Guest Editorial

Critical Issues Facing the Profession in 2020

We are grateful for the contributions the Journal of Dental Hygiene makes to the dental hygiene discipline by growing the body of knowledge as the underpinning of the profession. We embrace the ongoing evolution of the dental hygiene profession and share in the excitement of the expanding career opportunities for dental hygienists in improving the oral and overall health of individuals and communities. As we look at the issues facing the profession today, we must also consider the opportunities that lie before us.

First, let’s consider one of the most significant changes to the dental hygiene profession that recently occurred in the U.S. Bureau of Labor Statistics Standard Occupational Classification (SOC). The SOC is a classification system used by federal statistical agencies to “classify workers into occupational categories for the purpose of collecting, calculating, or disseminating data.” Information such as employment levels and projections, pay and benefits, skills required, and other demographics are widely used by the public, interested stakeholders and public policymakers.

As of 2018, the SOC now classifies dental hygienists as “Healthcare Diagnosing or Treating Practitioners,” under the same category as dentists. Previously, dental hygienists were classified as “Health Technologists and Technicians.” This change represents a marked advancement. We have long known that a dental hygiene diagnosis requires an evidence-based approach, including a critical analysis and interpretation of the patient’s oral, as well as general, health needs in order to develop the appropriate dental hygiene care plan.

Two challenges that have long faced the profession are the single encounter, live patient, clinical examination and license portability. In 2018, the American Dental Hygienists’ Association (ADHA) updated its policy to support elimination of the live patient, procedure-based, single encounter clinical examination. Furthermore, we believe that a dental hygienist, by virtue of having passed a national board examination and earned a dental hygiene license, should be able to practice across state lines. To advance this work, we are excited to share that the ADHA will now play an integral role in the Coalition for Modernizing Dental Licensure (CMDL).

CMDL has two goals:

1. Achieve adoption of valid and reliable examinations for dental licensure that do not involve the use of single encounter, procedure-based examinations on live patients.

2. Achieve portability of dental licensure among all licensing jurisdictions in the United States for the benefit of the public and the profession.

At the inaugural meeting of CMDL in October 2019, we reiterated the many challenges dental hygienists face in seeking initial licensure and working or moving across state lines. The Executive Committee of CMDL is charged to oversee the management of the ongoing business of the coalition, develop long-range and strategic plans, and carry out the work of the coalition. We are delighted to have the voice of dental hygiene at the table in this important work, with Director of Advocacy and Education, Ann Lynch, serving as the ADHA representative on the Executive Committee of CMDL. Founding CMDL members include the American Dental Association (ADA), the American Dental Education Association (ADEA), and the American Student Dental Association.

We were pleased to hear the announcement that the Surgeon General, Vice-Admiral Jerome M. Adams, MD, MPH has commissioned an update to the 2000 report, “Oral Health in America: A Report of the Surgeon General.” While it is extremely rare that the surgeon general
would direct that a second report be issued, it speaks to the priority and commitment that Dr. Adams has given to oral health. The new report, slated for release in late 2020, is expected to document the progress in oral health since 2000, identify existing knowledge gaps, and articulate a vision for the future of oral health in the United States. We are proud of the contributing writers and reviewers, including members of ADHA, who have been invited to assist the Surgeon General in developing the report. More importantly for the *Journal of Dental Hygiene*, it is expected that the new report will include an emphasis on the need for scientific evidence to transform the oral health of the nation.

To move dental hygiene forward and to ensure that all of our education programs are contemporary and meet the needs of the world we work in today, we applaud the Commission on Dental Accreditation (CODA) Dental Hygiene Review Committee for conducting a comprehensive review and offering revisions to the Accreditation Standards for Dental Hygiene Education Programs. With careful review and revision, we can ensure that today’s graduates are well prepared to contribute to improving the oral and overall health of the patients and communities they will serve. It is incumbent upon the dental hygiene community to engage in CODA’s year-long period of comment, including hearings at the ADEA Meeting, ADEA Program Director’s Conference, ADHA Annual Conference and ADA Meeting.

Interprofessional education, competency-based assessments, the oral systemic link, license portability and the impact that scope of practice has on access to care represent the myriad of areas that warrant further dental hygiene research. It is the combination of research and advocacy that provides the impetus for the profession to evolve to meet the needs of community.

We appreciate our members who walk hand in hand with us and rise to the challenge of improving the nation’s oral and overall health. We invite you to join us, along with dental hygienists from across the country, in New Orleans, June 12-14, 2020, for ADHA’s Annual Conference to hear more on the opportunities and challenges for this growing and evolving profession. More details can be found at www.adha2020.org

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