

## **DENTISTRY - *THE MODEL PROFESSION***

***DENTISTRY IS HEALTH CARE THAT WORKS.*** The profession of dentistry remains committed to the continued advancement of the highest ethical standards among its members and highest quality of oral health care for the public.

The American Dental Association (ADA) has prepared this document to highlight the positions, policies and activities of organized dentistry that support the profession's commitment to provide quality oral health care for the public with access to all who need and desire care. Representing more than 70% of all dentists, the ADA promotes dentistry by perpetuating the profession's integrity and ethics, strengthening the patient-doctor relationship and serving as both a source of information and a voice for the profession.<sup>1,2</sup>

Promoting oral health and providing dental care in a safe environment are the dental profession's foremost priorities. The profession seeks to serve the public by advocating improved access to care, research and innovation, the development of standards for materials and technology and by providing quality oral health care to all patients. The profession recognizes that oral health is integral to general health, and that enhancing the quality, availability, affordability and utilization of oral health care benefits the public's general health and well-being. The following are just a few examples of the ways in which dentists promote the public welfare:

***ADVOCACY:*** The dental profession advocates on behalf of the public for access to care, prevention, preservation of the patient/doctor relationship and quality of care.

Historically, dentistry has promoted public oral health programs and urged lawmakers to adequately fund oral health care for the underserved, programs for water fluoridation, sealants, child abuse detection and intervention, and education for cessation of smoking and smokeless tobacco use.

Today, thanks in part to fluoridation, half of all children ages 5 to 17 have never had a cavity in their permanent teeth.<sup>3</sup> The use of fluoride has led to approximately \$40 billion in savings in oral health care costs during the past 40 years.<sup>4</sup> In fact, the U.S. Centers for Disease Control and Prevention (CDC) has recognized community water fluoridation as one of the ten great public health achievements of the 20<sup>th</sup> Century.<sup>5</sup> Dentistry continues to work tirelessly to promote community water fluoridation.

Dentistry's emphasis on other preventive oral health measures, such as sealants, oral cancer screening and education, mouthguards and effective personal oral hygiene practices, contributes further to the billions of dollars saved in dental care bills. The profession sponsors conferences, such as Dentists C.A.R.E. (Child Abuse Recognition and Education), for dental professionals to promote the detection and reporting of suspected child abuse.

Dentistry supports and promotes Direct Reimbursement and health care reimbursement systems that slash administrative costs, leaving more money available for needed dental care.<sup>6</sup>

Dentistry works to maintain the integrity of the patient-doctor relationship by promoting patient choice of providers, treatments and other patients' rights.

Member dues for national, state and local dental organizations support numerous research and advocacy programs aimed at enhancing the quality of oral health care. Dental professionals voluntarily contribute to agencies, such as the ADA Health Foundation (ADAHF) and other philanthropic groups, which support research on current and emerging dental care delivery systems, products and materials. These activities bring new technology to the profession on behalf of the public, ensuring that the profession continues to deliver efficient, high-quality, affordable dental care. Since 1995, the ADAHF has disbursed more than \$4.3 million dollars to fund dental research, educational programs, scholarships and patient-care projects.<sup>7</sup>

**ACCESS:** National, state and local dental organizations continue to develop innovative programs to address the access problems facing underserved populations. These vulnerable populations are often limited by physical disabilities, illness, poverty and other socioeconomic conditions that impede their access to needed care.

Dentists are the primary oral health care providers; 80 percent are generalists, while 20 percent are specialists.<sup>8</sup> Emphasis on primary care allows dentists to address a broad range of oral health needs and guide their patients to efficient, cost-effective treatment while maintaining the continuity of care.

Dentistry constantly strives to create and promote innovative programs to make oral health care more accessible to the underserved. Some examples are:

- Since 1986, dentists participating in programs of the National Foundation of Dentistry for the Handicapped have served more than 31,000 disabled and elderly patients and donated dental treatment valued at over \$7.5 million annually.<sup>9</sup>
- State and local dental organizations work with their communities to develop innovative programs, such as Kids in Need of Dentistry in Denver, Dentistry for All in Massachusetts and the USC Mobile Dental Clinic in Los Angeles, to bring dental services to low-income populations.<sup>10</sup>
- Dentists provide screening and referral services to developmentally challenged individuals during Special Olympics events.
- Public oral health education programs, such as National Children's Dental Health Month and the Adult Oral Health Awareness Campaign, are sponsored annually by national, state and local dental organizations.
- Local dental organizations participate in community and school health fairs to promote consumer knowledge and awareness of oral health.
- Programs such as the Health Volunteers Overseas provide charitable dental services to developing countries.

Organized dentistry further demonstrated the profession's commitment to improve access disparities by sponsoring a national conference to foster improvements in Medicaid oral health programs for children.<sup>11</sup> With ADA support, state dental associations across the country are working with their legislatures and health departments

to ensure that needy individuals, including children covered under Medicaid and the State Children's Health Insurance Program (SCHIP), gain access to oral health care.

The dental profession has an exemplary record of helping those in need. For example, in 1997, dentists in private practice provided an estimated \$1.7 billion in donated dental treatment.<sup>12</sup> In addition, dentists regularly donate their professional skills in hospitals, community clinics and other settings that offer charitable care to those who cannot otherwise afford it.

***PUBLIC PROTECTION:*** Regulatory mechanisms that have evolved over the past 150 years work well to protect the public and promote patient safety. Dentistry's record of public protection and professional excellence is outstanding. The profession is committed to maintaining the public trust and consumer surveys consistently show that the public has a high level of confidence in the dental profession. In fact, Gallup polls consistently rate dentistry among the top 10 professions for honesty and ethical standards.<sup>13</sup>

Historically, licensure, oversight and regulation of professional activities for dentistry have been the responsibility of state boards of dentistry. The purpose of state regulatory boards has always been and continues to be the protection of the public.

The ADA supports the authority of individual state governments to adopt and enforce rules that regulate the practice of dentistry and enhance the oral health of their citizens.<sup>14</sup> State boards of dentistry should be the sole licensing and regulatory authority for all dental personnel.<sup>15</sup> These state boards of dentistry ensure that licensed dentists maintain competence and practice in accordance with the law.

Dental boards comprise of dentists, dental auxiliaries and public members. Although their composition varies from state to state, all boards have representatives of the public, who may constitute as much as one-third of the boards' memberships.<sup>16</sup> In determining the composition of a state dental board and the level of input from both practitioners and the public, the technical knowledge and expertise provided by dentist members are essential. Dentists who serve as volunteers on state boards are committed to the mission of protecting the public.

State dental boards interact with one another through membership in national organizations of state licensing agencies, such as the American Association of Dental Examiners (AADE),<sup>17</sup> whose purpose is to help state licensing agencies resolve issues of mutual concern. Such groups provide a mechanism for sharing information on licensees and assist in evaluating the quality and competence of candidates for licensure. ADA policy urges state dental boards to make information regarding disciplinary actions accessible to any other dental board making a formal inquiry concerning the credentials of an applicant for licensure.<sup>18</sup>

The profession also supports the coalition of state and regional testing agencies in an effort to expand opportunities for qualified, licensed dentists to move freely from state to state in accordance with established state board rules. Organized dentistry encourages mobility of dentists, participates in ongoing efforts to standardize the licensure examination process and encourages state dental boards granting licensure by credentials to use a defined set of criteria to ensure the competence and fitness of candidates eligible for licensure.<sup>19, 20</sup>

**PROFESSIONAL COMPETENCE:** *The dental profession has taken the lead and has long had processes in place to ensure the professional competence and continued professional development of dentists and to protect the public. A variety of programs support these efforts, including:*

- *Accreditation of Educational Programs.* Dental schools must adhere to the quality standards set forth by the ADA Commission on Dental Accreditation and participate in regular, thorough, on-site evaluations.<sup>21</sup> The Commission on Dental Accreditation is recognized by the U.S. Department of Education to evaluate and certify the quality of education in dental and dental-related education programs. Maintaining quality educational standards helps to ensure quality dental care for the public.
- *Initial Licensure.* State boards of dentistry evaluate candidates for initial licensure, providing checks and balances for the educational process by ensuring that new graduates are qualified to practice.
- *Continuing Education.* The profession is exemplary in its pursuit of professional development through lifelong learning.<sup>22, 23, 24</sup> Lectures, web-based seminars, study clubs, hands-on participation courses and peer-reviewed journals are widely available to assist dentists in keeping their knowledge and skills current. Forty-seven state boards of dentistry currently have continuing education requirements for relicensure, as well as criteria to delineate acceptable forms of continuing education.<sup>25</sup> To promote quality continuing education, the profession through its continuing education recognition programs, has mechanisms for recognizing course providers that meet standards of educational quality.<sup>26, 27</sup>
- *Code of Ethics.* The profession's long-standing *Principles of Ethics and Code of Professional Conduct* states, "The privilege of dentists to be accorded professional status rests primarily in the knowledge, skill and experience with which they serve their patients and society. All dentists, therefore, have the obligation of keeping their knowledge and skill current."<sup>22</sup>
- *Peer Review Process.* The profession has developed and implemented policies and systems for effective peer review that support professional excellence.<sup>28</sup> Local dental societies administer the peer review process at their own expense, providing patients, dentists and third-party payers with an impartial means for addressing disputes regarding dental treatment.
- *Specialty Certification and Recertification Programs.* All recognized dental specialties have certification and recertification procedures to promote professional development.<sup>29</sup>
- *Continued Learning Achievement Programs.* The Academy of General Dentistry grants fellowship and mastership awards to dentists to encourage and recognize achievements in continued professional learning.<sup>30</sup>
- *Dental Practice Parameters.* Dentistry's practice parameters promote quality health care by providing a reference for dentists in their clinical decision-making. These parameters assist the profession in its ongoing responsibility for up-to-date, quality care.<sup>31</sup>
- *Wellness Programs.* On the national, state and local levels, organized dentistry's wellness programs protect the public and enhance professional competence by supporting dentists' mental and physical well-being.<sup>32</sup>

**SCOPES OF PRACTICE:** The dental profession continually assesses scopes of practice for dentists and dental auxiliaries and makes changes based on new treatments and technology to ensure that the public receives quality care in a safe, cost-effective manner.

The scopes of practice for general dentists and dental specialists are defined by the accreditation standards for their respective educational programs, by the *ADA Principles of Ethics and Code of Professional Conduct* and by the definitions of dentistry and the definitions of individual specialties as approved by the ADA.<sup>33, 34, 35</sup> These definitions are frequently cited in state laws, rules and regulations and provide critical guidance to states in determining legal scopes of practice. State dental practice acts and board regulations legally define the scopes of practice for dentists, dental hygienists and dental assistants.

The ADA, through its formal policies and the accreditation standards set forth by the Commission on Dental Accreditation, provides guidance to states and is relied upon by state dental societies, state boards of dentistry, state legislatures and the dental specialties to establish policies which guide the states in making scopes of practice decisions for the protection of the public.

The ADA's *Comprehensive Policy Statement on Dental Auxiliaries* provides guidance regarding delegation of duties, educational requirements, supervision and practice settings for dental assistants, dental hygienists and dental laboratory technicians.<sup>36</sup>

**RESEARCH:** *Dentistry is continually striving for better ways to prevent and treat oral diseases and further the understanding of their relationship to general health.*

Achievements in oral health care research have saved Americans billions of dollars in health care costs.<sup>37</sup> Innovations in oral health research continue to contribute to success in understanding and fighting many other diseases and disorders, such as cardiovascular disease, diabetes, cystic fibrosis, osteoarthritis, Paget's disease, osteoporosis, rheumatoid arthritis, cancers of the mouth and throat, chronic pain and other neurologic disorders and infectious diseases, such as hepatitis and AIDS.

For more than 130 years, the ADA has aided the profession and the public in selecting safe and effective dental products.<sup>38</sup> The ADA Seal of Acceptance Program, initiated in 1930, demonstrates the profession's ongoing commitment to the safety, health and well being of the American public. The Seal program is a dynamic process based on the highest principles of quality assurance and has been awarded a White House certificate for its outstanding contributions to professional self-regulation.

Research studies at the National Institute of Dental and Craniofacial Research (NIDCR), the ADA Health Foundation's Paffenbarger Research Center (PRC) at the National Institute of Standards and Technology (NIST), the ADA Research Institute in Chicago and at public and private institutions across the country continually provide new developments in technology and clinical care to combat oral disease and improve patient safety and comfort.

Scientists at the ADA Paffenbarger Research Center have had a major role in developing new ways to repair, restore and replace diseased or damaged teeth and their supporting structures.

Projects under way at the ADA Research Institute that complement the work of the Paffenbarger Research Center include investigations of latex products and studies on the transmission of hepatitis and HIV.

The ADA Survey Center serves as a repository for the most extensive national collection of data on dentistry and emerging trends related to the delivery of oral health care. This information supports the profession's advocacy initiatives and continuing improvements in dental care.

The ADA has played a pivotal role in developing and maintaining national standards and guidelines for dental materials, instruments and equipment. Both the NIDCR and the ADA's PRC at the National Institute of Standards and Technology conduct research to provide information that supports the standards development process. The profession's commitment to the voluntary standards development process under the auspices of the American National Standards Institute provides an invaluable service to consumers and industry.

**SUMMARY:** *Dentistry is proud of its record of promoting high-quality oral health care and its efforts to protect the public. The profession looks forward to a future of continued progress in its efforts to improve access to care and to enhance the oral health of the public through the provision of state-of-the-art dental services in a safe, comfortable and cost-effective manner. The ADA continually reviews and updates its strategic plan to ensure that the Association's policies and programs meet the needs of the profession and the public and serve as the foundation for ongoing efforts in advocacy, access to care and prevention; public protection and professional competency; research, innovation and standards development; and especially for the provision of quality care to individual patients.*

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