 of expense is associated with this committee. While interviewees expressed a strong desire to address diversity issues, the Diversity Committee in its present form is not perceived as efficient or effective. Interviewees and leadership survey narrative comments suggested diversity efforts should include term limits for the HOD, involvement of women in the volunteer structure, recruitment of targeted minorities, and encouragement for states to appoint minorities in delegate and leadership positions, and targeting younger dentists and students. A task force composed of a broad range of volunteers – to include women, minorities and new dentists – could effectively address these issues in a short timeframe. Future needs for such a task force would be on an as needed basis.</p>	2,5,8



# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #34:</u> Explore developing a super council on Professional Affairs by combining the Council on Dental Practice and the Council on Dental Education and Licensure.</p> <p><u>Commentary:</u> A number of narrative comments in the leadership survey suggested combining councils such as the Council on Dental Practice, the Council on Dental Education and Licensure, and possibly the Council on Dental Benefits.</p>	1,2,4,6
<p><u>Suggestion #35:</u> Create an Inter-Governance Committee that includes all council chairs, vice chairs, and a BOT representative to share information across all governance entities.</p> <p><u>Commentary</u> There was considerable support for this concept in interviews. Lack of communications between councils and committees was frequently mentioned, and the creation of such a group was well received. Such a committee would facilitate such communication through periodic conference calls, sharing of information during the annual or other ADA meetings, a list serve for council chairs and vice chairs, etc. In the leadership survey, when asked how to eliminate duplication in councils, the number one response was “increase communications between councils.” This committee could help to accomplish that purpose.</p>	1,2,3,4
<p><u>Suggestion #36:</u> Assure each council receives a briefing between October and February regarding the upcoming year’s goals and plans for their council by the executive director and/or a board representative. Consideration could be given to combining this meeting with the board’s planning meeting.</p> <p><u>Commentary:</u> The leadership survey clearly documented that volunteers desire more orientation to make them more effective in their roles. Interviewees pointed out that new council members may not have the knowledge and background of the council, its activities and especially how it fits in the coming year’s strategic plan, the budget for the respective year, etc. An electronic webinar or teleconference to brief all council members would be effective. Alternatively, written documents could be produced to address these areas.</p>	1,2,3,4





# Detailed Suggestions and Commentary

## Councils & Committees Suggestions (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #37:</u> Establish a process to examine the agendas associated with all or selected council and committee meetings – identifying possible opportunities for minimizing on-site meeting time. This could be completed by a short-term task force or may be more effectively addressed by staff. This could be coordinated electronically.</p> <p><u>Commentary</u> Several interviewees indicated that significant time is spent during meetings on informational items (e.g., staff updates) that could instead be addressed before or in-between meetings via electronic reports. The council agenda items should focus more on group idea generation, strategizing, and decision-making, rather than reviewing reports. Such an initiative may result in many councils and committees decreasing the total days spent meeting on-site, along with associated expenses.</p>	1,2,4,5
<p><u>Suggestion #38:</u> Evaluate the feasibility of certain meetings being held on weekend days versus week days.</p> <p><u>Commentary</u> Survey results indicate a majority of volunteers would prefer to meet over the weekend. However, it could be costly when staff overtime and commitments are factored into conducting these meetings, and may lead to undesirable staff turnover. This should be reviewed and discussed internally.</p>	2,5



# Detailed Suggestions and Commentary

## Board of Trustees - Officers

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #39:</u> Evaluate the entire officer structure, including an analysis of responsibilities, skill requirements, and compensation. Focus leadership positions on more strategic roles and less on operations.</p> <p><u>Commentary:</u> There were many comments in interviews that the leadership – from officers to the BOT to councils – should be more focused on strategic issues and less on operations. Interviewees and leadership survey respondents correspondingly indicated considerable support for changing the officer structure. This could be taken on a step-by-step basis by utilizing the suggestions in this report or as a specific project of a short term task force charged with reviewing and proposing resolutions to implement the changes impacting officers.</p> <p>There are specific suggestions in this review that would make the officer structure much more effective and allow leadership to focus on strategic issues. This includes the positions of president-elect, vice presidents and treasurer.</p> <p>ADA member leaders spend considerably more time in their roles than do their peers in other associations. For example, it was estimated that the ADA:</p> <ul style="list-style-type: none"> <li>• President works full-time in the role, whereas the median benchmark association President works only half-time in the role.</li> <li>• President-Elect works full-time in the role, whereas the median benchmark association President-Elect spends only 260 hours in the role.</li> <li>• Treasurer works nearly half-time in the role, whereas the median benchmark association Treasurer spends only 260 hours in the role.</li> </ul>	1,2,5,6
<p><u>Suggestion #40:</u> Provide more formal training to the President prior to assuming his/her duties on meeting agenda development, facilitation, conflict resolutions skills, etc.</p> <p><u>Commentary:</u> This is a best practice that would benefit the ADA and the president. Several excellent training programs are offered by the American Society of Association Executives and Board Source. Individual coaching could also be considered. ASAE conducts an effective Chief Elected Officer Symposium that is very valuable for the upcoming President and the Executive Director.</p>	1,2,5



# Detailed Suggestions and Commentary

## Board of Trustees – Officers (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #41:</u> Eliminate the Presidents Campaign parties.</p> <p><u>Commentary:</u> This should result in a significant cost reduction. Many of the interviewees indicated the Presidents parties are excessively expensive, and that they did little to sway votes from one candidate to another. As an alternative, consider replacing the parties with a candidate's forum, with HOD delegates given the opportunity to hear all candidates speak and address questions side-by-side.</p>	6
<p><u>Suggestion #42:</u> Require that all candidates for President-Elect be off the BOT for at least a year.</p> <p><u>Commentary:</u> Numerous interviewees indicated that when current BOT members run for this office it creates a conflict of interest situation and may inappropriately influence their votes on key issues. The leadership survey responses were split on this suggestion, as 45% either fully supported or may support the requirement and 35% were either leaning against or strongly against, with 17% undecided.</p>	5
<p><u>Suggestion #43:</u> Convert the President-Elect's position to part-time and reduce the compensation accordingly.</p> <p><u>Commentary:</u> Interviewees indicated a lack of understanding for the need of a full time president-elect. It does not appear that the current responsibilities merit this requirement. Compensation for this position significantly exceeds the benchmark average and could be reduced to be more in line with the time required by the position.</p>	2,4,5
<p><u>Suggestion #44:</u> Eliminate the two Vice President positions.</p> <p><u>Commentary:</u> The original purpose has been served, and communications/relations between the HOD and BOT are much better. The position responsibilities are minimal and do not add to the skill base of the BOT.</p> <p>There was strong support for this based on interview and leadership survey feedback, as well as benchmarking data. 56% of leadership survey respondents either fully support or may support eliminating one or both vice presidents, while 27% were leaning against or strongly against.</p>	2,5,6



# Detailed Suggestions and Commentary

## Board of Trustees – Officers (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #45:</u> As an alternative to eliminating both Vice President positions, eliminate one and convert the other to the Second in Line for President (i.e., the position ascends to President Elect and then President as a succession plan).</p> <p><u>Commentary:</u> This would give the newly elected officer a three-year commitment to serve in the officer structure. This additional year on the BOT would be important if the ADA implements a policy that existing BOT members cannot run for the President-Elect position, as it would give the individual two years as an active BOT member before becoming President.</p>	1,2,5,6
<p><u>Suggestion #46:</u> Delineate the time and activities involved in Treasurer responsibilities and assign them to one of the existing officers in the organization (e.g., President-Elect or one of the Vice Presidents).</p> <p><u>Commentary:</u> Fiscal responsibilities should be defined as maintaining a thorough knowledge of the ADA budget process and finances, responsibility for communicating those areas to all governance entities and the membership, and working closely with the ADA CFO and the Budget and Finance Committee to oversee finances of the organization.</p> <p>It appears that many of the Treasurer's current financial responsibilities are coordinated by staff, and given there are separate chairs of the Budget and Audit Committee and Finance Committee this position has minimal fiduciary responsibility. The compensation paid to this position is very high compared to other benchmark associations.</p>	2,4,5,6
<p><u>Suggestion #47:</u> Eliminate the Speaker's participation on the BOT.</p> <p><u>Commentary:</u> As noted previously, the size of the ADA BOT is large, based on best practices in association governance. There were numerous comments in interviews that the ADA BOT is too large. W&amp;A perceives it is unusual for associations to have their HOD Speaker serve on the BOT, unless the incumbent also serves in another board capacity. For example, in many associations the President serves in the dual role of HOD Speaker.</p>	2,3,6
<p><u>Suggestion #48:</u> Create a new role for the Immediate Past President on the ADA BOT.</p> <p><u>Commentary:</u> The continuity provided by having the immediate past president serve on the BOT for one additional year is very valuable. This includes an important role in mentoring new BOT members, strategic planning, international relations etc. Nearly 75% of benchmark associations have a defined role for this position. Over 80% of those with such a position have defined a job description, with a median stipend of \$3,350. On average, Immediate Past Presidents spent 275 hours annually in the role.</p>	1,5



# Detailed Suggestions and Commentary

## Board of Trustees - Other

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #49:</u> Delegate more fiduciary responsibilities to the BOT, such as approving the budget.</p> <p><u>Commentary:</u> W&amp;A strongly believes that this represents “best practice” in association governance. The HOD meets infrequently, is large/cumbersome, and members simply do not have the requisite time, knowledge, and expertise to undertake the budgeting role effectively – especially for an organization as large and complex as ADA.</p> <p>Most associations have come to realize that the HOD is not in the best position to undertake key fiduciary responsibilities. Of benchmark associations, the BOT has been delegated authority to approve the association’s budget by more than 80% of respondents.</p> <p>In the leadership survey, 54% either fully supported or may support transferring budget authority to the Board.</p>	1,2,3,5 ,6
<p><u>Suggestion #50:</u> To reduce the number of Trustees, decrease the number of districts to no more than seven and thereby the number of trustees. This could also impact the number of positions on councils and committees.</p> <p><u>Commentary:</u> Although a number of associations utilize districts for the assignment of governance positions, it is rare to have so many districts identified (i.e., 17). The current configuration is viewed by many as inequitable given the variance of ADA members per district. A lesser number of districts would make it easier to construct districts of similar size and to rebalance districts as necessary. Although nearly half of leadership survey respondents opposed reducing the number of districts, more than 50% were either supportive or would consider such a change based on more information. For those supporting a reduction in the number of districts, the majority suggested a range of 5-10 districts.</p>	2,6,7

Based on interview and leadership survey data, W&A realizes there may not be enough support to implement the above suggestion. In that event, we recommend consideration of Suggestion 51.



# Detailed Suggestions and Commentary

## Board of Trustees – Other (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #51:</u> Establish an Executive Committee with a defined role and scope – composed of the:</p> <ul style="list-style-type: none"> <li>• President</li> <li>• President-Elect</li> <li>• Vice President (assuming this position remains)</li> <li>• Chairs of the Audit, Budget and Finance, and Governance committees</li> <li>• Treasurer (assuming this position remains)</li> <li>• Executive Director</li> </ul> <p><u>Commentary:</u> Over 75% of benchmark associations currently utilize an Executive Committee. Such committees typically have four to seven members, meet in-person between two and six times annually, and participate in an additional three to 12 teleconferences annually.</p> <p>Utilization of an Executive Committee should result in a need for fewer BOT meetings and/or fewer meeting days at each meeting. Currently the ADA BOT meets for approximately 216 hours annually, whereas the median benchmark association board met only 80 hours annually.</p>	1,2,3,6
<p><u>Suggestion #52:</u> Decrease the number of BOT meetings, assuming establishment of an Executive Committee.</p> <p><u>Commentary:</u> The full BOT would only need to meet three times per year (minimum required by current bylaws) and the Executive Committee would meet at other times as required. This would substantially reduce BOT expenses and time commitments and thus would require less financial reimbursement for time.</p>	2,4,6



# Detailed Suggestions and Commentary

## Board of Trustees – Other (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #53:</u> Clarify the BOT's role and responsibilities with emphasis on the need to focus more on strategic issues and less on day-to-day management. This would include adopting the following guidelines for the BOT:</p> <ul style="list-style-type: none"> <li>• Responsible for governing the association by setting broad policies and objectives, ensuring that the association has adequate resources and guiding the association in the best interests of the association.</li> <li>• Assumes major responsibility for organizational planning by developing, implementing and measuring progress on the strategic plan, including determining the organization's mission and purpose.</li> <li>• Assures that other governance entities align with the mission and goals of the organization.</li> <li>• Approves, monitors, and enhances programs and services.</li> <li>• Ensures legal and ethical integrity and maintains accountability.</li> <li>• Does not inject itself into administrative decisions and management operations.</li> <li>• Allows the Executive Director and staff to be responsible for running the association in a way that meets the objectives established by the BOT.</li> </ul> <p><u>Commentary:</u> Concern was expressed during the interview process that the BOT spends too much time and effort on day-to-operations and redoing work undertaken by other governance entities. Organizations operate most effectively when the BOT focuses on strategic direction and less on administrative details. The BOT should monitor its focus on strategic issues through its planning process and by establishing measurements of the success of the plan as part of the development process. These measurements should be reviewed and discussed at every BOT meeting.</p> <p>Interviewees also indicated strong support for all governance entities increasing their knowledge of the strategic plan and incorporating it into their responsibilities. The BOT should take the lead in implementing and measuring the plan by working with these entities. If they have not already done so, the BOT may find it valuable to read "<i>Race for Relevance</i>."</p>	1,2,5
<p><u>Suggestion #54:</u> Implement a policy and guideline assuring that financial reports are certified by the Executive Director and Chief Financial Officer</p> <p><u>Commentary:</u> This is a requirement under Sarbanes Oxley, and even though not mandated of associations, it represents a best practice. 80% of benchmark associations have such a policy.</p>	5
<p><u>Suggestion #55:</u> Articulate criteria for removal of BOT members from office.</p> <p><u>Commentary:</u> Although hopefully such criteria will not be needed, having them in place is a prudent practice. Over 60% of benchmark associations have such criteria defined.</p>	5



# Detailed Suggestions and Commentary

## Strategic Planning

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #56:</u> Enhance education provided to all members of governance entities regarding the strategic plan (i.e., the mission, vision) through orientation sessions.</p> <p><u>Commentary:</u> The strategic plan should serve as the primary guide for all ADA governance entities. Many interviewees and leadership survey respondents perceive the plan needs to be better communicated and referenced to a greater extent in ongoing governance operations. This could include speaking about the plan at caucuses, state meetings, etc. to drive an understanding of what the ADA is trying to accomplish with the strategic plan.</p>	1,2,5
<p><u>Suggestion #57:</u> Facilitate increased education efforts to increase awareness of the strategic plan through opportunities such as a webinar education session with delegates, through ADA Connect or during orientation opportunities.</p> <p><u>Commentary:</u> Interviewees indicated strong support and interest in the ADA strategic plan, but very limited knowledge of what it says and how it is used. This would be a first step to increasing awareness of the plan.</p>	1,2,5
<p><u>Suggestion #58:</u> Require that all HOD resolutions provide an explanation of how the purpose fits with a specific section of ADA's strategic plan and its mission.</p> <p><u>Commentary:</u> Interviewees strongly supported having HOD resolutions clarify how the action would fit into and help to implement the strategic plan. ADA should require such a provision in every resolution.</p>	1,,2





# Detailed Suggestions and Commentary

## Strategic Planning (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #59:</u> Assure each council utilizes the ADA strategic plan to develop an annual work plan (i.e., objectives and anticipated milestones) at the start of term – focusing on how the council can address areas of the strategic plan that pertain to its charges.</p> <p><u>Commentary:</u> 40% of benchmark associations have such a requirement. It was reported that some councils develop plans which are at odds/cross purposes with ADA's strategic plan. It is important that the entire organization focus its efforts on implementing the ADA strategic plan versus each governance entity developing its own separate goals and objectives. The Decision Lens program may be applicable for this process. A standardized work plan template should be developed and used for all councils.</p>	1,2,3,4
<p><u>Suggestion #60:</u> Continue to enhance ties between the ADA's strategic plan and budget.</p> <p><u>Commentary:</u> It is important for the strategic plan and mission to guide the activities of the organization. The strategic plan should be developed in a timeframe that allows ADA to utilize it as the guide to develop the proposed budget for the organization. ADA has made strides in this area and should continue to make sure that every new initiative fits in the mission and is tied to a plan strategy and objective.</p>	1,2,



# Detailed Suggestions and Commentary

## Financial Management

Suggestion/Commentary	Code (1)
<p><u>Suggestion #61:</u> Require that the HOD passes a balanced budget each year.</p> <p><u>Commentary:</u> Concern was expressed in many interviews about the HOD approving resolutions that resulted in a deficit budget. The leadership survey showed that 81% either fully supported or may support a requirement that the HOD approve a balanced budget. Only 9% were leaning against or strongly against it.</p>	1
<p><u>Suggestion #62:</u> Educate the constituents and delegates of the requirement to identify a funding mechanism for all HOD resolutions involving an expenditure of funds.</p> <p><u>Commentary:</u> There was considerable frustration expressed in interviews about the HOD approving resolutions with funding requirements that were not analyzed as part of or using the same criteria as the budget process. This points to a need for additional education and greater enforcement of this requirement.</p>	1
<p><u>Suggestion #63:</u> Require that all HOD resolutions involving an expenditure of funds be held over for one year, unless a super majority (at least 2/3rds) seeks an immediate vote.</p> <p><u>Commentary:</u> This would minimize the amount of adjustments made by the HOD to the budget – limiting them to items that have a broad level of support. It would facilitate appropriate consideration of other resolutions during the subsequent year's budgeting process. Nearly 50% of leadership survey respondents indicated either fully support or may support such a requirement.</p>	1,2



# Detailed Suggestions and Commentary

## Financial Management (continued)

Suggestion/Commentary	Code (1)
<p><u>Suggestion #64:</u> Establish a goal that ADA's financial reserves grow by at least 2% annually until it reaches 50% of the operating budget.</p> <p><u>Commentary:</u> There is no clear definition of a best practice for reserve levels in associations. However, the majority of associations strive for a level that is 50% of its annual operating budget; many pursue a higher level. It is in ADA's best interest to strive to meet this level by committing to use income every year to build the reserve level.</p>	1
<p><u>Suggestion #65:</u> Change the ADA bylaws to enable a 30-day notice to members of a dues increase.</p> <p><u>Commentary:</u> The current requirement is to provide a 90-day notice prior to the HOD meeting. This means a notice must go out before the BOT has agreed on the budget that will be presented to the HOD. As a result, the dues adjustment requested may not be in line with revenue needs ultimately identified through the budget process. Given the speed of communications enabled by technology, such a lengthy notice period is not as necessary as it was previously. Reducing the time would allow the BOT to have a final budget proposed before needing to propose a dues increase.</p>	1,5



# Detailed Suggestions and Commentary

## Diversity

Suggestion/Commentary	Code (1)
<p><u>Suggestion #66:</u> Encourage districts and states to cultivate diversity in volunteers, promote opportunities for women to become involved in organized dentistry, recruit targeted minorities, and target younger dentists and dental schools</p> <p><u>Commentary:</u> The leadership survey indicated only 46% believe the ADA is effective at incorporating diversity. Interviewees expressed concern regarding a lack of diversity -- younger dentists, females, minorities, etc. -- in the governance of ADA. Some of the problems noted are that minorities are attracted to their ethnically based specialty associations, young dentists find it difficult to become involved in a volunteer role and women are not actively recruited. Responses also made it clear they do not favor a “mandated” appointment or “slot” in order to increase diversity. They indicated the most important role of the ADA is to educate all segments about the importance of a diverse volunteer population.</p>	1,2,8
<p><u>Suggestion #67:</u> Increase liaison relationships with the Hispanic Dental Association, National Dental Association, and the Society for American Indian Dentists. This could include designating a non-voting delegate position to be selected by these three organizations in the HOD and/or a rotating non-voting seat on the BOT.</p> <p><u>Commentary:</u> This provides an opportunity to add a diversity voice to both the HOD and BOT. This practice was encouraged and noted in a number of interviews. The groups referenced above were specifically mentioned in interviews as being opportunities for collaboration on diversity. They have reportedly worked together to create an organized structure for the three associations.</p>	1,2,8
<p><u>Suggestion #68:</u> Develop a tool kit that constituents can utilize to implement diversity training programs.</p> <p><u>Commentary:</u> Interviewees stressed the importance of ADA working with constituent societies to increase the awareness and effectiveness of involving a diverse population of volunteers. ADA could develop a tool kit that serves as a model for constituent and component societies to use in addressing the issue of diversity.</p>	1,2,8



# Detailed Suggestions and Commentary

## Diversity (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #69:</u> Feature a diversity program at the President-Elect's conference.</p> <p><u>Commentary:</u> Interviewees praised the President-Elect's conference and its effectiveness in preparing them for their leadership role. It was also suggested that diversity should be a topic discussed at this conference annually, as a way of educating and sensitizing constituent leaders to the issue and providing successful approaches used by others.</p>	1,2,8
<p><u>Suggestion #70:</u> Establish student and new dentist slots, either voting or non-voting, on all or selected councils and committees, accompanied by transitioning the New Dentist Committee to a community of interest – consisting of each new dentist representative on the councils.</p> <p><u>Commentary:</u> This would provide more concrete opportunities for these demographic groups to become involved in ADA governance, while saving expenses associated with the New Dentist Committee. As noted previously, many ADA leaders do not support mandated or slotted appointments such as this. However, based on W&amp;A experience, this is frequently the only effective way to integrate younger dentists into the leadership structure. Perhaps this approach should be considered four or five years down the road if diversity doesn't increase measurably based on implementation of other suggestions.</p>	1,2,8



# Detailed Suggestions and Commentary

## Technology

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #71:</u> Utilize telephonic and/or web-based meetings to a greater extent for all governance entities, with a goal of reducing the number of face-to-face meetings at least 25% by fiscal year 2014 and 50% by fiscal year 2016.</p> <p><u>Commentary:</u> Use of this technology would increase convenience and result in better time management for members. It could also significantly reduce expenses associated with on-site meetings, especially given the large numbers of participants in a typical meeting. For example, the average out-of-pocket expense of a BOT onsite meeting is approximately \$71,000, and it is not unusual for a council meeting to result in \$35,000 in out-of-pocket expenses. The leadership survey indicated 79% fully support or may support reducing the number of in-person meetings and replacing them with video, webinar or telephonic meetings.</p> <p>Compared to benchmark associations, the ADA tends to have more in-person meetings. The ADA typically has:</p> <ul style="list-style-type: none"> <li>• Seven in-person BOT meetings, compared to the median of five meetings for benchmark associations.</li> <li>• Five in-person Finance Committee meetings, compared to the median of two meetings for benchmark associations</li> <li>• Four in-person Audit Committee meetings, compared to the median of two meetings for benchmark associations.</li> <li>• Five in-person Governance Committee meetings, compared to the median of three meetings for benchmark association.</li> </ul>	1,2,5,6
<p><u>Suggestion #72:</u> Appoint a short term task force with specific expertise and representation from each segment of the governance structure (i.e., HOD, BOT, councils, committees, and constituents) to review and recommend how ADA Connect can be utilized to a great extent to streamline governance activities, reduce governance expense, and increase communication, information sharing, and user-friendliness.</p> <p><u>Commentary:</u> There has only been limited use of ADA Connect in the governance operations of the ADA. While interviewees who have used it as delegates found it helpful, some find it difficult to use. It was clear a strong majority believe it offers tremendous potential for all governance entities. While the ADA has been expanding ADA Connect to most governance entities, the rollout process has been slow. This task force could advise staff on what key elements would be attractive to leaders and volunteers, and help determine the appropriate training topics and marketing of the system.</p>	1,2,5,6



# Detailed Suggestions and Commentary

## Technology (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #73:</u> Develop a better search mechanism for use by governance volunteers on ADA Connect.</p> <p><u>Commentary:</u> Many interviewees indicated it is difficult to find what they need in the software. To encourage and ensure ongoing use, an improved search mechanism is suggested.</p>	1,2,5,6
<p><u>Suggestion #74:</u> Enhance the training program on use of ADA Connect (e.g., written and video formats or an e-learning course).</p> <p><u>Commentary:</u> There has only been limited use of ADA Connect in the governance operations of the ADA. While interviewees who have used it as delegates found it helpful, some find it difficult to use. It was clear a strong majority believe it offers tremendous potential for all governance entities. A coordinated training program should be continued and expanded upon.</p>	1,2,5,6
<p><u>Suggestion #75:</u> Set up networking sections for each governance entity on ADA Connect.</p> <p><u>Commentary:</u> Interest in the use of ADA Connect for a broad range of purposes included the opportunity to have social networking for “communities” of ADA. This could include individual councils, constituents, component societies, specialty societies, committees, government relations discussions, etc.</p>	1,2,4,5,6



# Detailed Suggestions and Commentary

## Technology (continued)

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #76:</u> Assure that all governance operations are largely paperless by the end of 2013.</p> <p><u>Commentary:</u> Interview and leadership survey data indicate widespread support for this. Over 50% of benchmark associations indicated they have already or will be converting all governance entities to paperless operations. 89% of the leadership survey respondents indicated they fully support or may support the move to a paperless governance operation over the next two years.</p>	1,2,5,6
<p><u>Suggestion #77:</u> Assure that Help Desk staff are available during all meetings of governance entities where ADA Connect is utilized.</p> <p><u>Commentary:</u> There were reported instances where technical support was needed, but unavailable, especially at the HOD meeting.</p>	1,2,5





# Detailed Suggestions and Commentary

## Staff Support

Suggestion/Commentary	Code <sup>(1)</sup>
<p><u>Suggestion #78:</u> Create a Governance Coordinator position in the staff organization reporting to the Chief of Governance and Strategy Management. Specific responsibilities would include:</p> <ul style="list-style-type: none"> <li>• Assuring all governance entities are involved in and aware of strategic plan development and implementation.</li> <li>• Maintaining a database of all governance entities and coordinating efforts to assure ongoing communications, self-evaluations, updating of operations manuals and job description for governance entity positions, establishing and monitoring charges, etc.</li> <li>• Preparing and updating operations manuals for key governance entities, including job descriptions and committee charges.</li> <li>• Coordinating activity on ADA Connect for governance entities.</li> </ul> <p><u>Commentary:</u> This mid-level position would help ensure the effectiveness and efficiency of the ADA governance structure as a whole. ADA governance is so diverse that there is rarely one point person who can provide the details related to specific governance entities. For example, no list of committees for the governance structure existed prior to undertaking our project work. The above bullet points and other areas of coordination would be the responsibility of this position and would provide enhanced knowledge and continuity in all areas of governance.</p>	1,2,3,4 ,5
<p><u>Suggestion #79:</u> Periodically survey council leaders regarding their satisfaction with staff support.</p> <p><u>Commentary:</u> Results from such surveys could be used to enhance staffing patterns and assignments, improve processes and procedures, etc. to better support the councils.</p>	1,2,5



# Detailed Suggestions and Commentary

## Other

Suggestion/Commentary	Code (1)
<p><u>Suggestion #80:</u> Continue to undertake a compensation review for all governance positions receiving stipends and make adjustments according to prevailing market conditions and commensurate to the work involved.</p> <p><u>Commentary:</u> It is our understanding that a review hasn't been undertaken in more than a decade. Such a review should be undertaken at least tri-annually.</p> <p>Perhaps due to lack of a recent review, compensation received by the BOT officers and trustees is on the far end of compensation as compared to other associations included in the benchmarking analysis: ADA pays the:</p> <ul style="list-style-type: none"> <li>• Speaker a \$43,177 stipend, whereas the benchmark median is \$35,000.</li> <li>• President a \$263,505 stipend, whereas the benchmark median is \$76,937.</li> <li>• President-Elect a \$204,857 stipend, whereas the benchmark median is \$50,750.</li> <li>• Treasurer a \$84,470 stipend, whereas the benchmark median is \$6,700.</li> <li>• Trustees a \$56,145 stipend each, whereas the benchmark median is \$0.</li> </ul> <p>Although on the one hand, these seemingly excessive compensation levels are a concern (i.e., ADA's tax exempt status may be in jeopardy), it is also apparent from benchmarking that ADA officers and trustees spend considerably more time on their duties and responsibilities than do their counterparts in other associations. The issue of compensation is the subject of a separate report and is not addressed in this report other than to note it as an issue.</p> <p>While W&amp;A believes compensation is an important issue, we believe it more important to focus on the time commitments associated with ADA governance, which is indicative of role confusion. As indicated in a prior recommendation, officers and trustees should be operating at the oversight level and not the management level. A higher functioning BOT would not require as many meetings or time commitment as the ADA BOT currently does.</p>	6

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# Next Steps

Subsequent to submitting this report, the W&A team will undertake the final project work step:

**Step 10 – Facilitate Report Dissemination and Feedback:** We will undertake the following activities upon receiving the go-ahead from designated ADA representatives:

- Prepare a Power Point presentation or whitepaper to convey project findings and recommendations to key audiences.
- Conduct a webinar training program targeted at volunteer leaders to aid them in sharing these recommendations with their constituencies.
- Potentially attend the ADA 2012 HOD meeting – serving as a resource during consideration of various resolutions pertaining to this report.

.....

Westman & Associates has appreciated this opportunity to be of service to the ADA. Subsequent to completing our work, we look forward to monitoring your progress and stand ready to be of assistance in asked in the implementation of various suggestions. We wish you well!

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# APPENDIX: Interview Results

## **Overview**

Interviews provided the most comprehensive and valuable input in developing W&A's compilation of key findings and recommendations. Virtually every issue touched upon in Section 3 of this report was discussed to some extent during one or more of these dialogues. The other data gathering methodologies employed by W&A primarily served to fine tune and provide more detail to our findings and recommendations.

Westman & Associates interviewed 72 ADA leaders on a one-to-one basis. These included:

- All Board of Trustees members
- All Council and Commission Chairs
- Co-Chairs of the American Dental Political Action Committee
- New Dentist Committee Officers
- American Student Dental Association Officers
- A sample of State Executive Directors
- A sample of HOD delegates

Additionally, approximately 30 staff leaders were interviewed in small groups.

Several hundred pages of notes were recorded and subsequently analyzed. We used the following criteria to determine what should be included in this summary:

- A large number of interviewees expressed the point, and/or
- The point made was deemed to be constructive in addressing one or more specific issues/concerns.

# APPENDIX: Interview Results



## ***Overview (continued)***

Interview data have been categorized into 9 sections:

- |                                     |                       |
|-------------------------------------|-----------------------|
| 1. Overall Governance Effectiveness | 6. Staff Support      |
| 2. House of Delegates               | 7. Strategic Planning |
| 3. Councils/Committees              | 8. Technology         |
| 4. Board of Trustees                | 9. Other              |
| 5. Diversity Opportunities          |                       |

Most sections have sub-points due to the scope and complexity of feedback.



# APPENDIX: Interview Results

## 1. Overall Governance Effectiveness

### Strengths of the ADA's Operations and Governance Structure

- ADA sets standards and is critical for maintaining what dentistry is about; we are the authority.
- Endorsement programs are good.
- Scientific studies are important.
- The tri-partite system is a strength.
- Membership involvement at all levels is appreciated, especially the wide variety of volunteers having an active involvement in policy and operations of ADA – building a sense of ownership. It's a melting pot, representing a broad profession.
- Interviewees generally believe most governance entities have some value and provide a reasonable return on investment (ROI) to ADA.
- Most interviewees like the participation that the HOD offers.
- ADA has a high quality staff and an excellent Executive Director.



# APPENDIX: Interview Results



## 1. Overall Governance Effectiveness (continued)

### Concerns Expressed

- ADA's financial situation will likely get worse in future years. Approximately 37% of members are 55+ in age. When they reach 65 years age their dues go to half-price – a big financial hit to the organization.
- Many interviewees believe that, taken as a whole, the governance structure is ineffective in enabling ADA to be nimble/responsive to situations as they arise. Quotes included:
  - “Is it reasonable for the HOD to be held accountable for the governance of the association when it meets three days per year?”
  - “Our system doesn't allow us to react quickly to situations. By the time all the entities can get coordinated, meet, refer decisions back-and-forth, etc., the issue at hand has passed us by.”

“If ADA doesn't make decisions on governance now, the organization will be irrelevant in the future. It is time to change!”

### Suggestions Made

- Assure governing bodies undertake periodic self-assessments of their effectiveness.
- Establish an Executive Committee of the HOD that can respond during the year to issues as they arise.
- When the HOD passes a resolution, rather than having the President delegate work to a council, empower the President to establish a single-purpose work group/task force to address the issue – immediately sunseting it after the charges have been completed.



# APPENDIX: Interview Results

## 2. House of Delegates

### Size of House

#### Positive Comment

- The current size allows for significant member input.

#### Concerns Expressed

- Most leaders believe there are too many delegates and alternates, for one or more of the following reasons:
  - It is difficult to make decisions with so many delegates.
  - States are burdened with the expense of sending so many people to the HOD meeting.
  - The number of delegates and alternates limits ADA's ability to meet in most cities.

#### Suggestions Made

- Phase in a downsizing of the HOD over 3-4 years - taking down the number each year.
- Cut the number of delegates by 25% to 50%.
- Cut the number of delegates, but potentially increase member input (electronically) to Reference Committees.
- If not a cut, cap the number of delegates at the current level.
- Cut the number of alternate delegates by one-half or more.
- If a state has five or less delegates, allocate it the same number of alternates as delegates.



# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Delegate and Alternate Allocation/Selection

#### Concerns Expressed

- Given the current configuration of districts, there are examples of states with similar numbers of ADA members receiving different numbers of delegates.
- States appoint delegates based on reasons other than competence.

#### Suggestions Made

- Potential allocation formulas suggested by one or more interviewees:
  - At least 2 delegates per state, with proportional representation from each state for the remainder.
  - At least 2 delegates per state, with proportional representation from each state for the remainder up to a cap.
  - At least 1 delegate per state, with one additional delegate per 750 full-paying-dues members as of a certain credentialing date. This would result in approximately 225 delegates representing 157,000 total members as opposed to 535 Members of Congress representing 350 million citizens.
  - Combine the districts so there are 6-7 districts (e.g., Northeast, Southeast, Midwest, Mid-South, California, and Far West), with the delegate allocation methodology changing accordingly.
  - Make Michigan, Wisconsin, Ohio and Indiana one District. Also unite Florida with another district since it has lost so many dentists. That would reduce the number of districts by two.
- Better educate states about the importance of competencies in the selection of delegates.
- Provide delegate job descriptions (e.g., competencies and qualities needed) and be clear about the amount of work involved – extensive reading materials and HOD meeting time.

**Note: there were also concerns and suggestions pertaining to diversity, which we incorporate in a later section of this report.**

# APPENDIX: Interview Results



## 2. House of Delegates (continued)

### Delegate Diversity

#### Concerns Expressed

- Residencies now are 50/50 male/female and 30% minorities. The HOD and other governing entities do not reflect those numbers.
- It takes too long for new dentists to work their way up to become a delegate, as well as attain other leadership positions. This creates a risk of them leaving the ADA.

#### Suggestions Made

- Implement delegate term limits to provide more opportunities for increasing diversity.
- Incentivize states to include diversity in their delegate rosters.
- Invite leaders of related ethnic-focused associations to the HOD and give them speaking/non-voting privileges at HOD meetings – a way to add diversity but not increase the number of delegates or expense to ADA.
- Recommend to states that for every “X” number of delegates they have, one should be a new dentist, a woman, or minority.
- Recommend to the states that they have at least one alternate delegate who is a new dentist.



# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Delegate Term Limits

#### Concern Expressed

- Some delegates serve for too long, which prevents new blood, fresh perspectives, and diversity. This is especially a problem for small states with limited delegate slots.

#### Suggestions Made

- Cap the number of years members can serve as delegates; 6 to 10 years was the most typical suggestion.
- Set delegate terms at 2 or 3 years, with a limit of 2 to 3 terms served consecutively.

### Role Clarification

#### Concerns Expressed

- There is ambiguous wording in the ADA constitution and bylaws defining roles between the HOD and Board of Trustees (BOT).
- The HOD has too much involvement in managing the association vis-à-vis policy making.
- The HOD needs to be a policy body, with the BOT managing the organization and staff.
- There is a level of misunderstanding of roles and resulting lack of trust between the HOD and councils.



# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Effectiveness of HOD

#### Positive Comment

- Allows participation by rank and file members.

#### Concerns Expressed

- The HOD is too large to act nimbly.
- The HOD is not good at reaching consensus on issues, so it tends to just vote things down; it is easier to reject a resolution than to accept it.
- Many delegates don't read the materials, so they make decisions based on emotions or politics – not on the information provided.
- Too much is brought up and considered at the last minute.
- The reference committee process is viewed by some as ineffective, because the HOD has too much power to override decisions and suggestions made by the committees.
- Delegates tend to be micromanagers and don't understand association management.
- Too many delegates are there to serve their own vested interest or that of their state versus the needs of the organization and dentistry in general.
- Too many delegates speak to hear themselves speak.



# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Financial Management Role

#### Positive Comment

- It has been helpful to post a running total of program expenses during budget deliberations.

#### Concerns Expressed

- The HOD typically adds millions of dollars each year to the budget after the staff and BOT have done their fiduciary best to develop a budget – frequently putting the organization in a deficit budget position.
- Some districts circumvent resolution policy by submitting high expense items late.
- Many delegates don't understand the financial impact of their decisions on the association.

#### Suggestions Made

- Require that the HOD pass balanced budgets.
- Assure ADA's financial reserve grows by at least 2% each year until it reaches 50% of the operating budget.
- Assure HOD resolutions meet the same universal criteria and Decision Lens analysis as is used during the budget process.
- Assure that all new programs or services added by the HOD to the budget include identified ties to the strategic plan.
- Require a 2/3rds to 80% majority for all new programs or services added by the HOD to the budget.
- Allow HOD resolutions with budgetary impact only if they are submitted at least "x" months before the HOD meeting – giving the staff and BOT appropriate time to vet, apply Decision Lens, and check strategic fit in undertaking budgeting.
- Only allow HOD resolutions involving expenditures if tied to a revenue source (e.g., dues increase or a specific cut in expenses).



# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Speaker of the House

#### Concern Expressed

- The Speaker can be in office for far too long.

#### Suggestions Made

- Institute a term for the position of 2- 4 years, with a maximum of 8-10 consecutive years' service in the role.
- Appoint a Vice-Speaker for the last year of the Speaker's term.
- Consider using an outside Parliamentarian to assist the Speaker in managing the HOD.

### Format & Length of HOD Meeting

#### Concerns Expressed

- Given the HOD only meets once per year, it stalls decision making.
- HOD meetings, and more specifically Reference Committee meetings, last too long.

#### Suggestions Made

- Have a shorter virtual meeting midyear to address selected topics. This could involve putting issues on ADA Connect with discussions taking place there – followed by an electronic vote.
- Set a limit of two days for HOD meetings.
- Hold the HOD meeting at a different time from educational sessions to enable delegates to attend both.





# APPENDIX: Interview Results

## 2. House of Delegates (continued)

### Meeting Effectiveness

#### Concerns Expressed

- Too much time is spent on the “fluff” as opposed to the most important business.
- Many resolutions are presented just before or at the HOD meeting -- not giving enough time for delegates to consider the implications and fit with the ADA’s strategic plan, priorities, and budget.
- Many resolutions do not appear to be in line with ADA’s strategic plan and priorities.

#### Suggestions Made

- Install officers and present awards at a separate ceremony outside of the HOD meeting.
- Redefine the Late Resolutions Rule so that it can only be used in true emergencies.
- Have the Chair of each reference committee make a short video of each resolution that is posted on the website in advance to the meeting. Since many people prefer video to reading, this would result in a more informed set of delegates.
- Help districts apply the Decision Lens program to potential resolutions -- allowing many people to have input earlier and have resolutions better thought out and prioritized. It could also lead to shorter, more efficient HOD meetings.
- Set time limits for discussions, and have a protocol/rule that once a point is made, other delegates cannot make the same point.



# APPENDIX: Interview Results

## 2. *House of Delegates (continued)*

### Working relationship between HOD & BOT

#### Positive Comment

- Many say it has improved over the last couple of years.

#### Concern Expressed

- Many say that the working relationship needs to improve more.

#### Suggestion Made

- Continue to build communications between the BOT and HOD.

### Technology Issues

#### Positive Comment

- There appears to be support for the ADA's decision to go paperless and meet the 2013 deadline for a paperless HOD.

#### Suggestions Made

- Consider a mid-year virtual HOD that addresses selected issues.
- Use social media to encourage discussion on resolutions in advance.

# APPENDIX: Interview Results



## 2. *House of Delegates (continued)*

### Other HOD Issues

#### Suggestions Made

- Beef up the new delegate orientation program to get them up to speed on the issues and HOD practices (reference BOT training).
- Provide HOD delegates with more information on a regular basis throughout the year, using ADA Connect.
- Incorporate the cost of staff support for the HOD and council meetings when considering the cost of governance. Then ask the key ROI question, “Is it worth \$30,000 for each of the resolutions that gets passed by the HOD?”



# APPENDIX: Interview Results

## 3. Councils/Commissions

### Role Assignment and Clarification

#### Concerns Expressed

- There is a fundamental issue/concern of councils being governed by the HOD, but managed by the BOT. This results in an overall lack of oversight and accountability.
- There is duplication of effort between councils, sub-committees, task forces, staff, etc.

#### Suggestions Made

- Have councils report to and be accountable to the BOT instead of the HOD.
- When the HOD passes a resolution, rather than having the President delegate work to a council, empower the President to establish a single-purpose work group with a definitive timeframe to address the issue – immediately sunsetting it after the charges have been completed.
- Clarify and communicate what each council does. This could involve development of a grid that clearly delineates the roles of each council and identifies areas of overlap. It would help make appropriate decisions regarding the future council structure.
- Revisit and potentially refine the charter of each council.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Financial Management Role

#### Concern Expressed

- Councils have little sense of the budgetary implications associated with their work and the initiatives they take on.

#### Suggestions Made

- Give the BOT authority to approve council budgets and their operating plans.

Clarify with councils what their role is in budget development and management.

### Council Effectiveness

#### Concerns Expressed

- The use of councils and the reporting relationship of councils to the HOD inhibit ADA's "nimbleness". The decision-making process can take years.
- Some councils are too focused on tactics, which should be delegated to staff.
- Councils on occasion spend a great deal of time on hot button issues/initiatives that subsequently are overwhelmingly rejected by the HOD – a waste of time and money.



# APPENDIX: Interview Results

## 3. Councils/Commissions

### Council Effectiveness (continued)

#### Suggestions Made

- Use Decision Lens to establish each council's plan for the year – assuring each council's goals and objectives are very specific and in are in alignment with the strategic plan.
- Create a mechanism for councils to vet potential recommendations and initiatives with the HOD and/or BOT during the course of the year as opposed to waiting until the next HOD meeting – perhaps using electronic surveys.
- Implement a more robust council performance management process. This could include establishing specific objectives at the beginning of each year with formal assessment of attainment at the end of the year. Such assessments could influence decisions regarding the future role and perhaps even continuing existence of a given council (i.e., Return on Objective).

### Council Structure

#### Concerns Expressed

- There are too many councils, sub-committees, task forces, etc.
- Several of the councils are focused on issues that normally are undertaken by staff in other associations.
- Task forces and committees are set up without appropriate consideration. They have no metrics or measurement. Many are “passion” projects of members that don't need to be pursued.



# APPENDIX: Interview Results

## 3. Councils/Commissions

### Council Structure (continued)

#### Suggestions Made

- Cut back on the number of councils and instead rely on short-lived/narrowly focused task forces to accomplish the work of the organization. This could result in the involvement of more people (diversity) while reducing the fixed costs of councils (e.g., the California experience).
- Have a sunset provision for every entity. Assess committees and subcommittees every year and councils every three years. Require that they go through the Decision Lens priority process and then sunset those areas and programs that rank low. Have a specific timetable for sunseting task forces.
- The following specific entities were mentioned for sunseting based on perceptions that the work can be undertaken by staff:
  - Information Technology Committee
  - Council on Communications
- Other entities that may be considered for sunseting include:
  - Council on Members Insurance and Retirement Programs
  - Council on Ethics, Bylaws and Judicial Affairs
  - Many of the council committees (e.g. the Council on Access, Prevention & Interpersonal Relations has 11 sub and advisory committees). These essentially have become sub-councils and should be evaluated for sunseting.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Council Structure

#### Suggestions Made

- The following entities were mentioned as needing further review relative to structure or operations:
  - Council on Access, Prevention and Interprofessional Relations: some believe it should become part of the Council on Government Affairs. They both undertake advocacy, and there already is a division in the Council of Governmental Affairs that advocates for what ADA does with the public.
  - New Dentists Committee: some believe it should be a council, others believe it should be a subset of the Council on Membership and others still believe it should remain a committee of the BOT.
  - Council on Dental Practice: some believe it to be off track from its original purpose.

### Council Size

#### Concern Expressed

- There are too many members on each council.

#### Suggestions Made

- Cut the number of members per council in half or by one-third. Assuming the number of districts remains the same, there would no longer be automatic seats; districts would need to “compete” for slots. Or, alternatively, give districts seats on each council every other 4-year term.
- Institute “super councils” with some current councils converted into committees under these new entities.





# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Council Member Selection

#### Positive Comment

- Virtually all interviewees are pleased with the terms of office for councils.

#### Concern Expressed

- Trustees at times choose council members based on personalities and politics, or as rewards for long service at the state level. Even though competency/skill matrices have been developed and communicated, they are frequently ignored.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Council Size

#### Suggestions Made

- Reference the *Race for Relevance* in selecting council members (i.e., the need for skill set and expertise).
- Enhance and communicate competency/skill matrices specific to each council.
- Assure there is a job description for every council position.
- Reduce the number of council slots – thereby creating competition for the slots and motivating trustees to nominate high caliber individuals.
- Develop a database of members who have an interest in serving ADA, along with an inventory of their competencies/skills. The database can be used as a resource to select council members.
- Utilize a more formal, structured process to select council members, including completion of an application form by those interested in serving.
- Allocate half of council slots for selection based on competency match and the other half to districts on a rotational basis.
- Reserve some council slots for non-members with competencies and skills specific to the needs of a given council.
- Use the Council on Scientific Affairs Council and Council on Dental Education Licensure as models for selecting all council members.
- Use a Volunteer Placement Committee to select council members. Individuals interested in serving on a council would be vetted based on their competencies/skills, prior service, and willingness to commit time.
- Limit members to serving on one council during their tenure with ADA.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Meeting Effectiveness

#### Positive Comment

- The blend of in-person and telephonic meetings is appreciated by most interviewees.

#### Concerns Expressed

- It is very costly to have in-person meetings given the number of people involved.
- Too much time is spent during in-person meetings listening to reports.

#### Suggestions Made

- Limit council in-person meetings to one or two per year, with the rest by held by video or teleconference.
- Decrease the number of days for in-person council meetings.
- Focus in-person meetings more on strategizing and brainstorming, leaving other topics for video or teleconference meetings.
- Disseminate staff reports in writing prior to meetings – no oral delivery during meetings. Use meeting time to discuss questions or concerns based on the written reports.
- Conduct all committee meetings by video or teleconference.
- Hold more council meetings, in-person and remote, on weekends as opposed to week days.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Council Collaboration and Communication

#### Suggestions Made

- Convene an annual conference of council chairs and chair elects at the start of their terms to communicate roles, define working relationships, identify opportunities for collaboration, etc. A recent teleconference involving chairs of all councils was viewed as a good step in promoting understanding and communications between councils.
- Utilize an inter-council committee of council chairs and vice chairs to periodically communicate (electronically) throughout the year.
- Create mechanisms to share meeting agendas between councils.
- Set up a separate site on ADA Connect for each council, which can be viewed by other councils.
- Use the “Review of Major Activities” to share what each council is doing.
- Facilitate communication between council chairs prior to each HOD meeting to share their resolutions and minimize any overlap.

### Technology Issues

#### Suggestions Made

- Assure that ADA Connect is used as a major communications vehicle and resource for all governance entities:
  - All council and committee activities should be input.
  - A search mechanism should be available for easily finding items.
- Make all meeting agendas electronic, with links to any additional information and presentations.



# APPENDIX: Interview Results

## 3. Councils/Commissions (continued)

### Council Training

#### Suggestions Made

- Assure that members of councils receive a briefing between October and February regarding the upcoming year's goals and plans for their council.
- Train council members on the need to support decisions once they return to their districts. Too often members champion their own opposing opinions once decisions have been made.
- Train council members on decision-making skills. Too often councils end up focusing on making everyone happy as opposed to tackling tough decisions.
- Provide more training on the use of ADA Connect.



# APPENDIX: Interview Results

## 4. Board of Trustees

### Role Assignment and Clarification

#### Concerns Expressed

- The BOT's effectiveness is constrained by powers vested in the HOD.
- The BOT engages too much in committee work during its meetings – either doing the work or duplicating what was done at the committee level.

#### Suggestions Made

- Drive more accountability and decision-making authority to the BOT – enabling it to act as the decision-maker in-between HOD meetings.
- Delegate budgeting authority to the BOT.
- Increase the BOT's focus on strategic plan development and subsequent oversight in plan attainment (i.e., guiding all governance entities in abiding with the plan). This could include speaking about the plan at caucuses, state meetings, etc. to drive an understanding of what the ADA is trying to accomplish with the strategic plan.
- Clarify and delegate more authority to committees.
- Utilize an Executive Committee to further enable “nimbleness” in decision-making between BOT meetings.



# APPENDIX: Interview Results

## 4. Board of Trustees (continued)

### Size of Board

#### Concern Expressed

- There are too many districts and BOT members.

#### Suggestions Made

- Cut from 17 to a lesser number of districts, which would also impact the number of council appointments. Suggestions included:
  - Have only 5 districts with 2-3 Trustees each.
  - Rotate representation on the BOT by district – cutting the number of Trustees in half.
- Consider adding one or more public members to the BOT.

### Selection of Trustees

#### Concern Expressed

- Geographical selection of Trustees doesn't always result in the "best" leaders for ADA.

#### Suggestion Made

- Use the HOD to select Trustees – based not on geographic representation but "at large" and instead on credentials.



# APPENDIX: Interview Results

## 4. Board of Trustees (continued)

### **BOT Position: President**

#### Suggestions Made

- Develop better protocols and expectations for the position, including a greater focus on visibility (i.e., interacting and listening to members).
- Provide more formal training to the President, prior to assuming his/her duties, on meeting agenda development and facilitation, conflict resolution skills, etc.

### **BOT Position: President-Elect**

#### Concerns Expressed

- Trustees interested in this position are in campaign mode from the moment they take office. It is bad for decision making given these individuals are primarily interested in playing it politically safe.
- Only the largest states can afford to support a candidate for the position, given the \$160,000-\$180,000 cost of a typical campaign.

#### Suggestions Made

- Have either the BOT or all members select the President-Elect.
- Don't let sitting BOT members run for President-Elect. Make them wait at least a year after they complete their service as a Trustee.
- Make the progression to President two years (i.e., Vice President, President-Elect, President) in order to reacquaint the individual with the BOT prior to assuming the President position.
- Eliminate expensive Presidents' parties and instead utilize a Candidates Forum at the HOD.





# APPENDIX: Interview Results

## 4. Board of Trustees (continued)

### **BOT Position: Vice President**

#### Concern Expressed

- The position has outlived its usefulness. It was designed to be the “eyes and ears” of the HOD – mainly communicating BOT activity to the HOD. Now there are numerous other communication channels and perhaps too many newsletters and information overload.

#### Suggestions Made

- Eliminate one or both VP positions.
- Change the VP position to become the first step in the ascension chain to BOT President.

### **BOT Position: Speaker**

#### Concern Expressed

- There is no need for the Speaker to serve on the BOT.

#### Suggestion Made

- Have an Attorney serve as Parliamentarian at BOT meetings rather than the Speaker.



# APPENDIX: Interview Results

## 4. Board of Trustees (continued)

### **BOT: Treasurer**

#### Concern Expressed

- The Treasurer position is redundant given there is a CFO and separate Chairs of the Budget & Finance and Audit Committees.

#### Suggestions Made

- Eliminate the Treasurer position.
- Combine the Treasurer position with the Secretary position (i.e., Secretary/Treasurer) – taking away Secretary duties from the Executive Director.

### **BOT Position: Director**

#### Suggestion Made

- Implement a mentoring program, with Senior Trustees assigned to Freshman Trustees.

### **BOT Position: Past President**

#### Suggestion Made

- Create opportunities for Past Presidents and other former leaders to lend their experience and expertise to ADA (e.g., international involvement).



# APPENDIX: Interview Results

## 4. Board of Trustees (continued)

### BOT Meetings

#### Positive Comment

- Most BOT members are satisfied with the number of meetings and the format used.

#### Concern Expressed

- Information needed to make BOT decisions is not always available or received in a timely manner.

#### Suggestions Made

- Choose topics for in-person meetings that are truly strategic; handle the rest electronically.
- Hold BOT meetings Friday through Sunday to minimize lost office time for Trustees.

### Other BOT issues:

#### Suggestions Made

- Include in BOT training:
  - The differences between running a dental practice and running the ADA (e.g., a business comparison chart).
  - The strategic versus tactical role of the BOT.
- Consolidate the Compensation Committee with the Budget and Finance Committee
- Consolidate the Diversity Committee with the Council on Membership.

# APPENDIX: Interview Results



## 5. *Diversity Opportunities*

### **Ethnic and Gender Diversity**

#### Concern Expressed

- Residencies now are 50/50 male/female and 30% minorities. The composition of ADA's governance entities does not reflect these numbers.
- The Diversity Institute is too narrowly focused.

#### Suggestions Made

- Increase ADA's involvement with minority dental associations.
- Recruit minorities for positions on governance entities.
- Encourage states to select minorities for leadership positions.
- Establish a joint ADA/state initiative to provide leadership training to minorities.
- Develop a tool kit for constituents to help them recruit and utilize minorities.
- Conduct an evaluation of the Diversity Institute and its effectiveness in getting those who participate involved in constituent and ADA activities.
- Expand the Diversity Institute to the districts and/or states.
- Feature a diversity program at the President-Elects' conference.

# APPENDIX: Interview Results



## 5. *Diversity Opportunities (continued)*

### Students and New Dentists

#### Concern Expressed

- There is a lack of dental student and new dentist representation at all levels within the ADA governance structure.

#### Suggestions Made

- Increase marketing initiatives geared towards dental students and new dentists.
- Set term limits for HOD delegates to open up more opportunities for new dentists.
- Encourage states to include more new dentists on their delegate teams.
- Include more students and new dentists on councils, committees, task forces etc.
- Use social media and electronic meetings to a greater extent to better engage students and new dentists.



# APPENDIX: Interview Results

## 6. Staff Support

### General

#### Positive Comments

- The caliber of staff has improved significantly.
- Considerable appreciation was expressed for Kathy. She runs ADA with a “soft, iron glove.”

#### Concerns Expressed

- Some leaders believe the ADA is becoming too staff driven.
- Staff are generally viewed as good supporters of their assigned governance entities, but are not necessarily very proactive.
- A few leaders believe ADA staff are not as responsive as they should be.

#### Suggestions Made

- Decrease BOT oversight (some say micromanagement) of the staff organization.
- Periodically survey council leaders regarding satisfaction with staff support.
- Assure staff communicates better with each other to identify and minimize duplication of work between governance entities.
- Assure staff participates in 360 degree performance reviews.

# APPENDIX: Interview Results



## 6. Staff Support (continued)

### Specific Relationships

#### Board/Staff

- Most BOT members believe they are receiving good support from the staff and that staff support is much better than it used to be.

#### Councils/Staff

- Mixed feedback in terms of whether there should be more shared services between councils. Some believe more services can be shared, whereas other leaders appreciate councils having their own cadre of staff – a minimum of one dedicated staff person per council.



# APPENDIX: Interview Results

## 7. *Strategic Planning*

### Concerns Expressed

- The current strategic planning process does not result in operating plans, milestones, and metrics that support plan attainment.
- The budget process is not sufficiently tied to the strategic planning process.

### Suggestions Made

- Make the BOT accountable for strategic plan development, with input from all other governance entities.
- Use a new Inter-Council Committee to provide guidance and input in strategic plan development.
- Assign councils and committees accountability for developing operating plans, milestones, and metrics that are tied to the strategic plan and subsequently approved by the BOT.
- Disseminate to councils and committees a standardized template for them to use in developing operating plans.
- Increase linkages between budget development and the strategic plan.
- Increase education to leaders and members regarding components of the strategic plan and how it is/should be utilized by various governance entities.



# APPENDIX: Interview Results



## 8. Technology

### Positive Comments

- ADA Connect is much better than the old “Loop.”
- ADA Connect has a good help desk.

### Concern Expressed

- ADA Connect is still not as user friendly as it should be. For example, during a recent President Elects meeting on ADA Connect it was difficult to log in to the software.
- There isn't always an ADA Connect help desk available during meetings.
- ADA Connect needs a better search mechanism.

### Suggestions Made

- Offer more training on how to effectively use ADA Connect.
- Add list serves and ongoing dialogue to ADA Connect.
- Set up social networking sections for each council, commission, district, state, etc.
- Assure the help desk is available during all governance meetings that utilize ADA Connect.
- Utilize Go to Meetings or teleconferences for all committee and task force meetings.
- Use an electronic voting mechanism to streamline decision-making during virtual meetings.



# APPENDIX: Interview Results

## 9. Other:

### Positive Comment

- Appreciation was expressed for the state President-Elect conference at the annual meeting. It was good to include President-Elects of related ethnic-focused associations.

### Concerns Expressed

- Spousal travel expenses should be cut.
- Use of the ADA travel service results in higher costs than if leaders booked their own travel.
- The Government and Public Affairs initiatives can work at cross purposes with what the states are trying to accomplish.

### Suggestions Made

- Establish an organizational unit or entity to improve coordination and minimize duplication between the 150+ ADA governance entities. This unit could also facilitate periodic reviews of entities for possible sunseting or refocusing.
- Give leaders a travel budget to live within for each meeting (amount adjusted to geographic differences) – allowing states/leaders to keep the difference if they spend less and motivating more cost-effective travel.

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# APPENDIX: Resource Analysis Results

## Overview

W&A's Resource Analysis was undertaken to calculate the "cost of governance" for ADA. In addition to traditional expenses associated with such a calculation (i.e., member leader stipends, meeting travel expenses, and allocated office expenses), W&A calculated expenses that most associations fail to consider – the cost of staff time supporting various governance entities.

This calculation was developed based on administration of a comprehensive survey to 185 staff who were perceived to spend at least 5% of their time supporting ADA governance. Survey respondents were asked to allocate 100% of their time across nearly 200 specific governance activities, as well as a "catch-all" activity addressing non-governance related time. The amount of time assigned to each activity was multiplied by the respondent's total compensation (i.e., base salary plus benefits allocation) to arrive at a total expense for the activity. For example, a respondent with \$100,000 total compensation who indicated performing an activity 10% of her time had \$10,000 assigned to that activity. Data from all 185 respondents were accumulated to arrive at total expense for each activity.

The results of our analysis are incorporated in the three following analyses. A fourth analysis, detailing specific staff and the time they spend performing each activity, was provided separately to ADA executives.

- **Governance Entity Analysis:** This analysis summarizes total FTEs and employee expense associated with each ADA governance entity, as well as the traditional expense categories listed previously – resulting in a total governance expense for each entity.
- **High to Low Analysis:** This includes the same information as the Governance Entity Analysis, but sorted from highest total expense entity to lowest total expense entity.
- **Activity Detail Analysis:** This includes, for each governance entity, staff FTEs and expenses for the specific activities undertaken in support of the entity, along with the traditional expense categories provided in the prior two analyses.

The analyses indicate that nearly \$10 million is associated with staff time supporting governance entities, and total governance expense was calculated to be nearly \$16.5 million.



# APPENDIX: Resource Analysis Results

## Analysis 1: By Governance Entity

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>HOUSE OF DELEGATES (Speaker, Delegates &amp; Meetings)</b>	3.88	\$576,065	\$43,177	\$69,845	\$20,037	\$709,124
Constitution and Bylaws Committee	0.11	\$46,134	N/A	\$2,280	\$839	\$49,253
Credentials, Rules and Order Committee	0.19	\$28,085	N/A	\$4,750	\$1,049	\$33,884
Election Commission	0.21	\$46,473	N/A	\$5,000	\$1,105	\$52,578
Reference Committee – Budget, Business, and Administrative Matters	0.16	\$44,421	N/A	\$4,750	\$1,049	\$50,220
Reference Committee – Dental Benefits, Practice and Health	0.36	\$70,792	N/A	\$10,500	\$2,320	\$83,612
Reference Committee – Dental Education, Science and Related Matters	0.37	\$70,526	N/A	\$36,850	\$8,141	\$115,517
Reference Committee – Legal, Legislative, and Public Affairs Matters	0.11	\$32,531	N/A	\$3,100	\$685	\$36,316
Reference Committee – Membership and Planning	0.24	\$44,724	N/A	\$6,625	\$1,464	\$52,813



# APPENDIX: Resource Analysis Results

## Analysis 1: By Governance Entity (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b><u>COUNCILS/COMMISSIONS</u></b>						
Council on Access Prevention and Interprofessional Relations (CAPIR)	3.18	\$487,844	N/A	\$83,675	\$29,244	\$600,763
Council on Annual Session (CAS)	2.91	\$356,731	N/A	\$267,730	\$27,107	\$651,568
Council on Communications (CC)	1.68	\$259,389	N/A	\$70,422	\$11,096	\$340,907
Council on Dental Benefit Programs (CDBP)	1.76	\$244,259	N/A	\$64,623	\$53,628	\$362,510
Council on Dental Education and Licensure (CDEL)	4.22	\$542,840	N/A	\$107,817	\$33,579	\$684,236
Council on Dental Practice (CDP)	2.59	\$328,429	N/A	\$80,145	\$29,835	\$438,409
Council on Ethics, Bylaws and Judicial Affairs (CEBJA)	0.47	\$117,140	N/A	\$68,675	\$3,789	\$189,604
Council on Government Affairs (CGA)	0.71	\$149,811	N/A	\$63,538	\$7,346	\$220,695
Council on Members Insurance and Retirement Programs (CMIRP)	0.57	\$118,490	N/A	\$52,496	\$4,656	\$175,642
Council on Membership (CM)	2.95	\$407,129	N/A	\$48,235	\$32,403	\$487,767
Council on Scientific Affairs (CSA)	2.89	\$457,163	N/A	\$124,436	\$64,668	\$646,267



# APPENDIX: Resource Analysis Results

## Analysis 1: By Governance Entity (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
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### COUNCILS/COMMISSIONS (continued)

American Dental Political Action Committee (ADPAC)	2.82	\$355,034	N/A	\$255,849	\$18,557	\$629,440
Commission on Dental Accreditation (CODA)	7.51	\$780,397	N/A	\$1,127,926	\$50,756	\$1,959,079
Joint Commission on National Dental Examinations (JCNDE)	7.86	\$881,329	N/A	\$376,958	\$89,819	\$1,348,106
New Dentist Committee (NDC)	1.49	\$201,755	N/A	\$51,300	\$11,333	\$264,388

<b>BOARD OF TRUSTEES (Officers &amp; Meetings)</b>	6.10	\$1,152,665	\$1,550,474	\$824,997	\$32,088	\$3,560,224
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### **BOARD COMMITTEES**

Audit Committee	0.11	\$32,023	N/A	\$5,875	\$1,298	\$39,196
Budget and Finance Committee	0.36	\$96,181	N/A	\$16,075	\$3,551	\$115,807
Compensation Committee	0.07	\$23,741	N/A	\$2,050	\$453	\$26,244
Diversity Committee	1.21	\$114,664	N/A	\$33,475	\$7,395	\$155,534

# APPENDIX: Resource Analysis Results



## Analysis 1: By Governance Entity (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>BOARD COMMITTEES (continued)</b>						
Governance Committee	0.35	\$86,301	N/A	\$12,650	\$2,795	\$101,746
Information Technology Committee	0.03	\$11,162	N/A	\$3,000	\$663	\$14,825
International Programs and Development Committee	1.68	\$171,143	N/A	\$78,514	\$17,452	\$267,109
Pension Committee	0.13	\$46,273	N/A	\$6,300	\$1,392	\$53,965
Strategic Planning Committee	0.31	\$65,886	N/A	\$10,725	\$2,369	\$78,980
Issue Specific Work Groups/Task Forces	1.55	\$244,955	N/A	\$85,325	\$18,850	\$349,130
<b>Other Governance Support (unrelated to previous activities)</b>	10.72	\$1,199,610	N/A	\$263,275	\$58,162	\$1,521,047
<b>Total Governance Expense</b>	71.85	\$9,892,095	\$1,593,651	\$4,329,786	\$650,973	\$16,466,505



# APPENDIX: Resource Analysis Results



## Analysis 2: Highest to Lowest Cost Governance Entities

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>BOARD OF TRUSTEES (Officers &amp; Meetings)</b>	6.10	\$1,152,665	\$1,550,474	\$824,997	\$32,088	\$3,560,224
Commission on Dental Accreditation (CODA)	7.51	\$780,397	N/A	\$1,127,926	\$50,756	\$1,959,079
<b>Other Governance Support (unrelated to previous activities)</b>	10.72	\$1,199,610	N/A	\$263,275	\$58,162	\$1,521,047
Joint Commission on National Dental Examinations (JCNDE)	7.86	\$881,329	N/A	\$376,958	\$89,819	\$1,348,106
<b>HOUSE OF DELEGATES (Speaker, Delegates &amp; Meetings)</b>	3.88	\$576,065	\$43,177	\$69,845	\$20,037	\$709,124
Council on Dental Education and Licensure (CDEL)	4.22	\$542,840	N/A	\$107,817	\$33,579	\$684,236
Council on Annual Session (CAS)	2.91	\$356,731	N/A	\$267,730	\$27,107	\$651,568
Council on Scientific Affairs (CSA)	2.89	\$457,163	N/A	\$124,436	\$64,668	\$646,267
American Dental Political Action Committee (ADPAC)	2.82	\$355,034	N/A	\$255,849	\$18,557	\$629,440
Council on Access Prevention and Interprofessional Relations (CAPIR)	3.18	\$487,844	N/A	\$83,675	\$29,244	\$600,763
Council on Membership (CM)	2.95	\$407,129	N/A	\$48,235	\$32,403	\$487,767
Council on Dental Practice (CDP)	2.59	\$328,429	N/A	\$80,145	\$29,835	\$438,409
Council on Dental Benefit Programs (CDBP)	1.76	\$244,259	N/A	\$64,623	\$53,628	\$362,510

# APPENDIX: Resource Analysis Results



## Analysis 2: Highest to Lowest Cost Governance Entities (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
Issue Specific Work Groups/Task Forces	1.55	\$244,955	N/A	\$85,325	\$18,850	\$349,130
Council on Communications (CC)	1.68	\$259,389	N/A	\$70,422	\$11,096	\$340,907
International Programs and Development Committee	1.68	\$171,143	N/A	\$78,514	\$17,452	\$267,109
New Dentist Committee (NDC)	1.49	\$201,755	N/A	\$51,300	\$11,333	\$264,388
Council on Government Affairs (CGA)	0.71	\$149,811	N/A	\$63,538	\$7,346	\$220,695
Council on Ethics, Bylaws and Judicial Affairs (CEBJA)	0.47	\$117,140	N/A	\$68,675	\$3,789	\$189,604
Council on Members Insurance and Retirement Programs (CMIRP)	0.57	\$118,490	N/A	\$52,496	\$4,656	\$175,642
Diversity Committee	1.21	\$114,664	N/A	\$33,475	\$7,395	\$155,534
Budget and Finance Committee	0.36	\$96,181	N/A	\$16,075	\$3,551	\$115,807
Reference Committee - Dental Education, Science and Related Matters	0.37	\$70,526	N/A	\$36,850	\$8,141	\$115,517
Governance Committee	0.35	\$86,301	N/A	\$12,650	\$2,795	\$101,746
Reference Committee - Dental Benefits, Practice and Health	0.36	\$70,792	N/A	\$10,500	\$2,320	\$83,612
Strategic Planning Committee	0.31	\$65,886	N/A	\$10,725	\$2,369	\$78,980



# APPENDIX: Resource Analysis Results

## Analysis 2: Highest to Lowest Cost Governance Entities (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
Pension Committee	0.13	\$46,273
Reference Committee - Membership and Planning	0.24	\$44,724
Election Commission	0.21	\$46,473
Reference Committee - Budget, Business, and Administrative Matters	0.16	\$44,421
Constitution and Bylaws Committee	0.11	\$46,134
Audit Committee	0.11	\$32,023
Reference Committee - Legal, Legislative, and Public Affairs Matters	0.11	\$32,531
Credentials, Rules and Order Committee	0.19	\$28,085
Compensation Committee	0.07	\$23,741
Information Technology Committee	0.03	\$11,162

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$6,300	\$1,392	\$53,965
N/A	\$6,625	\$1,464	\$52,813
N/A	\$5,000	\$1,105	\$52,578
N/A	\$4,750	\$1,049	\$50,220
N/A	\$2,280	\$839	\$49,253
N/A	\$5,875	\$1,298	\$39,196
N/A	\$3,100	\$685	\$36,316
N/A	\$4,750	\$1,049	\$33,884
N/A	\$2,050	\$453	\$26,244
N/A	\$3,000	\$663	\$14,825

<b>Total Governance Expense</b>	71.85	\$9,892,095
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\$1,593,651	\$4,329,786	\$650,973	\$16,466,505
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# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>HOUSE OF DELEGATES (Speaker, Delegates &amp; Meetings)</b>	3.88	\$576,065	\$43,177	\$69,845	\$20,037	\$709,124
<b>Speaker Support:</b> Interact with and support the Speaker in the performance of his/her leadership role	0.20	\$31,015	\$43,177			
<b>Delegate Support:</b> Interact with and support delegates in the performance of their role, including delegate registration activities	0.68	\$74,638				
<b>Meeting Planning/Logistics:</b> Includes developing the schedule, assigning rooms, selecting menus, facilitating audio visual needs, etc. for the HOD meeting	0.87	\$109,403				
<b>Meeting Support:</b> Prepare meeting materials (e.g., reference committee instructions and historical publications) and attend/participate/summarize/disseminate results of HOD meetings - excluding HOD Committee meetings	1.50	\$228,466				
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders relative to HOD business	0.63	\$132,543				

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Constitution and Bylaws Committee</b>	0.16	\$74,576
<b>(Governance Related)</b>	0.11	\$46,134
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.01	\$5,097
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.01	\$3,380
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.04	\$11,718
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.05	\$28,442
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.04	\$25,939

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$2,280	\$839	\$77,695

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Credentials, Rules and Order Committee</b>	0.19	\$30,679
<b>(Governance Related)</b>	0.19	\$28,085
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.01	\$5,539
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.02	\$4,676
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.02	\$4,964
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.00	\$2,594
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.12	\$12,906

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$4,750	\$1,049	\$36,478

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Election Commission</b>	0.24	\$53,983
<b>(Governance Related)</b>	0.21	\$46,473
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.04	\$9,235
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.04	\$8,296
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Commission meetings.	0.03	\$6,468
<b>Candidate Support:</b> Communicate and interact with candidates before, during, and after the campaign season regarding various election issues.	0.06	\$13,239
<b>Decision/Initiative Support:</b> Work as directed by the Commission leader to enact decisions and support attainment of initiatives undertaken by the Commission	0.03	\$7,510
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Commission business	0.04	\$9,235

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$5,000	\$1,105	\$60,088

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Reference Committee - Budget, Business, and Administrative Matters</b>	0.19	\$55,978
<b>(Governance Related)</b>	0.16	\$44,421
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.03	\$11,805
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.04	\$8,688
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.06	\$16,791
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.03	\$11,557
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.03	\$7,137

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$4,750	\$1,049	\$61,777



# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
Reference Committee - Dental Benefits, Practice and Health	0.42	\$88,630
(Governance Related)	0.36	\$70,792
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.03	\$7,580
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.04	\$9,136
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.24	\$46,352
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.06	\$17,838
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.03	\$7,724

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$10,500	\$2,320	\$101,450

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
Reference Committee - Dental Education, Science and Related Matters	1.47	\$253,483
(Governance Related)	0.37	\$70,526
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.04	\$11,795
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.04	\$10,024
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.22	\$39,123
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	1.11	\$182,957
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.05	\$9,584

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$36,850	\$8,141	\$298,474



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Reference Committee - Legal, Legislative, and Public Affairs Matters</b>	0.12	\$40,222
<b>(Governance Related)</b>	0.11	\$32,531
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.01	\$5,224
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.03	\$9,597
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.04	\$13,935
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.02	\$7,691
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.01	\$3,775

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$3,100	\$685	\$44,007

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Reference Committee - Membership and Planning</b>	0.27	\$53,552
<b>(Governance Related)</b>	0.24	\$44,724
<b>Chair Support:</b> Interact with and support the Committee Chair in his/her leadership role	0.02	\$5,545
<b>Committee Member Support:</b> Interact with and support committee members in the performance of their role	0.04	\$7,348
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.13	\$23,158
<b>Decision/Initiative Support:</b> Work as directed by the Committee leader to enact decisions and support attainment of initiatives undertaken by the Committee	0.03	\$8,828
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.05	\$8,673

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$6,625	\$1,464	\$61,641



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b><u>COUNCILS/COMMISSIONS</u></b>						
<b>Council on Access Prevention and Interprofessional Relations (CAPIR)</b>	5.30	\$835,554	N/A	\$83,675	\$29,244	\$948,473
<b>(Governance Related)</b>	3.18	\$487,844				
<b><u>Chair Support:</u></b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.54	\$82,324				
<b><u>Council Member Support:</u></b> Interact with and support Council members in the performance of their role	0.65	\$114,109				
<b><u>Meeting Support:</u></b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.70	\$85,193				
<b><u>Subordinate Entity Meetings:</u></b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.75	\$113,616				
<b><u>Decision/Initiative Support:</u></b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	2.12	\$347,710				
<b><u>Other Communications:</u></b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.53	\$92,602				



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Annual Session (CAS)</b>	4.91	\$595,567
<b>(Governance Related)</b>	2.91	\$356,731
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.41	\$62,788
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.40	\$45,820
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.87	\$100,075
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.74	\$89,998
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	1.99	\$238,836
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.50	\$58,050

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$267,730	\$27,107	\$890,404



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Dental Benefit Programs (CDBP)</b>	9.71	\$1,262,397
<b>(Governance Related)</b>	1.76	\$244,259
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.09	\$16,919
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.18	\$23,960
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.62	\$75,914
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.53	\$82,368
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	7.95	\$1,018,138
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.33	\$45,098

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$64,623	\$53,628	\$1,380,648



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Communications (CC)</b>	2.01	\$324,688
<b>(Governance Related)</b>	1.68	\$259,389
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.24	\$46,320
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.30	\$44,056
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.56	\$67,592
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.35	\$58,124
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	0.33	\$65,299
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.22	\$43,297

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$70,422	\$11,096	\$406,206



# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Dental Education and Licensure (CDEL)</b>	6.08	\$782,414
<b>(Governance Related)</b>	4.22	\$542,840
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.43	\$63,431
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.42	\$45,160
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	1.27	\$155,633
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	1.48	\$192,182
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	1.86	\$239,574
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.61	\$86,434

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$107,817	\$33,579	\$923,810

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Dental Practice (CDP)</b>	5.40	\$694,795
<b>(Governance Related)</b>	2.59	\$328,429
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.11	\$23,527
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.18	\$27,394
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.76	\$88,708
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	1.01	\$128,325
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	2.81	\$366,366
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.53	\$60,475

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$80,145	\$29,835	\$804,775

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Ethics, Bylaws and Judicial Affairs (CEBJA)</b>	0.69	\$171,598
<b>(Governance Related)</b>	0.47	\$117,140
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.08	\$19,696
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.08	\$16,770
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.11	\$29,689
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.12	\$32,411
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	0.21	\$54,458
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.07	\$18,574

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$68,675	\$3,789	\$244,062

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Government Affairs (CGA)</b>	1.33	\$283,543
<b>(Governance Related)</b>	0.71	\$149,811
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.11	\$31,445
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.13	\$31,522
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.17	\$27,501
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.07	\$11,795
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	0.62	\$133,732
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.22	\$47,548

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$63,538	\$7,346	\$354,427

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Members Insurance and Retirement Programs (CMIRP)</b>	0.84	\$193,291
<b>(Governance Related)</b>	0.57	\$118,490
<b><u>Chair Support:</u></b> Interact with and support the Council Chair in the performance of his/her leadership role	0.08	\$18,257
<b><u>Council Member Support:</u></b> Interact with and support Council members in the performance of their role	0.15	\$22,522
<b><u>Meeting Support:</u></b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.28	\$64,958
<b><u>Decision/Initiative Support:</u></b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	0.28	\$74,801
<b><u>Other Communications:</u></b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.05	\$12,753

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$52,496	\$4,656	\$250,443



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Membership (CM)</b>	5.87	\$854,828
<b>(Governance Related)</b>	2.95	\$407,129
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.40	\$56,072
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.57	\$70,304
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.85	\$124,645
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.74	\$97,519
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	2.92	\$447,699
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.38	\$58,589

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$48,235	\$32,403	\$935,466



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Council on Scientific Affairs (CSA)</b>	11.71	\$1,823,814
<b>(Governance Related)</b>	2.89	\$457,163
<b>Chair Support:</b> Interact with and support the Council Chair and Chairs of subordinate entities in the performance of their leadership roles	0.18	\$32,388
<b>Council Member Support:</b> Interact with and support Council members in the performance of their role	0.41	\$64,159
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	1.39	\$213,693
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.46	\$71,602
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Council leaders to enact decisions and support attainment of initiatives associated with the Council and subordinate entities	8.82	\$1,366,651
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Council business	0.45	\$75,321

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$124,436	\$64,668	\$2,012,918

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>American Dental Political Action Committee (ADPAC)</b>	3.36	\$426,898
<b>(Governance Related)</b>	2.82	\$355,034
<b>Chair Support:</b> Interact with and support the Committee Chair and Chairs of subordinate entities in the performance of their leadership roles	0.60	\$86,573
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.78	\$95,693
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.46	\$53,269
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.47	\$48,561
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee and subordinate entities	0.54	\$71,864
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.51	\$70,938

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$255,849	\$18,557	\$701,304





# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Commission on Dental Accreditation (CODA)</b>	9.19	\$958,494
<b>(Governance Related)</b>	7.51	\$780,397
<b>Chair Support:</b> Interact with and support the Commission Chair and Chairs of subordinate entities in the performance of their leadership roles	0.84	\$125,765
<b>Council Member Support:</b> Interact with and support Commission members in the performance of their role	0.59	\$55,575
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	1.78	\$194,231
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	1.51	\$144,274
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Commission leaders to enact decisions and support attainment of initiatives associated with the Commission and subordinate entities	1.68	\$178,097
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Commission business	2.79	\$260,552

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$1,127,926	\$50,756	\$2,137,176

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Joint Commission on National Dental Examinations (JCND)</b>	16.26	\$1,764,162
<b>(Governance Related)</b>	7.86	\$881,329

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$376,958	\$89,819	\$2,230,939

<b>Chair Support:</b> Interact with and support the Commission Chair and Chairs of subordinate entities in the performance of their leadership roles	1.25	\$144,053
<b>Council Member Support:</b> Interact with and support Commission members in the performance of their role	1.14	\$106,383
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	1.54	\$168,305
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	2.53	\$311,552
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Commission leaders to enact decisions and support attainment of initiatives associated with the Commission and subordinate entities	8.40	\$882,833
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Commission business	1.40	\$151,036

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
New Dentist Committee (NDC)	2.05	\$329,127
(Governance Related)	1.49	\$201,755
<b>Chair Support:</b> Interact with and support the Committee Chair and Chairs of subordinate entities in the performance of their leadership roles	0.15	\$19,324
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.24	\$28,466
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of meetings.	0.55	\$82,228
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of subordinate entity meetings (e.g., subcommittees, advisory committees, task forces, and work groups)	0.30	\$41,263
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee and subordinate entities	0.56	\$127,372
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.25	\$30,474

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$51,300	\$11,333	\$391,760



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>BOARD OF TRUSTEES (Officers &amp; Meetings)</b>	6.10	\$1,152,665	\$1,550,474	\$824,997	\$32,088	\$3,560,224
<b>President Support:</b> Interact with and support the President in the performance of his/her leadership role	0.88	\$150,259	\$263,505			
<b>President-Elect Support:</b> Interact with and support the President-Elect in the performance of his/her leadership role	0.88	\$148,837	\$204,857			
<b>Treasurer Support:</b> Interact with and support the Treasurer in the performance of his/her leadership role	0.12	\$40,702	\$84,470			
<b>Other Board Member Support:</b> Interact with and support other Board members in the performance of their leadership role	1.02	\$224,311	\$954,465			
<b>Vice Presidents:</b> Interact with and support VPs in the performance of their leadership role	Not Asked	Not Asked	\$43,177			
<b>Meeting Planning/Logistics:</b> Includes developing schedules, assigning rooms, selecting menus, facilitating audio visual needs, etc. for board meetings	0.74	\$96,956				
<b>Meeting Support:</b> Prepare agendas and related meeting materials, and attend/participate/summarize/ disseminate results of board meetings	1.78	\$353,737				



# APPENDIX: Resource Analysis Results

<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders relative to BOT business	0.68	\$137,863
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## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b>BOARD COMMITTEES</b>						
<b>Audit Committee</b>	0.24	\$62,053	N/A	\$5,875	\$1,298	\$69,226
<b>(Governance Related)</b>	0.11	\$32,023				
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.02	\$6,879				
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.03	\$6,456				
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.05	\$14,312				
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.12	\$30,030				
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.01	\$4,376				

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Budget and Finance Committee</b>	0.64	\$158,254
<b>(Governance Related)</b>	0.36	\$96,181
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.02	\$12,157
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.03	\$9,050
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.23	\$54,178
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.29	\$62,073
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.07	\$20,796

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$16,075	\$3,551	\$177,880



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Compensation Committee</b>	0.08	\$27,404
<b>(Governance Related)</b>	0.07	\$23,741
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.004	\$2,594
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.03	\$8,337
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.01	\$3,663
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.01	\$3,663
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.02	\$9,147

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$2,050	\$453	\$29,907

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
Diversity Committee	1.34	\$133,879
(Governance Related)	1.21	\$114,664
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.13	\$13,451
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.16	\$18,233
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.24	\$35,129
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.13	\$19,215
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.68	\$47,851

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$33,475	\$7,395	\$174,749



# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Governance Committee</b>	0.51	\$129,777
<b>(Governance Related)</b>	0.35	\$86,301
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.06	\$18,503
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.08	\$20,471
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.11	\$25,731
<b>Subordinate Entity Meetings:</b> Prepare for, participate in, summarize, and disseminate results of Board Rules Work Group meetings	0.04	\$13,096
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee and the Work Group	0.15	\$43,476
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.05	\$8,500

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$12,650	\$2,795	\$145,222

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
Information Technology Committee	0.12	\$25,661
(Governance Related)	0.03	\$11,162
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.004	\$2,594
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.01	\$3,380
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.00	\$2,594
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.09	\$14,499
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.00	\$2,594

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$3,000	\$663	\$29,324



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>International Programs and Development Committee</b>	3.16	\$372,578
<b>(Governance Related)</b>	1.68	\$171,143
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.25	\$36,724
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.22	\$27,368
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.47	\$45,192
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	1.48	\$201,435
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.72	\$61,859

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$78,514	\$17,452	\$468,544



# APPENDIX: Resource Analysis Results

## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Pension Committee</b>	0.25	\$87,493
<b>(Governance Related)</b>	0.13	\$46,273
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.03	\$10,929
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.04	\$12,713
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.04	\$14,592
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.12	\$41,220
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.02	\$8,039

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$6,300	\$1,392	\$95,185

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Strategic Planning Committee</b>	0.43	\$96,172
<b>(Governance Related)</b>	0.31	\$65,886
<b>Chair Support:</b> Interact with and support the Committee Chair in the performance of his/her leadership role	0.04	\$9,083
<b>Committee Member Support:</b> Interact with and support Committee members in the performance of their role	0.08	\$14,432
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Committee meetings.	0.07	\$17,451
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Committee leaders to enact decisions and support attainment of initiatives associated with the Committee	0.12	\$30,286
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Committee business	0.11	\$24,920

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$10,725	\$2,369	\$109,266

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entity	Ttl. FTEs	Ttl. Comp & Benefits
<b>Issue Specific Work Groups/Task Forces</b>	3.43	\$520,403
<b>(Governance Related)</b>	1.55	\$244,955
<b>Chair Support:</b> Interact with and support the Work Group/Task Force Chair in the performance of his/her leadership role	0.20	\$39,083
<b>Work Group/Task Force Member Support:</b> Interact with and support Work Group/Task Force members in the performance of their role	0.37	\$52,714
<b>Meeting Support:</b> Prepare for, participate in, summarize, and disseminate results of Work Group/Task Force meetings.	0.73	\$109,853
<b>Decision/Initiative Support:</b> Undertake substantive work (i.e., unrelated to governance support) as directed by Work Group/Task Force leaders to enact decisions and support attainment of initiatives associated with the Work Groups/Task Forces	1.89	\$275,448
<b>Other Communications:</b> Exchange written, electronic, and/or verbal correspondence with volunteer leaders in-between meetings relative to Work Group/Task Force business	0.24	\$43,305

Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
N/A	\$85,325	\$18,850	\$624,578

# APPENDIX: Resource Analysis Results



## Analysis 3: Activity Detail (continued)

Entities	Ttl. FTEs	Ttl. Comp & Benefits	Leader Stipends	Meeting Travel Expenses	Allocated Office Expense	Total
<b><u>OTHER ACTIVITIES</u></b>						
Governance support unrelated to what is previously described in this survey	10.72	\$1,199,610	N/A	\$263,275	\$58,162	\$1,521,047
Other activities and responsibilities unrelated to ADA governance	66.33	\$10,469,675	N/A			\$10,469,675
<b><u>TOTALS</u></b>	184.99	\$26,963,962	\$1,593,651	\$4,329,786	\$650,973	\$33,538,372
<b><u>GOVERNANCE RELATED</u></b> (No Decision/Initiative Support and Other Activities and Responsibilities Unrelated to ADA Governance)	71.85	\$9,892,095	\$1,593,651	\$4,329,786	\$650,973	\$16,466,505

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# APPENDIX: Leadership Survey Results

## ***Overview***

Westman & Associates (W&A), on behalf of the American Dental Association (ADA), is undertaking a governance review designed to enhance the association's effectiveness and clarify the roles and responsibilities of the various governing bodies. A key initiative associated with the review was administration of a survey to more than 1,400 volunteer leaders. Target participants included members of the House of Delegates, Board of Trustees, councils, committees, state constituencies and staff that support governance entities.

The survey included 56 questions in the following categories:

- Demographics
- Governance effectiveness
- Recommendations: House of Delegates
- Recommendations: Board of Trustees
- Recommendations: Councils/Commissions
- Recommendations: Committees/Work Groups/Task Forces
- Recommendations: Applicable to all governance entities
- Other suggestions and response to survey instrument



# APPENDIX: Leadership Survey Results

## ***Overview (continued)***

A total of 701 ADA leaders responded to the survey. The W&A consulting team was very pleased with the 50% response rate – a higher response rate than we typically find when administering similar comprehensive surveys. We have thoroughly reviewed the survey results, including thousands of comments made by individuals in response to various open-ended questions. Survey results, taken as a whole, will be very helpful in identifying recommendations to improve ADA governance and will help us ascertain the extent to which recommendations may be supported or resisted by key stakeholder groups (e.g., the House of Delegates).

Survey results are presented in two sections. We start with a summary of what we perceive to be key findings – presented in the order shown on the survey instrument. This is followed by a detailed presentation of results associated with all quantitative survey questions. Note that not all respondents answered every question. Responses to specific questions do not always total 100% due to the rounding of percentages and/or the ability to select more than one response to the question.



# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings

### 1. Which ADA entities are you a member of?

The top five responses were:

- |                       |       |
|-----------------------|-------|
| 1. House of delegates | 48.2% |
| 2. Alternate delegate | 30.2% |
| 3. Council member     | 19.0% |
| 4. ADA Staff          | 9.8%  |
| 5. State President    | 5.4%  |

### 2. What ADA district are you associated with?

Responses by districts ranged from 13 to 75, depending on the size of the district. It appears to be a good geographic cross section of the membership.

### 3. How many years have you been a member of the ADA?

67.5% have been a member for over 25 years and 2.9% for under seven years. Ideally, the participant base wouldn't be so skewed towards long-term members, but perhaps it does reflect the age of a typical ADA leader.

### 4. How long did it take you to secure a leadership position with ADA?

The range was from 1 to 30 years, with the average estimated at seven years.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

- 5. How effective is ADA at incorporating diversity (i.e., students, new dentists, gender, ethnicity, culture, etc.) in the selection of members to governance entities (e.g., House of Delegates, Board, Council, and Committee members, etc.)?**

47% said effective, with 22% indicating ineffective and 30% neutral.

- 6. What steps should ADA take to increase diversity?**

The most frequent responses were:

1. Term limits for the House of Delegates
2. Promote women
3. Recruit targeted minorities
4. Encourage states to appoint minorities
5. Target younger dentists
6. Target dental schools

- 7. How effective was the ADA in orienting you to your leadership position?**

70% said effective, with 8% indicating ineffective and 22% neutral.



# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings (continued)

### 8. What additional information would have made you more effective in your leadership role?

The most frequent responses were:

1. Mentoring
2. Orientation packet (structure, functions, roles, protocols, how the House works, etc.)
3. Additional leadership training at the state or district level

Other comments included a variety of ideas such as better use of ADA Connect and better background information on specific entities. The president-elect's conference and speaker's orientation were perceived as great.

### 9. How effective do you believe the following entities are in referencing ADA's strategic plan (i.e., mission, vision, and goals) in undertaking their roles and making decisions?

The Board was seen as the most effective governance entity in utilizing the strategic plan, with 80% ranking the board as effectively using the plan. Other effective rankings included councils/commission 74%, committees 68% and the House 58%. The House had a 22% ineffective rate, compared to less than 9% for all others. Following are responses by entity:

<u>Entity</u>	<u>Effective</u>	<u>Ineffective</u>	<u>Neutral</u>
Board of Trustees	80%	7%	13%
Councils/Commissions	74%	8%	18%
Committees	68%	7%	25%
House of Delegates	58%	22%	20%



# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings (continued)

### 10. How “EFFECTIVE” do you perceive the following councils and commissions are in serving ADA?

Note the results below combine “very effective” and “effective” under the “effective” column, and “ineffective” and “very ineffective” under the “ineffective” column. It does not include the responses for “unsure.” The “unsure” responses were not included in percentage calculations so the figures represent the impression of those who were knowledgeable about the entity.

<u>Entity</u>	<u>Effective</u>	<u>Ineffective</u>	<u>Neutral</u>
ADA Sessions	87%	3%	10%
Government Affairs	87%	5%	8%
Scientific Affairs	80%	4%	16%
Ethics, Bylaws, Judicial Affairs	75%	5%	20%
New Dentist Committee	72%	7%	21%
Dental Practice	67%	7%	26%
Communications	67%	8%	25%
Access, Prevention & Interprofessional Relations	66%	9%	25%
Dental Education & Licensure	61%	12%	27%
Membership	58%	13%	29%
Dental Benefit Programs	54%	7%	39%
Members Insurance & Retirement Programs	49%	12%	39%
Commission on Dental Accreditation	48%	22%	30%
Joint Commission on National Dental Exams	48%	18%	34%



# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings (continued)

### 11. How “EFFICIENT” do you perceive the following councils and commissions are in serving ADA?

Note the results below combine “very efficient” and “efficient” under the “efficient” column, and “inefficient” and “very inefficient” under the “inefficient” column. It does not include the responses for “unsure.” The “unsure” responses were not included in percentage calculations so the figures represent the impression of those who were knowledgeable about the entity.

<u>Entity</u>	<u>Efficient</u>	<u>Inefficient</u>	<u>Neutral</u>
ADA Sessions	75%	7%	18%
Government Affairs	72%	14%	14%
Scientific Affairs	64%	8%	28%
Ethics, Bylaws & Judicial Affairs	62%	7%	31%
New Dentist	61%	11%	28%
Communications	59%	12%	29%
Dental Benefit Programs	58%	11%	31%
Dental Practice	56%	10%	34%
Dental Education & Licensure	54%	12%	34%
Membership	53%	17%	30%
Access, Prevention & Interprofessional Relations	51%	15%	34%
Membership Insurance & Retirement Programs	50%	15%	35%
Jt. Commission on National Dental Exams	44%	19%	37%
Commission on Dental Accreditation	43%	21%	36%

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **12. Where do you perceive there to be significant duplication/overlap of work performed between governance entities?**

Councils are perceived to have the highest duplication/overlap according to 27% of the respondents, followed by overlap between the House and Board with 21% and between the Board and Council/Committees with 18%.

### **13. How can ADA eliminate duplication?**

The most frequent responses were:

1. Increase communications between the councils
2. Reduce the number of councils
3. Delineate and clarify roles of the councils
4. Eliminate or reduce the size of the House
5. Have the board trust the work of councils and not redo it.

Duplication/overlap was perceived as good by some respondents, and they did not see the need to avoid duplication.





# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings (continued)

### 14. How appropriate is the amount of communications/information you receive regarding activities, decisions made, etc. associated with various governance entities?

Communications from the House are perceived as very good, with 77% indicating that “just the right amount of information” is provided, and only 17% indicating there was “too little information” and only 6% believing there was “too much.” The Board and councils each had 49% saying they provide the right amount, while 49% indicated the board provides too little information and 2% indicated both the board and councils provide too much. 48% of respondents indicated the councils provide too little information while 46% say committees provide the right amount and 53% say they provide too little. Only 1% said committees provide too much information.

### 15. How important do you perceive it is to reduce the cost structure of governance entities?

Respondents clearly believe it is important to reduce the governance cost structure. Following was the ranking and percentage that believed it was “important” or “very important” for the respective entity to reduce costs:

- |                           |  |
|---------------------------|--|
| 1. Committees/work groups | 83% (indicated they should reduce costs) |
| 2. House of Delegates     | 82%                                      |
| 3. Councils/commissions   | 81%                                      |
| 4. Staff                  | 76%                                      |
| 5. Board of trustees      | 75%                                      |

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **16. To what extent do you support reducing the number of delegates in the House?**

Reducing the size of the House is supported by 65% of respondents, with 43% fully supporting and 22% may support, while 16% are uncertain, 9% lean against and 11% are strongly against.

### **17. How many delegates should there be in the House?**

The most frequent response was to cut the size in half. The suggested number ranged from 0 to 476. Most responses were in the 250-300 range.

### **18. What should be the minimum number of delegates for each state or jurisdiction?**

The most frequent response was 2 delegates, with the second choice 1 delegate and 3 being the third choice.

### **19. To what extent do you support reducing the number of alternate delegates?**

Reducing the number of alternates is supported by over 75% of respondents, with 51% fully supporting and 25% may support, while 12% are uncertain, 7% lean against and 6% are strongly against.

### **20. How many alternate delegates do you believe there should be for each state or jurisdiction?**

There is no clear consensus on the number of alternates, with 27% saying there should only be 10-20% of the number of full delegates, 18% suggesting between 21-30%, 31% indicating between 31-50%, 10% saying between 51-75% and 13% wanting a maximum of 10 alternates per state or jurisdiction.



# APPENDIX: Leadership Survey Results

## ***Section 1: Summary Findings (continued)***

### **21. To what extent do you support establishing a term limit for the speaker?**

71% of respondents support a term limit, with 47% fully supporting and 24% may support. 13% are uncertain or need more information, 11% lean against and 5% are strongly against.

### **22. How many years should a speaker be allowed to serve?**

The most frequent responses were 4-6 years, with 6 being the most frequent.

### **23. To what extent do you support establishing term limits for delegates?**

Respondents tend to favor term limits for delegates, with 36% fully supporting and 28% may support. 15% are uncertain or need more information, 12% lean against it and 9% are strongly against.

### **24. What's the maximum number of years a delegate should serve?**

The responses varied considerably, but the majority ranged from 6 – 10 years. The average suggested term limit was about 7.5 years.

### **25. To what extent do you support establishing term limits for alternate delegates?**

Responses indicate that 54% will or may support term limits, while 24% either lean against or are strongly against them. About 19% are undecided or need more information.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **26. What is the maximum number of years an alternate delegate should be allowed to serve?**

The responses varied considerably, but the majority suggested term limits of 5 or 6 years. Comments included the importance of allowing more members to serve by having term limits. Some believe after serving a set number of years the alternate should be off for one or two years and then have an opportunity repeat a term.

The comment that seemed to summarize many of the responses said that they should serve no more than five years, and after that they should become a delegate or “ride off into the sunset.”

### **27. To what extent do you support establishing a requirement that the House must approve a balanced budget?**

There was good support for a balanced budget requirement as 81% either fully supported or may support it. Only 8% were against, with 6% leaning against and 2% strongly against. 11% needed more information or were uncertain.

### **28. To what extent do you support establishing a requirement that all House resolutions involving an expenditure of funds be held over for one year, unless a super majority seeks an immediate vote – to facilitate appropriate consideration during the budgeting process by the Board and delegates?**

The responses were divided on holding over resolutions, with 49% supporting (21% fully support and 28% may support) and 32% against (19% leaning against and 13% strongly against). 19% were uncertain or need more information.

### **29. To what extent do you support establishing a requirement that all House resolutions involving expenditure of funds specifically identify a funding mechanism (e.g., a dues increase, specific program expenditure cuts, use of reserves, etc.)?**

There was strong support for this provision with 80% supporting (45% fully support and 35% may support) and only 12% against (7% leaning against and 5% strongly against). 8% were uncertain or need more information.



# APPENDIX: Leadership Survey Results

## ***Section 1: Summary Findings (continued)***

### **30. To what extent do you support retaining the House's authority to establish membership dues, while transferring remaining budget authority to the Board of Trustees?**

Respondents lean slightly towards approving this provision, but not by a strong majority. 54% either fully support or may support, while 20% are uncertain, 15% lean against and 11% are strongly against.

### **31. To what extent do you support eliminating late filing of resolutions after a certain date prior to the meeting of the House – in order to provide the House time to evaluate resolutions fully?**

There was considerable support for this with 81% supporting and 11% opposing. Specifically, 48% fully support, 32% may support, 7% lean against, 4% are strongly against, and 8% are uncertain or need more information.

### **32. To what extent do you support convening a mid-year House of Delegates meeting (electronic format) to consider a segment of resolutions and conduct other to-be-determined business?**

The concept has viewed positively by most, with 58% either fully support or may support – 18% and 40% respectively. 24% are either leaning against or strongly against – 16% and 8% respectively. 18% are uncertain or need more information.

### **33. To what extent do you support reducing the number of districts (currently 17) – thereby reducing the number of total board members?**

Respondents generally resist reducing the number of districts. 25% lean against and 23% are strongly against this, while only 35% either fully support or may support such a change. Those who are uncertain and need more information (16%) could make this go either way.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **34. How many districts should there be?**

While there was a wide variety of comments and suggestions for the number of districts, most feel the number of districts should not be reduced. The majority of those with a suggestion for the number of districts recommended from 5-10.

### **35. To what extent do you support having the president-elect selected by the Board?**

There was essentially no support for this concept. 52% were strongly against and 25% leaning against this. Only 14% either fully support or may support such a change. 9% were uncertain or needed more information.

### **36. To what extent do you support ensuring all president-elect candidates have been off the board for at least one year prior to running?**

Respondents were split, with 21% fully supporting and 24 % may support (45% total), while 38% were either leaning against or strongly against such a change. 17% were uncertain or needed more information.

### **37. To what extent do you support eliminating one or both of the vice president positions?**

There was support for eliminating these positions, with 20% fully supporting and 36% may support. 27% were leaning against or strongly against, and 17% were uncertain or needed more information.

### **38. To what extent do you support establishing an executive committee of the board to act within the Board's authority and thereby decrease the number and length of board meetings?**

Interest was expressed in this type of a committee, with 55% of respondents either fully supporting or may support. There was a large number indicating that they were uncertain or needed more information. 25% were either leaning against or strongly against.



# APPENDIX: Leadership Survey Results

## ***Section 1: Summary Findings (continued)***

### **39. To what extent do you support reducing the number of councils and/or commissions (currently 11 councils and 2 commissions)?**

The majority was interested in reducing the number, while 24% were uncertain or need more information. 58% of respondents either fully support or may support reducing the number of councils/commissions, while 18% are either leaning against or strongly against.

### **40. What councils or commissions would you eliminate?**

There was a wide range of comments and recommendations. Those that were most frequently mentioned for elimination included (in order of preference):

- Council on Membership Insurance and Retirement Programs
- Council on Communications
- Council on Membership
- Council on Access, Prevention and Interprofessional Relations
- Council on Scientific Affairs
- New Member Committee
- Council on Ethics, Bylaws and Judicial Affairs

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings***

### **40. What councils or commissions would you eliminate (continued)?**

The most frequent suggestions for combining councils included:

- Membership Council and New Member Committee
- Membership and Communications
- Membership and Council on Membership Insurance and Retirement Programs
- Dental Practice, Council on Dental Education and Licensure and Council on Membership Insurance and Retirement Programs
- Council on Ethics, Bylaws and Judicial Affairs with the Council on Dental Practice
- Commission on Education and Licensure with Commission on Dental Exams
- Council on Dental Practice and Dental Benefit Programs
- Scientific Affairs, CMIRP and CAPIR
- Government Relations and ADAPAC
- CAPIR and CGA
- Incorporate New Dentist Committee into each entity
- Make Communications council a committee of the Board





# APPENDIX: Leadership Survey Results

## ***Section 1: Summary Findings (continued)***

### **41. To what extent do you support reducing the number of members assigned to each council (typically 17)?**

There is support for reducing the number of council members, with 55% of respondents either fully supporting or may support. 30% indicated either leaning against or strongly against, and 15% are uncertain or need more information.

### **42. How many members do you believe should be assigned to the councils?**

The responses varied considerably. Most suggested from 10 to 12, with 12 being the most frequent number. There were comments that if the number of districts is reduced then councils should be set accordingly, as well as the suggestion that half the districts rotate seats on a periodic basis.

### **43. What approach should be used to achieve a reduced number of members per council?**

There was no clear consensus, but many do support various recommendations. This included 30% supporting a reduction in the number of districts, 38% for rotating district representation on councils, 24% for creating competition for council slots with each district nominating a candidate, and 8% who would prefer “other” suggestions. Other suggestions included a combination of reducing the districts and rotating district representation, and suggestions to base the appointment on expertise of the nominee rather than a political decision based on “whose turn it is.”

### **44. To what extent do you support establishing a requirement that the structure of councils and commissions be periodically reviewed for effectiveness, possible sun setting, merger, etc.?**

There is near unanimous support for reviewing the effectiveness of the councils on a periodic basis. 95% either fully support or may support, while less than 2% lean against or are strongly against. 3% are uncertain or need more information.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **45. How often should the Council structure be reviewed?**

There was a wide range of recommendations but most recommended the councils be reviewed for effectiveness every 3-5 years, with five years being most frequently mentioned.

### **46. To what extent do you support reducing the number of committees, sub-committees, work groups and/or task forces?**

There is a great deal of interest and support, with 74% either fully supporting or may support, while only 7% are leaning against or strongly against. 18% of respondents are uncertain or need more information.

### **47. To what extent do you support establishing a requirement that the structure of committees, work group and task forces be periodically reviewed for effectiveness, possible sunseting, merger, etc.?**

Near unanimous support exists for reviewing the committees, with 96% either fully supporting or may support. Less than 1% lean against or are strongly against, and only 3% are uncertain or need more information.

### **48. How often should the committee structure be reviewed?**

Responses varied considerably, but the majority favored every 3-5 years.

### **49. To what extent do you support enforcing procedures to assure members of all governance entities possess competencies and skills designated as crucial for their specific entity?**

There is strong support to have volunteers selected who have the competencies and skills required for the position. 85% responded favorably, with 57% fully supporting and 28% may support. 12% are uncertain or need more information, and 3% either lean against or are strongly against.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

**50. To what extent do you support reducing the number of in-person meetings and replace one or more of them for each entity with video, webinar or telephonic meetings?**

Considerable interest exists, with 79% responding favorably. 42% fully support, 37% may support, 8% lean against, 4% are strongly against and 9% are uncertain or need more information.

**51. To what extent do you support moving to a paperless governance operation over the next two years (i.e., eliminating paper being sent in advance for House, Board, Council, and other governance entity meetings)?**

There is strong support for becoming paperless, with 89% indicating support, including 63% who fully support and 26% may support. 6% either lean against or are strongly against, and 5% are uncertain or need more information.

**52. To what extent do you support convening governance meetings over weekends as opposed to during the week?**

Respondents seem to favor weekend meetings, with 74% supporting versus 12% leaning or strongly against.



# APPENDIX: Leadership Survey Results

## Section 1: Summary Findings (continued)

### 53. What additional input and specific recommendations do you have?

Repeated responses included:

1. Governance is too big and unwieldy – streamline governance and reduce the size.
2. Decision making must focus on members...we must be a member driven organization. Some are concerned that the organization is currently too staff driven.
3. Increase the use of e-technology, including having the House, councils and committees using e-conference.
4. Increase transparency to the membership, including open minutes of governance entities to all members.
5. Other comments with multiple mentions:
  - Reduce officer campaign expenses and eliminate receptions.
  - Take this study seriously and make radical changes.
  - Reduce the House meetings by one day.
  - Designate a task force to review the governance study and make recommendations.
  - Trust staff and use them effectively.
  - Align governance to the mission of the organization.
  - Board members who run for office have their votes influenced by their candidacy.
  - Smaller districts don't have adequate representation.

### 54. To what extent do you agree or disagree that this survey instrument provided you an appropriate opportunity to convey your opinions about the ADA's governance structure and operations?

Over 80% agree that the survey provided an appropriate opportunity to convey their opinions about ADA's governance structure and operations, with 28% strongly agreeing and 52% agreeing. Only 4% disagreed, and 15% were neutral.

# APPENDIX: Leadership Survey Results



## ***Section 1: Summary Findings (continued)***

### **55. Describe specific concerns about this survey?**

Only a limited number of respondents made comments, and they included:

1. Some participants were not aware of the breadth of the study and suggested that interviews, benchmarking and fiscal analysis be conducted (which are all included in the governance study).
2. Some members may not be knowledgeable to answer the questions asked.
3. Questions were asked in a way that could give those interpreting the results the wrong message.
4. Too vague. Needs more specific information.

### **56. Additional comments?**

Virtually all the comments made in this section had been made in previous responses.



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions

1. Which ADA entities are you a member of? (Select all that apply)		
Answer Options	Response Percent	Response Count
Delegate to the House	48.2%	338
Alternate Delegate to the House	30.2%	212
Board of Trustee member	1.1%	8
Council member	19.0%	133
Committee member	8.1%	57
Commission member	1.3%	9
Task Force member	1.3%	9
State Executive Director	2.7%	19
State President	5.4%	38
ASDA Board member	0.4%	3
ADA staff	9.8%	69
<i>answered question</i>		701



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

2. Which ADA district are you associated with? (Select one of the following)			
Answer Options	Staff Response Count	Leader Response Count	Total Responses
District 1	1	38	39
District 2	0	45	45
District 3	0	32	32
District 4	1	41	42
District 5	0	31	31
District 6	0	34	34
District 7	0	36	36
District 8	3	25	28
District 9	0	33	33
District 10	0	20	20
District 11	0	21	21
District 12	0	13	13
District 13	0	56	56
District 14	0	75	75
District 15	0	33	33
District 16	0	35	35
District 17	0	38	38
None of the above/Uncertain	62	13	75
<i>answered question</i>	<i>67</i>	<i>619</i>	<i>686</i>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

3. How many years have you been a member of the ADA?		
Answer Options	Response Percent	Response Count
0-3	1.8%	11
4-6	1.1%	7
7-10	3.2%	20
11-15	4.8%	30
16-25	21.5%	133
Over 25	67.5%	418
<i>answered question</i>		619

5. How effective is the ADA at incorporating diversity (i.e., students, new dentists, gender, ethnicity, culture etc.) in the selection of members to governance entities (e.g., House of Delegates, Board, Council, and Committee members, etc.)?	
Answer Options	Response Count
Very Effective	75
Effective	248
Neutral	200
Ineffective	124
Very Ineffective	30
<i>answered question</i>	677





# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

7. How effective was the ADA in orienting you to your most recent leadership position? (Leadership Only)	
Answer Options	Response Count
Very Effective	150
Effective	253
Neutral	128
Ineffective	33
Very Ineffective	9
<i>answered question</i>	573

9. How effective do you believe the following entities are in referencing ADA's strategic plan (i.e., mission, vision, and goals) in undertaking their roles and making decisions?							
Answer Options	Very Effective	Effective	Neutral	Ineffective	Very Ineffective	Unsure	Response Count
House of Delegates	73	289	127	98	36	21	644
Board of Trustees	166	324	82	30	10	32	644
Councils/Commissions	116	331	109	36	9	42	643
Committees/Sub-committees/Task Forces/Work Groups	91	300	145	36	5	63	640

# APPENDIX: Leadership Survey Results



## Section 2: Detailed Responses to Quantitative Questions (continued)

10. How EFFECTIVE do you perceive the following councils and commissions are in serving ADA?							
Councils and Commissions	Very Effective	Effective	Neutral	Ineffective	Very Ineffective	Unsure	Response Count
Council on Access, Prevention and Interprofessional Relations	90	269	131	38	12	98	638
Council on ADA Sessions	220	300	62	14	2	43	641
Council on Communications	94	287	143	37	8	63	632
Council on Dental Benefit Programs	111	279	130	34	6	78	638
Council on Dental Education and Licensure	77	272	152	55	14	67	637
Council on Dental Practice	93	286	138	33	8	77	635
Council on Ethics, Bylaws and Judicial Affairs	130	288	127	25	3	65	638
Council on Government Affairs	216	281	68	24	6	44	639
Council on Membership	74	265	169	68	10	49	635
Council on Members Insurance and Retirement Programs	63	224	169	49	20	108	633
Council on Scientific Affairs	117	303	127	16	5	64	632
Commission on Dental Accreditation	67	204	170	84	40	68	633
Joint Commission on National Dental Examinations	43	209	180	72	26	104	634
New Dentist Committee	126	282	120	22	15	66	631

# APPENDIX: Leadership Survey Results



## Section 2: Detailed Responses to Quantitative Questions (continued)

11. How EFFICIENT do you perceive the following councils and commissions are in serving ADA?							
Councils and Commissions	Very Effective	Effective	Neutral	Ineffective	Very Ineffective	Unsure	Response Count
Access, Prevention and Interprofessional Relations	70	177	166	57	14	146	630
ADA Sessions	158	249	93	33	7	94	634
Communications	72	229	152	48	12	119	632
Dental Benefit Programs	80	206	150	44	10	143	633
Dental Education and Licensure	57	215	170	48	18	128	636
Dental Practice	69	214	166	40	12	134	635
Ethics, Bylaws and Judicial Affairs	86	227	155	29	5	128	630
Government Affairs	129	248	112	27	10	109	635
Membership	55	221	157	71	15	113	632
Members Insurance and Retirement Programs	48	187	166	51	18	158	628
Scientific Affairs	79	244	144	32	9	123	631
Dental Accreditation	48	165	183	68	35	131	630
Joint Commission on National Dental Examinations	39	174	177	62	31	147	630
New Dentist Committee	87	224	140	37	19	117	624



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

12. Where do you perceive there to be significant duplication/overlap of work performed between governance entities? (Select all that apply)	
Answer Options	Response Count
Between the House of Delegates and Board of Trustees	168
Between the Board of Trustees and Councils/Committees	147
Between Councils	220
No Opinion or None of the Above	272
<i>answered question</i>	<b>807</b>

14. For each of the following governance entities, how appropriate is the amount of communication/ information you receive regarding their activities, decisions made, etc.?				
Answer Options	Too Much Information	Just the Right Amount of Information	Too Little Information	Response Count
House of Delegates	33	442	96	571
Board of Trustees	11	277	274	562
Councils and Commissions	12	280	274	566
Committees	8	255	296	559



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

15. The ADA has operated under a deficit budget for the last three years, and current operating reserves (29% of budgeted expenses) are much lower than what is generally considered prudent for associations (i.e., 50% of budgeted expenses). With this in mind, how important do you perceive it is to reduce the cost structure of the following entities?

Answer Options	Very Important	Important	Unimportant	Very Unimportant	Response Count
House of Delegates	254	271	82	30	637
Board of Trustees	163	314	132	30	639
Councils/Commissions	179	333	95	25	632
Committees/Work Groups/Task Forces	194	329	93	21	637
Staff	165	318	109	44	636

16. To what extent do you support reducing the number of delegates in the House (currently 473)?

Answer Options	Response Percent	Response Count
Fully Support	43.1%	276
May Support	22.2%	142
Uncertain/Need More Information	15.6%	100
Leaning Against	8.6%	55
Strongly Against	10.5%	67
<i>answered question</i>		640



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

19. To what extent to you support reducing the number of alternate delegates (currently 473)?		
Answer Options	Response Percent	Response Count
Fully Support	50.6%	324
May Support	24.8%	159
Uncertain/Need More Information	11.9%	76
Leaning Against	6.6%	42
Strongly Against	6.1%	39
<i>answered question</i>		<b>640</b>

20. How many alternate delegates do you believe there should be for each state or jurisdiction? (Select one of the following)		
Answer Options	Response Percent	Response Count
10-20% of Delegates	27.0%	129
21-30% of Delegates	18.4%	88
31-50% of Delegates	31.4%	150
51-75% of Delegates	10.1%	48
A maximum of 10 alternates	13.0%	62
<i>answered question</i>		<b>477</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

21. To what extent do you support establishing a term limit for the Speaker position?		
Answer Options	Response Percent	Response Count
Fully Support	47.0%	301
May Support	24.2%	155
Uncertain/Need More Information	12.7%	81
Leaning Against	10.9%	70
Strongly Against	5.2%	33
<i>answered question</i>		<b>640</b>

23. To what extent do you support establishing term limits for delegates?		
Answer Options	Response Percent	Response Count
Fully Support	35.8%	228
May Support	28.0%	178
Uncertain/Need More Information	14.8%	94
Leaning Against	11.9%	76
Strongly Against	9.4%	60
<i>answered question</i>		<b>636</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

25. To what extent do you support establishing term limits for alternate delegates?		
Answer Options	Response Percent	Response Count
Fully Support	33.0%	210
May Support	24.1%	153
Uncertain/Need More Information	18.6%	118
Leaning Against	14.6%	93
Strongly Against	9.7%	62
<i>answered question</i>		<b>636</b>

27. To what extent do you support establishing a requirement that the House must approve a balanced budget each year?		
Answer Options	Response Percent	Response Count
Fully Support	54.8%	347
May Support	26.2%	166
Uncertain/Need More Information	11.1%	70
Leaning Against	5.8%	37
Strongly Against	2.1%	13
<i>answered question</i>		<b>633</b>





# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

28. To what extent do you support establishing a requirement that all House resolutions involving the expenditure of funds be held over for one year, unless a super majority seeks an immediate vote - to facilitate appropriate consideration during the budgeting process by the Board and delegates?		
Answer Options	Response Percent	Response Count
Fully Support	21.2%	134
May Support	27.5%	174
Uncertain/Need More Information	19.1%	121
Leaning Against	19.1%	121
Strongly Against	13.1%	83
<i>answered question</i>		<b>633</b>

29. To what extent do you support establishing a requirement that all House resolutions involving the expenditure of funds must specifically identify a funding mechanism (e.g., a dues increase, specific program expenditure cuts, use of reserves, etc.)?		
Answer Options	Response Percent	Response Count
Fully Support	44.5%	282
May Support	35.5%	225
Uncertain/Need More Information	8.5%	54
Leaning Against	6.8%	43
Strongly Against	4.7%	30
<i>answered question</i>		<b>634</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

30. To what extent do you support retaining the House's authority to establish membership dues, while transferring remaining budget authority to the Board of Trustees?		
Answer Options	Response Percent	Response Count
Fully Support	24.1%	152
May Support	29.6%	187
Uncertain/Need More Information	20.1%	127
Leaning Against	14.9%	94
Strongly Against	11.4%	72
<i>answered question</i>		632

31. To what extent do you support eliminating late filing of resolutions after a certain date prior to the meeting of the House - in order to provide the House time to evaluate resolutions fully?		
Answer Options	Response Percent	Response Count
Fully Support	48.2%	306
May Support	32.4%	206
Uncertain/Need More Information	8.3%	53
Leaning Against	7.4%	47
Strongly Against	3.6%	23
<i>answered question</i>		635



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

32. To what extent do you support convening a mid-year House of Delegates meeting (electronic format) to consider a segment of resolutions and conduct other to-be-determined business?		
Answer Options	Response Percent	Response Count
Fully Support	18.6%	118
May Support	39.8%	252
Uncertain/Need More Information	17.9%	113
Leaning Against	15.5%	98
Strongly Against	8.2%	52
<i>answered question</i>		<b>633</b>

33. To what extent do you support reducing the number of districts (currently 17) - thereby reducing the number of total board members?		
Answer Options	Response Percent	Response Count
Fully Support	12.8%	81
May Support	22.3%	141
Uncertain/Need More Information	16.4%	104
Leaning Against	25.3%	160
Strongly Against	23.2%	147
<i>answered question</i>		<b>633</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

35. To extent to you support having the President-Elect selected by the Board instead of the House of Delegates?		
Answer Options	Response Percent	Response Count
Fully Support	4.9%	31
May Support	8.7%	55
Uncertain/Need More Information	9.0%	57
Leaning Against	25.2%	159
Strongly Against	52.1%	329
<i>answered question</i>		<b>631</b>

36. To what extent do you support ensuring all President-Elect candidates have been off the Board for at least one year prior to running?		
Answer Options	Response Percent	Response Count
Fully Support	20.8%	131
May Support	24.2%	153
Uncertain/Need More Information	17.3%	109
Leaning Against	24.2%	153
Strongly Against	13.5%	85
<i>answered question</i>		<b>631</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

37. To what extent do you support eliminating one or both of the Vice President positions?		
Answer Options	Response Percent	Response Count
Fully Support	19.9%	126
May Support	36.3%	230
Uncertain/Need More Information	16.9%	107
Leaning Against	16.0%	101
Strongly Against	10.9%	69
<i>answered question</i>		<b>633</b>

38. To what extent do you support establishing an Executive Committee of the Board to act within the Board's authority and thereby decrease the number and length of Board meetings?		
Answer Options	Response Percent	Response Count
Fully Support	18.6%	117
May Support	35.9%	226
Uncertain/Need More Information	20.2%	127
Leaning Against	15.4%	97
Strongly Against	10.0%	63
<i>answered question</i>		<b>630</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

39. To what extent do you support reducing the number of councils and/or commissions (currently 11 councils and 2 commissions)?		
Answer Options	Response Percent	Response Count
Fully Support	21.5%	136
May Support	36.2%	229
Uncertain/Need More Information	24.1%	152
Leaning Against	11.4%	72
Strongly Against	6.8%	43
<i>answered question</i>		<b>632</b>

41. To what extent do you support reducing the number of members assigned to each council (typically 17)?		
Answer Options	Response Percent	Response Count
Fully Support	20.8%	131
May Support	33.7%	212
Uncertain/Need More Information	15.6%	98
Leaning Against	17.1%	108
Strongly Against	12.9%	81
<i>answered question</i>		<b>630</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

43. Which approach should be used to achieve a reduced number of members per council? (Select one of the following)		
Answer Options	Response Percent	Response Count
Reduce the number of districts, thereby reducing the number of council appointments.	30.2%	102
Rotate district representation on most/all councils; at any point in time a given district would only have appointees on half to two-thirds of the councils.	38.2%	129
Create competition for council slots, with each district given the opportunity to nominate a member for each council, but only half to two-thirds of the nominees selected; presumably the selection process would be viewed as "fair" and based on skill/competency profiles.	24.0%	81
Other	7.7%	26
Please Specify		39
<i>answered question</i>		<b>338</b>

44. To what extent do you support establishing a requirement that the structure of councils and commissions be periodically reviewed for effectiveness, possible sunseting, merger, etc.?		
Answer Options	Response Percent	Response Count
Fully Support	63.3%	398
May Support	31.6%	199
Uncertain/Need More Information	3.5%	22
Leaning Against	1.1%	7
Strongly Against	0.5%	3
<i>answered question</i>		<b>629</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

46. To what extent do you support reducing the number of committees, sub-committees, work groups, and/or task forces?		
Answer Options	Response Percent	Response Count
Fully Support	33.2%	208
May Support	40.8%	256
Uncertain/Need More Information	18.3%	115
Leaning Against	5.4%	34
Strongly Against	2.2%	14
<i>answered question</i>		<b>627</b>

47. To what extent do you support establishing a requirement that the structure of committees, work groups, and task forces be periodically reviewed for effectiveness, possible sunseting, merger, etc.?		
Answer Options	Response Percent	Response Count
Fully Support	69.0%	432
May Support	26.7%	167
Uncertain/Need More Information	3.5%	22
Leaning Against	0.6%	4
Strongly Against	0.2%	1
<i>answered question</i>		<b>626</b>





# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

49. To what extent do you support enforcing policies/procedures to assure members of all governance entities possess competencies and skills designated as crucial for their specific entity?		
Answer Options	Response Percent	Response Count
Fully Support	56.7%	352
May Support	28.3%	176
Uncertain/Need More Information	12.2%	76
Leaning Against	2.1%	13
Strongly Against	0.6%	4
<i>answered question</i>		<b>621</b>

50. To what extent do you support reducing the number of in-person meetings - replacing one or more of them for each entity with video, webinar, or telephonic meetings?		
Answer Options	Response Percent	Response Count
Fully Support	42.0%	262
May Support	37.7%	235
Uncertain/Need More Information	9.1%	57
Leaning Against	7.5%	47
Strongly Against	3.7%	23
<i>answered question</i>		<b>624</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

51. To what extent do you support moving to a paperless governance operation over the next two years (i.e. eliminating paper being sent in advance for House, Board, Council and other governance entity meetings)?		
Answer Options	Response Percent	Response Count
Fully Support	62.8%	391
May Support	25.8%	161
Uncertain/Need More Information	5.5%	34
Leaning Against	4.0%	25
Strongly Against	1.9%	12
<i>answered question</i>		<b>623</b>

52. To what extent do you support convening more governance meetings over weekends as opposed to during the week?		
Answer Options	Response Percent	Response Count
Fully Support	42.9%	268
May Support	30.6%	191
Uncertain/Need More Information	14.3%	89
Leaning Against	6.9%	43
Strongly Against	5.3%	33
<i>answered question</i>		<b>624</b>



# APPENDIX: Leadership Survey Results

## Section 2: Detailed Responses to Quantitative Questions (continued)

53. To what extent do you agree or disagree that this survey instrument provided you an appropriate opportunity to convey your opinions about the ADA's governance structure and operations?		
Answer Options	Response Percent	Response Count
Strongly Agree	28.3%	177
Agree	52.8%	330
Neutral	14.7%	92
Disagree	3.4%	21
Strongly Disagree	0.8%	5
<i>answered question</i>		<b>625</b>

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# APPENDIX: Benchmarking Survey Results

## Overview

A total of 21 associations, including the ADA, completed either a short (high priority questions) or long version survey instrument eliciting input regarding their governance structure and operations. Participants included the following, with those completing the long version highlighted in yellow:

Association	Contact	Contact Title	Telephone	E-Mail
Academy of Nutrition and Dietetics	Harold J. Holler	Vice President, Governance & Practice	800-877-1600	<a href="mailto:hholler@eatright.org">hholler@eatright.org</a>
American Academy of Pediatrics	John J. Miller	Director, Department of Finance	847-434-7925	<a href="mailto:jmiller@aap.org">jmiller@aap.org</a>
American Association of Nurse Anesthetists	Mary Scheuermann	Director of Governance and Board Affairs		<a href="mailto:mscheuermann@aana.com">mscheuermann@aana.com</a>
American Association of Orthodontists	Chris Vranas			<a href="mailto:cvranas@aaortho.org">cvranas@aaortho.org</a>
American Bar Association	Jack L. Rives	Chief Operating Officer	312-532-8350	<a href="mailto:jack.rives@americanbar.org">jack.rives@americanbar.org</a>
American College of Healthcare Executives	Thom D. Freyer	Vice President, Regional Services	312-424-9320	<a href="mailto:tfreyer@ache.org">tfreyer@ache.org</a>
American Dental Association	Jerry Bowman	Chief of Governance and Strategy Mgmt.	312-440-2877	<a href="mailto:bowmanj@ada.org">bowmanj@ada.org</a>
American Health Information Management Association	Sheryl Reyes	Director, Profession Governance	312-233-1582	<a href="mailto:sheryl.reyes@ahima.org">sheryl.reyes@ahima.org</a>
American Institute of Certified Public Accountants	Jay L. Rothberg		212-596-6005	<a href="mailto:jrothberg@aicpa.org">jrothberg@aicpa.org</a>
American Medical Association	Robin Menes	Vice President		<a href="mailto:robin.menes@ama-assn.org">robin.menes@ama-assn.org</a>
American Osteopathic Association	Romaine Nowakowski	Assistant to the Executive Director	800-621-1773	<a href="mailto:rnokowski@osteopathic.org">rnokowski@osteopathic.org</a>



# APPENDIX: Benchmarking Survey Results

## Overview (continued)

Association	Contact	Contact Title	Telephone	E-Mail
American Physical Therapy Association	Cheryl Robinson	Director, National Governance and Leadership	800-999-2782	<a href="mailto:cherylrobinson@apta.org">cherylrobinson@apta.org</a>
American Psychological Association	Nancy Gordon Moore	Executive Director, Governance Affairs	202-336-6088	<a href="mailto:nmoore@apa.org">nmoore@apa.org</a>
American Society of Anesthesiologists	John A. Thorner	Executive Vice President	847-268-9165	<a href="mailto:j.thorner@asahq.org">j.thorner@asahq.org</a>
American Speech-Language-Hearing Association	Andrea M. Falzarano	Director, Association Governance Operations	301-296-5710	<a href="mailto:afalzarano@asha.org">afalzarano@asha.org</a>
American Veterinary Medicine Association	Dr. Ron DeHaven	Chief Executive Officer		<a href="mailto:RDeHaven@avma.org">RDeHaven@avma.org</a>
College of American Pathologists	Liz Cramer	Manager, CAP Policy and Records, Governance Services	847-832-7440	<a href="mailto:lcramer@cap.org">lcramer@cap.org</a>
Health Information Management Systems Society	H. Stephen Lieber	President & CEO		<a href="mailto:Slieber@himss.org">Slieber@himss.org</a>
Heart Rhythm Society	Chris Busky	Chief Operating Officer	202-464-3410	<a href="mailto:cbusky@hrsonline.org">cbusky@hrsonline.org</a>
Radiological Society of North America	Mary Cerceo	Administrative Assistant; Board Affairs	630-571-7866	<a href="mailto:mcerceo@rsna.org">mcerceo@rsna.org</a>
Society of Actuaries	Cathy Powers	Executive Assistant	847-706-3568	<a href="mailto:cpowers@soa.org">cpowers@soa.org</a>



# APPENDIX: Benchmarking Survey Results

## *Overview (continued)*

On the following pages we first present quantitative survey results. This includes side-by-side comparisons of:

- ADA's responses
- Responses of all 21 associations
- Responses of the 14 responding associations that have at least \$30 million annual revenues. This excludes responses from:
  - Academy of Nutrition and Dietetics
  - American College of Healthcare Executives
  - American Association of Nurse Anesthetists
  - American Association of Orthodontists
  - American Osteopathic Association
  - Heart Rhythm Society
  - Health Information Management Systems Society

A case could be made for using either the group of 21 or group of 14 respondents in comparing governance practices with the ADA. For purposes of this report (i.e., commentary pertaining to various suggestions), W&A utilized the group of 21.



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results

		ADA	NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS						
Questions			Min.	25th %	50th %	75th %	Max.	Min.	25th %	50th %	75th %	Max.		
During what year did you complete your more recent review of your association's governance structure? (Numeric response)		2002	2000	2004	2011	2012	2012	2002	2003	2006	2011	2012		
What was your association's total revenue during the most recently completed fiscal year? (Numeric response)		\$110,000,000	\$6,200,000	\$25,000,000	\$39,500,000	\$110,000,000	\$285,000,000	\$30,569,361	\$41,000,000	\$92,082,769	\$154,200,000	\$285,000,000		
How many total professional (non-corporate) members did your association have during the most recently completed fiscal year? (Numeric response)		156,000	5,300	37,000	55,000	150,079	391,364	18,061	50,175	73,343	155,500	391,364		
Does your association have formal affiliations with:														
Regional (multi-state) or state associations serving the same profession? (Yes or No)		Yes	Yes:	5	50%	No:	5	50%	Yes:	2	33%	No:	4	67%
Associations serving cities, counties, or other geographic areas within states? (Yes or No)		No	Yes:	2	20%	No:	8	80%	Yes:	0	0%	No:	6	100%
Associations representing sub-specialties of your profession? (Yes or No)		No	Yes:	3	30%	No:	7	70%	Yes:	2	33%	No:	4	67%



# APPENDIX: Benchmarking Survey Results



## Quantitative Survey Results (continued)

		ADA	NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS						
Questions			Min.	25th %	50th %	75th %	Max.	Min.	25th %	50th %	75th %	Max.		
Do you periodically calculate the cost of governance for your association? <b>(Yes or No). If yes:</b>		No	Yes:	15	71%	No:	6	29%	Yes:	8	57%	No:	6	43%
Please indicate which of the following are included in the cost calculation:														
Leader selection (e.g., Nominating Committee expenses, balloting, candidate travel and related entertainment expenses)? <b>(Yes or No)</b>	N/A	Yes:	14	93%	No:	1	7%	Yes:	7	88%	No:	1	13%	
Stipends and general expenses (e.g., volunteers' office expenses and employer reimbursement) paid to the leaders and members of governance entities? <b>(Yes or No)</b>	N/A	Yes:	14	93%	No:	1	7%	Yes:	8	100%	No:	0	0%	
Meeting travel expenses for volunteers (e.g., air fare, ground travel, hotel, meals, daily stipends)? <b>(Yes or No)</b>	N/A	Yes:	15	100%	No:	0	0%	Yes:	8	100%	No:	0	0%	
Meeting travel expenses for volunteers' spouses (e.g., air fare, ground travel, hotel, meals)? <b>(Yes or No)</b>	N/A	Yes:	8	53%	No:	7	47%	Yes:	5	63%	No:	3	38%	
Meeting travel expenses for staff (e.g., air fare, ground travel, hotel, meals, daily stipends)? <b>(Yes or No)</b>	N/A	Yes:	13	87%	No:	2	13%	Yes:	8	100%	No:	0	0%	
Meeting travel expenses for staff's spouses (e.g., air fare, ground travel, hotel, meals)? <b>(Yes or No)</b>	N/A	Yes:	6	40%	No:	9	60%	Yes:	4	50%	No:	4	50%	
Other meeting expenses to third parties (e.g., facility rental, supplies, technology, etc.)? <b>(Yes or No)</b>	N/A	Yes:	14	93%	No:	1	7%	Yes:	8	100%	No:	0	0%	
Office supplies directly attributable to governance (e.g., business cards, stationary, postage) <b>(Yes or No)</b>	N/A	Yes:	11	73%	No:	4	27%	Yes:	6	75%	No:	2	25%	
Value of facility space allocated to governance entity leaders and for conducting governance meetings? <b>(Yes or No)</b>	N/A	Yes:	8	53%	No:	7	47%	Yes:	5	63%	No:	3	38%	
Cost of staff time to directly support various governance entities and their leaders, prepare for and participate in governance entity meetings, etc.? <b>(Yes or No)</b>	N/A	Yes:	8	53%	No:	7	47%	Yes:	4	50%	No:	4	50%	
Allocated cost of support departments (e.g., IT, HR, Finance) -- based on percent of staff supporting governance entities, floor space, or other allocation methods? <b>(Yes or No)</b>	N/A	Yes:	4	27%	No:	11	73%	Yes:	2	25%	No:	6	75%	
What was your association's calculated cost of governance for the most recently completed fiscal year? <b>(Numeric response)</b>	N/A	\$0	\$527,427	\$1,709,090	\$2,900,000	\$13,370,000	\$60,000	\$609,142	\$2,200,000	\$3,586,000	\$13,370,000			
Are you, or will you be, converting all governance entities to paperless operations? <b>(Yes or No)</b>	Yes	Yes:	5	56%	No:	4	44%	Yes:	2	40%	No:	3	60%	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS				
Min.	25th %	50th %	75th %	Max.

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS				
Min.	25th %	50th %	75th %	Max.

### HOUSE OF DELEGATES

#### Leadership Speaker

What is the term of office for the Speaker? (Numeric response)	1
Is there a limit on how many terms the Speaker can serve? (Yes or No)	No
If so, what is the limit? (Numeric response)	N/A
What is the annual stipend paid to the Speaker? (Input dollar amount)	\$43,177

1	1	1	2	3	
Yes:	9	64%	No:	5	36%
1	1	1	3	6	
\$0	\$12,000	\$35,000	\$37,200	\$43,177	

1	1	1	2	3	
Yes:	7	70%	No:	3	30%
1	1	1	3	6	
\$0	\$18,600	\$37,200	\$40,189	\$43,177	

#### Delegates

Is there a position description for delegates? (Yes or No)	No
How many delegates are allowed under your bylaws? (Numeric response)	473

Yes:	3	60%	No:	2	40%
5	74	215	418	504	

Yes:	1	33%	No:	2	67%
5	141	313	418	504	

According to the bylaws, is there a minimum percentage of delegates that must be:

Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association members? (Yes or No)	No
From specific geographic regions? (Yes or No)	Yes
What is the term of office for delegates in years? (Numeric response)	1
Is there a limit on how many terms delegates can serve? (Yes or No) If yes:	No
What is the limit in years? (Numeric response)	N/A
What is the annual stipend paid to delegates by the national organization? (Input dollar amount)	\$0

Yes:	2	14%	No:	12	86%
Yes:	0	0%	No:	14	100%
Yes:	0	0%	No:	14	100%
Yes:	1	7%	No:	13	93%
Yes:	5	38%	No:	8	62%
1	1	2	3	3	
Yes:	2	20%	No:	8	80%
2	5	7	8	9	
\$0	\$0	\$0	\$0	\$0	

Yes:	1	10%	No:	9	90%
Yes:	0	0%	No:	10	100%
Yes:	0	0%	No:	10	100%
Yes:	0	0%	No:	10	100%
Yes:	3	33%	No:	6	67%
1	1	2	3	3	
Yes:	2	29%	No:	5	71%
2	5	7	8	9	
\$0	\$0	\$0	\$0	\$0	

#### Alternative Delegates

Is there a position description for alternate delegates? (Yes or No)	No
How many alternate delegates are allowed under your bylaws? (Numeric response)	473
What is the term of office for alternate delegates in years? (Numeric response)	1

Yes:	3	60%	No:	2	40%
64	141	417	477	504	
1	1	1	2	3	

Yes:	1	33%	No:	2	67%
68	287	417	481	504	
1	1	2	2	3	

# APPENDIX: Benchmarking Survey Results



## Quantitative Survey Results (continued)

		ADA	NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS						
Questions			Min.	25th %	50th %	75th %	Max.	Min.	25th %	50th %	75th %	Max.		
Authority														
Does the HOD have ultimate authority to revise the association's bylaws? (Yes or No)		Yes	Yes:	10	71%	No:	4	29%	Yes:	7	70%	No:	3	30%
Does the HOD consider and vote upon resolutions addressing future direction of the profession (e.g., new programs and/or position statements to develop)? (Yes or No) If yes:		No	Yes:	4	80%	No:	1	20%	Yes:	2	67%	No:	1	33%
Are the resolutions binding? (Yes or No)		N/A	Yes:	3	75%	No:	1	25%	Yes:	1	50%	No:	1	50%
Does the HOD have ultimate authority to approve the association's strategic plan? (Yes or No)		No	Yes:	3	21%	No:	11	79%	Yes:	2	20%	No:	8	80%
What budget authority does the HOD have? (Respond to each choice)														
Authority to approve the budget without modifications? (Yes or No)		Yes	Yes:	5	36%	No:	9	64%	Yes:	4	40%	No:	6	60%
Authority to add expenses to the budget? (Yes or No)		Yes	Yes:	4	29%	No:	10	71%	Yes:	4	40%	No:	6	60%
Authority to reduce or eliminate expenses to the budget? (Yes or No)		Yes	Yes:	5	36%	No:	9	64%	Yes:	5	50%	No:	5	50%
Does the HOD have ultimate authority to approve membership dues increases? (Yes or No)		Yes	Yes:	12	86%	No:	2	14%	Yes:	9	90%	No:	1	10%
Operations														
How many in-person HOD meetings take place each year? (Numeric response)		1	1	1	2	2	3	1	1	2	2	3		
How many web/telephonic HOD meetings take place each year? (Numeric response)		0	0	0	0	1	12	0	0	0	0	12		
How many total hours of HOD meeting time are budgeted to take place each year, including reference committee meetings? (Numeric response)		21	4	19	25	40	53	10	20	32	40	53		
Does your association offer a formal orientation program for delegates? (Yes or No) If so:		Yes	Yes:	13	93%	No:	1	7%	Yes:	10	100%	No:	0	0%
What format(s) is the orientation offered in? (Respond to each choice):														
In person? (Yes or No)		Yes	Yes:	10	77%	No:	3	23%	Yes:	7	70%	No:	3	30%
Electronic? (Yes or No)		Yes	Yes:	10	77%	No:	3	23%	Yes:	7	70%	No:	3	30%
Hard copy? (Yes or No)		No	Yes:	9	69%	No:	4	31%	Yes:	6	60%	No:	4	40%
Is participation in HOD orientation mandatory for some or all delegates? (Yes or No) If yes:		No	Yes:	3	23%	No:	10	77%	Yes:	1	10%	No:	9	90%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions		ADA	NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS						NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
			Min.	25th %	50th %	75th %	Max.		Min.	25th %	50th %	75th %	Max.	
How are HOD preparatory materials provided? (Respond to each choice)														
Both electronic and hard copy? (Yes or No)	Yes		Yes:	5	100%	No:	0	0%	Yes:	3	100%	No:	0	0%
Electronic only? (Yes or No)	No		Yes:	1	20%	No:	4	80%	Yes:	0	0%	No:	3	100%
Hard copy only? (Yes or No)	No		Yes:	1	20%	No:	4	80%	Yes:	0	0%	No:	3	100%
How is voting on HOD decisions conducted? (Respond to each choice)														
Exclusively electronic voting? (Yes or No)	No		Yes:	2	40%	No:	3	60%	Yes:	1	33%	No:	2	67%
Exclusively paper ballots? (Yes or No)	No		Yes:	0	0%	No:	5	100%	Yes:	0	0%	No:	3	100%
Depends on the situation/type of vote? (Yes or No)	Yes		Yes:	4	80%	No:	1	20%	Yes:	2	67%	No:	1	33%
Is a professional Parliamentarian present during all HOD deliberations to assist the Speaker in addressing parliamentary issues? (Yes or No)	No		Yes:	7	50%	No:	7	50%	Yes:	4	40%	No:	6	60%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
<b>Board</b>	
Position Specific	President
Do you have this position designated as an officer? (Yes or No)	Yes
Is there a job description for this position? (Yes or No)	Yes
Are competency/skill profiles used to select the position? (Yes or No)	No
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	Yes
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	Yes
What is the term of office in years? (Numeric response)	1
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	1
Is ascension up the President chain automatic at the end of the term? (Yes or No)	N/A
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	2,080
What is the annual stipend paid to the position incumbent? (Numeric response)	\$263,505
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	\$98,800

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS				
Min.	25th %	50th %	75th %	Max.

President					
Yes:	21	100%	No:	0	0%
Yes:	8	80%	No:	2	20%
Yes:	7	35%	No:	13	65%
Yes:	3	33%	No:	6	67%
Yes:	1	11%	No:	8	89%
1	1	1	1	3	
1	1	1	1	8	
N/A					
42	750	1040	2000	2756	
\$0	\$16,525	\$76,937	\$165,375	\$263,505	
\$1,200	\$21,417	\$37,191	\$112,737	\$279,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS				
Min.	25th %	50th %	75th %	Max.

President					
Yes:	14	100%	No:	0	0%
Yes:	5	83%	No:	1	17%
Yes:	4	31%	No:	9	69%
Yes:	2	40%	No:	3	60%
Yes:	1	20%	No:	4	80%
1	1	1	1	3	
1	1	1	1	8	
N/A					
42	1040	1425	2020	2756	
\$0	\$40,543	\$83,187	\$167,625	\$263,505	
\$5,000	\$30,000	\$55,000	\$134,000	\$279,000	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
Position Specific	President Elect
Do you have this position designated as an officer? (Yes or No)	Yes
Is there a job description for this position? (Yes or No)	Yes
Are competency/skill profiles used to select the position? (Yes or No)	No
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	Yes
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	Yes
What is the term of office in years? (Numeric response)	1
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	N/A
Is ascension up the President chain automatic at the end of the term? (Yes or No)	Yes
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	See Note Below
What is the annual stipend paid to the position incumbent? (Numeric response)	\$204,857
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	\$75,900

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
President Elect					
Yes:	20	95%	No:	1	5%
Yes:	8	80%	No:	2	20%
Yes:	9	45%	No:	11	55%
Yes:	8	80%	No:	2	20%
Yes:	3	30%	No:	7	70%
1	1	1	1	2	
1	1	1	1	9	
Yes:	16	89%	No:	2	11%
0	450	832	1120	2340	
\$0	\$1,675	\$50,750	\$125,100	\$204,857	
\$1,200	\$8,321	\$36,250	\$70,000	\$274,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
President Elect					
Yes:	13	93%	No:	1	7%
Yes:	5	83%	No:	1	17%
Yes:	6	46%	No:	7	54%
Yes:	6	100%	No:	0	0%
Yes:	2	33%	No:	4	67%
1	1	1	1	2	
1	1	1	1	9	
Yes:	11	85%	No:	2	15%
34	580	1000	1300	2340	
\$0	\$9,150	\$57,000	\$125,100	\$204,857	
\$8,000	\$17,710	\$47,045	\$81,871	\$274,000	

Note: Data pertaining to time commitments are being compiled by the Board's Compensation Committee and will be reported separately.



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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Position Specific	2nd In Line for President
Do you have this position designated as an officer? (Yes or No)	Yes
Is there a job description for this position? (Yes or No)	Yes
Are competency/skill profiles used to select the position? (Yes or No)	No
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	Yes
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	Yes
What is the term of office in years? (Numeric response)	1
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	N/A
Is ascension up the President chain automatic at the end of the term? (Yes or No)	No
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	See Note Below
What is the annual stipend paid to the position incumbent? (Numeric response)	\$43,177
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	\$30,000

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS				
Min.	25th %	50th %	75th %	Max.

2nd In Line for President					
Yes:	5	24%	No:	16	76%
Yes:	2	100%	No:	0	0%
Yes:	1	20%	No:	4	80%
Yes:	1	50%	No:	1	50%
Yes:	1	50%	No:	1	50%
1	1	1	1	1	
1	1	1	1	2	
Yes:	0	0%	No:	5	100%
35	150	250	500	650	
\$0	\$10,794	\$21,589	\$32,383	\$43,177	
\$5,000	\$6,688	\$16,125	\$26,250	\$30,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS				
Min.	25th %	50th %	75th %	Max.

2nd In Line for President					
Yes:	3	21%	No:	11	79%
Yes:	1	100%	No:	0	0%
Yes:	0	0%	No:	3	100%
Yes:	1	100%	No:	0	0%
Yes:	1	100%	No:	0	0%
1	1	1	1	1	
1	1	2	2	2	
Yes:	0	0%	No:	3	100%
35	268	500	575	650	
\$43,177	\$43,177	\$43,177	\$43,177	\$43,177	
\$25,000	\$26,250	\$27,500	\$28,750	\$30,000	

Note: Data pertaining to time commitments are being compiled by the Board's Compensation Committee and will be reported separately.



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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Position Specific	Secretary
Do you have this position designated as an officer? (Yes or No)	No
Is there a job description for this position? (Yes or No)	N/A
Are competency/skill profiles used to select the position? (Yes or No)	N/A
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	N/A
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	N/A
What is the term of office in years? (Numeric response)	N/A
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	N/A
Is ascension up the President chain automatic at the end of the term? (Yes or No)	N/A
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	N/A
What is the annual stipend paid to the position incumbent? (Numeric response)	N/A
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS				
Min.	25th %	50th %	75th %	Max.

Secretary					
Yes:	7	35%	No:	13	65%
Yes:	2	100%	No:	0	0%
Yes:	3	43%	No:	4	57%
Yes:	1	50%	No:	1	50%
Yes:	0	0%	No:	2	100%
1	1	2	3	3	
1	3	4	5	6	
Yes:	0	0%	No:	7	100%
3	70	164	245	1820	
\$0	\$4,250	\$8,500	\$12,750	\$17,000	
\$0	\$500	\$2,500	\$39,375	\$55,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS				
Min.	25th %	50th %	75th %	Max.

Secretary					
Yes:	6	46%	No:	7	54%
Yes:	1	100%	No:	0	0%
Yes:	2	33%	No:	4	67%
Yes:	1	100%	No:	0	0%
Yes:	0	0%	No:	1	100%
1	1	2	3	3	
1	2	3	5	6	
Yes:	0	0%	No:	6	100%
3	100	228	250	1820	
\$17,000	\$17,000	\$17,000	\$17,000	\$17,000	
\$0	\$0	\$2,000	\$51,500	\$55,000	





# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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Position Specific	Treasurer
Do you have this position designated as an officer? (Yes or No)	Yes
Is there a job description for this position? (Yes or No)	Yes
Are competency/skill profiles used to select the position? (Yes or No)	No
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	Yes
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	Yes
What is the term of office in years? (Numeric response)	3
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	6
Is ascension up the President chain automatic at the end of the term? (Yes or No)	No
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	See Note Below
What is the annual stipend paid to the position incumbent? (Numeric response)	\$84,470
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	\$21,100

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	

Treasurer					
Yes:	11	52%	No:	10	48%
Yes:	5	100%	No:	0	0%
Yes:	4	33%	No:	8	67%
Yes:	3	60%	No:	2	40%
Yes:	1	20%	No:	4	80%
1	1	3	3	3	
1	2	3	6	6	
Yes:	0	0%	No:	12	100%
39	128	260	490	950	
\$0	\$0	\$6,700	\$21,200	\$84,470	
\$0	\$2,000	\$5,000	\$10,916	\$55,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	

Treasurer					
Yes:	7	50%	No:	7	50%
Yes:	3	100%	No:	0	0%
Yes:	2	25%	No:	6	75%
Yes:	3	100%	No:	0	0%
Yes:	1	33%	No:	2	67%
1	1	3	3	3	
1	3	5	6	6	
Yes:	0	0%	No:	8	100%
39	175	260	616	950	
\$6,700	\$13,950	\$21,200	\$52,835	\$84,470	
\$0	\$500	\$5,000	\$15,466	\$55,000	

□  
Note: Data pertaining to time commitments are being compiled by the Board's Compensation Committee and will be reported separately.



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions		ADA
Position Specific	Secretary/ Treasurer	
Do you have this position designated as an officer? (Yes or No)	No	
Is there a job description for this position? (Yes or No)	N/A	
Are competency/skill profiles used to select the position? (Yes or No)	N/A	
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	N/A	
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	N/A	
What is the term of office in years? (Numeric response)	N/A	
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	N/A	
Is ascension up the President chain automatic at the end of the term? (Yes or No)	N/A	
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	N/A	
What is the annual stipend paid to the position incumbent? (Numeric response)	N/A	
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	N/A	

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Secretary/Treasurer					
Yes:	3	14%	No:	18	86%
Yes:	2	67%	No:	1	33%
Yes:	2	67%	No:	1	33%
Yes:	1	33%	No:	2	67%
Yes:	0	0%	No:	3	100%
1	1	1	2	3	
1	2	2	4	6	
Yes:	0	0%	No:	3	100%
400	500	600	660	720	
\$0	\$33,750	\$67,500	\$73,750	\$80,000	
\$5,000	\$25,000	\$45,000	\$65,000	\$85,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Secretary/Treasurer					
Yes:	2	14%	No:	12	86%
Yes:	2	100%	No:	0	0%
Yes:	2	100%	No:	0	0%
Yes:	1	50%	No:	1	50%
Yes:	0	0%	No:	2	100%
1	2	2	3	3	
2	3	4	5	6	
Yes:	0	0%	No:	2	100%
600	630	660	690	720	
\$0	\$16,875	\$33,750	\$50,625	\$67,500	
\$5,000	\$25,000	\$45,000	\$65,000	\$85,000	

□



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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Position Specific	Immediate Past President
Do you have this position designated as an officer? (Yes or No)	No
Is there a job description for this position? (Yes or No)	N/A
Are competency/skill profiles used to select the position? (Yes or No)	N/A
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	N/A
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	N/A
What is the term of office in years? (Numeric response)	N/A
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	N/A
Is ascension up the President chain automatic at the end of the term? (Yes or No)	N/A
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	N/A
What is the annual stipend paid to the position incumbent? (Numeric response)	N/A
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	

Immediate Past President					
Yes:	14	74%	No:	5	26%
Yes:	6	86%	No:	1	14%
N/A					
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	7	100%
1	1	1	1	1	
1	1	1	1	7	
N/A					
0	75	275	550	2236	
\$0	\$0	\$3,350	\$12,114	\$82,000	
\$0	\$2,626	\$7,000	\$18,899	\$274,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	

Immediate Past President					
Yes:	10	77%	No:	3	23%
Yes:	4	100%	No:	0	0%
N/A					
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
1	1	1	1	1	
1	1	1	1	7	
N/A					
11	245	300	766	2236	
\$0	\$0	\$6,700	\$10,485	\$17,000	
\$0	\$3,252	\$13,849	\$34,000	\$274,000	

□



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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Position Specific	Remaining Board Members
Do you have this position designated as an officer? (Yes or No)	No
Is there a job description for this position? (Yes or No)	No
Are competency/skill profiles used to select the position? (Yes or No)	No
Is there a choice of candidates offered for the position (i.e., not a single slate)? (Yes or No)	No
Are candidates for the position subjected to reference and/or background checks? (Yes or No)	Yes
What is the term of office in years? (Numeric response)	4
What is the most consecutive years an incumbent can serve assuming term limits? (Numeric response -- if no term limits input N/A)	4
Is ascension up the President chain automatic at the end of the term? (Yes or No)	No
How many hours/year do you estimate the incumbent(s) spends performing his/her duties? (Numeric response)	See Note Below
What is the annual stipend paid to the position incumbent? (Numeric response)	\$56,145
What was the dollar amount of expenses reimbursed for the position incumbent during the most recent fiscal year -- average reimbursement in the case of Board members? (Numeric response including spousal travel, employer reimbursement, etc.)	\$32,000

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS				
Min.	25th %	50th %	75th %	Max.

Remaining Board Members					
Yes:	7	39%	No:	11	61%
Yes:	7	78%	No:	2	22%
Yes:	9	47%	No:	10	53%
Yes:	6	75%	No:	2	25%
Yes:	2	22%	No:	7	78%
2	3	3	3	6	
2	3	3	6	12	
Yes:	0	0%	No:	16	100%
10	71	234	445	884	
\$0	\$0	\$0	\$13,300	\$56,145	
\$0	\$3,000	\$10,688	\$28,500	\$55,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS				
Min.	25th %	50th %	75th %	Max.

Remaining Board Members					
Yes:	5	42%	No:	7	58%
Yes:	5	83%	No:	1	17%
Yes:	6	46%	No:	7	54%
Yes:	5	83%	No:	1	17%
Yes:	1	17%	No:	5	83%
2	3	3	4	6	
2	3	4	6	8	
Yes:	0	0%	No:	10	100%
10	120	239	738	884	
\$0	\$1,675	\$10,000	\$40,773	\$56,145	
\$0	\$5,000	\$16,750	\$40,028	\$55,000	

Note: Data pertaining to time commitments are being compiled by the Board's Compensation Committee and will be reported separately.



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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### Other Board Related Questions

Is there a minimum percentage of directors that must be: (Respond to each choice)

Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specific tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	Yes

Does the Board have ultimate authority to approve:

The association's strategic plan? (Yes or No)	Yes
The association's annual budget? (Yes or No)	No
Selection of the association's external auditing firm? (Yes or No)	No
Membership dues increases? (Yes or No)	No
Selection of the association's investment management firm? (Yes or No)	No
Selection of the association's legal counsel? (Yes or No)	No

Operations

Does the Board operate under a documented Code of Ethics? (Yes or No)	Yes
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With regard to Board meetings:

How many in-person Board meetings take place each year? (Numeric response)	7
How many web/telephonic Board meetings take place each year? (Numeric response)	3
Approximately how many total hours of Board meeting time are budgeted to take place each year? (Numeric response)	216

Do any of the following participate in all or selected Board meetings? (Respond to each choice)

An attorney? (Yes or No)	Yes
A CPA/accountant? (Yes or No)	Yes
A general business consultant? (Yes or No)	No
Does your association offer a formal orientation program for Board directors? (Yes or No) If so:	Yes

### NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS

Min.	25th %	50th %	75th %	Max.
------	--------	--------	--------	------

Yes:	1	5%	No:	20	95%
Yes:	1	5%	No:	20	95%
Yes:	1	5%	No:	20	95%
Yes:	3	15%	No:	17	85%
Yes:	8	38%	No:	13	62%

Yes:	16	76%	No:	5	24%
Yes:	15	71%	No:	6	29%
Yes:	18	86%	No:	3	14%
Yes:	9	43%	No:	12	57%
Yes:	16	80%	No:	4	20%
Yes:	7	33%	No:	14	67%

Yes:	8	80%	No:	2	20%
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3	4	5	6	7
0	2	5	8	15
15	40	80	114	216

Yes:	7	70%	No:	3	30%
Yes:	5	50%	No:	5	50%
Yes:	1	10%	No:	9	90%
Yes:	10	100%	No:	0	0%

### NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS

Min.	25th %	50th %	75th %	Max.
------	--------	--------	--------	------

Yes:	1	7%	No:	13	93%
Yes:	1	7%	No:	13	93%
Yes:	1	7%	No:	13	93%
Yes:	2	15%	No:	11	85%
Yes:	6	43%	No:	8	57%

Yes:	11	79%	No:	3	21%
Yes:	10	71%	No:	4	29%
Yes:	11	79%	No:	3	21%
Yes:	6	43%	No:	8	57%
Yes:	10	77%	No:	3	23%
Yes:	5	36%	No:	9	64%

Yes:	5	83%	No:	1	17%
------	---	-----	-----	---	-----

3	4	5	6	7
0	4	5	7	15
30	51	93	118	216

Yes:	5	83%	No:	1	17%
Yes:	4	67%	No:	2	33%
Yes:	0	0%	No:	6	100%
Yes:	6	100%	No:	0	0%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
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What format(s) is the orientation offered in? (Respond to each choice)

In person? (Yes or No)	Yes
Electronic? (Yes or No)	Yes
Hard copy? (Yes or No)	No
Is participation in Board orientation mandatory for some or all delegates? (Yes or No)	Yes
Does the Board participate in a retreat or other meeting at least annually where the primary focus is developing and/or assessing performance to the strategic plan? (Yes or No)	Yes

Are written governance guidelines in place that address: (Respond to each choice)

Certification of financial reports by the chief staff officer and/or other employees? (Yes or No)	No
Periodic (at least annual) reporting to the Board regarding internal controls? (Yes or No)	Yes
Allowable and prohibited Board director transactions? (Yes or No)	Yes
Treatment of material adjustments proposed by the association's external auditing firms? (Yes or No)	Yes
The Board's relationship with the association's external auditing firm? (Yes or No)	Yes
The Board's relationship with the association's investment management firm? (Yes or No)	Yes
The Board's relationship with the association's law firm? (Yes or No)	No
Processes for whistleblowers in communicating concerns? (Yes or No)	Yes
Do Board members participate in assessing the Board's overall performance on a regular basis (e.g., completing a survey or interview process)? (Yes or No)	Yes
Do Board members receive feedback on a regular basis (at least annually) regarding their individual performance? (Yes or No)	No
Do you have specific criteria for when and why a Board member can be removed from office? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	

Yes:	10	100%	No:	0	0%
Yes:	6	60%	No:	4	40%
Yes:	6	60%	No:	4	40%
Yes:	9	90%	No:	1	10%
Yes:	16	76%	No:	5	24%

Yes:	8	80%	No:	2	20%
Yes:	7	78%	No:	2	22%
Yes:	10	100%	No:	0	0%
Yes:	8	80%	No:	2	20%
Yes:	8	80%	No:	2	20%
Yes:	8	80%	No:	2	20%
Yes:	1	10%	No:	9	90%
Yes:	8	80%	No:	2	20%
Yes:	14	67%	No:	7	33%
Yes:	1	5%	No:	20	95%
Yes:	13	62%	No:	8	38%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	

Yes:	6	100%	No:	0	0%
Yes:	3	50%	No:	3	50%
Yes:	3	50%	No:	3	50%
Yes:	5	83%	No:	1	17%
Yes:	10	71%	No:	4	29%

Yes:	4	67%	No:	2	33%
Yes:	5	83%	No:	1	17%
Yes:	6	100%	No:	0	0%
Yes:	4	67%	No:	2	33%
Yes:	4	67%	No:	2	33%
Yes:	5	83%	No:	1	17%
Yes:	0	0%	No:	6	100%
Yes:	5	83%	No:	1	17%
Yes:	9	64%	No:	5	36%
Yes:	1	7%	No:	13	93%
Yes:	6	43%	No:	8	57%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Councils
Do you have this entity? (Yes or No) If no, there is no need to complete remaining questions in that specific column.	Yes
How many of each entity do you currently have? (Numeric response)	11
What is the average number of members for each entity? (Numeric response)	17

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	Yes
A Board officer (e.g., President Elect)? (Yes or No)	No
Full Board? (Yes or No)	Yes
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	No
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	Yes
What is the typical term of office for the chair of each entity? (Numeric response)	1
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	No
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	250
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	\$0

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Councils					
Yes:	10	53%	No:	9	47%
2	5	6	9	19	
10	10	11	17	30	

Yes:	1	33%	No:	2	67%
Yes:	2	40%	No:	3	60%
Yes:	2	40%	No:	3	60%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	1	20%	No:	4	80%
Yes:	3	60%	No:	2	40%
1	1	1	2	4	
Yes:	7	70%	No:	3	30%
1	2	2	3	4	
60	105	185	250	250	
\$0	\$0	\$0	\$0	\$12,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Councils					
Yes:	8	62%	No:	5	38%
2	5	6	10	19	
10	11	16	19	30	

Yes:	1	50%	No:	1	50%
Yes:	1	25%	No:	3	75%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	1	25%	No:	3	75%
Yes:	3	75%	No:	1	25%
1	1	1	2	4	
Yes:	6	75%	No:	2	25%
1	1	2	3	4	
60	155	250	250	250	
\$0	\$0	\$0	\$0	\$0	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Councils
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	Yes
A Board officer (e.g., President Elect)? (Yes or No)	No
Full Board? (Yes or No)	Yes
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	No
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	4
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	No
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	100

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	No
Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	Yes
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Councils					

Yes:	1	33%	No:	2	67%
Yes:	2	40%	No:	3	60%
Yes:	3	60%	No:	2	40%
Yes:	0	0%	No:	5	100%
Yes:	2	40%	No:	3	60%
Yes:	0	0%	No:	5	100%
1	2	3	3	6	
Yes:	2	20%	No:	8	80%
Yes:	10	100%	No:	0	0%
2	3	4	5	6	
40	43	100	120	220	

Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	1	20%	No:	4	80%
Yes:	1	20%	No:	4	80%
Yes:	0	0%	No:	5	100%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Councils					

Yes:	1	50%	No:	1	50%
Yes:	1	25%	No:	3	75%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
1	2	3	3	6	
Yes:	0	0%	No:	8	100%
Yes:	8	100%	No:	0	0%
2	3	3	4	4	
40	42	72	130	220	

Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%





# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Councils
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	2
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	25
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>(Numeric response)</b>	31
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	Yes

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	No
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	No
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	Yes
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	\$0
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	No
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	No
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	Yes

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Councils					
0	1	2	3	6	
0	2	2	10	25	
10	15	26	40	50	
Yes:	4	80%	No:	1	20%

Yes:	4	40%	No:	6	60%
Yes:	7	70%	No:	3	30%
Yes:	2	20%	No:	8	80%
Yes:	3	60%	No:	2	40%
\$0	\$0	\$0	\$0	\$0	
Yes:	5	50%	No:	5	50%
Yes:	0	0%	No:	10	100%
Yes:	7	70%	No:	3	30%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Councils					
0	1	2	2	3	
0	2	2	11	25	
10	17	26	41	50	
Yes:	4	100%	No:	0	0%

Yes:	2	25%	No:	6	75%
Yes:	5	63%	No:	3	38%
Yes:	0	0%	No:	8	100%
Yes:	2	50%	No:	2	50%
\$0	\$0	\$0	\$0	\$0	
Yes:	3	38%	No:	5	63%
Yes:	0	0%	No:	8	100%
Yes:	5	63%	No:	3	38%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Executive Committee
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	No
How many of each entity do you currently have? (Numeric response)	N/A
What is the average number of members for each entity? (Numeric response)	N/A

House of Delegates? (Yes or No)	N/A
A Board officer (e.g., President Elect)? (Yes or No)	N/A
Full Board? (Yes or No)	N/A
Committee of the HOD or Board? (Yes or No)	N/A
Full membership? (Yes or No)	N/A
Other? (Yes or No)	N/A
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	N/A
What is the typical term of office for the chair of each entity? (Numeric response)	N/A
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	N/A
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	N/A
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					
Yes:	16	76%	No:	5	24%
1	1	1	1	1	
3	4	6	7	13	

Yes:	0	0%	No:	3	100%
Yes:	1	13%	No:	7	88%
Yes:	2	25%	No:	6	75%
Yes:	0	0%	No:	8	100%
Yes:	3	38%	No:	5	63%
Yes:	2	25%	No:	6	75%
Yes:	4	57%	No:	3	43%
1	1	1	1	3	
Yes:	13	93%	No:	1	7%
1	1	1	1	2	
10	52	140	945	2700	
\$0	\$0	\$0	\$72,825	\$186,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					
Yes:	11	79%	No:	3	21%
1	1	1	1	1	
3	4	6	8	13	

Yes:	0	0%	No:	2	100%
Yes:	0	0%	No:	5	100%
Yes:	1	20%	No:	4	80%
Yes:	0	0%	No:	5	100%
Yes:	3	60%	No:	2	40%
Yes:	1	20%	No:	4	80%
Yes:	2	50%	No:	2	50%
1	1	1	2	3	
Yes:	8	89%	No:	1	11%
1	1	1	1	2	
75	656	945	1455	2700	
\$0	\$0	\$0	\$36,100	\$186,000	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Executive Committee
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	N/A
A Board officer (e.g., President Elect)? (Yes or No)	N/A
Full Board? (Yes or No)	N/A
Committee of the HOD or Board? (Yes or No)	N/A
Full membership? (Yes or No)	N/A
Other? (Yes or No)	N/A
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	N/A
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	N/A
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	N/A
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	N/A

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	N/A
Within certain specified age ranges? (Yes or No)	N/A
Of a specific gender? (Yes or No)	N/A
Of specified racial minority groups? (Yes or No)	N/A
Of specified tenure as an association member? (Yes or No)	N/A
From specific geographic regions? (Yes or No)	N/A
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					

Yes:	1	33%	No:	2	67%
Yes:	3	38%	No:	5	63%
Yes:	2	29%	No:	5	71%
Yes:	0	0%	No:	7	100%
Yes:	2	25%	No:	6	75%
Yes:	1	13%	No:	7	88%
1	1	1	3	3	
Yes:	4	25%	No:	12	75%
Yes:	13	81%	No:	3	19%
1	2	3	3	12	
5	48	140	350	830	

Yes:	2	25%	No:	6	75%
Yes:	0	0%	No:	8	100%
Yes:	0	0%	No:	8	100%
Yes:	0	0%	No:	8	100%
Yes:	1	13%	No:	7	88%
Yes:	0	0%	No:	8	100%
Yes:	0	0%	No:	8	100%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					

Yes:	1	50%	No:	1	50%
Yes:	1	20%	No:	4	80%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	2	40%	No:	3	60%
Yes:	1	20%	No:	4	80%
1	1	2	3	3	
Yes:	2	18%	No:	9	82%
Yes:	9	82%	No:	2	18%
1	3	3	3	6	
75	244	350	508	830	

Yes:	1	20%	No:	4	80%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Executive Committee
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	N/A
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	N/A
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	N/A
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	N/A

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	N/A
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	N/A
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	N/A
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	N/A
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	N/A
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					
0	2	3	6	8	
1	3	6	12	50	
0	7	20	69	140	
<b>Yes:</b>	5	63%	<b>No:</b>	3	38%

<b>Yes:</b>	2	13%	<b>No:</b>	14	88%
<b>Yes:</b>	6	38%	<b>No:</b>	10	63%
<b>Yes:</b>	5	31%	<b>No:</b>	11	69%
<b>Yes:</b>	5	63%	<b>No:</b>	3	38%
\$0	\$0	\$0	\$25,000	\$500,000	
<b>Yes:</b>	5	31%	<b>No:</b>	11	69%
<b>Yes:</b>	1	6%	<b>No:</b>	15	94%
<b>Yes:</b>	8	50%	<b>No:</b>	8	50%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Executive Committee					
1	3	4	6	8	
1	4	11	26	50	
4	10	50	75	118	
<b>Yes:</b>	4	80%	<b>No:</b>	1	20%

<b>Yes:</b>	0	0%	<b>No:</b>	11	100%
<b>Yes:</b>	3	27%	<b>No:</b>	8	73%
<b>Yes:</b>	3	27%	<b>No:</b>	8	73%
<b>Yes:</b>	2	40%	<b>No:</b>	3	60%
\$0	\$0	\$0	\$0	\$0	
<b>Yes:</b>	2	18%	<b>No:</b>	9	82%
<b>Yes:</b>	1	9%	<b>No:</b>	10	91%
<b>Yes:</b>	5	45%	<b>No:</b>	6	55%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Finance Committee
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	Yes
How many of each entity do you currently have? (Numeric response)	1
What is the average number of members for each entity? (Numeric response)	8

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	No
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	Yes
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	No
What is the typical term of office for the chair of each entity? (Numeric response)	1
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	1
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	120
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	\$0

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					
Yes:	19	95%	No:	1	5%
1	1	1	1	1	
5	5	7	8	11	

Yes:	1	25%	No:	3	75%
Yes:	6	67%	No:	3	33%
Yes:	1	11%	No:	8	89%
Yes:	1	11%	No:	8	89%
Yes:	0	0%	No:	9	100%
Yes:	1	11%	No:	8	89%
Yes:	4	50%	No:	4	50%
1	1	1	2	3	
Yes:	13	72%	No:	5	28%
1	1	1	1	6	
6	50	93	125	150	
\$0	\$0	\$0	\$0	\$82,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					
Yes:	13	100%	No:	0	0%
1	1	1	1	1	
5	5	6	7	11	

Yes:	1	33%	No:	2	67%
Yes:	3	50%	No:	3	50%
Yes:	1	17%	No:	5	83%
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%
Yes:	1	17%	No:	5	83%
Yes:	2	40%	No:	3	60%
1	1	1	2	3	
Yes:	9	75%	No:	3	25%
1	1	1	1	6	
60	75	110	120	150	
\$0	\$0	\$0	\$0	\$0	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA
	Finance Committee

Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	Yes
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	No
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	1
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	No
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	4
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	72

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	No
Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	No
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					

Yes:	1	25%	No:	3	75%
Yes:	7	78%	No:	2	22%
Yes:	1	11%	No:	8	89%
Yes:	1	11%	No:	8	89%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	8	100%
1	1	2	3	4	
Yes:	4	21%	No:	15	79%
Yes:	13	72%	No:	5	28%
1	2	3	5	12	
10	34	86	118	150	

Yes:	3	33%	No:	6	67%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	1	11%	No:	8	89%
Yes:	0	0%	No:	9	100%
Yes:	1	11%	No:	8	89%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					

Yes:	1	33%	No:	2	67%
Yes:	4	67%	No:	2	33%
Yes:	1	17%	No:	5	83%
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	5	100%
1	1	3	3	4	
Yes:	0	0%	No:	13	100%
Yes:	10	77%	No:	3	23%
1	2	3	4	6	
40	72	100	110	150	

Yes:	2	33%	No:	4	67%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Finance Committee
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	5
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	2
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	17
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	No

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	No
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	Yes
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	No
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	No
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	Yes

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					
0	1	2	3	5	
0	2	3	5	12	
4	9	15	33	140	
Yes:	5	56%	No:	4	44%

Yes:	4	21%	No:	15	79%
Yes:	14	74%	No:	5	26%
Yes:	11	58%	No:	8	42%
Yes:	6	67%	No:	3	33%
\$0	\$0	\$0	\$0	\$500,000	
Yes:	2	11%	No:	16	89%
Yes:	0	0%	No:	18	100%
Yes:	9	47%	No:	10	53%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Finance Committee					
1	1	2	3	5	
0	2	2	3	6	
5	9	15	33	50	
Yes:	3	50%	No:	3	50%

Yes:	1	8%	No:	12	92%
Yes:	8	62%	No:	5	38%
Yes:	6	46%	No:	7	54%
Yes:	3	50%	No:	3	50%
\$0	\$0	\$0	\$0	\$0	
Yes:	1	8%	No:	11	92%
Yes:	0	0%	No:	12	100%
Yes:	7	54%	No:	6	46%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Audit Committee
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	Yes
How many of each entity do you currently have? (Numeric response)	1
What is the average number of members for each entity? (Numeric response)	8

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	No
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	Yes
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	No
What is the typical term of office for the chair of each entity? (Numeric response)	1
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	No
What is the limit in years? (Numeric response)	3
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	120
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	\$0

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					
Yes:	17	89%	No:	2	11%
1	1	1	1	1	
3	4	5	6	9	

Yes:	1	25%	No:	3	75%
Yes:	6	67%	No:	3	33%
Yes:	1	11%	No:	8	89%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	2	22%	No:	7	78%
Yes:	3	33%	No:	6	67%
1	1	1	1	2	
Yes:	10	63%	No:	6	38%
1	1	1	2	4	
4	6	40	64	120	
\$0	\$0	\$0	\$0	\$12,000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					
Yes:	11	85%	No:	2	15%
1	1	1	1	1	
3	5	5	6	8	

Yes:	1	33%	No:	2	67%
Yes:	3	50%	No:	3	50%
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	2	33%	No:	4	67%
Yes:	1	17%	No:	5	83%
1	1	1	2	2	
Yes:	6	60%	No:	4	40%
1	1	1	2	3	
6	40	60	75	120	
\$0	\$0	\$0	\$0	\$0	





# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Audit Committee
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	Yes
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	No
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	1
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	No
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	4
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	72

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	No
Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	No
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					

Yes:	1	25%	No:	3	75%
Yes:	7	78%	No:	2	22%
Yes:	2	22%	No:	7	78%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	1	11%	No:	8	89%
1	1	2	2	3	
Yes:	4	24%	No:	13	76%
Yes:	11	69%	No:	5	31%
1	2	3	4	12	
3	9	40	48	100	

Yes:	4	44%	No:	5	56%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	1	11%	No:	8	89%
Yes:	0	0%	No:	9	100%
Yes:	2	22%	No:	7	78%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					

Yes:	1	33%	No:	2	67%
Yes:	4	67%	No:	2	33%
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	1	17%	No:	5	83%
1	1	2	3	3	
Yes:	0	0%	No:	11	100%
Yes:	8	73%	No:	3	27%
1	2	3	3	6	
6	40	40	72	100	

Yes:	3	50%	No:	3	50%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	1	17%	No:	5	83%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Audit Committee
What is the average number of annual in-person meetings associated with each entity? (Numeric response)	4
What is the average number of annual web/telephonic meetings associated with each entity? (Numeric response)	2
Approximately how many hours of meeting time are budgeted to take place annually for each entity? (Numeric response)	19
Does your association offer a formal orientation program for members of each entity? (Yes or No)	No

Are the entities in each category required to: (Respond to each of the following)

Submit documented performance plans to a higher level governance entity at the start of their term? (Yes or No)	No
Submit written progress reports to a higher level governance entity at least annually? (Yes or No)	Yes
Make oral progress reports and/or presentations to a higher level governance entity at least annually? (Yes or No)	Yes
Meet a certain number of times annually to be considered active? (Yes or No)	Yes
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? (Numeric response)	
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? (Yes or No)	No
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? (Yes or No)	No
Do you have specific criteria for when and why a member would be removed from the entity? (Yes or No)	Yes

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					
0	0	2	3	4	
0	2	2	3	10	
2	4	5	13	27	
Yes:	4	44%	No:	5	56%

Yes:	4	24%	No:	13	76%
Yes:	13	76%	No:	4	24%
Yes:	11	65%	No:	6	35%
Yes:	5	56%	No:	4	44%
\$0	\$0	\$0	\$0	\$0	
Yes:	2	12%	No:	15	88%
Yes:	0	0%	No:	17	100%
Yes:	6	35%	No:	11	65%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Audit Committee					
0	1	2	3	4	
0	0	2	3	6	
2	4	6	8	19	
Yes:	2	33%	No:	4	67%

Yes:	1	9%	No:	10	91%
Yes:	7	64%	No:	4	36%
Yes:	6	55%	No:	5	45%
Yes:	2	33%	No:	4	67%
\$0	\$0	\$0	\$0	\$0	
Yes:	1	9%	No:	10	91%
Yes:	0	0%	No:	11	100%
Yes:	4	36%	No:	7	64%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Governance Committee
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	Yes
How many of each entity do you currently have? (Numeric response)	1
What is the average number of members for each entity? (Numeric response)	10

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	No
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	Yes
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	No
What is the typical term of office for the chair of each entity? (Numeric response)	1
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	1
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	55
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	\$0

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					
Yes:	6	32%	No:	13	68%
1	1	1	1	1	
5	7	9	9	10	

Yes:	0	0%	No:	2	100%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
1	1	1	1	3	
Yes:	4	80%	No:	1	20%
1	1	1	1	2	
8	24	40	48	55	
0	0	0	3000	12000	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					
Yes:	3	23%	No:	10	77%
1	1	1	1	1	
5	6	8	9	10	

Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	1	100%	No:	0	0%
Yes:	0	0%	No:	1	100%
1	1	1	1	1	
Yes:	3	100%	No:	0	0%
1	1	1	1	1	
55	55	55	55	55	
0	0	0	0	0	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Governance Committee
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	Yes
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	No
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	4
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	No
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	Yes
What is the limit in years? (Numeric response)	4
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	55

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	No
Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	No
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					

Yes:	0	0%	No:	2	100%
Yes:	4	100%	No:	0	0%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
1	2	3	3	4	
Yes:	1	17%	No:	5	83%
Yes:	5	100%	No:	0	0%
2	3	4	4	12	
6	9	25	44	55	

Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					

Yes:	0	0%	No:	1	100%
Yes:	1	100%	No:	0	0%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
2	3	3	4	4	
Yes:	1	33%	No:	2	67%
Yes:	3	100%	No:	0	0%
2	3	3	4	4	
55	55	55	55	55	

Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%
Yes:	0	0%	No:	1	100%

# APPENDIX: Benchmarking Survey Results



## Quantitative Survey Results (continued)

Questions	ADA Governance Committee
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	5
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	7
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	15
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	No

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	No
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	Yes
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	No
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	No
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	Yes

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					
1	2	3	5	5	
2	3	3	5	7	
4	8	8	15	140	
Yes:	0	0%	No:	4	100%

Yes:	2	33%	No:	4	67%
Yes:	5	83%	No:	1	17%
Yes:	4	67%	No:	2	33%
Yes:	4	100%	No:	0	0%
\$0	\$0	\$0	\$0	\$0	
Yes:	0	0%	No:	6	100%
Yes:	1	17%	No:	5	83%
Yes:	4	67%	No:	2	33%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Governance Committee					
3	3	3	4	5	
3	4	5	6	7	
8	10	12	13	15	
Yes:	0	0%	No:	1	100%

Yes:	1	33%	No:	2	67%
Yes:	2	67%	No:	1	33%
Yes:	2	67%	No:	1	33%
Yes:	1	100%	No:	0	0%
\$0	#NUM!	#NUM!	#NUM!	\$0	
Yes:	0	0%	No:	3	100%
Yes:	1	33%	No:	2	67%
Yes:	3	100%	No:	0	0%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Nominating Committee
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	No
How many of each entity do you currently have? (Numeric response)	N/A
What is the average number of members for each entity? (Numeric response)	N/A

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	N/A
A Board officer (e.g., President Elect)? (Yes or No)	N/A
Full Board? (Yes or No)	N/A
Committee of the HOD or Board? (Yes or No)	N/A
Full membership? (Yes or No)	N/A
Other? (Yes or No)	N/A
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	N/A
What is the typical term of office for the chair of each entity? (Numeric response)	N/A
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	N/A
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	N/A
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					
Yes:	14	70%	No:	6	30%
1	1	1	1	1	
3	6	8	9	10	

Yes:	0	0%	No:	1	100%
Yes:	1	20%	No:	4	80%
Yes:	1	20%	No:	4	80%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	4	80%	No:	1	20%
Yes:	2	40%	No:	3	60%
1	1	1	1	2	
Yes:	11	79%	No:	3	21%
1	1	1	2	2	
10	10	25	60	63	
\$0	\$0	\$0	\$0	\$0	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					
Yes:	9	69%	No:	4	31%
1	1	1	1	1	
3	6	7	9	10	

Yes:	0	0%	No:	1	100%
Yes:	1	25%	No:	3	75%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	3	75%	No:	1	25%
Yes:	1	25%	No:	3	75%
1	1	1	1	2	
Yes:	7	78%	No:	2	22%
1	1	1	1	2	
25	43	60	62	63	
\$0	\$0	\$0	\$0	\$0	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Nominating Committee
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	N/A
A Board officer (e.g., President Elect)? (Yes or No)	N/A
Full Board? (Yes or No)	N/A
Committee of the HOD or Board? (Yes or No)	N/A
Full membership? (Yes or No)	N/A
Other? (Yes or No)	N/A
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	N/A
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	N/A
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	N/A
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	N/A

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	N/A
Within certain specified age ranges? (Yes or No)	N/A
Of a specific gender? (Yes or No)	N/A
Of specified racial minority groups? (Yes or No)	N/A
Of specified tenure as an association member? (Yes or No)	N/A
From specific geographic regions? (Yes or No)	N/A
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					

Yes:	0	0%	No:	1	100%
Yes:	3	50%	No:	3	50%
Yes:	1	17%	No:	5	83%
Yes:	1	17%	No:	5	83%
Yes:	2	33%	No:	4	67%
Yes:	1	17%	No:	5	83%
1	1	2	3	3	
Yes:	3	21%	No:	11	79%
Yes:	9	64%	No:	5	36%
2	3	3	3	4	
7	10	20	40	63	

Yes:	2	33%	No:	4	67%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					

Yes:	0	0%	No:	1	100%
Yes:	2	50%	No:	2	50%
Yes:	1	25%	No:	3	75%
Yes:	1	25%	No:	3	75%
Yes:	1	25%	No:	3	75%
Yes:	1	25%	No:	3	75%
1	2	3	3	3	
Yes:	1	11%	No:	8	89%
Yes:	6	67%	No:	3	33%
2	3	3	3	3	
20	30	40	52	63	

Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	0	0%	No:	4	100%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Nominating Committee
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	N/A
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	N/A
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	N/A
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	N/A

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	N/A
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	N/A
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	N/A
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	N/A
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	N/A
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					
0	1	2	3	5	
0	2	3	6	12	
2	9	12	22	100	
Yes:	4	67%	No:	2	33%

Yes:	4	31%	No:	9	69%
Yes:	10	77%	No:	3	23%
Yes:	6	46%	No:	7	54%
Yes:	3	50%	No:	3	50%
\$0	\$0	\$0	\$0	\$0	
Yes:	3	23%	No:	10	77%
Yes:	0	0%	No:	13	100%
Yes:	4	31%	No:	9	69%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Nominating Committee					
0	1	1	3	5	
1	2	3	9	12	
2	11	14	22	100	
Yes:	4	100%	No:	0	0%

Yes:	2	22%	No:	7	78%
Yes:	6	67%	No:	3	33%
Yes:	4	44%	No:	5	56%
Yes:	1	25%	No:	3	75%
\$0	\$0	\$0	\$0	\$0	
Yes:	2	22%	No:	7	78%
Yes:	0	0%	No:	9	100%
Yes:	3	33%	No:	6	67%





# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Other Committees
Do you have this entity? (Yes of No) If no, there is no need to complete remaining questions in that specific column.	Yes
How many of each entity do you currently have? (Numeric response)	130
What is the average number of members for each entity? (Numeric response)	Varies

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	Varies
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	No
Full membership? (Yes or No)	No
Other? (Yes or No)	Varies
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	Varies
What is the typical term of office for the chair of each entity? (Numeric response)	1
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	Varies
What is the limit in years? (Numeric response)	Varies
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	Varies
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	\$0

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					
Yes:	20	100%	No:	0	0%
5	16	27	45	130	
6	8	10	12	38	

Yes:	0	0%	No:	4	100%
Yes:	4	50%	No:	4	50%
Yes:	1	11%	No:	8	89%
Yes:	2	22%	No:	7	78%
Yes:	0	0%	No:	9	100%
Yes:	3	38%	No:	5	63%
Yes:	3	38%	No:	5	63%
1	1	1	2	4	
Yes:	14	78%	No:	4	22%
1	1	2	4	9	
10	28	40	55	85	
\$0	\$0	\$0	\$0	\$2,500	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					
Yes:	14	100%	No:	0	0%
5	21	30	65	130	
6	9	10	12	38	

Yes:	0	0%	No:	3	100%
Yes:	1	20%	No:	4	80%
Yes:	1	17%	No:	5	83%
Yes:	2	33%	No:	4	67%
Yes:	0	0%	No:	6	100%
Yes:	3	60%	No:	2	40%
Yes:	2	40%	No:	3	60%
1	1	1	2	4	
Yes:	9	75%	No:	3	25%
1	1	3	3	4	
40	50	60	73	85	
\$0	\$0	\$0	\$0	\$0	



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Other Committees
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Are remaining members of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	No
A Board officer (e.g., President Elect)? (Yes or No)	Sometimes
Full Board? (Yes or No)	No
Committee of the HOD or Board? (Yes or No)	Sometimes
Full membership? (Yes or No)	No
Other? (Yes or No)	Sometimes
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	Varies
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	No
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	Varies
What is the limit in years? (Numeric response)	Varies
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	Varies

Is there a minimum percentage of entity members that must be: (Respond to each)

Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	No
Within certain specified age ranges? (Yes or No)	No
Of a specific gender? (Yes or No)	No
Of specified racial minority groups? (Yes or No)	No
Of specified tenure as an association member? (Yes or No)	No
From specific geographic regions? (Yes or No)	No
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	No

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					

Yes:	1	25%	No:	3	75%
Yes:	4	50%	No:	4	50%
Yes:	2	22%	No:	7	78%
Yes:	2	25%	No:	6	75%
Yes:	0	0%	No:	9	100%
Yes:	1	13%	No:	7	88%
1	2	3	3	3	
Yes:	1	5%	No:	18	95%
Yes:	11	65%	No:	6	35%
1	3	3	6	12	
10	22	40	40	80	

Yes:	2	25%	No:	6	75%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	0	0%	No:	9	100%
Yes:	1	13%	No:	7	88%
Yes:	0	0%	No:	7	100%
Yes:	0	0%	No:	8	100%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					

Yes:	1	33%	No:	2	67%
Yes:	1	20%	No:	4	80%
Yes:	1	17%	No:	5	83%
Yes:	2	40%	No:	3	60%
Yes:	0	0%	No:	6	100%
Yes:	1	20%	No:	4	80%
1	2	3	3	3	
Yes:	0	0%	No:	13	100%
Yes:	8	67%	No:	4	33%
1	3	3	6	6	
40	40	40	60	80	

Yes:	1	17%	No:	5	83%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	6	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%
Yes:	0	0%	No:	5	100%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Other Committees
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	Varies
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	Unknown
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	Unknown
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	Unknown

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	No
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	Yes
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	Yes
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	0
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	No
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	No
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	Yes

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					
0	2	2	3	5	
0	1	3	4	9	
2	10	15	40	50	
Yes:	3	60%	No:	2	40%

Yes:	5	28%	No:	13	72%
Yes:	13	68%	No:	6	32%
Yes:	5	29%	No:	12	71%
Yes:	5	56%	No:	4	44%
\$0	\$0	\$0	\$0	\$0	
Yes:	4	21%	No:	15	79%
Yes:	0	0%	No:	19	100%
Yes:	8	42%	No:	11	58%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Other Committees					
0	2	2	3	5	
0	1	2	3	8	
8	13	28	43	50	
Yes:	3	100%	No:	0	0%

Yes:	3	23%	No:	10	77%
Yes:	9	69%	No:	4	31%
Yes:	4	31%	No:	9	69%
Yes:	2	33%	No:	4	67%
\$0	\$0	\$0	\$0	\$0	
Yes:	3	23%	No:	10	77%
Yes:	0	0%	No:	13	100%
Yes:	6	46%	No:	7	54%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Work Groups
Do you have this entity? (Yes or No) If no, there is no need to complete remaining questions in that specific column.	Included with Committees
How many of each entity do you currently have? (Numeric response)	N/A
What is the average number of members for each entity? (Numeric response)	N/A

Are chairs of this entity typically selected by: (Respond to each of the following)

House of Delegates? (Yes or No)	N/A
A Board officer (e.g., President Elect)? (Yes or No)	N/A
Full Board? (Yes or No)	N/A
Committee of the HOD or Board? (Yes or No)	N/A
Full membership? (Yes or No)	N/A
Other? (Yes or No)	N/A
Is prior service on the entity or a lower level entity required to be selected as the chair? (Yes or No)	N/A
What is the typical term of office for the chair of each entity? (Numeric response)	N/A
Is there a limit on how many terms the chair of each entity can serve? (Yes or No) If so:	N/A
What is the limit in years? (Numeric response)	N/A
How many hours annually do you estimate the chair of each entity spends performing his/her responsibilities? (Numeric response)	N/A
What is the typical annual stipend paid to the chair of each entity? (Numeric response)	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Work Groups					
Yes:	15	83%	No:	3	17%
1	6	10	49	100	
5	7	8	10	10	

Yes:	0	0%	No:	3	100%
Yes:	4	57%	No:	3	43%
Yes:	0	0%	No:	7	100%
Yes:	1	14%	No:	6	86%
Yes:	0	0%	No:	7	100%
Yes:	2	29%	No:	5	71%
Yes:	0	0%	No:	7	100%
1	1	1	2	2	
Yes:	5	42%	No:	7	58%
1	2	2	3	4	
10	20	40	40	50	
\$0	\$0	\$0	\$0	\$2,500	

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Work Groups					
Yes:	9	75%	No:	3	25%
5	6	8	49	100	
7	7	8	10	10	

Yes:	0	0%	No:	2	100%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	1	25%	No:	3	75%
Yes:	0	0%	No:	4	100%
Yes:	2	50%	No:	2	50%
Yes:	0	0%	No:	4	100%
1	1	1	2	2	
Yes:	2	33%	No:	4	67%
2	2	2	2	2	
40	43	45	48	50	
\$0	\$0	\$0	\$0	\$0	

# APPENDIX: Benchmarking Survey Results



## Quantitative Survey Results (continued)

		NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS						NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
		Min.	25th %	50th %	75th %	Max.		Min.	25th %	50th %	75th %	Max.	
Questions		Work Groups											
Are remaining members of this entity typically selected by: (Respond to each of the following)													
House of Delegates? (Yes or No)	N/A	Yes:	0	0%	No:	3	100%	Yes:	0	0%	No:	2	100%
A Board officer (e.g., President Elect)? (Yes or No)	N/A	Yes:	4	57%	No:	3	43%	Yes:	1	25%	No:	3	75%
Full Board? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Committee of the HOD or Board? (Yes or No)	N/A	Yes:	1	14%	No:	6	86%	Yes:	1	25%	No:	3	75%
Full membership? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Other? (Yes or No)	N/A	Yes:	2	33%	No:	4	67%	Yes:	2	67%	No:	1	33%
What is the typical term of office for the remaining members (non-leaders) of each entity? (Numeric response)	N/A	1	1	1	1	3		1	1	1	1	3	
Is prior service on a lower level entity required to be selected as a member? (Yes or No)	N/A	Yes:	2	15%	No:	11	85%	Yes:	0	0%	No:	7	100%
Is there a limit on how many terms the remaining members of each entity can serve? (Yes or No) If so:	N/A	Yes:	5	42%	No:	7	58%	Yes:	3	43%	No:	4	57%
What is the limit in years? (Numeric response)	N/A	3	3	4	6	12		3	3	3	3	3	
How many hours annually do you estimate the remaining members of each entity spends performing his/her responsibilities? (Numeric response)	N/A	3	10	40	40	50		40	43	45	48	50	
Is there a minimum percentage of entity members that must be: (Respond to each)													
Able to demonstrate specific skills/competencies relevant to the entity? (Yes or No)	N/A	Yes:	3	43%	No:	4	57%	Yes:	2	50%	No:	2	50%
Within certain specified age ranges? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Of a specific gender? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Of specified racial minority groups? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Of specified tenure as an association member? (Yes or No)	N/A	Yes:	1	14%	No:	6	86%	Yes:	0	0%	No:	4	100%
From specific geographic regions? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%
Non-members of the association with a specialized certification or profession (e.g., CPA or attorney)? (Yes or No)	N/A	Yes:	0	0%	No:	7	100%	Yes:	0	0%	No:	4	100%



# APPENDIX: Benchmarking Survey Results

## Quantitative Survey Results (continued)

Questions	ADA Work Groups
What is the average number of annual in-person meetings associated with each entity? <b>(Numeric response)</b>	N/A
What is the average number of annual web/telephonic meetings associated with each entity? <b>(Numeric response)</b>	N/A
Approximately how many hours of meeting time are budgeted to take place annually for each entity? <b>Numeric response)</b>	N/A
Does your association offer a formal orientation program for members of each entity? <b>(Yes or No)</b>	N/A

Are the entities in each category required to: **(Respond to each of the following)**

Submit documented performance plans to a higher level governance entity at the start of their term? <b>(Yes or No)</b>	N/A
Submit written progress reports to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Make oral progress reports and/or presentations to a higher level governance entity at least annually? <b>(Yes or No)</b>	N/A
Meet a certain number of times annually to be considered active? <b>(Yes or No)</b>	N/A
What is the maximum monetary expenditure that can be authorized by the entity without prior consent of a higher level governance entity? <b>(Numeric response)</b>	N/A
Do members of the entity participate in assessing the entity's overall performance on a regular basis (e.g., completing a survey or interview process)? <b>(Yes of No)</b>	N/A
Do members of the entity receive feedback on a regular basis (at least annually) regarding their individual performance)? <b>(Yes of No)</b>	N/A
Do you have specific criteria for when and why a member would be removed from the entity? <b>(Yes or No)</b>	N/A

NUMERICAL RESPONSE QUESTIONS - ALL BENCHMARKING PARTNERS					
Min.	25th %	50th %	75th %	Max.	
Work Groups					
0	1	2	3	4	
1	2	3	4	12	
8	11	15	40	50	
Yes:	0	0%	No:	6	100%

Yes:	5	36%	No:	9	64%
Yes:	8	62%	No:	5	38%
Yes:	2	17%	No:	10	83%
Yes:	4	67%	No:	2	33%
\$0	\$0	\$0	\$0	\$0	
Yes:	2	15%	No:	11	85%
Yes:	0	0%	No:	13	100%
Yes:	8	57%	No:	6	43%

NUMERICAL RESPONSE QUESTIONS - \$30 MILLION PLUS REVENUE BENCHMARKS					
Min.	25th %	50th %	75th %	Max.	
Work Groups					
1	2	2	2	3	
1	2	2	4	12	
12	33	40	43	50	
Yes:	0	0%	No:	3	100%

Yes:	2	25%	No:	6	75%
Yes:	3	43%	No:	4	57%
Yes:	0	0%	No:	7	100%
Yes:	1	33%	No:	2	67%
\$0	\$0	\$0	\$0	\$0	
Yes:	2	29%	No:	5	71%
Yes:	0	0%	No:	7	100%
Yes:	5	63%	No:	3	38%



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What other factors are included in your cost of governance calculation?***

Academy of Nutrition and Dietetics	
American Academy of Pediatrics	
American Association of Nurse Anesthetists	We do not compute an <u>overall</u> "cost of governance" for our association.
American Association of Orthodontists	
American Bar Association	The above fairly includes all significant factors.
American College of Healthcare Executives	
American Dental Association	Have not periodically calculated governance cost
American Health Information Management Association	N/A
American Institute of Certified Public Accountants	Speaker fees, also outside audio visual vendor
American Medical Association	Any and all costs directly attributable to those functions.
American Osteopathic Association	Costs of Board related bureaus, councils, committees, commissions, task forces and work groups.
American Physical Therapy Association	Cost of consultants for various Board-related activities, other professional charges
American Psychological Association	None
American Society of Anesthesiologists	
American Speech-Language-Hearing Association	Board Retreat expenses, Board Orientation expenses, Volunteer Cultivation - Luncheon, Committee gifts, certificates



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What other factors are included in your cost of governance calculation? (continued)*

American Veterinary Medicine Association	N/A
College of American Pathologists	Governance staff (5), Records and Information Center including the Archives, The Officers, Board members, all Board and Executive Committee meetings, Nominating Committee, Election Oversight Committee, all election expenses, Constitution and Bylaws Committee, and the Conflicts of Interest Review Committee. Does not include CEO's office and staff or all the other committees of the organization.
Healthcare Information Management Systems Society	Consultant: sometimes bring in an outside presenter/consultant to a board meeting, e.g. strategic planning
Heart Rhythm Society	N/A
Radiological Society of North America	n/a
Society of Actuaries	We haven't calculated these costs. The costs provided below are accurate, but are provided simply because they're easily identifiable from our system.





# APPENDIX: Benchmarking Survey Results

***Narrative Response: What steps are being taken by your association to bring younger generations into governance structures and operations?***

American Academy of Pediatrics	
American Association of Orthodontists	New/Younger member committee; continuous demographic studies; using social networks to form communities within the association; new/younger member specific programs at annual meeting; annual leadership conference
American Dental Association	Yes, there is a New Dentist Committee which is a standing committee of the Board; representation in the House from the Student Dental Organization; an annual New Dentist Conference; ex officio representation on ADA Councils of New Dentist Committee members; incremental percentage of dues payments for recent graduates; Board Liaison to the Student Association; only a few of the programs/activities geared to new or recent dental graduates.
American Osteopathic Association	Specific seat on BOT, HOD and bureaus, councils and committees for students, residents and young physicians in practice.
American Psychological Association	Have an association of graduate students with a voting seat on the Board, have Committee on Early Career Psychologists (ECPs), graduated dues ramp up for new members, some boards have dedicated seats for ECPs
American Speech-Language-Hearing Association	Offering Leadership Development Program and Minority Student Leadership Program. Considering these graduates for committee appt when appropriate. Also, developing a volunteer cultivation program and promoting entry level volunteer opportunities.
College of American Pathologists	We operate a Residents Forum (similar to our House of Delegates) and have a reserved position for a Junior Member on our Board of Governors, in our House of Delegates, and on each of our committees (with a few exceptions).
Healthcare Information Management Systems Society	Nominating Committee works from a policy regarding board candidates. There is no specific objective regarding age.
Heart Rhythm Society	We lessened the workload of Directors by removing them as official committee members to open slots for younger members. We instituted communities of interest - self organizing virtual member groups - to allow for more member engagement. We instituted a voluntary Advisory Panel to engage members in monthly surveys. We will eventually pull-in future volunteers from this population.
Society of Actuaries	We recruit younger members to serve on Section Council and Education Committees where they gain valuable experience and contacts that allow them to move into the governance structure.



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What steps are being taken by your association to bring diversity into governance structures and operations?***

American Academy of Pediatrics	
American Association of Orthodontists	none
American Dental Association	Board Standing Committee on Diversity; sponsorship of a Diversity Institute
American Osteopathic Association	Strive to be all inclusive in the nomination and appointment process for all governance entities.
American Psychological Association	Have a diversity implementation plan that includes specific activities to enhance and increase diversity participation in governance; fully fund travel costs for ethnic minority council representatives; some boards and committees have diversity slates
American Speech-Language-Hearing Association	It is voluntary for members to provide us with demographic information. The BOD uses this information when considering committee appointments. The Committee on Nominations and Elections also uses this information when developing a slate for the Board of Directors and Advisory Councils
College of American Pathologists	In addition to our policy statement espousing diversity, each year we perform a gap analysis of our current Board characteristics compared to our identified "ideals" (including characteristics of age, gender, race, skill sets, practice setting, etc.) and publish this information for our Nominating Committee and with our call for nominations.
Healthcare Information Management Systems Society	Gender and race are considerations in the board policy for the Nominating Committee
Heart Rhythm Society	We consistently look for the most qualified and skilled volunteers from around the world.
Society of Actuaries	The Nominating Committee looks at the makeup of the board and tries to recruit members that are diverse.



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: How is the House of Delegates Speaker selected?***

American Academy of Pediatrics	
American Association of Orthodontists	By one of the (8) constituent organizations; rotates
American Dental Association	The Speaker is elected annually by the ADA House of Delegates in accordance with Chapter VIII, Elective Officers of the ADA Bylaws.
American Osteopathic Association	Speaker is elected annually
American Psychological Association	Do not have a speaker position. The President presides over the Council of Representatives. Nominated and elected by the membership
American Speech-Language-Hearing Association	We have a 17 member BOD and do not have a Legislative Council (House of Delegates) as of 2008. The Legislative Council had 150 members made up of members elected from both professions. The Legislative Council approved this Governance Change in March 2007 because they realized the need to become more flexible and streamline decision making. be more responsive to member needs, external opportunities or threats and more strategic in its future planning for the professions.
College of American Pathologists	see CAP Appendix A
Healthcare Information Management Systems Society	Do not have a House of Delegates
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What expenses are reimbursed for the House of Delegates Speaker?***

American Academy of Pediatrics	
American Association of Orthodontists	all travel related to the House of Delegates, computer, etc. Same as board of trustees
American Dental Association	Travel (air, ground, luggage, parking; \$75 per day stipend for out-of-pocket gratuities and meals; lodging (room and tax only); spouse travel to 4 meetings of the Board and the annual session meeting of the House of Delegates
American Osteopathic Association	Honorarium per work day, hotel expenses, meal allowance, travel and ground transportation.
American Psychological Association	Airfare, travel, hotel, meals, incidentals.
American Speech-Language-Hearing Association	
College of American Pathologists	Travel for House meetings
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What other House of Delegates leadership positions are defined in your bylaws?***

American Academy of Pediatrics	
American Association of Orthodontists	none
American Dental Association	The officers of the House are the Speaker and Secretary who is the Executive Director of the Association. The elective officers of the Association are the President, President-elect, First Vice President, Second Vice President, Treasurer and Speaker of the House.
American Osteopathic Association	Vice Speaker
American Psychological Association	NA
American Speech-Language-Hearing Association	
College of American Pathologists	Vice Speaker, Secretary, 2 Sergeants-at-Arms, 2 Members-at-large (elected to the governing Steering Committee), Delegation Chair, Action Group Chair.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the delegate allocation formula associated with your House of Delegates?*

Academy of Nutrition and Dietetics	The 104 delegates (66 affiliate delegates, 28 DPG delegate, 6 At-large Delegates and 6 HOD Leadership Team members are based on a formula that is in the HOD Policy/Procedure Manual and not dictated by the Bylaws. The formula for determining the number of affiliate delegates: each affiliate will have one delegate for 1200 or less voting members; larger affiliates will have more than one additional delegate for each additional 1200 voting members. The calculation for each affiliate should be reviewed every three years. The formula for the number of DPG delegates is: 1 delegate per DPG.
American Academy of Pediatrics	
American Association of Nurse Anesthetists	
American Association of Orthodontists	prorated based on constituent membership population with a minimum of 2
American Bar Association	Based on the number of lawyers in each district and the number of members of the ABA Sections.
American College of Healthcare Executives	I have attached provisions of the bylaws. The basic/simple answer is that the Board of Governors decides how many Regents there are and the jurisdictions they represent - with some restrictions embedded in the Bylaws.
American Dental Association	See ADA Bylaws, Chapter V. House of Delegates, Section 10 C. Representational Requirements and Goals
American Health Information Management Association	1-100 members = 1 delegate; 101-200 members = 2 delegates; 201-300 members = 3 delegates; 301-400 members = 4 delegates; 401 or more members = 5 delegates
American Institute of Certified Public Accountants	75 % based on number of AICPA members in each state; 25 % includes At-Large Members, Board of Directors, and Past Chairs of the Board
American Medical Association	The number of delegates can change annually. Every society in the House of Delegates is entitled to at least 1 delegate. Additional delegates are apportioned on the basis of 1 per 1000 AMA members or fraction thereof. Delegates for specialty societies are apportioned on a 1 per 1000 (or fraction) designations submitted by members. Bylaws 2.111 and 2.121.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the delegate allocation formula associated with your House of Delegates? (continued)*

American Osteopathic Association	Each divisional society is entitled to 1 delegate and one additional delegates for each 100 regular members of the AOA located in the state represented; if there are 75 or more unrepresented regular members of the AOA, they are entitled to one additional delegates and one additional delegate as a student council representative of each college of osteopathic medicine accredited by the AOA and located on the state represented. Specialty college affiliates are entitled to 1 delegate.
American Physical Therapy Association	<p>Bylaws of the American Physical Therapy Association, Article VIII. House of Delegates of the American Physical Therapy Association, B. Number of Voting Delegates:  The number of chapter delegates shall be based on, but not limited to, 400, which shall be apportioned among the chapters on the basis of the number of Physical Therapist, Retired Physical Therapist, Life Physical Therapist, Physical Therapist Assistant, Retired Physical Therapist Assistant, and Life Physical Therapist Assistant members in each chapter according to membership records in the Association headquarters and as described in the standing rules. No chapter shall have fewer than 2 delegates.</p> <p>Standing Rules of the American Physical Therapy Association, 17. Formula for Determining the Size of the House of Delegates:  (1) Add the number of Physical Therapist, Retired Physical Therapist, and Life Physical Therapist members and one-half of the number of Physical Therapist Assistant, Retired Physical Therapist Assistant, and Life Physical Therapist Assistant members of the Association who are assigned to chapters as of June 30 of the year preceding the House of Delegates in which they will serve.  (2) Divide the total found in Step 1 by 400. This shall be the apportionment number.  (3) Divide the total number of Physical Therapist, Retired Physical Therapist, and Life Physical Therapist members and one-half of the number of Physical Therapist Assistant, Retired Physical Therapist Assistant, and Life Physical Therapist Assistant members for each chapter by the apportionment number.  (4) Chapters shall be allowed one delegate for each whole number and one additional delegate for any remainder equaling or exceeding 50 percent of the apportionment number.  (5) Any chapter that would be entitled to fewer than 2 delegates according to the above shall be allowed 2 delegates.</p>



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the delegate allocation formula associated with your House of Delegates? (continued)*

American Psychological Association	Each member has 10 votes to allocate to any state or division or combination. Total votes given to states vs. divisions determines the number of seats in each pool. The pool is then allocated to each segment based on total votes.
American Society of Anesthesiologists	Delegates are apportioned to each state based on the number of ASA members in that state. One delegate per 100 ASA members
American Speech-Language-Hearing Association	
American Veterinary Medicine Association	One delegate from each of the 68 member organizations
College of American Pathologists	1 delegate for every 50 CAP Fellows in a state, district, territory, or province., and 1 for each federal service.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Radiological Society of North America	n/a
Society of Actuaries	N/A





# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select delegates in your House of Delegates?***

Academy of Nutrition and Dietetics	The affiliate delegates are elected by each affiliate organization (53 total number of affiliates); DPG delegates are elected by each DPG; 6 At-large Delegates-ACEND: 1 delegate appointed; CDR: 1 delegate appointed; Students: 1 delegate elected by students; Under 30 Years of Age: 1 delegate elected nationally; Retired; 1 delegate elected nationally; and, DTR: 1 delegate elected nationally. HOD Leadership Team: 6 directors elected nationally and includes the Speaker, Speaker-elect and Past Speaker.
American Academy of Pediatrics	
American Association of Nurse Anesthetists	
American Association of Orthodontists	each constituent has its own process; no mandate
American Bar Association	Election
American College of Healthcare Executives	self-nomination, local election for 70, board appointment for 6
American Dental Association	See ADA Bylaws, Chapter V. House of Delegates, Section 20. Election of Delegates and Alt Delegates
American Health Information Management Association	CSAs appoint their delegates
American Institute of Certified Public Accountants	Council members are approved by the Nominations Committee and later elected by the AICPA Governing Council
American Medical Association	Each society selects its own delegates. AMA requires only that the delegates be AMA members and that each delegate should serve for a 2 year term. Some societies appoint delegate(s), and others elect their delegate(s). Some societies limit the number of terms a delegate may serve.
American Osteopathic Association	Varies; delegates are selected by the divisional or specialty affiliates to serve in the delegate or alternate delegate role.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select delegates in your House of Delegates? (continued)*

American Physical Therapy Association	APTA chapters, sections, assemblies, and the PTA Caucus select their own delegates via processes that vary from component to component. Each must report that information to national office by January 1 on an annual basis, whether or not their delegates serve multiple-year terms. Delegates (chapter, section, PTA Caucus) must be members in good standing for no fewer than 2 yrs. immediately preceding the start of the House session; student delegates must have 4 months membership to serve.
American Psychological Association	Each state or division submits a slate of two people. Their members who are also members of APA then vote.
American Society of Anesthesiologists	Selected by the individual states. Each state has their own process
American Speech-Language-Hearing Association	
American Veterinary Medicine Association	It is up to each member organization to identify its respective delegate and alternate delegate.
College of American Pathologists	See CAP Appendix B
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Radiological Society of North America	n/a
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What expenses are reimbursed for HOD delegates by the national organization?***

American Academy of Pediatrics	
American Association of Orthodontists	none by the national organization; covered by each individual constituent and it is not consistent
American Dental Association	None
American Osteopathic Association	For state/divisional affiliates with fewer than 300 members, the national organization will reimburse no more than \$500 toward travel expenses for the delegate.
American Psychological Association	Airfare, hotel, meals, local transportation for Winter meeting. @ nights hotel only for meeting at summer Convention
American Speech-Language-Hearing Association	
College of American Pathologists	meeting travel up to \$100 for one meeting; up to \$200 if both meetings in the year are attended.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What expenses are typically reimbursed for HOD delegates by states or other organizations?***

American Academy of Pediatrics	
American Association of Orthodontists	all over the map
American Dental Association	Unknown
American Osteopathic Association	Varies by affiliate - the majority of affiliates pay 100% of their delegates expenses.
American Psychological Association	Varies
American Speech-Language-Hearing Association	
College of American Pathologists	don't know
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the role of alternate delegates in your HOD?***

Academy of Nutrition and Dietetics	Participates in a meeting (face-to-face or virtually); participates in virtual dialogues on a specific topic; voting on motions (when appropriate). May assist a delegate in an affiliate to visit districts, but this varies.
American Academy of Pediatrics	
American Association of Nurse Anesthetists	
American Association of Orthodontists	serves in the stead of a delegate's absence or for specific issues
American Bar Association	Same as the delegate
American College of Healthcare Executives	none
American Dental Association	Role not defined in Bylaws or House Manual. In practice, alternates substitute for a delegate, as needed. For example, the alternate may be a subject matter expert on specific issues before the House. The alternate may replace a delegate who cannot be in attendance at a meeting or meetings of the House.
American Health Information Management Association	If a delegate cannot attend a meeting or participate in an electronic vote, an alternate can be appointed in coordination with the CSA leadership. The delegate is to contact the lead delegate of the state. After an alternate is appointed, the lead delegate informs the AHIMA staff of the alternate and shares materials with the alternate delegate.
American Institute of Certified Public Accountants	No alternates
American Medical Association	Alternate delegates may substitute for a delegate, on the floor of the House of Delegates, at the request of the delegate. Bylaw 2.185.
American Osteopathic Association	Alternate delegate will serve in the delegates capacity when called upon
American Physical Therapy Association	The role of the alternate delegate is to prepare as any delegate would in order to be ready to step into the role of delegate should it be necessary. Alternates do not sit with their delegations in the House proper unless they are promoted to delegate status.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the role of alternate delegates in your HOD? (continued)*

American Psychological Association	Only to serve in case of the representatives absence. Same rights and privileges as other reps.
American Society of Anesthesiologists	They are considered non-voting members of the House. They can vote only when sitting in for a delegate. As members of the House, however, they can testify at Review Committee hearings.
American Speech-Language-Hearing Association	
American Veterinary Medicine Association	Attend meetings; Vote in absence of the delegate
College of American Pathologists	When a Delegate is unable to attend a specified session, an Alternate from the Delegation will substitute for that Delegate.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Radiological Society of North America	n/a
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What is the alternate delegate allocation formula associated with your House of Delegates?***

Academy of Nutrition and Dietetics	N/A
American Academy of Pediatrics	
American Association of Nurse Anesthetists	
American Association of Orthodontists	one for one
American Bar Association	There is not
American College of Healthcare Executives	
American Dental Association	See ADA Bylaws, Chapter V. House of Delegates, Section 10, Subsection E. Alternate Delegates
American Health Information Management Association	No formula.
American Institute of Certified Public Accountants	N/A
American Medical Association	Each organization may select an alternate delegate for each of its delegate(s).
American Osteopathic Association	Same as for delegate.
American Physical Therapy Association	If a component has: 1-14 Delegates = 1 alternate Delegate may register 15-24 Delegates = 2 alternate Delegates may register 25-34 Delegates = 3 alternate Delegates may register 35 and above = 4 alternate Delegates may register
American Psychological Association	NA
American Society of Anesthesiologists	one for each delegate



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What is the alternate delegate allocation formula associated with your House of Delegates?  
(continued)***

American Speech-Language-Hearing Association	
American Veterinary Medicine Association	One alternate delegate from each of the 68 member organizations
College of American Pathologists	1 Alternate for every 50 CAP Fellows in a state, territory, district or province, and one for each federal service.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Radiological Society of North America	n/a
Society of Actuaries	N/A





# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select HOD alternate delegates?***

American Academy of Pediatrics	
American Association of Orthodontists	up to each constituent
American Dental Association	See ADA Bylaws, Chapter V. House of Delegates, Section 20. Election of Delegates and Alt Delegates.
American Osteopathic Association	varies; affiliates use their own methodology
American Psychological Association	
American Speech-Language-Hearing Association	
College of American Pathologists	See CAP Appendix B
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What expenses are reimbursed for HOD alternate delegates by the national organization?***

American Academy of Pediatrics	
American Association of Orthodontists	none
American Dental Association	None
American Osteopathic Association	None
American Psychological Association	
American Speech-Language-Hearing Association	
College of American Pathologists	meeting travel up to \$100 for one meeting; up to \$200 if both meetings in the year are attended.
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: What expenses are typically reimbursed for HOD alternate delegates by states or other organizations?***

American Academy of Pediatrics	
American Association of Orthodontists	all over the place
American Dental Association	Unknown
American Osteopathic Association	Same as for delegate.
American Psychological Association	
American Speech-Language-Hearing Association	
College of American Pathologists	don't know
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the HOD have?*

Academy of Nutrition and Dietetics	The House of Delegates, as the voice of members, governs the profession and develops policy on major professional issues via dialogue sessions (face-to-face or virtually). Monitors and evaluates trends affecting the profession, monitors member issues and mega issues, and the resulting actions, approves standards of education and standards of practice, reviews, debates, and approves professional standards, establishes the size and structure of the House, adopts and revises with the Commission on Dietetic Registration (CDR) a code of ethics for dietetics practitioners, disciplinary procedures for unethical conduct, and reinstatement conditions, makes recommendations on standards, qualifications, and other issues related to credentialing to the Commission on Dietetic Registration, makes recommendations on accreditation, approval and related issues to the Accreditation Council for Education in Nutrition and Dietetics (ACEND), provides direction for quality management in dietetics practice, identifies and develops position statements, provides oversight to Academy Bylaws and, assists with recruitment and retention efforts related to Academy membership, plus leadership development.
American Academy of Pediatrics	
American Association of Nurse Anesthetists	
American Association of Orthodontists	policy making body of the organization
American Bar Association	Adopt Association policies and elect officers
American College of Healthcare Executives	advisory to the Board of Governors (Directors)
American Dental Association	See ADA Bylaws, Chapter V. House of Delegates, Section 40. Powers; Section 50. Duties
American Health Information Management Association	(a) The standards governing the health information management profession; (b) Election of six (6) members of the AHIMA Nominating Committee in accordance with the process set forth in the AHIMA Policy and Procedure Manual; (c) Any other matters put before the House of Delegates by the AHIMA Board of Directors for final consideration and action.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the HOD have? (continued)*

American Institute of Certified Public Accountants	Designates Senior Technical Committees, Establishes composition of Board of Directors, Authorizes member ballots and proposed bylaw changes, can call special meetings of Council and the membership, Sets educational requirements (CPE) for membership, Establishes conditions for acceptance of member resignation, automatic disciplinary provisions and non-application of termination provisions, ability to elect Board Chair, Vice Chair, At-Large Council members, Joint Trial Board members, and Peer Review Board members
American Medical Association	Article IV of the AMA Constitution: "The House of Delegates is the legislative and policy-making body of the Association....[It] transacts all business of the Association not otherwise specifically provided for in this Constitution and Bylaws and elects the officers except as otherwise provided in the Bylaws."
American Osteopathic Association	Serves as the legislative body of the Association. Sets the policy of the Association.
American Physical Therapy Association	Bylaws of the American Physical Therapy Association, ARTICLE VIII. House of Delegates of the American Physical Therapy Association, Section 1: General Powers The House of Delegates of the American Physical Therapy Association has all legislative and elective powers and authority to determine policies of the Association, including the power to: A. Amend and repeal these bylaws; B. Amend, suspend, or rescind the standing rules; C. Adopt ethical principles and standards to govern the conduct of members of the Association in their roles as physical therapists or physical therapist assistants; and D. Modify or reverse a decision of the Board of Directors.
American Psychological Association	Full fiduciary responsibility for the association
American Society of Anesthesiologists	Final authority on all policy decisions of the society....
American Speech-Language-Hearing Association	



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the HOD have? (continued)*

American Veterinary Medicine Association	The House of Delegates shall be the principal body within the Association responsible for establishing policy and providing direction for matters relating to veterinary medicine and shall be the representative body of the Principal and Constituent Allied Veterinary Organizations of the Association. In addition to its other duties specified in the Bylaws, the House of Delegates has the authority to elect the President-Elect, Vice President, and when necessary, President of the AVMA; elect members to serve on the House Advisory Committee; elect members to serve on AVMA councils; determine the initial and annual dues for all members of the AVMA; amend the AVMA Articles of Incorporation and Bylaws; and vote on all matters properly brought before it.
College of American Pathologists	none
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Radiological Society of North America	n/a
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: Who is it HOD orientation mandatory for?*

American Academy of Pediatrics	
American Association of Orthodontists	none
American Dental Association	NA
American Osteopathic Association	All new Delegates and Alternate Delegates. It is recommended that all delegates and alternate delegates attend.
American Psychological Association	
American Speech-Language-Hearing Association	
College of American Pathologists	
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

***Narrative Response: Which parliamentary procedure rules does the HOD operate under (e.g., Roberts, SCPP, etc.)?***

American Academy of Pediatrics	
American Association of Orthodontists	Sturgis
American Dental Association	The Standard Code of Parliamentary Procedures (formerly "Sturgis")
American Osteopathic Association	Roberts Rule of Order Newly Revised (most recent edition)
American Psychological Association	Keesey
American Speech-Language-Hearing Association	
College of American Pathologists	SCPP
Healthcare Information Management Systems Society	
Heart Rhythm Society	
Society of Actuaries	N/A





# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the President?***

Academy of Nutrition and Dietetics	Nomination process which includes an interview by the Nominating Committee before selected to be placed on the ballot for a national election.
American Academy of Pediatrics	Succeeds President-elect
American Association of Nurse Anesthetists	President is an accession from President Elect Position so there is no specific election for "President".
American Association of Orthodontists	constituents elected trustees; after 4 (2) year terms, automatic up the officer track. Each trustee has an 11 year commitment
American Bar Association	Nominated by nominating committee and selected by the House of Delegates
American College of Healthcare Executives	automatic succession upon completion of chairman-elect term
American Dental Association	President-elect succeeds to the Office of President
American Health Information Management Association	Membership election
American Institute of Certified Public Accountants	Nominations Committee selection; elected by Council
American Medical Association	See President-Elect
American Osteopathic Society	Prior Year's President-elect
American Physical Therapy Association	Elected by the Chapter voting delegates of the House; officers elected by majority of votes cast
American Psychological Association	Membership popular nomination and vote
American Society of Anesthesiologists	Elected by House of Delegates.



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the President? (continued)***

American Speech-Language-Hearing Association	It is a three year successive position - President-elect, President, Past President
American Veterinary Medicine Association	Automatic ascension
College of American Pathologists	n/a
Healthcare Information Management Systems Society	Automatic succession of Chair-elect to Chair
Heart Rhythm Society	The President shall not be elected. The President-Elect shall succeed to the office of President upon the election of the new President-Elect.
Radiological Society of North America	President - Elect succeeds to office:
Society of Actuaries	President-Elect automatically becomes President



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the President-Elect?***

Academy of Nutrition and Dietetics	As noted above. President-elect becomes president after 1 year.
American Academy of Pediatrics	2 candidates selected by nationally elected Nominating Committee to run for election. President-elect is elected via ballot of all voting members.
American Association of Nurse Anesthetists	President-elect is nominated by states and placed on the ballot by Nominating Committee. Must have served on AANA Board within the past 7 years.
American Association of Orthodontists	constituents elected trustees; after 4 (2) year terms, automatic up the officer track. Each trustee has an 11 year commitment
American Bar Association	Nominated by nominating committee and selected by the House of Delegates
American College of Healthcare Executives	nominated by nominating committee, elected by Council of Regents (HOD)
American Dental Association	See ADA Bylaws, Chapter V, Section 150 and Chapter VIII, Section 30; see also Campaign Guidelines
American Health Information Management Association	Membership election
American Institute of Certified Public Accountants	Nominations Committee selection; elected by Council
American Medical Association	President-Elect is elected by the House each year, for what amounts to be a 3-year term (one year as President-Elect, one year as President, one year as Immediate Past President).
American Osteopathic Association	Elected by the House of Delegates
American Physical Therapy Association	
American Psychological Association	Same. Rotates into Presidency
American Society of Anesthesiologists	Elected by House of Delegates.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select the President-Elect? (continued)*

American Speech-Language-Hearing Association	There is a Call for Nominations broadcast to the entire membership. The Nomination period is open for approximately 6 weeks in the 4th quarter of the year. Nominees prepare an application and answer a series of questions on their qualifications, strengths and demonstrated leadership. The Committee on Nominations and Elections reviews these applications as well as demographic information and determines a slate
American Veterinary Medicine Association	Elected by House of Delegates
College of American Pathologists	See CAP Appendix C
Healthcare Information Management Systems Society	Elected by the Board
Heart Rhythm Society	Elected by membership. See attached job description and nominating committee documentation.
Radiological Society of North America	Elected by members at Annual Meeting; nomination submitted by Nominating Committee
Society of Actuaries	Nominating Committee selects, Board approves ballot, membership votes for President. Competitive (i.e., multiple candidates) election.



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the Secretary?***

Academy of Nutrition and Dietetics	N/A
American Academy of Pediatrics	N/A
American Association of Nurse Anesthetists	No position
American Association of Orthodontists	N/A
American Bar Association	Nominated by nominating committee and selected by the House of Delegates
American College of Healthcare Executives	
American Dental Association	ADA Executive Director (employee)
American Health Information Management Association	Elected by the Board
American Institute of Certified Public Accountants	Staff position
American Medical Association	Secretary is elected by the Board each year, for a one year term.
American Osteopathic Association	Not a Board position - Executive Director serves as Secretary
American Physical Therapy Association	Elected by the Chapter voting delegates of the House; officers elected by majority of votes cast
American Psychological Association	Nominated by Board and voted on by Council
American Society of Anesthesiologists	Elected by House of Delegates.
American Speech-Language-Hearing Association	The ASHA BOD does not have this position.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select the Secretary? (continued)*

American Veterinary Medicine Association	N/A
College of American Pathologists	n/a
Healthcare Information Management Systems Society	No position
Heart Rhythm Society	Elected by membership. See attached job description and nominating committee documentation.
Radiological Society of North America	President - Elect serves as Secretary - Treasurer
Society of Actuaries	N/A



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the Treasurer?***

Academy of Nutrition and Dietetics	Nomination process which includes an interview by the Nominating Committee before selected to be placed on the ballot for a national election.
American Academy of Pediatrics	N/A
American Association of Nurse Anesthetists	Treasurer is nominated by states and placed on the ballot by Nominating Committee. Must have served on AANA Board within the past 7 years.
American Association of Orthodontists	N/A
American Bar Association	Nominated by nominating committee and selected by the House of Delegates
American College of Healthcare Executives	
American Dental Association	See ADA Bylaws, Chapter V, Section 150 and Chapter VIII, Section 30; see also Campaign Guidelines
American Health Information Management Association	Elected by the Board
American Institute of Certified Public Accountants	Staff position
American Medical Association	NA
American Osteopathic Society	Prior Year's Immediate Past President
American Physical Therapy Association	Elected by the Chapter voting delegates of the House; officers elected by majority of votes cast
American Psychological Association	Nominated by Board and voted on by Council
American Society of Anesthesiologists	Elected by House of Delegates.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select the Treasurer? (continued)*

American Speech-Language-Hearing Association	The Call for Nomination is open to all members in the 4th quarter and all members are eligible for nomination. The Committee on Nominations and Elections will select a slate for the VP of Finance based on portfolio and their completed application.
American Veterinary Medicine Association	Elected by Executive Board
College of American Pathologists	n/a
Healthcare Information Management Systems Society	No position
Heart Rhythm Society	Elected by membership. See attached job description and nominating committee documentation.
Radiological Society of North America	President - Elect serves as Secretary - Treasurer
Society of Actuaries	N/A





# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select the Secretary/Treasurer?***

Academy of Nutrition and Dietetics	N/A
American Academy of Pediatrics	Executive Director/CEO serves in this capacity.
American Association of Nurse Anesthetists	No position
American Association of Orthodontists	constituents elected trustees; after 4 (2) year terms, automatic up the officer track. Each trustee has an 11 year commitment
American Bar Association	N/A
American College of Healthcare Executives	
American Dental Association	N/A
American Health Information Management Association	N/A
American Institute of Certified Public Accountants	Nominations Committee selection; elected by Council
American Medical Association	NA
American Osteopathic Association	NA
American Physical Therapy Association	
American Psychological Association	
American Society of Anesthesiologists	n/a
American Speech-Language-Hearing Association	The ASHA BOD does not have this position



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select the Secretary/Treasurer? (continued)*

American Veterinary Medicine Association	N/A
College of American Pathologists	See CAP Appendix C
Healthcare Information Management Systems Society	No position
Heart Rhythm Society	N/A
Radiological Society of North America	President - Elect serves as Secretary - Treasurer
Society of Actuaries	Leadership Team (i.e., Executive Committee of the board) selects Secretary/Treasurer from among the Vice Presidents



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What is the process used to select remaining board members?***

Academy of Nutrition and Dietetics	Nomination process before selected to be placed on the ballot for a national election.
American Academy of Pediatrics	10 Board members are each chairs of their geographic districts. Each district's nominating committee selects 1 or 2 candidates to be on ballot. Election is by all voting members of the respective district.
American Association of Nurse Anesthetists	Seven Regional Directors serve for 2 year terms with 3 being elected in one year and 4 the next year. To service they must have served one term as an officer at their state association and must have been active in state and/or national association affairs.
American Association of Orthodontists	constituents elected trustees; after 4 (2) year terms, automatic up the officer track. Each trustee has an 11 year commitment
American Bar Association	Nominated by nominating committee and selected by the House of Delegates
American College of Healthcare Executives	nominated by nominating committee, elected by Council of Regents (HOD)
American Dental Association	See ADA Bylaws, Chapter VII, Sections 40 and 50
American Health Information Management Association	Membership election
American Institute of Certified Public Accountants	
American Medical Association	Medical student member elected by the Medical Student Section; all other trustees elected by the House
American Osteopathic Association	Elected by the House of Delegates
American Physical Therapy Association	Elected by the Chapter voting delegates of the House; directors are elected by a plurality of votes cast
American Psychological Association	Nomination and election by Council



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What is the process used to select remaining board members? (continued)*

American Society of Anesthesiologists	House of Delegates also elects Assistant Treasurer, Assistant Secretary, a Vice President of Professional Affairs, a Vice President of Scientific Affairs, a Speaker of the House and an Assistant Speaker of the House.
American Speech-Language-Hearing Association	The Call for Nomination is open to all members. However, BOD positions other than the presidential team are based upon portfolio and in some cases profession specific. The Committee on Nominations and Elections will select a slate for all other BOD positions based on portfolio and their completed application.
American Veterinary Medicine Association	Elected by the voting members within their respective districts
College of American Pathologists	See CAP Appendix C
Healthcare Information Management Systems Society	Competitive election by the membership--bylaws require the number of candidates to be at least 2 times the number of open seats (4 seats annually therefore at least 8 candidates)
Heart Rhythm Society	Elected by membership. See attached job description and nominating committee documentation.
Radiological Society of North America	Elected by members at Annual Meeting; nomination submitted by Nominating Committee
Society of Actuaries	Nominating Committee selects, Board approves ballot, membership votes for six Elected Board Members annually. Competitive (i.e., multiple candidates) election.



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What additional leadership positions do you have on your Board?***

Academy of Nutrition and Dietetics	Treasurer-elect (1 year of training before serving as treasurer for 2 years); Speaker, House of Delegates, Speaker-elect, House of Delegates; Past Speaker, House of Delegates; HOD Directors (3); Board Directors (3)--all these positions are elected nationally. Two public members appointed by the Board of Directors based on criteria for the positions. And, the chair of the Foundation.
American Academy of Pediatrics	Executive Director/CEO serves as an ex-officio, non-voting member.
American Association of Nurse Anesthetists	Vice President is nominated by states and placed on the ballot by Nominating Committee. Must have served on AANA Board within the past 7 years.
American Association of Orthodontists	editor of the journal and the speaker of the HOD
American Bar Association	Made the Chair of the House of Delegates second-in-line
American College of Healthcare Executives	none
American Dental Association	The President, the Treasurer and the Executive Director of the Association, are ex officio members of the Board without the right to vote. The Speaker of the House of Delegates serves as parliamentarian during sessions of the Board of Trustees.
American Health Information Management Association	Committee chairs
American Institute of Certified Public Accountants	Designates Senior Technical Committees, Establishes composition of Board of Directors, Authorizes member ballots and proposed bylaw changes, can call special meetings of Council and the membership, Sets educational requirements (CPE) for membership, Establishes conditions for acceptance of member resignation, automatic disciplinary provisions and non-application of termination provisions, ability to elect Board Chair, Vice Chair, At-Large Council members, Joint Trial Board members, and Peer Review Board members
American Medical Association	Board Chair, Chair-Elect and Immediate Past Chair. The Chair is elected by the Board for what amounts to be a 3-year term (one year as Chair-Elect, one year as Chair, one year as Immediate Past Chair).
American Osteopathic Association	Executive Committee - prior two presidents and 7 members of the Board selected as Chairs of specific departments (e.g., Education, Business, Professional, etc.)



# APPENDIX: Benchmarking Survey Results

## ***Narrative Response: What additional leadership positions do you have on your Board? (continued)***

American Physical Therapy Association	The Board consists of the President, Vice President, Secretary, Treasurer, Speaker, Vice Speaker, and 9 Directors
American Psychological Association	CEO serves as ex-officio
American Society of Anesthesiologists	see above
American Speech-Language-Hearing Association	<ol style="list-style-type: none"> <li>1. President, who shall serve as Chair of the BOD</li> <li>2. President Elect</li> <li>3. Past President</li> <li>4. Vice President for Academic Affairs in Audiology</li> <li>5. Vice President for Academic Affairs in Speech-Language Pathology</li> <li>6. Vice President for Audiology Practice</li> <li>7. Vice President for Speech-Language Pathology Practice</li> <li>8. Vice President for Finance</li> <li>9. Vice President for Government Relations and Public Policy</li> <li>10. Vice President for Planning</li> <li>11. Vice President for Standards and Ethics in Audiology</li> <li>12. Vice President for Standards and Ethics in Speech-Language Pathology</li> <li>13. Vice President for Science and Research</li> <li>14. Chair of the Audiology Advisory Council</li> <li>15. Chair of the Speech-Language Pathology Advisory Council</li> <li>16. National Student Speech-Language-Hearing Association Advisor</li> <li>17. Executive Director of the Association (EX OFFICIO)</li> </ol>
American Veterinary Medicine Association	Vice President (2-year term; elected by the House of Delegates)
College of American Pathologists	Ex-Officio members: Speaker and Vice-Speaker of the House of Delegates, Chair of the Resident's Forum, and President of the CAP Foundation.
Healthcare Information Management Systems Society	CEO



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional leadership positions do you have on your Board? (continued)*

Heart Rhythm Society	Second Vice President and Second Past President.
Radiological Society of North America	Chairman of the Board
Society of Actuaries	Vice President, Chair of Issues Advisory Council (Strategic Management System), chairs of strategic action teams, chair of the Leadership Development Committee, Board partner to research functional area, Board partner to education functional area, chair of Audit Committee, chair of Risk Committee, chair of International Committee.



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the Board have?*

Academy of Nutrition and Dietetics	Provides leadership for professional initiatives, selects, supports and assesses the chief executive officer and conducts an annual performance appraisal, appoints persons to represent the Academy, establishes guidelines and policies for appeals, publications, awards and honors, administers and enforces the professional Code of Ethics in conjunction with CDR and HOD, and exercises such powers and performs all lawful acts permitted or required under the Illinois Not for Profit Corporation Act.
American Academy of Pediatrics	
American Association of Nurse Anesthetists	The AANA Board serves as the Ethics committee when a member is charged with an ethics violation.
American Association of Orthodontists	approve programs from reserves, hire executive director, choose lobbyist and other high level vendors
American Bar Association	
American College of Healthcare Executives	selection of and determine levels of corporate performance objectives
American Dental Association	The powers and duties of the Board of Trustees are outlined in the ADA Bylaws, Chapter VII. Board of Trustees, Section 90. Powers and Section 100 Duties.





# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the Board have? (continued)*

American Health Information Management Association	<p>(a) To establish the mission, purposes, goals, and program priorities to be implemented by AHIMA's Chief Executive Officer and staff, through a strategic planning process;</p> <p>(b) To ensure that appropriate governance and operational policies have been developed, adopted, and implemented by AHIMA to carry out its mission;</p> <p>(c) To determine and set overall policy;</p> <p>(d) To advocate the mission, values, accomplishments, and goals of AHIMA to the members and to the public at large;</p> <p>(e) To determine, monitor, and strengthen programs that are responsive to the needs of the members and are central to AHIMA's mission;</p> <p>(f) To establish fiscal policy, including budget authorization and oversight;</p> <p>(g) To develop adequate resources to ensure financial stability for AHIMA's activities;</p> <p>(h) To establish, develop, and maintain an effective and responsive corporate structure for AHIMA and its related entities, including but not limited to the creation of new affiliates and integrated commissions;</p> <p>(i) To select, retain, support, evaluate the performance of, and discharge the Chief Executive Officer of AHIMA;</p> <p>(j) To orient and evaluate the Directors and Officers of the Board of Directors; and</p> <p>(k) To render a year-to-date report on the financial status and activities of AHIMA to the House of Delegates at the national convention of AHIMA and a full report to the members.</p>
American Institute of Certified Public Accountants	
American Medical Association	See AMA Bylaw 5.30 and related subsections
American Osteopathic Association	Serves as the policy making and governing authority between meetings of the House of Delegates



# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the Board have? (continued)*

American Physical Therapy Association	<p>Bylaws of the American Physical Therapy Association, Article IX, Board of Directors of the American Physical Therapy Association, Section 5: Duties</p> <p>The Board of Directors shall, in addition to the duties otherwise imposed by these bylaws and the standing rules:</p> <p>A. Carry out the mandates and policies of the Association as determined by the House of Delegates. Between sessions of the House of Delegates, the Board of Directors may make and enforce such policy on behalf of the Association as is not inconsistent with the mandates and policies determined by the House of Delegates.</p> <p>B. Direct all business and financial affairs for and on behalf of the Association, be responsible for all of its property and funds, and provide for an annual audit by a certified public accountant.</p> <p>C. Foster the growth and development of the Association.</p> <p>D. Provide for the maintenance of a headquarters of the Association and assume responsibility for personnel policies.</p> <p>E. Appoint and employ a chief executive officer who shall be the administrator of the headquarters and who shall be responsible to the Board of Directors.</p> <p>F. Provide for bonding of all persons handling money or other property of the Association.</p> <p>G. Prescribe and publish with these bylaws the qualifications for each category of individual membership and provide for appropriate action on all applications for membership.</p> <p>H. Be responsible for filling vacancies on the Board of Directors and on committees, except as otherwise provided in these bylaws and in the standing rules.</p> <p>I. Be responsible for creation, appointment, purposes, and activities of such committees as it deems necessary.</p> <p>J. Be responsible for the creation of and facilitation of activities of such councils as it deems necessary.</p> <p>K. Be responsible for the program, time, and place of the annual conference of the Association.</p> <p>L. Be responsible for publication of the official journal of the Association.</p> <p>M. Provide for development and maintenance of procedural documents related to these bylaws.</p> <p>N. Approve the procedure by which reported violations of the ethical principles and standards of the Association are to be processed.</p> <p>O. Review and revise existing Association policies, except in these bylaws, for consistency of intent and language with such new policies as may be adopted from time to time by the House of Delegates.</p>
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# APPENDIX: Benchmarking Survey Results

## *Narrative Response: What additional authority does the Board have? (continued)*

American Psychological Association	Review and set compensation for CEO, Deputy CEO and CFO
American Society of Anesthesiologists	Chooses CEO. Additionally, the Board is supposed to have final authority on all business matters of the society, but this contradicts with a provision that says the House has final budget authority.
American Speech-Language-Hearing Association	Approve position statements, guidelines and other policy documents affecting the professions. Create and dissolve standing committees, councils, boards, ad hoc committees and other entities necessary to conduct the Association's business. Create and dissolve Special Interest Groups.
American Veterinary Medicine Society	The affairs of the Association shall be managed by the Executive Board, which shall have supervision, control, and direction of the Association, shall determine its policies or changes therein within the limits of the Bylaws, shall actively promote its purposes, and shall have discretion in the disbursement of its funds. The Executive Board shall act for and on behalf of the House of Delegates between sessions of the House of Delegates. The Executive Board may adopt such rules and regulations for the conduct of its business as shall be deemed advisable and may, in the execution of the powers granted, appoint such agents as it may consider necessary.
College of American Pathologists	See CAP Appendix D
Healthcare Information Management Systems Society	Hiring of the CEO
Heart Rhythm Society	
Radiological Society of North America	
Society of Actuaries	The Board has broad authority over all aspects of association activities, but the primary additional responsibility of the Board is to hire and, if necessary, dismiss the chief staff executive. The chief staff executive reports to the Board of Directors.

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# APPENDIX: Key Stakeholders Meeting Results

## *Overview*

Subsequent to W&A submitting a preliminary report to the ADA, we facilitated a Key Stakeholders meeting on Monday, June 18, 2012 at the ADA headquarters in Chicago. The purpose of the meeting was to gain feedback from a group of 35 ADA delegates, council members, state leaders and executives on key suggestions included in this report for enhancing ADA governance. No decisions were made at the meeting.

Five topic areas were selected for discussion at this meeting. Attendees were divided into five groups and participated in World Café format breakout sessions where each group discussed the topics at a table and then rotated until they had an opportunity to discuss every suggestion presented at the session. Attendees were asked to consider the following three questions when discussing each suggestion:

- What are the benefits of the suggestions?
- What concerns might ADA members have about the suggestions?
- What needs to be considered or done to assure smooth implementation of the suggestions?

ADA Governance Committee members were named as facilitators for the five topics. They included Dr. Jeffrey Dow, Dr. Dennis Engel, Dr. Don Seago, Dr. Kenneth Versman and Dr. Charles Weber.

Following is a summary of the reports provided on each of the discussion topics, as well as an overview of comments presented at the Open Forum after the meeting. The suggestion and consultant commentary is included under each topic, along with a summary of the report by the table facilitator:



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 1: House of Delegates allocation process and size*

### **A. Options to reduce the size of the house**

Undertake one of the following actions – descending order of consultant suggestions:

- Reduce the size of the HOD by 50%, with that number capped similar to the number of the United States Congress.
- Reduce the size by 25% by 2014 and another 25% by 2016.
- Reduce the size by 25% by 2014, with that number capped.

Westman & Associates Commentary: A smaller delegate contingent would significantly reduce expenses at the state society level, enable individual delegates to be more engaged in decision-making, and theoretically will make the HOD more nimble. The current size of the HOD also disenfranchises delegates because debates go on too long and questions are called before many get a chance to speak.

Leadership survey responses indicated that 43% fully support and 22% may support reducing the number of delegates, while only 20% leaned against or were strongly against. Written responses to “how many delegates should there be in the House” resulted in the most frequent suggestion being to cut the size in half, and numerical responses recommended 250-300 delegates. Benchmarking data also confirm that the ADA’s HOD is larger than most similar associations; the median benchmark association had 215 delegates.

Discussion: Although there was some vocal opposition, the general consensus was to reduce the size of the House of Delegates. Supporters commented that their delegation is so large they don’t even know all the delegates from their state. Those opposing indicated concern that a reduction would result in less annual meeting attendees and would not address the reality that certain delegates tend to dominate HOD discussions.

Even those opposing a reduction in size tend to support a cap on the number of delegates. There was no consensus on how large of a reduction should be pursued. How the reduction is determined will be very important.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 1: House of Delegates allocation process and size (continued)*

### **B. Reduce the number of alternate delegates**

Reduce the number by having a minimum of two alternates and a maximum of one-third the delegation for those constituents with over six delegates.

Westman & Associates Commentary: There appears to be significant support for reducing the number of alternate delegates from both interviews and the leadership survey. Over 75% of respondents – 51% fully supporting and 25% may support – recommended reducing the number of alternate delegates. 18% suggested reducing the number to 21-30% and 31% said 31-50%.

Discussion: The consensus was this is a state issue. Some states have large delegations to involve various segments of the profession – new members, academic, etc. There was some interest in ADA making a suggestion on what guideline states could use for determining the number of alternates.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 1: House of Delegates allocation process and size (continued)*

### **C. Regardless of HOD size, discontinue the practice of assigning delegates first to districts and secondarily to states.**

Instead allocate them to constituent state societies without consideration of district configuration:

- Minimum of two delegates per state
- Minimum of one delegate for the Air Force Dental Corps, the Public Service Health Services, the Department of Veteran Affairs, and the Virgin Islands Dental Association
- Remaining delegates allocated bi-annually to constituent organizations based on their membership level on a defined date (e.g., six months before the HOD meeting) as a percent of total ADA members. For example, if a state has 10% of total ADA members and there are 150 remaining delegate slots available, the state will receive 15 delegates in addition to the initial allocation of two delegates.

Westman & Associates Commentary: Given the current structure of districts, states with roughly equivalent numbers of ADA members are allocated different numbers of delegates. The suggested approach results in a more equitable distribution of delegates across state organizations. Based on W&A first-hand experience with another HOD, the suggested approach also serves to motivate state organizations to recruit members in order to keep or increase the number of delegate slots available to them – especially during the months preceding the cutoff date for determining delegate levels.

Discussion: Under the current allocation method, delegates are allocated to districts and then the formula dictates how many each state receives. This results in a disproportionate allocation, such as Rhode Island with 550 members and three seats, compared to Montana with 637 members and two seats. When this was explained to participants, they unanimously agreed that the formula should allocate to states versus districts.





# APPENDIX: Key Stakeholders Meeting Results

## *Topic 2: New procedures to improve the efficiency and cost effectiveness of key governance operations*

### **A. Reduce the number of districts.**

Decrease the number of districts to no more than seven and thereby the number of trustees. This could also impact the number of positions on councils and committees.

Westman & Associates Commentary: Although a number of associations utilize districts for the assignment of governance positions, it is rare to have so many districts identified (i.e., 17). The current configuration is viewed by many as inequitable given the variance of ADA members per district. A lesser number of districts would make it easier to construct districts of similar size and to rebalance districts as necessary. Although nearly half of leadership survey respondents opposed reducing the number of districts, more than 50% were either supportive or would consider such a change based on more information. For those supporting a reduction in the number of districts, the majority suggested a range of 5-10 districts.

Discussion: The only benefit that was mentioned was a cost savings to ADA. There was some discussion as to whether or not it would make the ADA more nimble. While theoretically some felt the ADA should pursue this, the consensus was it is politically impossible. Concerns expressed included:

- Difficult for trustees to make visits in all states.
- The large geographical area could make elections difficult.
- Regional problems could result due to political differences in various states.
- Communications would be more difficult.
- District meetings would be more difficult for grassroots members to attend.
- It could disenfranchise small states.
- The increased geographic area would overburden each trustee.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 2: New procedures to improve the efficiency and cost effectiveness of key governance operations (continued)*

### **B. Establish delegate term limits.**

Establish term limits for delegates of three years, with the ability to serve two consecutive terms. The delegate could become eligible to serve again after sitting out at least one year for up to a maximum of 12 years' service as a delegate.

Westman & Associates Commentary: This will enable greater numbers of members to serve as leaders of the organization. Additionally, it will allow more opportunities for diversity in delegates, rather than having one delegate serve 20 or more years.

There was great support for term limits in the leadership survey and interviews. 64% of survey respondents supported term limits – 36% fully supported and 28% may support. The average number of years suggested ranges from 6-10, with the average being 7.5 years. Interviewees suggested that after a term limit has been met, delegates should sit out a year and then be eligible for an additional two years. Several benchmark associations have term limits for delegates.

Discussion: There was not a clear consensus on establishing term limits. Some felt it was a good idea and others saw it as a bad idea:

Benefits cited included:

- A good way to increase member movement through the system.
- Promotes diversity by providing more opportunities to involve younger, gender and ethnic dentists.

Concerns cited included:

- Might lose some mentors, as some might not attend the meeting.
- Might eliminate the best people from participating.
- It would require a bylaws change.

The consensus was this is a state issue, but consideration could be given to the ADA providing states with suggested guidelines. The question was raised of when states' rights supersede the wellness of the whole.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 2: New procedures to improve the efficiency and cost effectiveness of key governance operations (continued)*

### **C. Focus on using small, short-term, skill-based task forces with narrow foci to address key issues – as opposed to relying on continuing councils or committees.**

Westman & Association Commentary There was widespread support for skill-based expertise on committees, task forces and virtually all leadership positions. Structuring the committees, task forces and work groups in this manner will open the door for increased involvement of members at the constituent level. Since many will be short-term projects, it will allow a larger number of volunteers to be utilized and will be based on their skill sets. Then they can stay focused on meeting their goal and celebrate the achievement when it is complete. Additionally, younger generations have shown a preference for shorter-term commitments, and task forces will provide that alternative. This will help ensure involvement of a key segment of the membership, which are the future leaders of ADA.

Discussion: The consensus was this is a “fantastic” idea. Skill based is important and is the key. There are no major downsides. The use of task forces will allow more people to get involved, as it can be a training ground and transition members to greater involvement.

Some participants were concerned that smaller groups would not provide a leadership development structure. There was discussion on how to identify the skill based members, with the suggestion that a system could be developed on ADA Connect to identify dentists’ skills and record their interests( i.e. an ADA Facebook) in order to show what a diverse group ADA includes.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 3: Council structure and activities*

### **A. Reduce the size of the councils by rotating the allocation of appointments among districts {assumes number of districts is not reduced}**

This would reduce the number of council members by establishing a system whereby appointments are rotated among the 17 districts, with staggered terms to assure continuity from year-to-year. Note: it may be prudent to keep a representative from each district on selected entities that benefit from geographic representation.

Westman & Associates Commentary: The median number of council members for benchmark associations is 11. Most ADA councils are currently structured with 17 members appointed by districts. There was support for reducing the number of council members in both interviews and the leadership survey. Survey respondents indicated that 21% fully support and 34% may support reducing the number of council members, while 17% lean against and 13% are strongly against it. The survey also indicated that 30% supported reducing the number of council members by reducing the number of districts, and 38% for rotating district representation on councils.

Discussion: Many felt the council structure is very “heavy” and reducing the number of members by rotating appointments among districts is a reasonable way to reduce council size. It would be important to phase in this system.

Benefits cited included:

- Efficient and focused.
- Cost savings.
- Move to a skill based appointment process.

Concerns cited included:

- Impedes leadership development.
- Less involvement of members.

The consensus was this suggestion should be considered. Each council is unique and requires skill based representation.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 3: Council structure and activities (continued)*

### **B. Sunset the Communications Council**

Westman & Associates Commentary: The Cost of Governance analysis undertaken by W&A indicates over \$340,000<sup>1</sup> of expense is associated with this council. Council functions are mainly staff oriented and do not merit the need or expense of council involvement. The council could be eliminated and a smaller BOT communications committee or ad hoc groups to be used as needed could be established for oversight of communications initiatives undertaken by staff. Council members should be appreciated for what they have accomplished and be allowed to sunset their operation. The new committee or ad hoc groups could meet largely electronically to review and discuss branding and marketing initiatives. Interviewees and leadership survey narrative responses ranked the Communications Council as one that should be eliminated.

Discussion: There was no consensus on this suggestion, with the group indicating a need for more information. Those advocating for this suggestion believe it would facilitate skill based appointments with fewer members (less cost) if it transitions to a BOT committee. Those expressing concern believe the suggestion would serve to diminish accountability and take away safeguards for membership activities. The question was raised whether or not volunteers would need to be replaced with staff increases.

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<sup>1</sup> W&A recognizes that some of the work represented by this figure would still need to be accomplished, so savings may not equal this amount.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 3: Council structure and activities (continued)*

### **C. Sunset the Council on Members Insurance & Retirement Programs**

Westman & Associates Commentary: The Cost of Governance analysis undertaken by W&A indicates over \$175,000<sup>2</sup> of expense is associated with this council. The function of this council is mainly staff oriented and does not merit the need or expense of being a council. This council received very low ratings in the leadership survey; less than 50% ranked it effective, and it received the most suggestions for elimination of any council.

Discussion: There was strong consensus to implement this suggestion.

### **D. Sunset the Membership Council**

Westman & Associates Commentary: The Cost of Governance analysis undertaken by W&A indicates over \$487,000<sup>3</sup> of expense is associated with this council. The function of this council is mainly staff oriented and does not merit the need or expense of being a council. The leadership survey narrative responses ranked the Membership Council as one that should most likely be eliminated. If situations develop that require input or analysis, a task force or ad hoc committee could be utilized and could include constituent society executive directors and officers who are on the front lines of the membership.

Discussion: The consensus was to keep the Membership Council. However, the number of appointments should be reduced by appointing members on a rotation basis. There were a number of comments that state executive directors need to be involved in the council and membership promotion activities. Some felt it is important to have district representation from all parts of the country on the council.

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<sup>2</sup> W&A recognizes that some of the work represented by this figure would still need to be accomplished, so savings may not equal this amount.

<sup>3</sup> W&A recognizes that some of the work represented by this figure would still need to be accomplished, so savings may not equal this amount.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 4: Board accountability, size and authority*

### **A. Delegate more fiduciary responsibilities to the BOT**

This would include approving the budget.

Westman & Associates Commentary: W&A strongly believes that this represents “best practice” in association governance. The HOD meets infrequently, is large/cumbersome, and members simply do not have the requisite time, knowledge, and expertise to undertake the budgeting role effectively – especially for an organization as large and complex as ADA.

Most associations have come to realize that the HOD is not in the best position to undertake key fiduciary responsibilities. Of benchmark associations, the BOT has been delegated authority to approve:

- The association’s strategic plan by 76% of respondents.
- The association’s budget by more than 80% of respondents.
- Selection of the association’s external auditing firm by 86% of respondents.
- Selection of the association’s investment management firm by 80% of respondents.
- Membership dues increase by 43% of respondents.

In the leadership survey, 54% either fully supported or may support transferring budget authority to the Board.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 4: Board accountability, size and authority*

### **A. Delegate more fiduciary responsibilities to the BOT (continued)**

Discussion: The consensus was that more fiduciary responsibility should be assigned to the BOT, including approval of the budget, with the HOD maintaining authority for member dues increases. This will need to be voted on by the HOD. There was a suggestion that the budget should have an amount built into it for resolutions passed by the HOD. Trustees should also be educated on their fiduciary responsibilities. The board should involve HOD members in the budget process so the HOD is comfortable in giving this authority to the BOT.

Benefits cited included:

- Many HOD members are not educated on the budget and yet they are asked to approve it.
- The current process is inefficient.
- BOT members are much more involved compared to HOD members.

Concerns cited included:

- HOD distrust of the BOT could increase.
- There is a need for HOD checks and balances.
- Does the BOT have the necessary skill set?
- The BOT has to be answerable to the HOD



# APPENDIX: Key Stakeholders Meeting Results



## *Topic 4: Board accountability, size and authority (continued)*

### **B. Establish an Executive Committee with a defined role and scope**

The Committee would be composed of the:

- President
- President-Elect
- Vice President (assuming this position remains)
- Chairs of the Audit, Budget and Finance, and Governance committees
- Treasurer (assuming this position remains)
- Executive Director

{Assumes the size of the board is not reduced as a result in reduction in number of districts.}

Westman & Associates Commentary: Over 75% of benchmark associations currently utilize an Executive Committee. Such committees typically have four to seven members, meet in-person between two and six times annually, and participate in an additional three to 12 teleconferences annually. Utilization of an Executive Committee should result in a need for fewer BOT meetings and/or fewer meeting days at each meeting. Currently the ADA BOT meets for approximately 216 hours annually, whereas the median benchmark association board met only 80 hours annually.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 4: Board accountability, size and authority*

### **B. Establish an Executive Committee with a defined role and scope (continued)**

Discussion: Many states find that executive committees (EC) work very effectively. If there is an EC, the BOT can spend more time on strategic versus management issues. It could also reduce the number of BOT meetings. It was agreed it can be very efficient, but there must be checks and balances.

Concern was expressed over future continuity on an EC. It was noted if the Vice President's position is changed to ascend to the President-Elect, it would provide three year continuity. Some were concerned it would create another layer of governance. Some noted that the Trustees are elected with equal responsibility and the BOT as a whole should be responsible for decision making.

In terms of EC composition, the President should not be given authority to appointment members. Some suggested trustees should be on the EC as well as officers, but concern was expressed this could give them an unfair advantage if they run for office. Chairs should not be on the EC – only Trustees and officers. The Executive Director should be a member without voting privileges. It was noted geographic concerns would not be represented on the EC.

Implementation of the EC concept will require education for the HOD and membership, and must be voted upon. If implemented, there should be a clear, defined role, scope and responsibilities. Most of their BOTs have final oversight over the EC.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 4: Board accountability, size and authority (continued)*

### **C. Clarify the BOT's role and responsibilities with emphasis on the need to focus more on strategic issues and less on day-to-day management.**

This would include adopting the following guidelines for the BOT:

- Responsible for governing the association by setting broad policies and objectives, ensuring that the association has adequate resources and guiding the association in the best interests of the association.
- Assumes major responsibility for organizational planning by developing, implementing and measuring progress on the strategic plan, including determining the organization's mission and purpose.
- Assures that other governance entities align with the mission and goals of the organization.
- Approves, monitors, and enhances programs and services.
- Ensures legal and ethical integrity and maintains accountability.
- Does not inject itself into administrative decisions and management operations.

Allows the Executive Director and staff to be responsible for running the association in a way that meets the objectives established by the BOT.

Westman & Associates Commentary: Concern was expressed during the interview process that the BOT spends too much time and effort on day-to-operations and redoing work undertaken by other governance entities. Organizations operate most effectively when the BOT focuses on strategic direction and less on administrative details. The BOT should monitor its focus on strategic issues through its planning process and by establishing measurements of the success of the plan as part of the development process. These measurements should be reviewed and discussed at every BOT meeting.

# APPENDIX: Key Stakeholders Meeting Results



## *Topic 4: Board accountability, size and authority*

### **C. Clarify the BOT's role and responsibilities with emphasis on the need to focus more on strategic issues and less on day-to-day management (continued)**

Discussion: This suggestion is the way the board should be operating, and the consensus was support to move forward in this direction. There is a need for trust between all entities – BOT, HOD, councils, administration, staff, etc. Transparency is critical. Bylaw amendments may be required to implement this. Steps to implement should be slow and include education of the membership, including presentation at districts



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 5: Evaluate officer structure and positions*

### **A. Eliminate the two Vice President positions.**

Westman & Associates Commentary: The original purpose has been served, and communications/relations between the HOD and BOT are much better. The position responsibilities are minimal and do not add to the skill base of the BOT. There was strong support for this based on interview and leadership survey feedback, as well as benchmarking data. 56% of leadership survey respondents either fully support or may support eliminating one or both vice presidents, while 27% were leaning against or strongly against.

Discussion: There was consensus to eliminate the Vice President positions. The role of Vice President is no longer important and can be changed. There was some support for making the Vice President position the predecessor to President-Elect to result in a three-year succession line, but the group was not totally sold on this.

### **B. Convert the President-Elect's position to part-time and reduce the compensation accordingly.**

Westman & Association Commentary: Interviewees indicated a lack of understanding for the need of a full time president-elect. It does not appear that the current responsibilities merit this requirement. Compensation for this position significantly exceeds the benchmark average and could be reduced to be more in line with the time required by the position.

Discussion: The consensus was to leave the President-Elect position as it is.



# APPENDIX: Key Stakeholders Meeting Results

## *Topic 5: Evaluate officer structure and positions (continued)*

### **C. Reassign Treasurer responsibilities.**

Delineate the time and activities involved in Treasurer responsibilities and assign them to one of the existing officers in the organization (e.g., President-Elect or one of the Vice Presidents).

Westman & Associates Commentary: Fiscal responsibilities should be defined as maintaining a thorough knowledge of the ADA budget process and finances, responsibility for communicating those areas to all governance entities and the membership, and working closely with the ADA CFO and the Budget and Finance Committee to oversee finances of the organization. It appears that many of the Treasurer's current financial responsibilities are coordinated by staff, and given there are separate chairs of the Budget and Audit Committee and Finance Committee this position has minimal fiduciary responsibility. The compensation paid to this position is very high compared to other benchmark associations.

Discussion: Many felt the position responsibilities need to be reevaluated, with a belief that the role and/or responsibilities of the position should be changed. Reassigning duties would enhance checks and balances. The Treasurer position could be important if an Executive Committee is formed. The compensation should be reduced and the position should not be an employee of ADA, as this creates a conflict-of-interest related to the pension plan.



# APPENDIX: Key Stakeholders Meeting Results

## ***Open Forum Comments by Stakeholder Meeting Attendees:***

Following the World Café Breakout Session, attendees were given the opportunity to make additional comments. These included the following:

- A facilitated session should be held for the HOD to consider the governance review suggestions.
- The membership will support changes if they are informed of how helpful the fiduciary changes can be in making ADA more effective.
- Term limits for delegates would help to get new members as HOD delegates versus those who have been around for 20 or more years.
- If the HOD is reduced in size the same minimum number of delegates should apply for all entities (i.e., either one or two delegates).
- Numerous comments supported placing a cap on the number of delegates.
- It would be helpful to see more benchmarking data on what other associations have done. (Note this is included in the benchmarking section of this report.)
- Concern was expressed regarding a cut in HOD delegates and losing advocacy support by those delegates.
- Numerous comments were made in support of decreasing the size of the HOD. One suggested a 150 delegate maximum, noting that when entities get large there is no relationship building. Delegates need to be more accountable to the organization. Younger members come and are disenchanted to see how the HOD functions. One participant stressed the need to reduce the HOD because they have so many delegates they don't even know them. Reducing the number of delegates will save states money that they can then use to support young dentists to attend the annual meeting. While ADA needs to reduce the size of the HOD, states need to take responsibility for sending the "right" delegates.



# APPENDIX: Key Stakeholders Meeting Results

## ***Open Forum Comments by Stakeholder Meeting Attendees (continued):***

- Several comments were made in support of not reducing the size of the HOD. When you reduce the number of delegates, you reduce parity. A 50% reduction may be too much, but 25% might be doable. Reducing the size of the HOD will not impact diversity efforts.
- Forming an executive committee could cause more distrust because of an additional entity involved in decision making.
- One state tweaked councils and committees and empowered them to take action within the budget and strategic plan, which substantially reduced the number of resolutions.
- ADA governance is too large and members are disenchanted with how long it takes for action. To become more nimble we need to reduce the size, including the number of delegates.
- We should consider holding the HOD meetings at a different time and perhaps place from the annual meeting.
- Numerous participants complained about late resolutions being introduced and that this process needs to be changed. It's about the process – how we deal with resolutions – not the size of the HOD.
- Numerous participants indicated that it is extremely important to take steps to adopt appropriate resolutions for governance change. ADA can't keep rehearsing and repeating this cycle of studying governance and not taking action. This is the time "for courage." We must adopt key suggestions...look at the low hanging fruit and make sure it is implemented immediately to show the HOD what progress can be made.
- Several participants support making the HOD more action oriented in order to gain support from young dentists that attend.
- Many of the delegates who have served for 20 years are very valuable to the HOD and should have the opportunity to continue serving in that role.
- ADA needs to understand that the ones who will need to support these actions are the ones currently sitting in the HOD and they may not be supportive.
- Increase the amount of electronic meetings of ADA governance entities.



# APPENDIX: Key Stakeholders Meeting Results



## ***Open Forum Comments by Stakeholder Meeting Attendees (continued):***

- It was helpful to learn what is going on in various states...the process was great.
- There should be a special reference committee for action on the governance recommendations.
- Council members should be selected based on merit and skills.
- The Membership and Communications councils are important and need to have representation from different regions.
- One state is reviewing governance at this time and stressed the importance of educating members and leaders of the reasons for change.
- This is the most engaging ADA meeting one participant has ever attended. It is important that we embrace the changes that are needed.
- Young member involvement is a state issue and states need to be encouraged to be all inclusive.
- An executive committee with a succession plan and board monitoring to make sure it stays within the strategic plan would be valuable.
- Appropriate education and phase in of proposed changes are essential. This is a huge undertaking, and there is fear the HOD will become frustrated and delay action.
- Finances are driving the governance concerns to some degree. If reductions in councils and other entities are made, then staffing should also be evaluated.
- It is important for the grass roots to know what ADA is doing. State Presidents should be encouraged to promote the efforts of ADA to improve governance in their speeches.
- It is important to have a phased in approach to these changes. This should go hand in hand with educating the membership about the proposed changes.

Resolution No. 61-2016 New

Report: N/A Date Submitted: August 2016

Submitted By: Council on Ethics, Bylaws and Judicial Affairs

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Organizational Capacity-Obj. 6: Role and responsibility of each element of the tripartite clearly defined and agreed upon

How does this resolution increase member value: Not Applicable

## ADA CONSTITUTION AND BYLAWS REVIEW PURSUANT TO RESOLUTION 118H-2014

**Background:** This report transmits proposed amendments to the ADA *Constitution* to the House of Delegates which were introduced at last year's House of Delegates; per constitution requirements, the amendments were held over for a vote in 2017. The proposed amendments are to align the ADA *Constitution* with the revisions to the ADA *Bylaws* proposed in response to 118H-2014 and submitted for consideration by the 2017 House of Delegates by a separate resolution.

Based on the foregoing, the Council tenders Resolution 61-2016 to the House of Delegates:

### Resolution

**61-2016. Resolved,** that the ADA *Constitution* be amended as follows (additions underscored, deletions ~~stricken through~~):

### *Constitution*

#### ARTICLE I • NAME

The name of this organization shall be the American Dental Association, ~~hereinafter referred to as "the Association" or ("this Association:")~~

\* \* \*

#### ARTICLE III • ORGANIZATION

Section 10. INCORPORATION: This Association is a non-profit corporation organized under the laws of the State of Illinois. If this corporation shall be dissolved at any time, no part of its funds or property shall be distributed to, or among, its members but, after payment of all indebtedness of the corporation, its surplus funds and properties shall be used for dental education and dental research in such manner as the then governing body of ~~the~~ this Association may determine.

Section 40. MEMBERSHIP: The membership of this Association shall consist of dentists and other persons whose qualifications and classifications shall be as established in ~~Chapter I of the Bylaws.~~

Section 50. ~~CONSTITUENTS SOCIETIES AND COMPONENTS: Constituent societies- Constituents of this Association shall be those dental societies or dental associations chartered in conformity with Chapter II of the Bylaws.~~

1 ~~Section 60. COMPONENT SOCIETIES:~~ Component societies of this Association shall be those  
2 dental societies or dental associations organized in conformity with ~~Chapter III~~ of the Bylaws of this  
3 Association and in conformity with the bylaws of their respective ~~constituent societies~~ constituents.  
4 Section ~~70~~ 60. TRUSTEE DISTRICTS: The constituent societies of ~~the this~~ Association and the  
5 federal dental services shall be grouped into ~~seventeen (17)~~ trustee districts.

#### 6 **ARTICLE IV • GOVERNMENT**

7  
8 Section 10. LEGISLATIVE BODY: The legislative and governing body of this Association shall be a  
9 House of Delegates, ~~which may be referred to as "the House" or "this House."~~

10 Section 20. ADMINISTRATIVE BODY: The administrative body of this Association shall be a Board  
11 of Trustees, ~~which may be referred to as "the Board" or "this Board."~~

12 \* \* \*

#### 13 **ARTICLE VI • ANNUAL SESSION**

14  
15  
16  
17 The annual session of this Association shall be conducted in accordance with ~~Chapters V and XV~~  
18 ~~of the Bylaws.~~

#### 19 **ARTICLE VII • PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT**

20  
21 The *Principles of Ethics and Code of Professional Conduct* of this Association and the codes of  
22 ethics of the constituents and components ~~societies~~ which are not in conflict with the *Principles of*  
23 *Ethics and Code of Professional Conduct* of this Association, shall govern the professional conduct  
24 of all members.

25  
26 **SPEAKER'S COMMENT:** Because Resolution 61-2016 proposed amendments to the *ADA Constitution*,  
27 in accordance with the *ADA Constitution*, Article VIII. AMENDMENTS, this resolution was laid over to the  
28 2017 House of Delegates.

29 **BOARD RECOMMENDATION: Vote Yes.**

30 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
31 **BOARD DISCUSSION)**

Resolution No. 33 New

Report: N/A Date Submitted: September 2017

Submitted By: Council on Advocacy for Access and Prevention

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact:

Amount One-time  Amount On-going  FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

### PEER TO PEER STATE DENTAL MEDICAID AUDITS

**Background:** The goals of the ADA's *Action for Dental Health* Medicaid Initiative are to increase the number of dentists participating and to increase the number of dental services delivered to Medicaid-eligible individuals. Increasing reimbursement is one means of incentivizing provider participation, but one that is not always feasible within the current political and fiscal climate of individual states. There are other incentives that may prove similarly attractive, as well as disincentives that discourage participation in this program. To that end, the Council on Advocacy for Access and Prevention (CAAP), with assistance from its Medicaid Provider Advisory Committee (MPAC), continues to seek ways in which to reduce the administrative burdens associated with Medicaid participation.

The 2015 House of Delegates passed two actions that laid a solid foundation for state Medicaid agencies to support strong dental Medicaid programs (*Trans*:2015.275):

- The American Dental Association encourages all state dental associations to work with their state Medicaid agency in hiring a Chief Medicaid Dental Officer, who is a member of organized dentistry
- The American Dental Association encourages all state dental associations to actively participate in the establishment or continuation of an existing Medicaid dental advisory committee that is recognized by the state Medicaid agency as the professional body to provide recommendations on Medicaid dental issues

Though these two actions have helped many states improve the oral health of Medicaid-eligible individuals, there remains an ongoing challenge of recruiting sufficient dentists to provide the care that is needed. A significant impediment to greater provider participation in Medicaid is fear of being audited.

The Affordable Care Act does mandate audits of those practitioners who participate in Medicaid, which from an accountability perspective is reasonable, but the manner in which these audits are often times conducted, via the state Medicaid agency itself or through a contracted entity, have been problematic. This is especially true, when auditors do not have sufficient oral health background to review diagnostic and treatment planning decisions. The MPAC believes that dentists should be audited by their peers, who have similar educational background and credentialing. In addition, due to the state-by-state variations of how a state dental Medicaid program can be administered, it is in the best interest of both the state and the practitioner that the auditor be licensed within the specific state in which the audit is being conducted.

1 To that end, the Council on Advocacy for Access and Prevention, upon the recommendation of its  
2 Medicaid Provider Advisory Committee, recommends the following resolution to the 2017 House of  
3 Delegates.

4 **Resolution**

5  
6 **33. Resolved,** that the American Dental Association encourages all state dental associations to work  
7 with their respective state Medicaid agency to ensure that Medicaid dental audits be conducted by  
8 dentists who have similar educational backgrounds and credentials as the dentists being audited, as  
9 well as being licensed within the state in which the audit is being conducted.

10 **BOARD RECOMMENDATION: Vote Yes.**

11 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
12 **BOARD DISCUSSION)**

Resolution No. 38 New

Report: N/A Date Submitted: September 2017

Submitted By: Fourteenth Trustee District

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

# 1 **IMPROPER USE OF THE DEA REGISTRATION NUMBER**

2 The following resolution was adopted by the Fourteenth Trustee District and transmitted on August 20,  
3 2017, by Dr. Carol Morrow, Fourteenth Trustee District caucus chair.

4  
5 **Background:** The Department of Public Health and Environment created the Colorado Health Care  
6 Credential Application on April 20, 2005 and it became effective December 31, 2005. Since that time, it  
7 has been amended on March 21, 2007, which became effective on July 1, 2007 and subsequently  
8 amended February 14, 2014.

9  
10 The intent of the application, a mandate of the state legislature, was to create an instrument that would be  
11 used in the collection of information for the process of credentialing healthcare professionals.

12 The document further states this “uniform application has been designed to allow each practitioner to  
13 complete a single form with core information for submission to each credentialing entity to which the  
14 practitioner is applying.”

15 On page 3 of the application, under General Instruction referred to as the “Federal Narcotic License,” the  
16 disclosure of the DEA registration number is required. This number is a mandate for credentialing by  
17 insurance carriers.

18 The Drug Enforcement Administration (DEA) has produced a position statement entitled: *Consensus*  
19 *Statement to Eliminate the Improper Use of Drug Enforcement Administration Registration Numbers.*

20 In this statement, the DEA notes the following.

21  
22 The “Controlled Substance Act” of 1970 (CSA) was enacted to regulate the lawful use of, and  
23 eliminate the illegal distribution, of controlled substances. The CSA and regulations adopted  
24 pursuant to the Act require a practitioner to obtain and maintain a current Drug Enforcement  
25 Administration (DEA) registration number in order to purchase, possess, distribute, and prescribe  
26 controlled substances.

27 The intent of the DEA registration number is to identify and validate those individuals who have been  
28 authorized by the Federal DEA to prescribe controlled substances in the course of professional  
29 practice.

1 The disclosure of a practitioner's DEA number to entities other than those involved in the legal  
2 distribution of controlled substances or the enforcement of the laws governing their legal distribution  
3 may facilitate a diversion of controlled substances from the legal channels of distribution.

4 The improper use of a DEA registration number by insurance companies and/or other health care  
5 providers for identification purposes is contrary to the spirit of the CSA and national drug policies.  
6

7 The improper use of the DEA registration number has been acknowledged in the policy of the  
8 American Dental Association (page 87 of our Policy Manual *Trans.*2000:454; 2013:306). The DEA  
9 registration number is not a critical prerequisite for the practice of dentistry. This may result in an  
10 unnecessary proliferation in the issuance of DEA registrations to many health care professionals who  
11 have neither the need nor desire to use or handle controlled substances in their chosen professions.  
12 This increases the probability of prescription fraud and diversion.

### 13 14 Resolution

15  
16 **38. Resolved**, that the appropriate ADA agency seek Federal legislative remedies to stop the  
17 inappropriate use of the DEA Registration number.  
18

19 **BOARD COMMENT:** The Board recommends that this resolution be referred to the appropriate ADA  
20 agency for review to determine how to effectively and efficiently address the inappropriate use of DEA  
21 registration numbers, especially within the context of credentialing health care professionals, and to report  
22 back to the 2018 House of Delegates. Currently, the ADA is working with CAQH ProView® to develop a  
23 centralized credentialing system for dentists. Offered by the Council for Affordable Quality Healthcare,  
24 Inc., CAQH ProView® is a web-based solution used by providers to self-report and share a wide range of  
25 demographic and professional information with more than 900 participating health plans, hospitals, health  
26 systems and provider groups. This data is then used for credentialing, network directories, claims  
27 administration and more.  
28

29 It is known that at times dental benefit plans require DEA numbers when dentists prescribe controlled  
30 substances for their insureds, even in cases where the dental benefit plan does not pay for the  
31 prescription. The ADA will be able to streamline the information required for dentists in the CAQH  
32 system, but that is not until next year. In 2018, the ADA intends to work with CAQH to make required  
33 fields optional fields if they are not required for a particular provider use case.

34 **BOARD RECOMMENDATION: Vote Yes to Refer.**

35 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
36 **BOARD DISCUSSION)**

Resolution No. 47-48 NewReport: Board Report 12 Date Submitted: September 2017Submitted By: Board of TrusteesReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None

Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_

Amount On-going \_\_\_\_\_

FTE 0

ADA Strategic Plan Objective: Membership-Obj. 3: 10% increase in assessment of member value

How does this resolution increase member value: See Background

**REPORT 12 OF THE BOARD OF TRUSTEES TO THE HOUSE OF DELEGATES: NEW DENTIST  
COMMITTEE LIAISON VOTING PRIVILEGES ON COUNCILS**

**Background: The ADA and the Need for the New Dentist Voice:** The ADA recognizes that a key to its future success is the diversity of its membership; specifically, age, gender and ethnicity/race. The research is clear; the strongest associations are the ones that draw individuals from various walks of life (diversity), united by a common focus and the ones that reflect an array of experiences, perspectives and expertise (inclusion).<sup>1</sup> This idea is captured within ADA's mission statement: To Help **All** Members Succeed.

The average age of an ADA member is 49 years old, which is significantly lower than the age of ADA leadership. As evidenced by Chart A and Chart B below, there is a substantial gap between the ADA reality and the vision of an inclusive ADA. Currently, new dentists make up 26% of the ADA, however new dentists are drastically under-represented in leadership. Unfortunately, the ADA has not seen a noticeable improvement in new dentist representation, even with a focus on diversity and inclusion. And as the population continues to grow more diverse, as evidenced by the dental school demographics in Appendix 1, the disparity among gender, race/ethnicity, as well as age, will become even more pronounced.

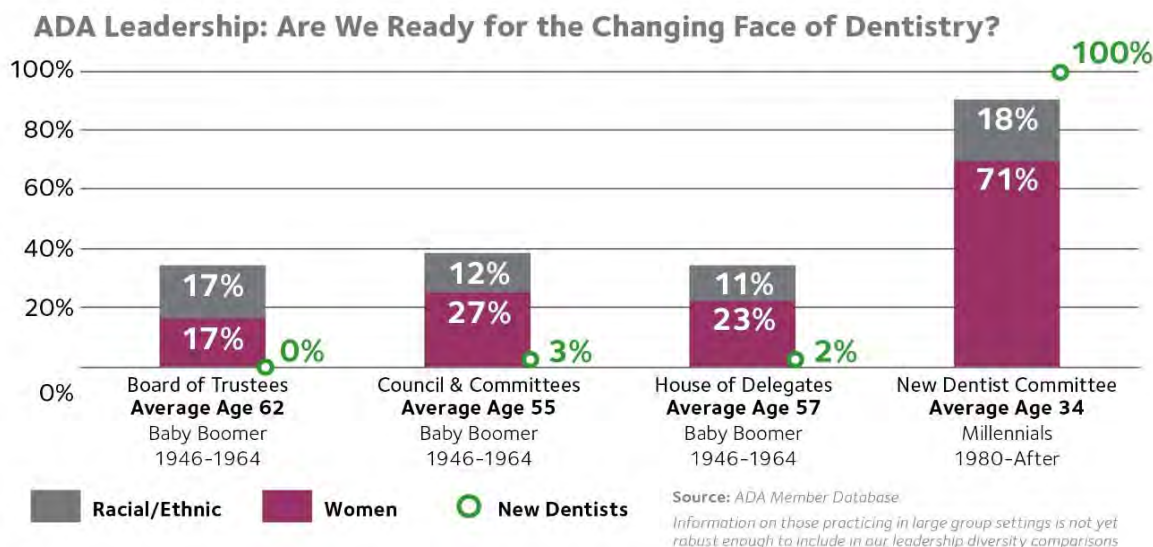
The Board and its Diversity and Inclusion Committee strongly supports an ADA leadership that mirrors the demographics of new dentists and dental students alike. Creating diversity and increasing the voice of new dentists is imperative to the ADA's success. The presence of the new dentist voice serves as a key to shaping the future of our organization to sustain its relevance and to fill the pipeline for member and financial growth.

Chart A

**ADA's Member Diversity**



Chart B



Source: ADA Member Database, EOY 2016

The ADA Board of Trustees has benefitted greatly from the advice and counsel of its New Dentist Committee (NDC). The chair of the NDC is invited and attends Board meetings to serve as the voice of the new dentist. The Committee has been tasked to focus its efforts towards the needs of new dentists, and this has produced innovative ideas and initiatives that have been implemented by the ADA. The Board believes that now is the time to engage *all* of the talent in the ADA and find ways to create an organizational culture that embraces diversity to move the ADA forward.

Currently, the New Dentist Committee provides the new dentist perspective to ADA Councils through a liaison relationship or as designated consultants. As such, the New Dentist Committee has a representative on every Council as well as the American Dental Political Action Committee (ADPAC) and the Committee on Annual Meetings (CAM). Committee members do not participate in Commissions. New Dentist Committee representatives serve as non-voting members of the Councils and Committees, with the exception of ADPAC where the NDC member already has voting privileges. As a result, the ADA Board of Trustees supports converting the NDC liaison position into a full-voting member on each ADA Council, so that the voice of the new dentist is recognized and legitimized in the governance of the ADA. The Board urges the House of Delegates to convert these New Dentist liaison positions to full voting members, with the ability to participate in all aspects of Council work. This will strengthen the new dentist voice in ADA governance and enable the ADA to be more relevant to the soon-to-be majority of millennial members.

The New Dentist Committee will be charged with recommending new dentists from among all new dentist ADA members for each council. From these recommendations, the Board will nominate to the House these new dentists as council members, along with all other council nominations. It is expected that the NDC will select its recommendations from among its members, but NDC will be free to recommend new dentist members from outside its ranks as necessary or deemed prudent by the Committee.

This modification to Councils will necessitate a *Bylaws* change. These proposed changes to the *Bylaws* are set forth in the resolution below. There is no financial impact; as the existing budgets already cover the cost of attendance by NDC members at Council meetings. No action is required with respect to ADPAC, which already allows a vote to the NDC representative, nor for CAM, as it is a committee of the Board.

**Data Supporting New Dentist Representation:** A new dentist is defined as a dentist who graduated with a D.M.D. or D.D.S. degree less than 10 years ago. Research has demonstrated that the early years of practice are critical in creating loyalty to the ADA. Analysis suggests that engaging members in the five to eight years following dental school graduation significantly increases the likelihood of their future membership with the ADA; a higher percentage of recent graduates who remain members up until they pay full dues, will remain members throughout their careers.

At present, the ADA does not fully leverage the voice of the new dentist in its governance. This failure jeopardizes the ADA's ability to make certain that the ADA remains relevant to the new and future generations of dentists. In 2016, despite the fact that new dentists represented 26% of ADA membership, they comprised merely 3% of Councils and Committees with only five new dentists serving on ADA Councils out of a total of 188 Council members. Clearly, change is essential to accurately represent our membership, aid in recruitment and retention and most importantly move the ADA into the future.

**Diversity in Leadership:** "The Changing Face of Dentistry — Meeting the Challenge: A Diversity and Inclusion Toolkit for State and Local Dental Societies" (Appendix 2) outlines the current composition and challenges of diversity in ADA membership and leadership, including the business case for fostering diversity in the ADA. Objective 3 of the ADA's 2015-2019 Diversity and Inclusion Plan is to increase leadership diversity, and Objectives 3.5 and 3.6 address the pipeline directly:

- 3.5 Leverage the dental school strategy to help foster a diverse pipeline of future leaders early on
- 3.6 Align New Dentist Committee leadership initiatives with leadership diversity goals

In the last two years, increasing leadership diversity has been a key priority for the Diversity and Inclusion Committee.

Association experts agree that diverse leadership can lead to greater success for organizations. According to the American Society for Association Executives (ASAE) article, "Diverse Boards Boost Organizational Success"<sup>2</sup> a diverse membership is good for associations and the industries they serve. Specifically, the article states, "The most successful diversity and inclusion initiatives begin with commitment to diversity at leadership levels." A report on "Enhancing Diversity and Inclusion in Membership Associations," by researchers at North Carolina State University and supported by the ASAE Foundation research shows that "Associations with a significant emphasis on diversity and inclusion share a high level of comfort with change, conflict, and empowerment of others."<sup>3</sup>

Businesses are increasingly looking at how to improve diversity in Board leadership. A study on Board diversity with the Boards of Directors from Fortune 250 companies, conducted by Russell Reynolds Associates, found this key learning objective: *A wide range of perspectives, not merely token representation, is critical to effective corporate governance.*<sup>4</sup> This speaks to the importance of having meaningful representation. Again, while this proposal does not address the full range of diversity issues, it is a concrete beginning.

**ADA Policy:** The addition of a vote for a new dentist on Councils is in alignment with ADA policy. Since 2009, the ADA has had a policy in place to urge new dentists to become involved in organized dentistry. Additionally, the ADA has a definition of Diversity and a statement on Diversity and Inclusion. These policies and definitions are listed below.

**New Dentist Involvement in Volunteer Leadership (Trans.2009:487)**

**Resolved**, that new dentists (defined as dentists graduating less than ten years previously) be encouraged to become involved as volunteers in organized dentistry, and be it further

**Resolved**, that constituent dental societies be urged to include new dentists in the leadership development process, offer new dentists volunteer opportunities, and be inclusive of new dentists in the leadership education offered.

**Definition of Diversity (Trans.2011:550)**

**Resolved**, that ADA diversity is defined as differences related to personal characteristics, demographics, and professional choices.

**Statement on Diversity and Inclusion:** The American Dental Association strives to model diversity and inclusion in everything we do. We believe that these foster an innovative and dynamic culture and lead to sustainable results. They allow us to further advance the dental profession, improve the oral health of the public, and promote equity and access to oral health.

As a result, we serve and support the different identities, beliefs and perspectives of a diverse member-ship, leadership, workforce and staff, as well as a wide range of communities and organizations.

Additionally, the Board's Diversity and Inclusion Committee further explains that *Inclusion enables us to strive to have all people represented and included and make everyone feel welcomed and valued, not only for their abilities, but also for their unique qualities and perspectives.* Similarly the Association Forum of Chicagoland recommends that associations embrace a welcoming environment, and defines the [Welcoming Environment](#) as the creation of a sense of belonging and connectedness that engages individuals in an authentic manner in which uniqueness is valued, respected and supported through opportunities and interaction.<sup>5</sup> As the data provided above demonstrates, with only five new dentists presently serving as voting members on ADA Councils, the Association is not effectively encouraging new dentists to become fully involved in leadership and is not benefitting from their "unique qualities and perspectives." Adoption of the proposal contained in this report will bring the ADA one step closer to satisfying both the letter and the spirit of these policies. Converting the New Dentist Committee liaison positions to full voting members ensures that at least one new dentist voice on each council is counted.

**New Dentist Participation on Councils:** The New Dentist Committee recognizes that participation as a voting member of the Councils will require a significant commitment. The Committee understands the implications and its members are prepared to make that extra commitment or to recommend other new dentists who can do so in order to represent their demographic.

With adoption of this proposal, the Committee will suggest to the Board specific new dentists for each Council. The Committee will take the Council needs into careful consideration as it recommends its appointments each year. The Board will then include the new dentist members among its nominations to councils which it submits to the House for approval. The House will then need to approve these nominations annually with the other Council appointments.

The following resolution is proposed which identifies the addition of a New Dentist Committee member in the composition of each Council in the ADA Bylaws. In addition, if the proposed Bylaws changes are adopted, a second resolution is offered which includes the names of the nominations of New Dentist Committee members for service on the Councils for the 2017-2018 term.

## Resolution

**47. Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS*, Paragraph A., be amended as follows (additions underscoring; deletions ~~stricken~~):

Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. The composition of the councils of this Association shall be as follows: In addition, a council may request an additional member who shall be a non-practicing dentist member appointed in accordance with Chapter I, Section 20Db of these *Bylaws*.

Council on Advocacy for Access and Prevention shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Communications shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Benefit Programs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Education and Licensure shall be composed of ~~sixteen (16)~~ seventeen (17) members selected as follows:

a. Nominations and Selection.

(1) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency. A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

(2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members

1 of any state or regional testing agency, state board of dentistry or jurisdictional dental  
2 licensing agency.

3 (4) One (1) new dentist member recommended by the New Dentist Committee and  
4 nominated by the Board of Trustees.

5 b. Election. The ~~eight (8)~~ members of the Council on Dental Education and Licensure nominated  
6 by the Board of Trustees shall be elected by the House of Delegates from nominees selected in  
7 accordance with this Section.

8 c. Committees. The Council on Dental Education and Licensure shall establish a standing  
9 Committee on Dental Education and a standing Committee on Licensure, each consisting of  
10 eight (8) members selected by the Council. The Council may establish additional committees  
11 when they are deemed essential to carry out the duties of this Council.

12 Council on Dental Practice shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1)  
13 member from each trustee district whose terms of office shall be staggered in such a manner that  
14 four (4) members will complete their terms each year except every fourth year when five (5)  
15 members shall complete their terms, and one (1) new dentist member recommended by the New  
16 Dentist Committee and nominated by the Board of Trustees.

17 Council on Ethics, Bylaws and Judicial Affairs shall be composed of ~~seventeen (17)~~ eighteen (18)  
18 members, one (1) member from each trustee district whose terms of office shall be staggered in  
19 such a manner that four (4) members will complete their terms each year except every fourth year  
20 when five (5) members shall complete their terms, and one (1) new dentist member recommended  
21 by the New Dentist Committee and nominated by the Board of Trustees.

22 Council on Government Affairs shall be composed of ~~eighteen (18)~~ nineteen (19) members, one (1)  
23 member from each trustee district whose terms of office shall be staggered in such a manner that  
24 four (4) members will complete their terms each year except every fourth year when five (5)  
25 members shall complete their terms, and one (1) new dentist member recommended by the New  
26 Dentist Committee and nominated by the Board of Trustees. In addition, the chair of the political  
27 action committee shall be a non-voting member of the Council. Consideration shall be given to a  
28 candidate's experience in the military or other federal dental services. Members of the Council shall  
29 not be in the full-time employ of the federal government. Individuals called to active duty from the  
30 military reserves or national guard forces, providing such active duty has not been requested by the  
31 individual, shall not be considered to be in the full-time employ of the federal government.

32 Council on Members Insurance and Retirement Programs shall be composed of ~~seventeen (17)~~  
33 eighteen (18) members, one (1) member from each trustee district whose terms of office shall be  
34 staggered in such a manner that four (4) members will complete their terms each year except every  
35 fourth year when five (5) members shall complete their terms, and one (1) new dentist member  
36 recommended by the New Dentist Committee and nominated by the Board of Trustees.

37 Council on Membership shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1)  
38 member from each trustee district whose terms of office shall be staggered in such a manner that  
39 four (4) members will complete their terms each year except every fourth year when five (5)  
40 members shall complete their terms, and one (1) new dentist member recommended by the New  
41 Dentist Committee and nominated by the Board of Trustees.

42 Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ seventeen (17) members, fifteen (15)  
43 of who whom shall be selected from nominations open to all trustee districts, the current recipient of

the Gold Medal Award for Excellence in Dental Research, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

and be it further

**Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 60*. TERM OF OFFICE, be amended as follows (additions underscoring; deletions ~~stricken~~):

*Section 60. TERM OF OFFICE:* The term of office of members of councils shall be four (4) years except as otherwise provided in these *Bylaws*. The tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in these *Bylaws*. Except as otherwise provided in these Bylaws, a A-member shall not be eligible for appointment to another council or commission for a period of two (2) years after completing a previous council appointment. The terms of office for the new dentist members of councils recommended by the New Dentist Committee and nominated by the Board of Trustees shall be one (1) year terms; however, such members shall not be limited as to the number of consecutive one (1) year terms that they may serve. The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

**Resolved**, that the ADA *Bylaws*, CHAPTER VII. BOARD OF TRUSTEES, *Section 140*. COMMITTEES, be amended as follows (additions underscoring, deletions ~~stricken through~~):

*Section 140. COMMITTEES:* The Board of Trustees shall have a standing New Dentist Committee. The Committee shall consist of one (1) member from each trustee district who are active members selected by the Board of Trustees and confirmed by the House of Delegates. Members of the Committee shall have received their D.D.S. or D.M.D. degree less than ten (10) years before the time of selection. The chair of the Committee shall be appointed annually by the Board of Trustees.

Members of the Committee shall serve one (1) term of four (4) years. The Board of Trustees shall stagger the terms of the members of the Committee in a manner so four (4) members will complete their terms each year, except every fourth year when five (5) members shall complete their terms.

The Board of Trustees shall have the power to remove a Committee member for cause in accordance with procedures established by the Board in its *Rules*. In the event of any vacancy on the Committee, the Board of Trustees shall select a member of this Association possessing the same qualifications as established by these *Bylaws* for the previous member, to fill such vacancy for the remainder of the unexpired term. If the term of the vacated Committee position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is selected, the successor member shall be eligible for selection to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of selection, the successor member shall not be eligible for another term.

The New Dentist Committee's work shall be assigned by the Board of Trustees, and reports and proposals formulated by the Committee shall be referred to the Board for decision and action. The duties of the Committee shall be to:

- a. Provide the Board of Trustees with expertise on issues affecting new dentists.
- b. Advocate to the Board of Trustees, other agencies of this Association and the tripartite dental societies the perspectives of the new dentist in the development of policies, programs, benefits and services of the Association.

- 1 c. Identify the needs and concerns of new graduate dentists and make recommendations for  
2 any programs to assist with their transition to practice.
- 3 d. Enhance member value, encourage involvement and active participation, and build a  
4 community of new dentists in organized dentistry.
- 5 ~~e. Serve as non-voting members of councils and commissions of this Association on issues~~  
6 ~~affecting new dentists; these appointments will be recommended by the Committee and~~  
7 ~~assigned by the Board of Trustees. Recommend new dentist members to serve as members~~  
8 ~~of councils of this Association; these recommendations are submitted to the Board of~~  
9 ~~Trustees for consideration as nominations to be forwarded to the House of Delegates.~~
- 10 f. Facilitate the development of constituent and component new dentist committees and provide  
11 resources to assist constituent and component dental societies in meeting the needs of new  
12 dentists.
- 13 g. Enhance the development of future leaders by providing and promoting leadership  
14 development opportunities and training for new dentists.

15 and be it further

16 **Resolved**, that if Resolution 7, *Amendment of the ADA Bylaws pursuant to Resolution 118H-2014* is  
17 adopted, that the following conforming changes to the foregoing ADA Bylaws amendments be  
18 approved for placement into the newly revised *Governance and Organizational Manual of the*  
19 *American Dental Association* as follows:

20 **CHAPTER VIII. COUNCILS**

21 **A. Members, Selections, Nominations and Elections.**

22 1. Composition. The composition of the councils of this Association shall be as follows:

- 23 a. Council on Dental Education and Licensure. The Council on Dental Education and  
24 Licensure shall be composed of seventeen (17) members selected as follows:

25 i. Nominations.

- 26 (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational  
27 system by trustee district from the active, life or retired members of this  
28 Association, no one of whom shall be a full-time member of a faculty of a school of  
29 dentistry, a current dental examiner or member of a state or regional testing  
30 agency, state board of dentistry or jurisdictional dental licensing agency. \*
- 31 (b) Four (4) members who are active, life or retired members of this Association shall  
32 be selected by the American Association of Dental Boards from the active  
33 membership of that body, no one of whom shall be a member of a faculty of a  
34 school of dentistry.

35  
36  
37 \* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2)  
38 days or sixteen (16) hours per week.

(c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

(d) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.

b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ seventeen (17) members, ~~fifteen (15)~~ of whom ~~who~~ shall be selected from nominations open to all trustee districts, ~~and the current recipient of the Gold Medal Award for Excellence in Dental Research and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.~~

c. Remaining Councils. The remaining councils of this Association shall each be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees. The term of service for new dentist members recommended by the New Dentist Committee and nominated by the Board of Trustees elected to serve on councils shall be one (1) year; however, such members shall not be limited as to the number of terms that they may serve.

**48. Resolved,** that the following nominations of New Dentist Committee members to the ADA Councils be approved:

Council on Advocacy for Access and Prevention (CAAP), Dr. Colleen Greene  
Council on Communications (CC), Dr. Andrea Fallon  
Council on Dental Benefit Programs (CDBP), Dr. Sara Stuefen  
Council on Dental Education and Licensure (CDEL), Dr. Jon Pascarella  
Council on Dental Practice (CDP), Dr. Mike Saba  
Council on Ethics, Bylaws and Judicial Affairs (CEBJA), Dr. Lindsey Compton  
Council on Government Affairs (CGA), Dr. Robin Nguyen  
Council on Membership (CM), Dr. Lauren Czerniak  
Council on Members Insurance and Retirement Programs (CMIRP), Dr. Britany Matin  
Council on Scientific Affairs (CSA), Dr. Ben Youel

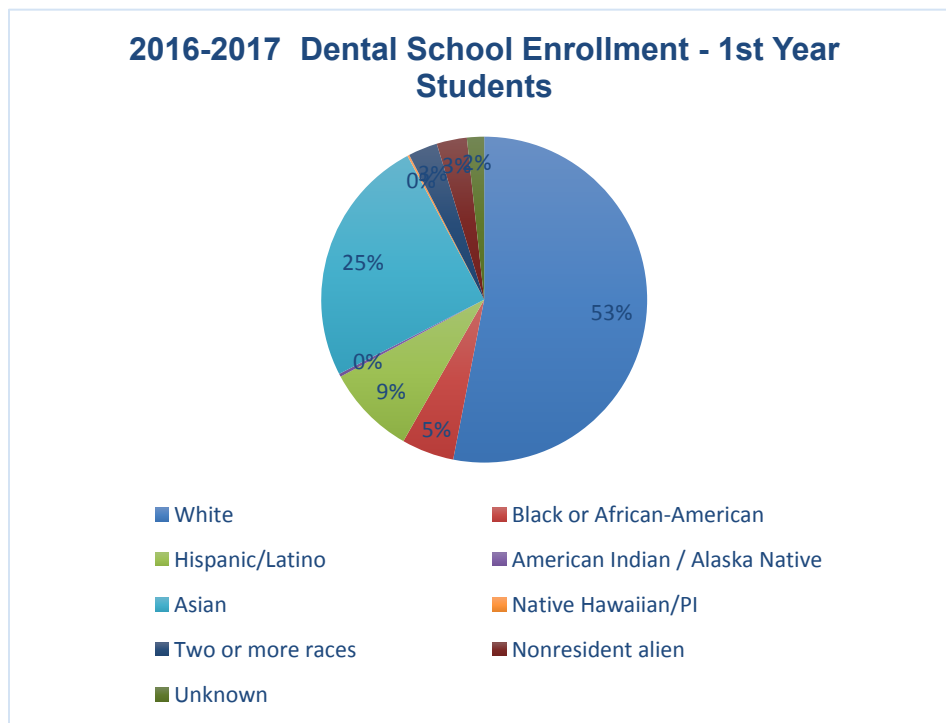
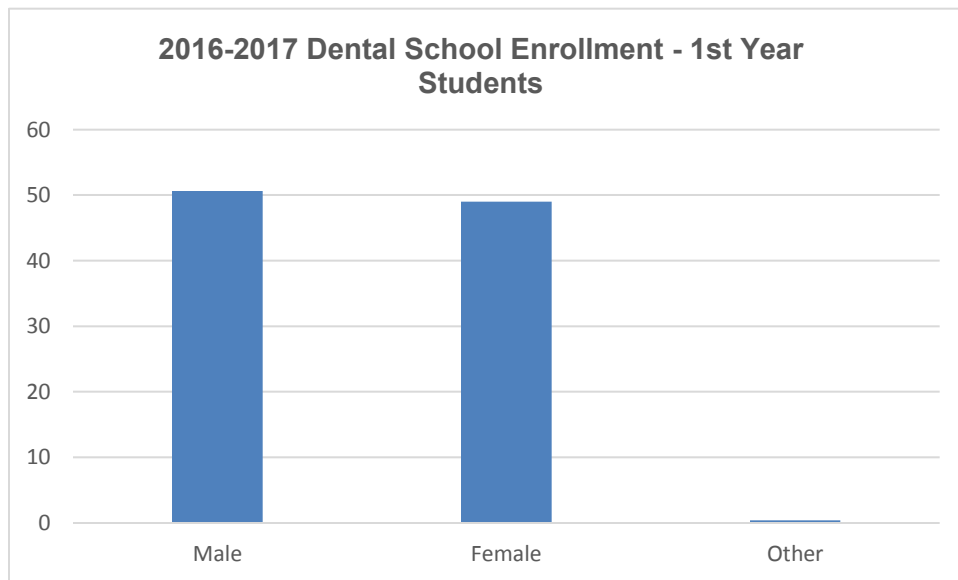
### Resolutions

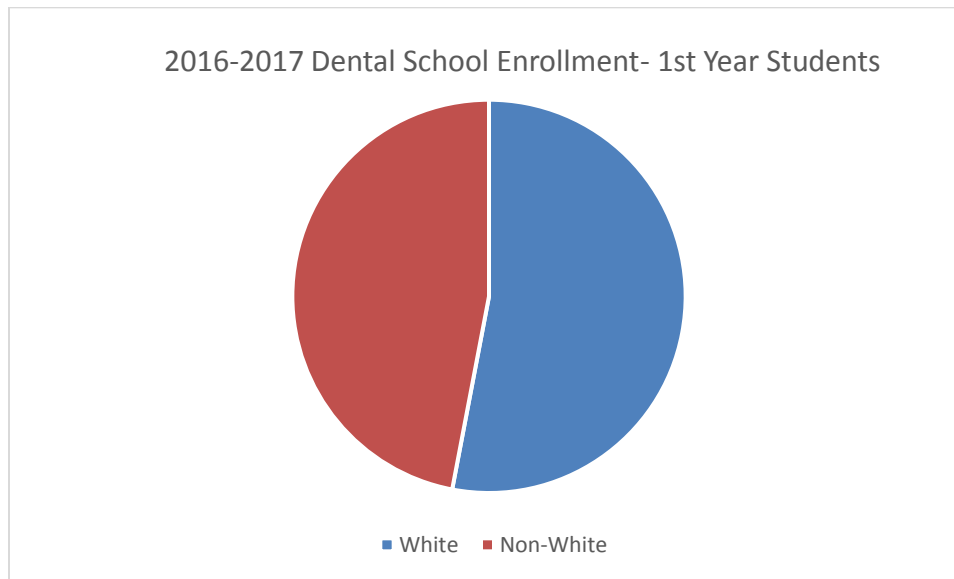
(Resolution 47:Worksheet:5040)

(Resolution 48:Worksheet:5045)



### Appendix 1 - Dental School Demographics





Source: ADA Survey of Dental Education Report 1: Academic Programs, Enrollment and Graduates, 2016-2017

#### References:

1. "The Changing Face of Dentistry —Meeting the Challenge: A Diversity and Inclusion Toolkit for State and Local Dental Societies", ADA 2017, Print (Appendix I)
2. "[Diverse Boards Boost Organizational Success](#)", American Society of Association Executives, September 2016, Web ([www.ASAECenter.org](http://www.ASAECenter.org))
3. Leiter, Jeffrey, Prof., Solebello, Nicholas and Professor Mary Tschirhart, Prof. "Enhancing Diversity and Inclusion in Membership Associations a White Paper Based on an Interview Study conducted by NC State University Institute for Nonprofits" ASAE Foundation, November 2011, Print
4. "Different Is Better: Why Diversity Matters in the Boardroom", Russell Reynolds Associates, 2009, Web ([www.RussellReynolds.com](http://www.RussellReynolds.com))
5. "[Commitment to a WELCOMING ENVIRONMENT™ \(WE\) at Association Forum and our Member Associations](#)", Association Forum of Chicagoland, 2017, Web ([www.associationforum.org](http://www.associationforum.org))



# The Changing Face of Dentistry — Meeting the Challenge

A Diversity and Inclusion Toolkit for State and Local Dental Societies

## Toolkit Overview

The toolkit can help societies:

- Facilitate conversations about diversity and inclusion
- Discuss membership diversity success and action
- Evaluate leadership diversity and pathways for inclusion
- Foster more welcoming and inclusive environments
- Implement systems of sustainability

# Welcome to the State and Local Dental Society Diversity and Inclusion Toolkit

Dear State and Local Dental Societies,

The ADA Diversity and Inclusion Committee and supporting staff have laid a foundation for diversity and inclusion progress through the [2015-2019 Diversity and Inclusion Plan](#). The plan outlines three goals: increasing member diversity, creating a welcoming and inclusive environment, and building a system of sustainability.

Although the ADA has made progress toward these goals, more work is needed. As the demographics of dentistry change, our organizations must fully embrace diversity and inclusion in order to be competitive, and ready to support all dentists now and in the future.

We invite you to take the journey of advancing diversity and inclusion alongside the ADA. In this toolkit you'll discover ideas to compliment your dental society's diversity and inclusion efforts. The ADA applauds all of you who are committed to diversity and inclusion, whether just embarking on the journey or already making strides. And let's remember: "A journey of a thousand miles begins with a single step." – Lao Tzu

## Where is Your Dental Society on its Diversity and Inclusion Journey? The Diversity and Inclusion Continuum

**1. Unacquainted** – Diversity and difference are not on the radar of the dental society. Discussions on the value that diversity and inclusion bring to the society have not taken place.

**2. Realization** – There is an understanding of the importance of diversity and inclusion and the dental society is fostering conversations about how to better create a welcoming and inclusive environment for all dentists.

**3. Intentional Inclusion** – The dental society and its leadership have made a formal commitment to diversity and inclusion and structural efforts are in place to advance efforts.

**4. Strategic Inclusion** – Long-term, broad-reaching diversity and inclusion strategic measures are in place and align with the dental society's overall goals and objectives.

**5. Culture of Inclusion** – All layers of diversity and inclusion are considered and supported, and systemic processes for maintaining inclusion are fully woven into the dental society's culture and operations.

Resources will continue to be developed and shared as we move forward together. Your feedback is encouraged so that we can continually improve the resources we offer. Contact a member of the [ADA Client Services Outreach Team](#) with your feedback or for assistance with your diversity and inclusion efforts. You may also reach us at [diversity@ada.org](mailto:diversity@ada.org).

### ADA CLIENT SERVICES

Fostering Member Growth • Delivering Key Information and Services • Building Community

# 8 Key Action Steps that Your Dental Society Can Take to Help Advance Diversity and Inclusion.

- [Set the Stage for Diversity and Inclusion](#)
- [Gain Buy-in for Diversity and Inclusion: The Business Case](#)
- [Start the Conversation about Diversity and Inclusion](#)
- [Increase Leadership Diversity](#)
- [Build Member Diversity](#)
- [Foster a Welcoming and Inclusive Environment](#)
- [Take Action for Diversity and Inclusion Success](#)
- [Sustain Diversity and Inclusion](#)

# Set the Stage for Diversity and Inclusion

Certainly, at the center of any successful association is a healthy membership. There is strength in numbers. But membership is also evaluated in terms of the quality, the engagement and, increasingly, the diversity of its members. The research is clear; the strongest associations are the ones that draw individuals from various walks of life (diversity), united by a common focus and the ones that reflect an array of experiences, perspectives and expertise (inclusion).

You'll hear different definitions about what diversity is and what inclusion is about. The key takeaway is that diversity is about counting difference, while inclusion is making sure that everyone's differences count. These are very key distinctions that should be kept in the forefront with any diversity and inclusion initiative. And because these distinctions are so important, the ADA's Diversity and Inclusion Committee changed its name from the Diversity Committee to the Diversity and Inclusion Committee in 2013 to demonstrate its recognition and commitment to not only diversity, but to inclusion as well.

## Diversity versus Inclusion

**Diversity** – A group comprised of different people with different experiences. These differences include, for example, race, color, religion, gender, national origin, sexual orientation, age, disability, veteran status or citizenship. However, “diversity” does not address how different people function, work or determine value.

**Inclusion** – Enables us to strive to have all people represented and included and make everyone feel welcomed and valued, not only for their abilities, but also for their unique qualities and perspectives.

**Diversity is counting all; inclusiveness is making sure that all are counted.**

## ADA's Definition for Diversity

**Resolution 54H-2011.** Resolved, that ADA diversity is defined as differences related to personal characteristics, demographics, and professional choices.

## ADA's Diversity & Inclusion Statement

The American Dental Association strives to model diversity and inclusion in everything we do. We believe that these foster an innovative and dynamic culture and lead to sustainable results. They allow us to further advance the dental profession, improve the oral health of the public, and promote equity and access to oral health.

As a result, we serve and support the different identities, beliefs and perspectives of a diverse membership, leadership, workforce and staff, as well as a wide range of communities and organizations.

# Gain Buy-In for Diversity and Inclusion: The Business Case

The racial/ethnic and gender diversity of the dental profession is expected to grow, as greater numbers of people of diverse backgrounds enter dentistry and older, predominately white dentists, retire. Also, while solo practice is the dominant form of delivery in dentistry, the number of dentists in solo practices is decreasing, while the number of dentists in group practice and other non-traditional practice settings is increasing. Unfortunately, **the growing diversity of the profession is not reflected in the membership of the American Dental Association** and its state and local counterparts. Key demographic groups, including women and racially and ethnically diverse dentists continue to lag the overall ADA membership market share. And, the growth of non-traditional practice settings presents unique membership value challenges. As the dental workforce becomes more diverse, ADA's market share of dentists may decline as these demographic groups make up a higher proportion of the profession.

While efforts to increase membership diversity are important, inclusion must be an implicit part of the ADA's culture at the national, state and local levels. An **intentional focus on inclusion** will ensure that efforts to diversify the membership are sustained within a culture and climate where everyone feels welcomed and valued.

A lack of inclusion is currently reflected in the disparity that exists between membership diversity and leadership diversity at the national, state and local levels of the ADA. The pool of emerging leaders within the ADA should reflect the changing demographics of dentistry in order for the Association to gain diverse perspectives and ensure its **relevance and sustainability**. As the makeup of the United States and the demographics of dentistry continue to change, this disparity will become increasingly apparent without the successful engagement of diverse leaders throughout all levels of the ADA.

The ADA's **context and organizational perspective** for diversity and inclusion is representative of the dental profession being less diverse than the U.S. population, ADA membership being less diverse than the dental profession and ADA leadership being less diverse than ADA membership.

As the **face of dentistry changes** with more dentists of diverse backgrounds entering the profession, growth in diversity and a culture of inclusion will reinforce ADA's leadership role within organized dentistry and ensure that the membership fabric of the ADA remains strong.

**Not taking action** to enhance diversity and inclusion across all levels of the ADA will result in missed opportunities to shape the industry and demonstrate the relevance of the Association to dentists of diverse backgrounds. This would have a significant negative impact on ADA's standing credibility and ability to advocate that would fundamentally change the stature and influence of the Association as a leader in oral health. Consequently, a failure to act would also have dire consequences for state and local dental societies.

## Moving Forward

In order to accomplish the ADA mission, a continued commitment to diversity and inclusion is critical. Although [diversity and inclusion progress](#) has been made, more work is needed for ADA's governance, programs and policies to advance diversity in the dental profession and nation's population. Moving forward, ADA's strong appreciation for both diversity and inclusion, coupled with its intentional focus on implementing its [2015-2019 ADA Diversity and Inclusion Plan](#), positions it for success with new and expanded priorities.



# Start the Conversation about Diversity and Inclusion

## The Landscape

The dental workforce is **becoming more diverse.**

Women and diverse dentists **continue to lag** the overall ADA membership market share.

**A disparity exists** between membership diversity and leadership diversity across all levels of the ADA.

## Ten Discussion Questions to Spark Strategic Conversations within your Dental Society about Diversity and Inclusion

1. How does your dental society **define diversity and inclusion**?
2. **Why should diversity and inclusion matter** to your dental society?
3. How can your society's practices, traditions, and overall environment be better perceived as welcoming and inclusive?
4. How can your dental society foster an **open discussion about the changing demographics of dentistry** and how it may impact the relevance of your society's services, programs, and mission?
5. How might enhancing diversity and inclusion efforts **increase your dental society's ability to serve its mission and sustain its relevance**?
6. What are the **potential points of contention or resistance** from your dental society's decision-makers related to diversity and inclusion?
7. How can your leadership **demonstrate its commitment to advancing diversity and inclusion** within your dental society?
8. What is the **level of member diversity** represented in your dental society?
  - a. What growth opportunities exist with your overall market of diverse dentists?
9. What is the **level of leadership diversity** represented in your dental society?
  - a. If your leadership is not diverse, how can your dental society make sure the perspectives of dentists of diverse backgrounds are reflected in its decision-making?
    - i. How can your dental society benefit from having a diversity and inclusion committee?
    - ii. What opportunities exist to increase diverse representation on your dental society's councils and committees?
  - b. If your leadership is not diverse, what pathways to leadership can be leveraged?
    - i. What are the alternative options for diverse dentists to get involved if a formal leadership position is not available?
10. What next steps can your dental society take to **enhance diversity and inclusion** in order to maintain its position as a relevant and representative leader for future generations of dentists?

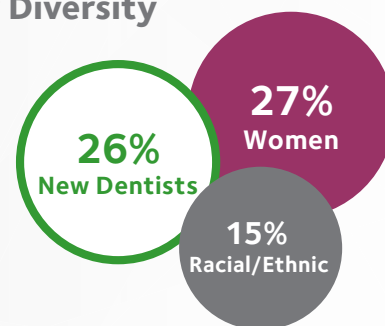


# Increase Leadership Diversity

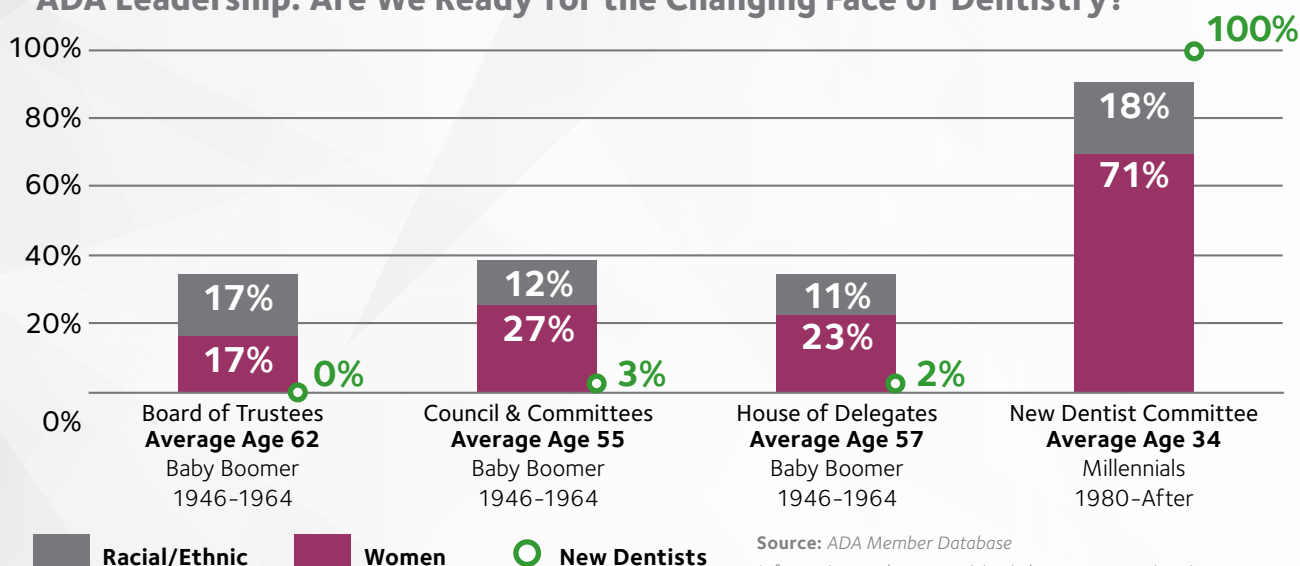
Best practice leadership standards across a variety of industries, including corporate, healthcare and association industries, **suggest that an organization's leadership and governance composition should reflect the varied constituents it serves.** Research advises that organizations who have leadership from diverse backgrounds, offering a wide array of perspectives, position themselves as more credible and relevant and are more likely to attract customers or members from broader demographics.

Currently the ADA's leadership diversity is not reflective of its member composition at the national level and also at many state and local levels.

## ADA's Member Diversity



## ADA Leadership: Are We Ready for the Changing Face of Dentistry?



Source: ADA Member Database

Information on those practicing in large group settings is not yet robust enough to include in our leadership diversity comparisons.

## Know Your Leadership

Understanding the composition of leadership is the first step to building leadership diversity. Access ADA's [Best Practice Standards for Leadership Composition Guide \(ADA House of Delegates\) — EOY 2016](#) to see an analysis of House of Delegate representation by state. In addition, download the [Leadership Composition Analysis Template](#) to conduct a comprehensive analysis of your dental society's leadership.

## 5 Strategies for Increasing Leadership Diversity

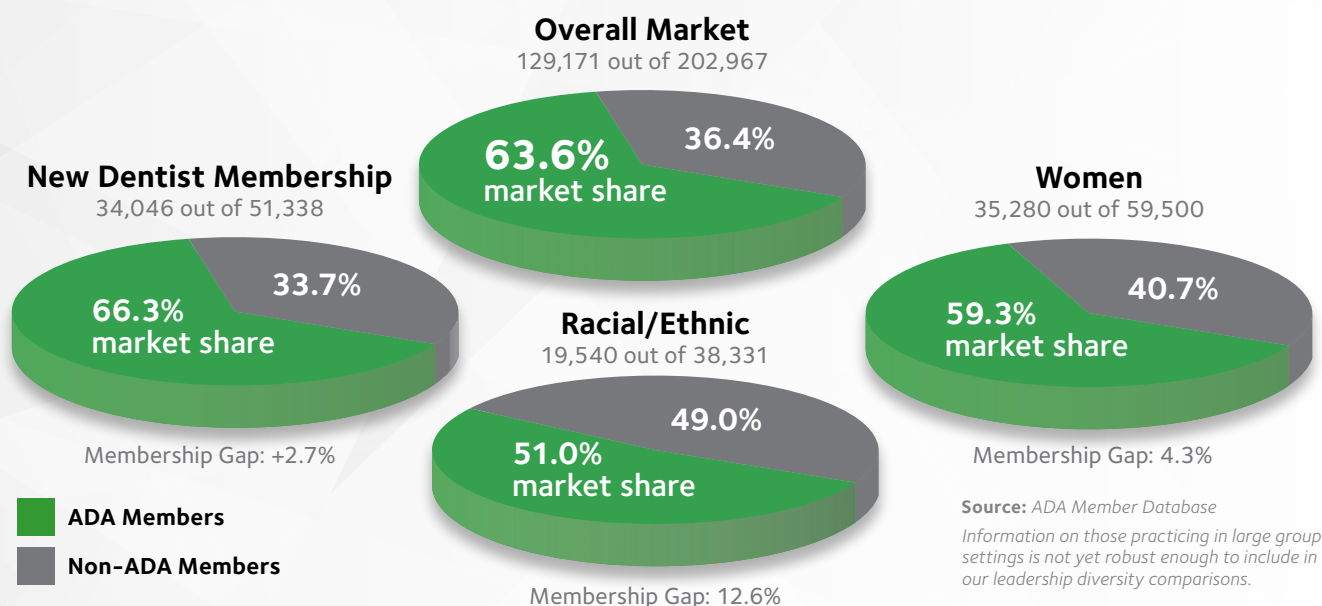
1. Build competencies related to diversity and inclusion into your leadership requirements.
2. Engage leaders from racially, ethnically and gender diverse dental organizations for leadership positions.
3. Cultivate a broader pool of diverse leadership candidates through leadership development programs.
4. Nurture potential and emerging leaders of diverse backgrounds through targeted mentoring programs.
5. Consider [current participants and alumni](#) from the American Dental Association's [Institute for Diversity in Leadership](#).

# Build Member Diversity

Key demographic groups including women and diverse dentists continue to lag the overall ADA membership market share. As the dental workforce becomes more diverse, ADA's market share of dentists may decline. The decreased likelihood of women and non-whites to maintain ADA membership compared with white men, may reduce ADA's market share going forward as these demographic groups make up a higher proportion of the profession.

Currently, ADA membership diversity is not reflective of membership at the national level and also at many state and local levels.

## ADA Membership: Are We Ready for the Changing Face of Dentistry?



## Know Your Membership

Understanding the composition of your membership is the first step to building member diversity. Access ADA's [State Membership Diversity Tracker](#) to see an analysis of membership diversity by state. In addition, download the [Membership Composition Analysis Template](#) to conduct a comprehensive analysis of your dental society's membership.

## 7 Strategies for Recruiting Diverse Dentists

1. As dental students are one of the most diverse populations, start early with outreach to dental students.
2. Identify your target membership segment(s).
3. Send surveys to respective membership segments to find out what you do well, what they would like to see you do, as well as what they value from membership.
4. List out insights and perspectives from each segment along with the related membership value findings.
5. Re-examine your programming and communications to make sure that the needs of each segment are covered regularly.
6. If there's a gap, target communications and events that align with the respective group's needs, interests and concerns.
7. Leverage [State and Local Diversity and Inclusion Activities and Events](#) from other dental societies.

# Foster a Welcoming and Inclusive Environment

Working to make your dental society welcoming and inclusive is a critical component for diversifying your dental society. Building membership and leadership diversity without addressing the welcoming and inclusive climate of the dental society can result in disconnects with diverse individuals. It is not uncommon to recruit new members only to see them not return after the first or second event. It is also not uncommon for leaders of diverse backgrounds to feel seen, but not heard. Could part of the problem be a symptom of an organizational culture that does not feel welcoming or inclusive to new members or leaders, especially those who have identities that are different from the majority? The dental society gets one opportunity to make a first impression, this first encounter is extremely important and sets the tone for the relationship that follows.

**“I’ve learned that people will forget what you said,  
people will forget what you did, but people will  
never forget how you made them feel.”**

— Maya Angelou

## What Is a Welcoming and Inclusive Dental Society?

An inclusive Dental Society has an “organizational environment that allows people with multiple backgrounds, mindsets, and ways of thinking to work effectively together. In such an environment voices are respected and heard, diverse viewpoints, perspectives, and approaches are valued, and everyone is encouraged to make a unique and meaningful contribution.

In an inclusive organization, current leaders and members actively recruit and welcome newcomers. They are willing to change themselves and the culture of their organization to make room for new people with diverse perspectives, ideas, and ways of working together.

Use the **Welcoming and Inclusion Lens** tool to gain insight into how you can create a more inclusive environment.

### Welcoming and Inclusive Lens

The Lens tool uses a series of questions to help you acknowledge certain behaviors and actions. The following overarching questions can be used to help better foster a welcoming and inclusive environment.

1. Who is not included in the work we do?
2. What could contribute to this exclusion?
3. What are we doing to promote inclusion?
4. What can we do differently to ensure inclusion?



# Take Action for Diversity and Inclusion Success

## Diversity and Inclusion Planning Checklist

Once you have decided to take the journey towards inclusiveness, it is important to engage in planning. Diversity and Inclusion efforts often fail because of a lack of proper planning and preparation at the outset. To jumpstart your diversity and inclusion work, consider the five initial action items:

### ☐ **Assess Your Organizations' Welcoming and Inclusive Climate**

Understand your current state by assessing your welcoming and inclusive climate. The findings will give you a sense of how your organization is perceived among diverse members and potential members, as well as help determine what areas of focus could become priorities. The [Diversity and Inclusion Welcoming and Inclusive Survey](#) can be used as a template or it can be customized specifically for your dental society.

### ☐ **Audit Your Dental Society's Current Activities**

A framework for assessment is critical to success with diversity and inclusion. Assessment also helps determine next steps. What diversity and inclusion activities do you currently have in place? What diversity and inclusion activities could be implemented for greater success? Conducting this type of audit can help you as you move forward with a new or broader plan of action. The [Diversity and Inclusion Success Factors](#) can be used as an assessment starting point.

### ☐ **Align and Leverage Leadership**

It is not enough for one or two people to think advancing diversity and inclusion is important; the majority of your executive committee, board, staff and committee structure must be convinced of the value of this endeavor. Why? Because such an effort touches every aspect of your organization and will influence all that you do. A myriad of research suggests that a primary factor in successfully advancing diversity and inclusion is support from leadership. Start by having conversations about diversity and inclusion with organizational leaders to help make the business case for advancing diversity and inclusion. The [Start the Conversation about Diversity and Inclusion](#) questions can be used as a discussion starter.

### ☐ **Determine a Structure to Carry Out Diversity and Inclusion Initiatives**

Decide if you need a formal Committee or if a group or individual can be leveraged to enhance your diversity and inclusion efforts. If you determine that a committee or similar governing body is needed, refer to [Starting & Maintaining a Diversity and Inclusion Committee or Task Force](#) to identify next steps.

### ☐ **Draw up an Action Plan**

Sift through the various opportunities identified by your team and determine some reasonable short- and long-term goals. Based on your goals and resources, draft an action plan that defines specific objectives, strategies, timelines, budgets and responsible parties — and then hold those parties to it. The [Diversity and Inclusion Action Plan Template](#) can be used as an outline.



# Sustain Diversity and Inclusion

Advancing Diversity & Inclusion is an ongoing journey that takes sustained commitment. Too often organizations engage in one and done efforts around diversity and inclusion. It isn't enough to hold a training session once every few years. Efforts around inclusion need to be sustainable and not crossed off a list after a weeklong communication initiative or a one-hour team building event. Being inclusive is an ongoing process.

Sustain diversity and inclusion efforts through personal, collective and shared power.

## Personal Power

**Use your personal power to sustain diversity and inclusion.**

As an individual, you can impact the sustainability of diversity and inclusion through an intentional focus on your personal role in fostering a diverse, welcoming and inclusive environment.

- Speak up for diversity and inclusion.
- Be engaged in diversity and inclusion efforts.
- Build diverse teams.
- Be aware of your Unconscious Bias.
- Be an inclusive leader.

**Take these free tests from Harvard University and Catalyst to learn and discover more about yourself.**

- [Unconscious Bias Implicit Association Tests](#)
- [Inclusive Leader Quiz](#)

## Collective Power

**Use your dental society's collective power to sustain diversity and inclusion.**

As a group, your dental society can impact the sustainability of diversity and inclusion through intentional creation of systems, policies, practices, communications and collaborations that support a diverse, welcoming and inclusive environment.

### UNDERSTAND THE DIFFERENCE

#### Diversity

Numbers

#### Inclusion

Systems

Policies

Practices

Communications

Collaborations

## Shared Power

**Share insights and perspective to sustain diversity and inclusion.**

Peer-to-Peer sharing of successes and challenges can help societies throughout the ADA system enhance their efforts. To help foster success across the tripartite, please share your diversity and inclusion thoughts, activities or ideas with key stakeholders within your state, a member of the [Client Services Outreach Team](#) or via email at [diversity@ada.org](mailto:diversity@ada.org).

# Toolkit Resources

- [Diversity and Inclusion Progress](#)
- [2015-2019 ADA Diversity and inclusion Plan](#)
- [Best Practice Standards for Leadership Composition Guide \(ADA House of Delegates\) - EOY 2016](#)
- [Leadership Composition Analysis Template](#)
- [ADA Institute for Diversity in Leadership](#)
- [Current Participants and Alumni \(Institute for Diversity in Leadership\)](#)
- [State Membership Diversity Tracker](#)
- [Membership Composition Analysis Template](#)
- [State and Local Diversity and Inclusion Activities & Events](#)
- [Diversity and Inclusion Welcoming and Inclusive Survey](#)
- [Diversity and Inclusion Success Factors](#)
- [Start the Conversation about Diversity and Inclusion](#)
- [Starting and Maintaining a Diversity and Inclusion Committee](#)
- [Sample Diversity and Inclusion Action Plan](#)
- [Project Implicit \(Harvard\): Hidden Biases Test](#)
- [Inclusive Leader Quiz: Are You an Inclusive Leader?](#)

These resources are housed electronically in the Membership Contact and Connections area, under Diversity and Inclusion, on ADA Connect ([connect.ADA.org](http://connect.ADA.org)). Hard copy versions can be requested through Susie Galvan at [galvans@ada.org](mailto:galvans@ada.org).

Resolution No. 47 NewReport: Board Report 12 Date Submitted: September 2017Submitted By: Board of TrusteesReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 3: 10% increase in assessment of member value

How does this resolution increase member value: See Background

**NEW DENTIST COMMITTEE LIAISON VOTING PRIVILEGES ON COUNCILS****Background:** (See Report 12 of the Board of Trustees to the House of Delegates: New Dentist Committee Liaison Voting Privileges on Councils, Worksheet:5029)**Resolution****47. Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS*, Paragraph A., be amended as follows (additions underscored; deletions ~~stricken~~):

Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. The composition of the councils of this Association shall be as follows: In addition, a council may request an additional member who shall be a non-practicing dentist member appointed in accordance with Chapter I, Section 20Db of these *Bylaws*.Council on Advocacy for Access and Prevention shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.Council on Communications shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.Council on Dental Benefit Programs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Education and Licensure shall be composed of ~~sixteen (16)~~ seventeen (17) members selected as follows:

a. Nominations and Selection.

(1) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency. A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

(2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

(4) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

b. Election. The ~~eight (8)~~ members of the Council on Dental Education and Licensure nominated by the Board of Trustees shall be elected by the House of Delegates from nominees selected in accordance with this Section.

c. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish additional committees when they are deemed essential to carry out the duties of this Council.

Council on Dental Practice shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Ethics, Bylaws and Judicial Affairs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Government Affairs shall be composed of ~~eighteen (18)~~ nineteen (19) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees. In addition, the chair of the political action committee shall be a non-voting member of the Council. Consideration shall be given to a



1 candidate's experience in the military or other federal dental services. Members of the Council shall  
2 not be in the full-time employ of the federal government. Individuals called to active duty from the  
3 military reserves or national guard forces, providing such active duty has not been requested by the  
4 individual, shall not be considered to be in the full-time employ of the federal government.

5 Council on Members Insurance and Retirement Programs shall be composed of ~~seventeen (17)~~  
6 eighteen (18) members, one (1) member from each trustee district whose terms of office shall be  
7 staggered in such a manner that four (4) members will complete their terms each year except every  
8 fourth year when five (5) members shall complete their terms, and one (1) new dentist member  
9 recommended by the New Dentist Committee and nominated by the Board of Trustees.

10 Council on Membership shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1)  
11 member from each trustee district whose terms of office shall be staggered in such a manner that  
12 four (4) members will complete their terms each year except every fourth year when five (5)  
13 members shall complete their terms, and one (1) new dentist member recommended by the New  
14 Dentist Committee and nominated by the Board of Trustees.

15 Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ seventeen (17) members, fifteen (15)  
16 of who whom shall be selected from nominations open to all trustee districts, the current recipient of  
17 the Gold Medal Award for Excellence in Dental Research, and one (1) new dentist member  
18 recommended by the New Dentist Committee and nominated by the Board of Trustees.

19 and be it further

20 **Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 60*. TERM OF OFFICE, be amended  
21 as follows (additions underscored; deletions ~~stricken~~):

22 *Section 60. TERM OF OFFICE:* The term of office of members of councils shall be four (4) years  
23 except as otherwise provided in these *Bylaws*. The tenure of a member of a council shall be  
24 limited to one (1) term of four (4) years except as otherwise provided in these *Bylaws*. Except as  
25 otherwise provided in these Bylaws, a A-member shall not be eligible for appointment to another  
26 council or commission for a period of two (2) years after completing a previous council  
27 appointment. The terms of office for the new dentist members of councils recommended by the  
28 New Dentist Committee and nominated by the Board of Trustees shall be one (1) year terms;  
29 however, such members shall not be limited as to the number of consecutive one (1) year terms  
30 that they may serve. The current recipient of the Gold Medal Award for Excellence in Dental  
31 Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next  
32 honoree.

33 **Resolved**, that the ADA *Bylaws*, CHAPTER VII. BOARD OF TRUSTEES, *Section 140*.  
34 COMMITTEES, be amended as follows (additions underscored, deletions ~~stricken through~~):

35 *Section 140. COMMITTEES:* The Board of Trustees shall have a standing New Dentist Committee.  
36 The Committee shall consist of one (1) member from each trustee district who are active members  
37 selected by the Board of Trustees and confirmed by the House of Delegates. Members of the  
38 Committee shall have received their D.D.S. or D.M.D. degree less than ten (10) years before the  
39 time of selection. The chair of the Committee shall be appointed annually by the Board of Trustees.

40 Members of the Committee shall serve one (1) term of four (4) years. The Board of Trustees shall  
41 stagger the terms of the members of the Committee in a manner so four (4) members will complete  
42 their terms each year, except every fourth year when five (5) members shall complete their terms.

43 The Board of Trustees shall have the power to remove a Committee member for cause in  
44 accordance with procedures established by the Board in its *Rules*. In the event of any vacancy on

the Committee, the Board of Trustees shall select a member of this Association possessing the same qualifications as established by these *Bylaws* for the previous member, to fill such vacancy for the remainder of the unexpired term. If the term of the vacated Committee position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is selected, the successor member shall be eligible for selection to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of selection, the successor member shall not be eligible for another term.

The New Dentist Committee's work shall be assigned by the Board of Trustees, and reports and proposals formulated by the Committee shall be referred to the Board for decision and action. The duties of the Committee shall be to:

- a. Provide the Board of Trustees with expertise on issues affecting new dentists.
- b. Advocate to the Board of Trustees, other agencies of this Association and the tripartite dental societies the perspectives of the new dentist in the development of policies, programs, benefits and services of the Association.
- c. Identify the needs and concerns of new graduate dentists and make recommendations for any programs to assist with their transition to practice.
- d. Enhance member value, encourage involvement and active participation, and build a community of new dentists in organized dentistry.
- e. ~~Serve as non-voting members of councils and commissions of this Association on issues affecting new dentists; these appointments will be recommended by the Committee and assigned by the Board of Trustees.~~ Recommend new dentist members to serve as members of councils of this Association; these recommendations are submitted to the Board of Trustees for consideration as nominations to be forwarded to the House of Delegates.
- f. Facilitate the development of constituent and component new dentist committees and provide resources to assist constituent and component dental societies in meeting the needs of new dentists.
- g. Enhance the development of future leaders by providing and promoting leadership development opportunities and training for new dentists.

and be it further

**Resolved**, that if Resolution 7, *Amendment of the ADA Bylaws pursuant to Resolution 118H-2014* is adopted, that the following conforming changes to the foregoing ADA *Bylaws* amendments be approved for placement into the newly revised *Governance and Organizational Manual of the American Dental Association* as follows:

## **CHAPTER VIII. COUNCILS**

### **A. Members, Selections, Nominations and Elections.**

#### **1. Composition.** The composition of the councils of this Association shall be as follows:

- a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of seventeen (17) members selected as follows:

1 i. Nominations.

2 (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational  
3 system by trustee district from the active, life or retired members of this  
4 Association, no one of whom shall be a full-time member of a faculty of a school of  
5 dentistry, a current dental examiner or member of a state or regional testing  
6 agency, state board of dentistry or jurisdictional dental licensing agency. \*

7 (b) Four (4) members who are active, life or retired members of this Association shall  
8 be selected by the American Association of Dental Boards from the active  
9 membership of that body, no one of whom shall be a member of a faculty of a  
10 school of dentistry.

11 (c) Four (4) members who are active, life or retired members of this Association shall  
12 be selected by the American Dental Education Association from its active  
13 membership. These members shall hold positions of professorial rank in dental  
14 schools accredited by the Commission on Dental Accreditation and shall not be  
15 current dental examiners or members of any state or regional testing agency,  
16 state board of dentistry or jurisdictional dental licensing agency.

17 (d) One (1) new dentist member recommended by the New Dentist Committee and  
18 nominated by the Board of Trustees.

19 ii. Committees. The Council on Dental Education and Licensure shall establish a standing  
20 Committee on Dental Education and a standing Committee on Licensure, each  
21 consisting of eight (8) members selected by the Council. The Council may establish  
22 such additional committees believed to be essential to carrying out its duties.

23 b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of  
24 ~~sixteen (16)~~ seventeen (17) members, ~~fifteen (15) of whom who~~ shall be selected from  
25 nominations open to all trustee districts, ~~and~~ the current recipient of the Gold Medal  
26 Award for Excellence in Dental Research and one (1) new dentist member recommended  
27 by the New Dentist Committee and nominated by the Board of Trustees.

28 c. Remaining Councils. The remaining councils of this Association shall each be composed  
29 of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district  
30 whose terms of office shall be staggered in such a manner that four (4) members will  
31 complete their terms each year except every fourth year when five (5) members shall  
32 complete their terms and one (1) new dentist member recommended by the New Dentist  
33 Committee and nominated by the Board of Trustees. The term of service for new dentist  
34 members recommended by the New Dentist Committee and nominated by the Board of  
35 Trustees elected to serve on councils shall be one (1) year; however, such members  
36 shall not be limited as to the number of terms that they may serve.  
37  
38

39 \* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2)  
40 days or sixteen (16) hours per week.

41 **BOARD RECOMMENDATION: Vote Yes.**

42 **BOARD VOTE: UNANIMOUS.**

Resolution No. 47S-1 SubstituteReport: Board Report 12 Date Submitted: October 11, 2017Submitted By: Sixteenth Trustee DistrictReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 3: 10% increase in assessment of member value

How does this resolution increase member value: See Background

**SUBSTITUTE FOR RESOLUTION 47: NEW DENTIST COMMITTEE LIAISON VOTING PRIVILEGES  
ON COUNCILS**

The following substitute for Resolution 47 (Worksheet:5040) was submitted by the Sixteenth Trustee District on October 11, 2017, and submitted by Phil Latham, executive director, South Carolina Dental Association.

**Background:** During its review of Resolution 47, the Sixteenth Trustee District noticed that, as currently drafted, new dentists nominated and appointed to serve on councils who are not members of the New Dentist Committee (NDC) can potentially serve up to ten years – the entire period that they are classified as “new dentists” because no term limits are specified in the resolution.

The Sixteenth Trustee District’s substitute resolution proposes a limit on council appointments for new dentists to four (4) one (1) year terms so that all new dentists are treated consistently with other members in terms of the maximum length of time of council service while a new dentist member. In the following resolution additions to the original resolution are noted with double underscoring while deletions from the original language of the resolution is noted with ~~double strikethroughs~~. For clarity, amended language is also **highlighted**.

**Resolution**

**47S-1. Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS*, Paragraph A., be amended as follows (additions are double underscored; deletions ~~stricken~~):

Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. The composition of the councils of this Association shall be as follows: In addition, a council may request an additional member who shall be a non-practicing dentist member appointed in accordance with Chapter I, Section 20Db of these *Bylaws*.

Council on Advocacy for Access and Prevention shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth

year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.\*

Council on Communications shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Benefit Programs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Education and Licensure shall be composed of ~~sixteen (16)~~ seventeen (17) members selected as follows:

a. Nominations and Selection.

(1) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency. A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

(2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

(4) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

b. Election. The ~~eight (8)~~ members of the Council on Dental Education and Licensure nominated by the Board of Trustees shall be elected by the House of Delegates from nominees selected in accordance with this Section.

c. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish additional committees when they are deemed essential to carry out the duties of this Council.

\* As used in this Chapter of the Bylaws, the term "new dentist" means either a member of the New Dentist Committee or a dentist who graduated from dental school with a D.D.S. or a D.M.D. degree less than ten (10) years prior to the selection.

1 Council on Dental Practice shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1)  
2 member from each trustee district whose terms of office shall be staggered in such a manner that  
3 four (4) members will complete their terms each year except every fourth year when five (5)  
4 members shall complete their terms, and one (1) new dentist member recommended by the New  
5 Dentist Committee and nominated by the Board of Trustees.

6  
7 Council on Ethics, Bylaws and Judicial Affairs shall be composed of ~~seventeen (17)~~ eighteen (18)  
8 members, one (1) member from each trustee district whose terms of office shall be staggered in  
9 such a manner that four (4) members will complete their terms each year except every fourth year  
10 when five (5) members shall complete their terms, and one (1) new dentist member recommended  
11 by the New Dentist Committee and nominated by the Board of Trustees.

12  
13 Council on Government Affairs shall be composed of ~~eighteen (18)~~ nineteen (19) members, one (1)  
14 member from each trustee district whose terms of office shall be staggered in such a manner that  
15 four (4) members will complete their terms each year except every fourth year when five (5)  
16 members shall complete their terms, and one (1) new dentist member recommended by the New  
17 Dentist Committee and nominated by the Board of Trustees. In addition, the chair of the political  
18 action committee shall be a non-voting member of the Council. Consideration shall be given to a  
19 candidate's experience in the military or other federal dental services. Members of the Council shall  
20 not be in the full-time employ of the federal government. Individuals called to active duty from the  
21 military reserves or national guard forces, providing such active duty has not been requested by the  
22 individual, shall not be considered to be in the full-time employ of the federal government.

23  
24 Council on Members Insurance and Retirement Programs shall be composed of ~~seventeen (17)~~  
25 eighteen (18) members, one (1) member from each trustee district whose terms of office shall be  
26 staggered in such a manner that four (4) members will complete their terms each year except every  
27 fourth year when five (5) members shall complete their terms, and one (1) new dentist member  
28 recommended by the New Dentist Committee and nominated by the Board of Trustees.

29  
30 Council on Membership shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1)  
31 member from each trustee district whose terms of office shall be staggered in such a manner that  
32 four (4) members will complete their terms each year except every fourth year when five (5)  
33 members shall complete their terms, and one (1) new dentist member recommended by the New  
34 Dentist Committee and nominated by the Board of Trustees.

35  
36 Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ seventeen (17) members, fifteen (15)  
37 of who whom shall be selected from nominations open to all trustee districts, the current recipient of  
38 the Gold Medal Award for Excellence in Dental Research, and one (1) new dentist member  
39 recommended by the New Dentist Committee and nominated by the Board of Trustees.

40  
41 and be it further

42  
43 **Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 60*. TERM OF OFFICE, be amended  
44 as follows (additions underscored; deletions ~~stricken~~):

45  
46 *Section 60*. TERM OF OFFICE: The term of office of members of councils shall be four (4) years  
47 except as otherwise provided in these *Bylaws*. The tenure of a member of a council shall be  
48 limited to one (1) term of four (4) years except as otherwise provided in these *Bylaws*. Except as  
49 otherwise provided in these Bylaws, a A-member shall not be eligible for appointment to another  
50 council or commission for a period of two (2) years after completing a previous council  
51 appointment. The terms of office for the new dentist members of councils recommended by the  
52 New Dentist Committee and nominated by the Board of Trustees shall be one (1) year terms;  
53 however, such members shall not be limited as to the number of consecutive to four (4) one (1)  
54 year terms of council service during the period that they are characterized as new dentists that

~~they may serve.~~ The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

**Resolved**, that the ADA *Bylaws*, CHAPTER VII. BOARD OF TRUSTEES, *Section 140*. COMMITTEES, be amended as follows (additions underscored, deletions ~~stricken through~~):

Section 140. COMMITTEES: The Board of Trustees shall have a standing New Dentist Committee. The Committee shall consist of one (1) member from each trustee district who are active members selected by the Board of Trustees and confirmed by the House of Delegates. Members of the Committee shall have received their D.D.S. or D.M.D. degree less than ten (10) years before the time of selection. The chair of the Committee shall be appointed annually by the Board of Trustees.

Members of the Committee shall serve one (1) term of four (4) years. The Board of Trustees shall stagger the terms of the members of the Committee in a manner so four (4) members will complete their terms each year, except every fourth year when five (5) members shall complete their terms.

The Board of Trustees shall have the power to remove a Committee member for cause in accordance with procedures established by the Board in its *Rules*. In the event of any vacancy on the Committee, the Board of Trustees shall select a member of this Association possessing the same qualifications as established by these *Bylaws* for the previous member, to fill such vacancy for the remainder of the unexpired term. If the term of the vacated Committee position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is selected, the successor member shall be eligible for selection to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of selection, the successor member shall not be eligible for another term.

The New Dentist Committee's work shall be assigned by the Board of Trustees, and reports and proposals formulated by the Committee shall be referred to the Board for decision and action. The duties of the Committee shall be to:

- a. Provide the Board of Trustees with expertise on issues affecting new dentists.
- b. Advocate to the Board of Trustees, other agencies of this Association and the tripartite dental societies the perspectives of the new dentist in the development of policies, programs, benefits and services of the Association.
- c. Identify the needs and concerns of new graduate dentists and make recommendations for any programs to assist with their transition to practice.
- d. Enhance member value, encourage involvement and active participation, and build a community of new dentists in organized dentistry.
- e. ~~Serve as non-voting members of councils and commissions of this Association on issues affecting new dentists; these appointments will be recommended by the Committee and assigned by the Board of Trustees. Recommend new dentist members to serve as members of councils of this Association; these recommendations are submitted to the Board of Trustees for consideration as nominations to be forwarded to the House of Delegates.~~
- f. Facilitate the development of constituent and component new dentist committees and provide resources to assist constituent and component dental societies in meeting the needs of new dentists.
- g. Enhance the development of future leaders by providing and promoting leadership development opportunities and training for new dentists.

and be it further

**Resolved**, that if Resolution 7, *Amendment of the ADA Bylaws pursuant to Resolution 118H-2014* is adopted, that the following conforming changes to the foregoing ADA Bylaws amendments be approved for placement into the newly revised *Governance and Organizational Manual of the American Dental Association* as follows:

## CHAPTER VIII. COUNCILS

### A. Members, Selections, Nominations and Elections.

#### 1. Composition. The composition of the councils of this Association shall be as follows:

##### a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of seventeen (17) members selected as follows:

##### i. Nominations.

(a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*

(b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

(d) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.\*\*

##### ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.

##### b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ seventeen (17) members, ~~fifteen (15) of whom~~ who shall be selected from nominations open to all trustee districts, ~~and~~ the current recipient of the Gold Medal

\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

\*\* As used in this Chapter of the Bylaws, the term "new dentist" means either a member of the New Dentist Committee or a dentist who graduated from dental school with a D.D.S. or a D.M.D. degree less than ten (10) years prior to the selection.



1  
2  
3 Award for Excellence in Dental Research and one (1) new dentist member recommended  
4 by the New Dentist Committee and nominated by the Board of Trustees.  
5

- 6 c. Remaining Councils. The remaining councils of this Association shall each be composed  
7 of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district  
8 whose terms of office shall be staggered in such a manner that four (4) members will  
9 complete their terms each year except every fourth year when five (5) members shall  
10 complete their terms and one (1) new dentist member recommended by the New Dentist  
11 Committee and nominated by the Board of Trustees. The term of service for new dentist  
12 members recommended by the New Dentist Committee and nominated by the Board of  
13 Trustees elected to serve on councils shall be one (1) year; however, such members  
14 shall not be limited as to the number of terms that they may serve to four (4) one (1) year  
15 terms of council service during the period that they are characterized as new dentists.  
16

17 **BOARD RECOMMENDATION: Received after the September 2017 Board of Trustees meeting.**

Resolution No. 48 New

Report: Board Report 12 Date Submitted: September 2017

Submitted By: Board of Trustees

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: None Net Dues Impact: \_\_\_\_\_

Amount One-time \_\_\_\_\_ Amount On-going \_\_\_\_\_ FTE 0

ADA Strategic Plan Objective: Membership-Obj. 3: 10% increase in assessment of member value

How does this resolution increase member value: See Background

1 **NEW DENTIST COMMITTEE LIAISON ASSIGNMENTS ON COUNCILS**

2 **Background:** (See Report 12 of the Board of Trustees to the House of Delegates: New Dentist  
3 Committee Liaison Voting Privileges on Councils, Worksheet:5029)

4 **Resolution**

5 **48. Resolved,** that the following nominations of New Dentist Committee members to the ADA Councils  
6 be approved:

7 Council on Advocacy for Access and Prevention (CAAP), Dr. Colleen Greene  
8 Council on Communications (CC), Dr. Andrea Fallon  
9 Council on Dental Benefit Programs (CDBP), Dr. Sara Stuefen  
10 Council on Dental Education and Licensure (CDEL), Dr. Jon Pascarella  
11 Council on Dental Practice (CDP), Dr. Mike Saba  
12 Council on Ethics, Bylaws and Judicial Affairs (CEBJA), Dr. Lindsey Compton  
13 Council on Government Affairs (CGA), Dr. Robin Nguyen  
14 Council on Membership (CM), Dr. Lauren Czerniak  
15 Council on Members Insurance and Retirement Programs (CMIRP), Dr. Britany Matin  
16 Council on Scientific Affairs (CSA), Dr. Ben Youel

17 **BOARD RECOMMENDATION: Vote Yes.**

18 **BOARD VOTE: UNANIMOUS.**



**Geographic Breakdown of the Campaign Within a State:** Major metropolitan areas typically have the largest number of member dentists. Knowing specifically which areas are being funded for digital advertising assures all members that the campaign exists to promote all regions of a state. This information is important, and has not yet been reported.

**Levels of Reach and Frequency:** This information allows constituents to gauge the effectiveness of the ADA campaign within their state and may be used to coordinate with the ADA on where marketing campaign focus and monies should go to. This is a critical component to gauge the campaign's impact. It has not yet been reported, and should be included on an ongoing basis.

**Other Media Platforms Being Used:** This insight would provide state societies the ability to change their marketing efforts if needed to utilize other sites or modalities to reach potential patients. Any advertising in addition to display, Facebook and search ads should be reported.

**Actual CPCs (Cost Per Clicks), CTRs (Click Thru Rates) and CPMs (Cost Per Impression) Based on the Performance of the ADA campaign:** This shows the ADA members and the state societies how well the ADA campaign ads are performing in terms of the ADA media strategy and how well the ADA creative work is doing to engage potential patients. This was provided and should continue to be routinely reported.

**Percentage of the ADA National Campaign Media Dollars Being Spent in Each State:** This information would help constituents to evaluate the effectiveness of the campaign at a state level. The effectiveness is important to show for the long term ROI of the member dollars being spent on the campaign. This was provided and should continue to be routinely reported.

**Percentage of the ADA National Campaign Being Spent on Agency Fees, Production and Media Placement:** There should be transparency about how these funds are being spent. If the majority of the National Campaign budget is allocated to agency fees and/or production costs, that leaves less money available to engage the public with the advertisements. This would lead to a lower ROI to the membership. This is being reported and should continue to routinely be reported.

**Find a Dentist Google Analytics Main View (Unique Pageviews, City, Device, Bounce Rate, Etc.) by State:** This information would allow the constituent societies to track how well the campaign is working to engage potential patients who are actively searching for a dentist within their state. Sharing of this data was only provided by special request and should be reported to all constituent societies on a regular basis, at least monthly.

**Member Dentists Who Have Incomplete Find a Dentist Profiles By State:** A database including the eligible Find a Dentist members names that have missing profile information, photo or need to check "permission to publish" box will allow the states to support the ADA campaign through outreach to those members encouraging them to complete their profiles and allow potential patients to find them more effectively when searching online. This information was provided to the states during initial launch of the revamped find a dentist tool and should be routinely reported.

## Resolution

**51. Resolved,** that the ADA will provide the following information to constituent societies and the ADA House of Delegates regarding Resolution 67H-2016: A Three-Year Initiative to Drive Utilization of Dental Services for ADA Members, beginning December 31, 2017:

1. Keywords/phrases being used for paid search advertising
2. Geographic breakdown of the campaign budget within the state
3. Levels of reach and frequency within each state
4. Other platforms being used within the state other than keyword/search engine platform

5. Actual cost per clicks (CPCs), click thru rates (CTRs) and cost per impression (CPI)
6. Percentage of the campaign media budget being spent in each state
7. Percentage of the annual campaign budget being spent on the following areas
  - a. Agency fees
  - b. Production
  - c. Media Placement
8. Find a Dentist Google analytics main view (unique pageviews, city, device bounce rate, etc.) by state
9. Member dentists who have incomplete Find a Dentist profiles by state

**BOARD COMMENT:** The Board recommends voting no on this resolution. The majority of items are already being shared with the states in monthly reports, and the remaining requests are at a level of detail that would be prohibitively expensive. State executive directors already receive monthly reports that include completed searches in their states. Additional reports will be posted on the campaign page on ADA.org and is available to all state and local dental societies. It will include media platforms used (item 3), cost per click and click thru rates (item 4), agency fees (item 7), and analytics (item 8). States are able to pull their own reports of members who have incomplete profiles (item 9). In addition, Find-A-Dentist metrics are included in the Quarterly Management Report.

The remaining elements would require additional expense and staff time to accommodate. Keywords for paid search (item 1) have been shared with the states and are now built into the platforms and would need to be manually exported for each state. Geographic breakdown within each state (item 2) is not feasible under the current campaign structure because it is a national campaign targeting specific consumer demographics versus a budget broken down by metropolitan markets. To instate this would require considerable effort. Levels of reach and frequency (item 3) are common measures for broadcast campaigns (television and radio) – the ADA campaign is digital and is measured by visits to the ADA Find-a-Dentist tool and conversions, defined as completed searches on the tool. To add these elements would add an expense of \$300,000, or 5% to the campaign.

**BOARD RECOMMENDATION: Vote No.**

**Vote: Resolution 51**

ASAI	No	CROWLEY	No	KWASNY	No	NORBO	No
BITTER	No	FISCH	No	KYGER	No	ROBINSON	Yes
BLACK	No	GEHANI	No	MARRON-TARRAZZI	Yes	SABATES	No
COHLMIA	No	JEFFERS	No	MCDUGALL	No	STEVENS	No
COLE	No	KLEMMEDSON	No	MITCHELL	No	THOMPSON	No

Resolution No. N/A N/AReport: Council on Communications Report 1 Date Submitted: September 2017Submitted By: Council on CommunicationsReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: Amount One-time  Amount On-going  FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

**COUNCIL ON COMMUNICATIONS REPORT 1 TO THE HOUSE OF DELEGATES: UPDATE ON  
RESOLUTION 67H-2016: A THREE-YEAR INITIATIVE TO DRIVE UTILIZATION OF DENTAL  
SERVICES FOR ADA MEMBERS**

**Background:** Resolution 67H-2016 calls for a three-year campaign to increase dental visits for ADA members. The resolution provides in full:

**67H-2016. Resolved,** that the initiative “Drive Utilization of Dental Services for ADA Members” be approved, and be it further

**Resolved,** that the Council on Communications submit annual status updates to the House of Delegates for the duration of the campaign, and be it further

**Resolved,** that the House of Delegates urges funding for this program shall come from the reserves for the first year, and be it further

**Resolved,** that funding for the second and third years shall be at the discretion of the Board of Trustees<sup>1</sup>, and be it further

**Resolved,** that the Council on Communications shall provide evidence of the value of this media campaign to the 2017 HOD.

This report summarizes progress during the first half of 2017.

**Campaign Overview:** In response to Health Policy Institute data showing a decline in dental visits in 2007, Resolution 90-2015 from District 2 was referred by the 2015 House of Delegates to the Council on Communications. The Council worked with staff to create a campaign to drive U.S. adults to see an ADA dentist and help members be busier. This digital campaign targets consumers who have the financial resources to pay for dental visits, but are not seeing a dentist regularly. A comprehensive research initiative in 2016 identified these consumers and drove the strategy for the campaign.

<sup>1</sup> This report does not address the source of funding for the program. Funding is addressed by the Board in Board Report 2; Resolution 32:Worksheet:2014.

**Estimated campaign costs 2017: total \$6,300,000**

- Build Find-a-Dentist tool: \$250,000
- Populate Find-a-Dentist: \$300,000
- Promote Find-a-Dentist: Paid Search \$2,400,000
- Promote Find-a-Dentist Display Advertising and Sponsored Social Posts: \$2,800,000
- State and Local Matching Support: \$500,000
- Member Toolkits: \$50,000

**Projected spending for the \$6,000,000 budgets for 2018 and 2019 each include:**

- Tool improvements: \$300,000
- Paid search: \$2,800,000
- Display advertising/sponsored social posts: \$2,400,000
- State/local matching: \$500,000

Budgets will be refined based on performance of the 2017 campaign.

**Success Metrics**

Following is a summary of success measures to date. They are described in more detail later in the report.

Projected Year End Goal 2017	Actual as of August, 2017	Success measure
40,000 member photo profiles by December 30, 2017	29,000 photo profiles	72.5% of year-end goal. On target to meet goal by year end
77,000 total completed searches through Find-a-Dentist 8,555 per month April site launch through December	123,000	Exceeds goal by 59%
776,000 total clicks to Find-a-Dentist 129,000 per month April site launch through December	541,000 135,250/month April-July	20% ahead of goal to date (includes paid campaign + unpaid site traffic)
218 million views/impressions from advertising and paid search 36 million views/impressions per month	45,000,000 in one month	125% of one-month goal

**Build Find-a-Dentist:** All advertising will drive public traffic to the members-only Find-a-Dentist tool, which draws from the ADA's Aptify database and lists all active licensed members. The ADA built a new tool with improved functionality that includes more data fields and a mapping function to make the tool more appealing to the target consumer. The purpose of the tool is to make it easy and convenient for people looking for a dentist to find an ADA member. It replaces the former tool that had not been updated in five years.

1 To benchmark the year one campaign, goals are 776,000 clicks to the Find-a-Dentist tool, 77,000  
2 completed searches and 218 million impressions of the ads and social posts. Early search results  
3 indicate the campaign will surpass the benchmark goals. Although the analytics tools can track profile  
4 views, and whether a potential patient clicked to email or phone a practice, it is not possible to track  
5 whether the patient scheduled the appointment.

7 Even before the advertising launch, search results have surpassed expectations, increasing more than  
8 1400% versus one year ago. As an additional measure, once a potential patient completes two searches,  
9 that potential patient sees a one-question survey about whether the tool fulfills his or her expectations,  
10 with a thumbs up or thumbs down response. To date, the tool has received 70% thumbs up responses  
11 which is above the industry average.

13 **Populate Find-a-Dentist:** Because the new Find-a-Dentist tool now includes new fields, such as office  
14 hours, it is essential that all participating members update their profiles and upload a photo, which makes  
15 the member appear higher in search criteria. The goal for photo profiles is 40,000 by December 31,  
16 2017. The goal is based on a critical mass of members in the tool to offer options to potential patients  
17 and demonstrate engagement by member dentists. LinkedIn research shows that profiles with photos  
18 receive 11 times more clicks than those without, and thus members with photos will benefit more than  
19 those without.

21 An extensive member marketing campaign launched in February 2017 to encourage members to  
22 complete their profiles by the end of 2017. In addition, the ADA contracted with an outbound calling  
23 vendor to contact member offices to complete their profiles, and calling will continue through the end of  
24 2017. Additional marketing efforts surrounding America's Dental Meeting in Atlanta will complete the  
25 process to achieve the profile goal of 40,000 by December 31, 2017.

27 As of late August, almost 28,000 photo profiles are in Find-a-Dentist. Top states in photo profiles (based  
28 on percentage of eligible members) with 30% or more are Nebraska, Wisconsin, Montana, Minnesota,  
29 Oregon, South Dakota, Iowa, District of Columbia, North Dakota, Kansas and Virginia. The year-end goal  
30 of 40,000 photo profiles will represent 40% of eligible members.

31 To help state and local societies promote the initiative, the ADA hosted two webinars and created a toolkit  
32 with materials they could use in their own channels. At least 28 dental societies reported that they used  
33 toolkit materials to promote populating Find-a-Dentist.

35 **Paid Search, Display Ads and Social:** The campaign launched July 10, 2017. Research indicates that  
36 more people search for a dentist during July/August and November/December, and this strategy is  
37 designed to capitalize on this behavior by reaching consumers during this time frame.

38 To design the most motivating advertising, the ADA and its agency tested a number of campaign  
39 concepts and messages during the creative development phase with the target audience. After  
40 narrowing the concepts to two, the ADA conducted a more extensive test comparing the two top ad  
41 concepts with the target audience to determine which campaign would be most motivating. The "Your  
42 Teeth Are Amazing" concept scored highest amongst the target audience. Four ads present information  
43 about teeth with the line "Your Teeth Are Amazing – Your ADA Dentist Can Keep Them That Way." The  
44 call to action button takes the user to the Find-a-Dentist tool. Visuals of the ads are in the appendix of  
45 this report.

47 Paid search also began July 10. When a consumer in the target audience (Consumer personas for  
48 "Responsible Rachel" and "Detached Derek" who have income \$60,000-\$200,000 and/or a dental benefit)  
49 searches for a dentist, the ADA Find-a-Dentist search ad should show up toward the top of the list.

51 Promoted social posts also began in July. These sponsored posts show up on Facebook pages of  
52 people in the target audience. Samples are in the appendix of this report.



Results to date are surpassing expectations. Clicks to Find-a-Dentist are 20% ahead of goal to date and completed searches are 59% ahead of goal to date.

**State and Local Matching Funds:** Each year the budget includes \$500,000 to help state and local dental societies amplify the national campaign in their areas. The workgroup of the Council on Communications voted to match funds at a 2:1 ratio to maximize the budget and determine how an additional spend will impact the campaign. Dental societies had the choice to opt for digital advertising and/or a billboard campaign. The campaigns will amplify the national advertising and will be complete by the end of 2017, providing metrics to inform the 2018 campaign strategy.

The following states elected to participate in the matching funds program: Idaho, Iowa, Minnesota, Montana, New Mexico, New York and Virginia. The following local societies elected to participate: Dallas County, San Diego County, Southwest Idaho, Montana First District and Nassau County (NY). To date, dental societies contributed \$144,000 and the ADA contributed \$288,000 for media and \$86,400 agency commission, for a total spend of \$518,400.

**Member Resources:** The ADA created a "Get Ready" member resource kit, which included a video about how to update a Find-a-Dentist profile, as well as information on how to market practices online. This is the first of two resource kits for members.

## Competitive Analysis

ADA's advertising agency GMMB conducted an analysis of organizations which currently advertise in the dental space to provide a comparison of how the ADA campaign relates to other advertisers. A breakdown is below with further detail in the appendix. Because the ADA is focusing on digital audiences and not TV/radio, the agency believes that this is the appropriate spending level to be competitive.

Advertiser	Estimated 2017 annual ad spend
American Dental Association	\$5,700,000
Aspen Dental	\$29,458,800
1-800-Dentist	\$8,781,800
Delta Dental	\$8,360,300
ZocDoc	\$5,226,000

## Conclusion and Ongoing Monitoring

The goals outlined at the beginning of this report provide benchmark numbers for measuring success. The program is on track to meet or exceed each of its success measures in 2017. Metrics are measured each month and an update is provided for every meeting of the Board of Trustees. Every two weeks the amount spent on advertising can be adjusted to optimize results based on ad performance. Should the goals not be met, the Council will consult with staff on a change in strategy. If the program fails to perform, the Council may recommend to the Board and the House that it be discontinued.

In addition to continuously monitoring the performance of the campaign in terms of completed searches for members through the Find-a-Dentist tool, the annual Health Policy Institute survey will monitor whether members feel busy enough. Because the survey is fielded in April, the program will not contribute to results in 2017.

1 **Resolutions**

2 This report is informational and no resolutions presented.

3 **BOARD RECOMMENDATION: Vote Yes to Transmit.**

4 **BOARD VOTE: UNANIMOUS.**

## APPENDIX 1

# See Your ADA Dentist

INSIGHT	STRATEGY	CAMPAIGN
Dentists: <b>“We’re not busy enough”</b>	Identified <b>19M</b> potential patients in the Detached Derek and Responsible Rachel personas	We had a tool, that needed an overhaul, but could be that portal to “new patients” <b>ADA Find-a-Dentist</b>



## HOW WE BROUGHT IT TO LIFE

To Member Dentists

To Consumers

}

Outbound Calling

To Consumers

## DIGITAL DISPLAY ADS

### Walnut

<p>YOUR TEETH CAN BITE WITH <b>200 POUNDS</b> OF FORCE.</p> 	<p>YOUR TEETH CAN BITE WITH <b>200 POUNDS</b> OF FORCE.</p>  <p>BUT THEY CAN'T STOP CAVITIES ON THEIR OWN.</p>	<p>YOUR TEETH CAN BITE WITH <b>200 POUNDS</b> OF FORCE.</p>  <p>BUT THEY CAN'T STOP CAVITIES ON THEIR OWN.</p>	<p><b>YOUR TEETH ARE AMAZING.</b></p> <p>YOUR ADA DENTIST CAN KEEP THEM THAT WAY.</p> <p><a href="#">FIND AN ADA DENTIST</a></p> <p><b>ADA</b> American Dental Association®</p>
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### Mummy

	<p>TEETH CAN LAST <b>CENTURIES.</b></p> 	<p>TEETH CAN LAST <b>CENTURIES.</b></p>  <p>BUT DECAY CAN CAUSE DAMAGE ANY TIME.</p>	<p><b>YOUR TEETH ARE AMAZING.</b></p> <p>YOUR ADA DENTIST CAN KEEP THEM THAT WAY.</p> <p><a href="#">FIND AN ADA DENTIST</a></p> <p><b>ADA</b> American Dental Association®</p>
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## Unique

**NO TWO TEETH  
ARE EXACTLY  
ALIKE.**



**NO TWO TEETH  
ARE EXACTLY  
ALIKE.**



**DON'T TREAT  
YOUR SMILE LIKE  
IT'S REPLACEABLE.**

**NO TWO TEETH  
ARE EXACTLY  
ALIKE.**



**DON'T TREAT  
YOUR SMILE LIKE  
IT'S REPLACEABLE.**

**YOUR TEETH  
ARE AMAZING.**

**YOUR ADA DENTIST  
CAN KEEP THEM  
THAT WAY.**

[FIND AN ADA DENTIST](#)

**ADA** American Dental Association®

## SAMPLE SOCIAL POSTS

**American Dental Association**

Sponsored

Like Page

It's a bird, it's a plane, it's a...sign! (A sign that you should probably schedule a check-up.)



**It's time to think teeth.**

Find an ADA dentist now.

[FINDADENTIST.ADA.ORG](#)

20

562 Comments 311 Shares

Like

Comment

Share

**American Dental Association**

Sponsored

Like Page

No joke: Your laugh just isn't the same without healthy teeth.



**Smile and snicker confidently.**

Find an ADA dentist now.

[FINDADENTIST.ADA.ORG](#)

20

562 Comments 311 Shares

Like

Comment

Share

## Medium Breakout by Advertiser

Advertiser	Television	Radio	Digital	Print	Outdoor	Investment
ASPEN Dental	✓	✓	✓	✓	✓	\$29,458,800
1-800-Dentist		✓	✓			\$8,781,800
Delta Dental	✓	✓	✓	✓	✓	\$8,360,300
ZocDoc			✓			\$5,226,000
Academy of General Dentistry			✓			\$1,000

Resolution No. N/A N/AReport: CAAP Report 1 Date Submitted: September 2017Submitted By: Council on Advocacy for Access and PreventionReference Committee: D (Legislative, Health, Governance and Related Matters)Total Net Financial Implication: None Net Dues Impact: Amount One-time  Amount On-going  FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

**COUNCIL ON ADVOCACY FOR ACCESS AND PREVENTION REPORT 1 TO THE HOUSE OF DELEGATES: RESPONSE TO RESOLUTION 84-2016: CREATING A NATIVE AMERICAN PRE-DENTAL CURRICULUM**

**Background:** At the 2016 House of Delegates, Resolution 84-2016 (Appendix 1) was referred to the Council on Advocacy for Access and Prevention (CAAP). Resolution 84-2016 proposes that a taskforce be created to develop appropriate materials and methods to allow Native American pre-dental students to successfully prepare and gain entry into dental school. In consultation with representatives of the Council on Dental Education and Licensure, the pros and cons of this resolution were studied, while taking into consideration what the ADA and others are already doing to encourage diversity and provide educational materials to students considering an oral health professional career.

It was noted that both the [Society of American Indian Dentists](#) (SAID) and the [Pathways into Health](#) program focus extensively on encouraging Native American youth to consider health careers. Both organizations are dedicated to improving the health, health care, and health care education of American Indians and Alaska Natives (AI/AN) in this country. At the same time, the [Health Careers Opportunity Program](#) (HCOP) seeks to:

- Promote recruitment of qualified individuals from disadvantaged backgrounds into health and allied health professions programs;
- Improve retention and admission rates by putting tailored enrichment programs into action that address the academic and social needs of disadvantaged trainees; and
- Provide opportunities for community-based health careers training, emphasizing experiences in underserved communities.

HCOP focuses on three key milestones of education: graduation from high school; retention and graduation from college; and acceptance, retention and completion of a health careers' degree program.

Considering the potential for success by these existing resources, while realizing that the expertise for this work does not exist within the ADA, the Council recommends that the ADA continue its support and encouragement of SAID and the Pathways into Health Program as it has historically done in the past, as well as supporting greater ongoing appropriations for HCOP. Therefore, the Council is not presenting a resolution to the House of Delegates.

1 **Resolutions**

2 This report is informational and no resolutions are presented.

3 **BOARD RECOMMENDATION: Vote Yes to Transmit.**

4 **BOARD VOTE: UNANIMOUS. (BOARD OF TRUSTEES CONSENT CALENDAR ACTION—NO**  
5 **BOARD DISCUSSION)**



Resolution No. 84 New

Report: N/A Date Submitted: September 2016

Submitted By: Fourteenth Trustee District

Reference Committee: C (Dental Education, Science and Related Matters)

Total Net Financial Implication: \$125,000 Net Dues Impact: \$1.19

Amount One-time \$25,000 Amount On-going \$100,000 FTE 1

ADA Strategic Plan Objective: Membership-Obj. 2: Market share will equal 70%

How does this resolution increase member value: See Background

### 1 CREATING A NATIVE AMERICAN PRE-DENTAL CURRICULUM

2 The following resolution was adopted by the Fourteenth Trustee District and transmitted on September 13,  
3 2016, by Dr. A.J. Smith, chair, Resolutions Committee.

4 **Background:** Successfully becoming a dentist is difficult, no matter who you are, but for many Native  
5 Americans, the barriers can be insurmountable. Many find that the adjustment to university life feels like  
6 going to a foreign country. The opportunity to navigate financial aid and compete for a position in a graduate  
7 professional program is daunting even for the most talented Native American student.

8 Many universities have partnered with organized dentistry to nurture potential dental students with pre-dental  
9 societies and mentoring programs. Unfortunately, many are poorly equipped to provide the special support  
10 Native American students may require to thrive and be successful. The goal of this program would be to  
11 provide materials and methods to pre-dental faculty and advisors, supporting programs that already exist and  
12 encouraging new efforts.

13 This resolution allows the ADA to seek collaboration with educators and Native American leaders to develop a  
14 pre-dental curriculum to supplement the academic requirements to enter dental school. The ADA has already  
15 endorsed a pipeline program, to promote the dental profession to Native American students. This project  
16 takes a next logical step to improve both the quantity and quality of Native American students on the supply  
17 side of the pipeline. It shows our profession's commitment to diversify and better represent the variety of  
18 patients and populations we treat.

19 Federal funding may be available for efforts like this, but accessing these funds requires the leadership and  
20 commitment to collaborate that the ADA can provide. The relationships we build will give credibility when we  
21 encourage Native American leaders to make choices about the most effective ways to address the serious  
22 dental needs their people have.

### 23 Resolution

24 **84. Resolved**, that the ADA seek collaboration with dental educators, representatives of the Society  
25 of American Indian Dentists (SAID), and Native American leaders to create a taskforce to develop  
26 appropriate materials and methods to allow Native American pre-dental students to successfully  
27 prepare and gain entry into dental school, and be it further

28 **Resolved**, that the taskforce seek funding for the project from the Health Resources and Services  
29 Administration (HRSA) and other federal sources, as well as private and charitable foundations and  
30 corporate sponsors, and be it further

**Resolved**, that once completed, the Council on Dental Education and Licensure develop a plan to distribute the materials, train pre-dental advisors and mentors in utilizing it and encourage its adoption by pre-dental educational institutions, and be it further

**Resolved**, that a report be prepared on the progress of the project for the House of Delegates in 2017 and each subsequent year until the project is completed.

**BOARD COMMENT:** The Board appreciates the 14<sup>th</sup> District's interest in increasing the enrollment of Native American students in our dental schools, but reminds the House that in 2012, the ADA sunset the Career Guidance and Diversity Activities Committee, including the staff who supported this endeavor. At that time, the Council on Dental Education and Licensure and the Board agreed that career guidance activities for predental students did not directly support the ADA strategic plan or ADA's mission and that career guidance activities were better supported at the state and local levels. Further, other national organizations such as the American Dental Education Association and the National Association of Health Profession Advisors had, and still have, extensive career guidance programming to support career exploration for diverse student populations. New accreditation standards implemented in 2013 require dental schools to document that they have programs in place to enroll a diverse student body. The Board is also aware of several ongoing national pipeline projects targeting the Native American population. Since 2012, the Association has made a renewed commitment to work with predental and dental students and dental schools as a key strategy to meeting membership objectives. Significant new work is underway and is described in Board Report 6 to the House of Delegates: Dental School Strategy (Worksheet:6006).

Collaborating with dental educators, representatives of the Society of American Indian Dentists (SAID), and Native American leaders, establishing a task force, seeking funding and developing and maintaining curriculum materials will require funding for one new full-time staff member whose skill set includes grant writing, career guidance and curriculum development at an annual cost of \$100,000 (salary and benefits) as well as for a 9 member task force to meet twice in 2017 at an approximate cost of \$25,000. Given the resources and organizations already established to increase diversity in our dental schools, coupled with the ADA's renewed commitment to offer resources to predental students, the Board does not believe it is necessary to allocate specific funding at this time for this activity.

**BOARD RECOMMENDATION: Vote No.**

**BOARD VOTE: UNANIMOUS.**

Resolution No. 54 New

Report: N/A Date Submitted: September 2017

Submitted By: Ninth Trustee District

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: \$27,575 Net Dues Impact: \$0.26

Amount One-time \$27,575 Amount On-going  FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

### STRATEGIC CONFERENCE ON MID-LEVEL CHALLENGES

The following resolution was submitted by the Ninth Trustee District and transmitted on September 19, 2017, by Ms. Michelle Nichols-Cruz, governance manager, Michigan Dental Association.

**Background:** Mid-level provider legislation is being introduced in many states around the country. Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New Mexico, North Dakota, and Ohio are all currently facing this challenge. Various tactics are being used in each state to contend against the mid-level efforts, which are initiated and strongly supported by the Pew and Kellogg foundations.

In addition, some states have not been successful in fending off the creation of a mid-level provider. These states are Maine, Minnesota and Vermont. While they may have failed, the experience they have could prove useful for future efforts to stop a mid-level provider.

The American Dental Association (ADA) has been providing assistance to states through the SPA grant and by organizing informational conference calls for state society staff dealing with workforce. While these calls have been helpful, the main benefit has been to alert people to media stories and updates on the status of the battle in each of the states participating in the call. This type of platform does not really allow for in-depth discussion and development of strategies. The mid-level topic has also been addressed in meetings such as ADA Management Conference, the ADA President-elect's Conference, the ADA Lobbyist Conference, and regional dental leadership conferences. While these discussions are helpful, they are fragmented and limited in focus.

There is a wealth of knowledge in the various state dental associations who are fighting mid-level provider efforts that should be shared more effectively, and used as a basis for determining the most effective strategies. An in-depth meeting on the single topic of mid-level providers, focused on what works and does not work in these fights, would be extremely valuable.

The proposed idea is for the ADA to invite the 12 state societies who are currently facing mid-level legislation, or were unsuccessful in this legislative challenge, to a meeting in Chicago and have them each share what has worked and not worked in their respective state. An in-depth discussion to identify the most successful strategies and identify new approaches would lead to greater success for all. The ADA would also compile the results for use by states that may face the mid-level challenge in the future. Specifically, the ADA would budget for up to two people to attend this one-day meeting at ADA Headquarters. The cost of this could come out of the SPA Grant fund. A state association could send

36 more than two people at their own expense. The expectation would be to have the most knowledgeable  
37 people from each state on the mid-level effort participate.

38  
39 This focused, in-person meeting, incorporating in-depth discussion and analysis would benefit the entire  
40 tripartite, helping state associations to avoid repeating mistakes already made and focusing on tactics  
41 that work.

#### 42 **Resolution**

43  
44 **54. Resolved**, that the ADA Board is urged to convene a one-day meeting at ADA Headquarters for  
45 the constituents facing mid-level legislative challenges and those who have had mid-levels approved  
46 (to include but not limited to Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New  
47 Mexico, North Dakota, Ohio, Maine, Minnesota and Vermont) for the purpose of sharing information,  
48 identifying successful strategies, and enhancing the effectiveness of organized dentistry in meeting  
49 the challenge of state legislative efforts to establish mid-level providers, and be it further

50  
51 **Resolved**, that the ADA maintain and archive this information and to share with other state societies.  
52

53 **BOARD RECOMMENDATION: Received after the September 2017 Board of Trustees meeting.**

Resolution No. 61 New

Report: N/A Date Submitted: October 2017

Submitted By: Eleventh Trustee District

Reference Committee: D (Legislative, Health, Governance and Related Matters)

Total Net Financial Implication: \$400,000 Net Dues Impact: \$3.86

Amount One-time \$400,000 Amount On-going  FTE 0

ADA Strategic Plan Objective: Membership-Obj. 1: Leaders and Advocates in Oral Health

How does this resolution increase member value: See Background

### STRENGTHENING THE STATE PUBLIC AFFAIRS (SPA) PROGRAM

The following resolution was submitted by the Eleventh Trustee District and transmitted on October 20, 2017, by Dr. Barry Taylor.

**Background:** The ADA's State Public Affairs (SPA) program is a valuable program that has fortified the efforts of state dental associations to reduce barriers to care and study the efficacy of workforce models that allow non-dentists to perform irreversible procedures. SPA has helped state dental associations conduct research and develop educational messaging for several access to dental care issues. The SPA program effectively coordinates resources of the ADA and state dental associations to address state issues with national implications. The 2017 SPA program had a program year budget of \$2,006,810.00, but required a supplemental Board approved allocation of \$55,000.00 for a total 2017 fiscal year allocation of \$2,061,810.00.

Dental workforce issues are increasing in many states with state legislative efforts to recommend dental midlevel providers legislation. The number of states facing passage of midlevel provider legislation has grown considerably and SPA funding should be correspondingly increased. Although the Board of Trustees can authorize additional financial support to the SPA program during the upcoming 2018 program year, this process can take vital time away from state dental associations that is needed to plan and implement strategies necessary for legislative success. Legislative issues move rapidly, and waiting for Board budgetary approval can have adverse impacts.

### Resolution

**61. Resolved,** that the 2018 Budget be amended to increase the "Grants and Awards" expense line of the proposed 2018 Annual Budget from \$2,627,000 to \$3,027,000 to provide an additional \$400,000 for SPA grants to state dental associations.

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