



STATE OF WASHINGTON

**DEPARTMENT OF HEALTH**

PO Box 47852 · Olympia Washington 98504-7852

**DENTAL QUALITY ASSURANCE COMMISSION  
SPECIAL BUSINESS MEETING MINUTES  
Thursday, January 7, 2021**

**MEMBERS PRESENT**

Aaron Stevens, DMD, Chair  
David Carsten, DDS, Vice Chair  
Lyle McClellan, DDS  
Ronald Marsh, DDS  
Marlynne Fulton, Public Member  
John Liu, DDS  
Tiffany Bass, DDS  
Julia Richman, DDS  
Sonia Pal, DDS  
Bree Kramer, EFDA

**STAFF PRESENT**

Trina Crawford, Executive Director  
Jennifer Santiago, Program Manager  
Becky McElhiney, Assistant Program  
Manager  
Bill Kellington, Supervising Staff Attorney  
Heather Carter, Assistant Attorney General  
(AAG)

**MEMBERS ABSENT**

Brian Macall, DDS  
Kathleen Elling, EFDA  
Karla Briggs, Public Member  
Kunal Walia, DDS  
Abhishake Banda, DMD, MD  
Karen Clements, DDS

**OPEN SESSION**

**1. CALL TO ORDER** – Aaron Stevens, DMD, Chairperson, called the meeting to order at 12:01 p.m.

- 1.1. The commission and staff introduced themselves.
- 1.2. The commission approved the agenda as presented.

**2. COVID-19 VACCINATION**

- 2.1. The commission discussed an interpretive statement related to dentists administering the COVID-19 vaccination.
  - Dr. Carsten suggested a requirement for a hands-on training component in order to prevent potential shoulder injuries.
  - Dr. Liu shared his agreement with Dr. Carsten's suggestion.

- Dr. Bass inquired whether dentists could be trained by any vaccinator such as nurses, doctors, etc. or if it would need to be a dentist.
- Dr. Carsten clarified that any trained and licensed vaccinator could conduct the training.
- Dr. Bass shared that she had concerns with requiring a hands-on training component due to issues with in-person training availability, but after hearing Dr. Carsten's comment she understands the need for hands-on training. Dr. Bass inquired how a practitioner would become certified as a trainer.
- Dr. Carsten clarified there is no formal certification, providers could just attest that they are able to train to the Department of Health.
- Dr. Richman expressed concerns about the willingness of trainers to attest due to the liability in case of an injury.
- Dr. Marsh suggested requiring the newly trained practitioner to testify they had been trained, instead of requiring trainers to certify, in order to shift liability from the trainer.
- Ms. Carter reminded the commission that an interpretive statement is advisory only, and not enforceable. Any discipline would be assessed on a case by case basis, and would have to be based on the requirements to be sufficiently trained and to meet the standard of care. Implementing new requirements would require rule writing.
- Emily Lovell with the Washington State Dental Association expressed concerns with the hands-on component due to limited access to training that could create barriers to receiving the training. Ms. Lovell suggested including the language that dentists should receive in-person training "if possible" and providing training resources including online options.
- Dr. Carsten shared concerns that dentists are not as familiar with the anatomy of arms and shoulders.
- Dr. Chiodo from the University of Washington (UW) School of Dentistry shared that the training the UW has been working on is narrowly focused on COVID-19 vaccinations and does include a hands-on component. They are working with the schools of pharmacy and nursing to push the training throughout the state. The UW met with the Association of Pharmacists to share their training materials, as a large portion of vaccinations are provided by pharmacists. The didactic portion is almost completed.
- Dr. Sara Gordon with the UW asked for clarification on the specific Centers for Disease Control and Prevention (CDC) training required as the CDC offers multiple trainings. Ms. Santiago verified that the resource listed on the interpretative statement directs providers to the main CDC web page listing multiple training options. The commission agreed individual providers should determine the training most appropriate for them.
- Dr. Rod Wentworth shared that Virginia and California are not requiring hands-on training.
- Dr. Gordon shared that the UW School of Pharmacy has training that could be completed by a community vaccinator.

- Simon Prior expressed his opinion that injury could happen under the best circumstances, and that dental hygienists do not have sufficient training to be delegated vaccination.
  - Dr. Marsh moved to approve the statement as written. Dr. Carsten seconded the motion. A vote was taken and the motion passed with none opposed or abstained.
- 2.2. The commission discussed an emergency rule to allow delegation of the administration of the Covid-19 vaccination to licensed dental hygienists.
- Dr. Stevens expressed concerns that there is no language requiring a hands-on component.
  - Dr. Liu shared his opinion that the language requiring hygienists to demonstrate competency implies they must meet the requirements for training as it relates to the dentist in order to be delegated the task.
  - Dr. Carsten expressed concerns that there should be a provider trained in emergencies on-site in case of an emergency.
  - Dr. Liu suggested striking “general supervision” and adding “close supervision”.
  - Dr. McClellan agreed with Dr. Liu’s suggestion.
  - Pixie Needham stated that dental hygienists have extensive education in emergencies and pharmacology.
  - Beverly Frye with the Washington Dental Hygienists’ Association (WDHA) shared her opinion that we need all available practitioners to administer vaccinations, and close supervision could be limiting.
  - Colleen Gaylord with WDHA shared that she is all-in for volunteering anywhere she can to help. She is not against educational requirements, but general supervision would make it easier to volunteer wherever needed.
  - Dr. Richman asked whether volunteers through public health or medical reserve corps would be under the supervision of a dentist, even if the dentist is unaffiliated with the facility the hygienist is volunteering at.
  - Dr. Carsten stated they would not.
  - Dr. Richman suggested editing the language to allow delegation of vaccinations under close supervision, or under general supervision if a health care provider trained in emergencies is on site.
  - Dr. Stevens stated that the commission has previously given hygienists the ability to administer many medications under general supervision and suggested leaving the language allowing delegation under general supervision to be consistent. The commission does not have authority to have a medical physician supervise a hygienist.
  - Dr. Liu agreed, and shared his opinion that the commission should leave the delegation to discretion of dentists.
  - Dr. Bass inquired whether dental hygienists volunteering at a health care facility such as a clinic are still under general supervision of the dentist they work with.
  - Dr. Liu answered they are not.

- Ms. Carter clarified that the rule is not that clear, and a hygienist is still under the supervision of a dentist.
- Ms. Santiago shared there is a definition of general supervision that requires dentist to examine and diagnose.
- Dr. Marsh moved to approve the statement as written. Dr. Bass seconded the motion. A vote was taken and the motion passed with 9 in favor and one abstained.

### 3. ADJOURN

The commission adjourned at 12:50 p.m.

Submitted By:

Commission Approval By:

Signature on file  
Jennifer Santiago, Program Manager

Signature on file  
Aaron Stevens, DMD, Chairperson