Appendix A
Testimony on HB 463 by Mark A. Armstrong, D.D.S.

Appendix B
Testimony on HB 463 by Lili C. Reitz, Esq.

Appendix C
Letter to the Ohio Dental Association Regarding HB 463

Appendix D
Curriculum Vitae of Charles C. Smith, D.D.S., QUIP Coordinator

Appendix E
First Annual QUIP Report to the Board By Charles C. Smith, D.D.S.
Ohio State Dental Board

Board Meeting

April 23, 2014

Attendance
The Ohio State Dental Board (Board) met in Room 1960, of The Vern Riffe Center for Government and the Arts, 77 South High Street, 19th Floor, Columbus, Ohio on April 23, 2014, beginning at 1:00 p.m. Board members present were:

- Gregory A. McDonald, D.D.S., President
- William G. Leffler, D.D.S., Vice President
- Marybeth Shaffer, D.D.S., Secretary
- Ashok Das, D.D.S., Vice Secretary
- Ann Aquillo
- Constance F. Clark, R.D.H.
- W. Chris Hanners, D.D.S.
- Susan Johnston, R.D.H.
- Lawrence Kaye, D.D.S.
- Anne Missig, R.D.H.
- Charles Smith, D.D.S.
- Douglas W. Wallace, D.D.S.

The following guests were also in attendance: Katherine Bockbrader, Esq. of the Ohio Attorney General’s Office; Michele Carr, R.D.H., M.A. of the Ohio State University College of Dentistry, Division of Dental Hygiene; Chadleo Webb, R.D.H. of the Ohio Dental Hygienists’ Association; Keith Kerns, Esq. and Chris Moore of the Ohio Dental Association; Mark T. Armstrong, D.D.S. representing the North East Regional Board; Lili C. Reitz, Esq., Executive Director, Barb Yehnert, Dental Board Enforcement Officer, Heidi Massaro, Compliance Coordinator, Jayne Smith, Licensing Coordinator, and Malynda Franks of the Ohio State Dental Board; and other guests.

Call to Order
Dr. Leffler introduced himself as the Board Vice President, a general dentist from Akron, and after extending greetings to everyone he explained that the Board President, Dr. Greg McDonald and the Board Executive Director, Lili Reitz, Esq. were over at the Ohio Statehouse providing testimony to the House of Representatives Health and Aging Committee on H.B. 463. He stated that they would attend the meeting upon completion of their testimony. Noting that there was a quorum present, Dr. Leffler called the meeting to order at approximately 1:05 p.m.

Introduction of Board Members
Dr. Leffler then introduced the rest of the Board members. He introduced Dr. Marybeth Shaffer, the Board’s Secretary, a general dentist from Leetonia, Dr. Ashok Das, the Board’s Vice Secretary, a general dentist from Mason, Dr. Chris Hanners, a general dentist from Chillicothe, Dr. Charles Smith, a general dentist from Tipp
City, Dr. Douglas Wallace, an oral and maxillofacial surgeon from West Chester, and Ms. Constance Clark, a dental hygienist from Dublin, Ms. Susan Johnston, a dental hygienist from Columbus, Ms. Anne Missig, a dental hygienist from Morrow, Ms. Ann Aquillo, the Board’s Public member from Marysville, and Dr. Lawrence Kaye, a periodontist from Akron.

Review of Minutes

March 2014
Motion by Dr. Wallace, second by Dr. Das, to approve the March 19, 2014 Board meeting minutes as presented.

Roll call vote:  Ms. Aquillo – Yes
                Ms. Clark – Yes
                Dr. Das – Yes
                Dr. Hanners – Yes
                Ms. Johnston – Yes
                Dr. Kaye – Yes
                Dr. Leffler – Yes
                Dr. McDonald - Absent
                Ms. Missig – Yes
                Dr. Shaffer – Yes
                Dr. Smith – Yes
                Dr. Wallace – Yes

Motion carried.

Agenda
Dr. Leffler stated that the Board had previously approved the agenda for the afternoon as presented. However, he stated that he would entertain a motion to modify the agenda due the testimony being provided on H.B. 463.

Motion by Dr. Hanners, second by Ms. Aquillo, to amend the Board agenda to allow for flexibility of agenda items due to extenuating circumstances.

Roll call vote:  Ms. Aquillo – Yes
                Ms. Clark – Yes
                Dr. Das – Yes
                Dr. Hanners – Yes
                Ms. Johnston – Yes
                Dr. Kaye – Yes
                Dr. Leffler – Yes
                Dr. McDonald - Absent
                Ms. Missig – Yes
                Dr. Shaffer – Yes

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Dr. Smith – Yes  
Dr. Wallace – Yes

Motion carried.

**Personal Appearance(s)**

**Timothy J. Backiewicz, D.D.S.**

Ms. Yehnert introduced Dr. Timothy Backiewicz to the Board members. She stated that this was Dr. Backiewicz second appearance before them. Ms. Yehnert then provided the members with Dr. Backiewicz’ background in this matter. She stated that he has been a dentist for 23 years in the New Albany area and that in late 2013, Dr. Backiewicz was convicted of two (2) traffic offenses; Driving Under the Influence (DUI) in Franklin County which resulted in a suspended driver’s license and the second for driving under a suspended license in Delaware County. Ms. Yehnert indicated that both driving offenses were heard on February 19, 2014 which resulted in fines. She stated that it is the opinion of Dr. Backiewicz’s Counsel that the reduction in charges was due to Dr. Backiewicz seeking residential treatment for alcohol abuse.

Continuing on, Ms. Yehnert informed the members that Dr. Backiewicz self-reported to the Board that he had entered treatment at The Woods at Parkside and on January 28, 2014, Dr. Backiewicz was discharged as treatment completed. Almost one month later, Ms. Yehnert reported, Dr. Backiewicz and his attorney, Lawrence Levinson, Esq., met with Executive Director Reitz and herself to review a proposed consent agreement with the Board. She stated that Dr. Backiewicz had signed the consent agreement that then ratified at the previous Board meeting in March. Ms. Yehnert informed the members that since the last meeting, Dr. Backiewicz has hired an associate for his practice who fits in quite well which has allowed him to keep his practice open. She stated that Dr. Backiewicz is compliant with the terms of his consent agreement, that he is 160 days sober as of today, and that he hopes to seek approval to return to practice 20 hours per week.

Upon questioning by the Board, Dr. Backiewicz stated that things were going really well and feels thankful for every day. He informed the members that he’s been keeping with the program, complying with the terms in his consent agreement by attending Alcoholics Anonymous (AA) meetings and staying sober.

When questioned as to what has changed in his life to bring him to this point in his sobriety, Dr. Backiewicz state that sobriety has been life-changing for him, that he actually feels that it has been lifesaving in his situation. Dr. Backiewicz informed the Board that he was at a point in his life where he was drinking a lot and had been drinking for a long time. He indicated that now he enjoys sobriety because it is a clarity that he has not had in quite some time. Dr. Backiewicz said that his sobriety has been good for his children, his wife, and everyone has seen a big difference in him and how he is as a person. He said that he likes his AA meetings and that it helps every day and that he wakes up every day feeling great.

When asked about his caduceus meetings, Dr. Backiewicz informed the Board that there are two (2) dentists in those meetings of which one (1) is his sponsor and therefore, he finds the meetings very helpful. He explained to the members that he plans to go back to what he has been doing for 20 years as he has enjoyed
dentistry and he knows that there are going to be a lot of questions from his patients. Knowing this, he said he has asked the other dentists in his group what he should expect and that it has been very good to communicate with other dentists and other doctors as well.

Further questioning by the Board revealed that Dr. Backiewicz had lost his associate that had been with him for 13 years due to the disease because he had put a lot of pressure on her to work harder than what she should have. However, he indicated that the practice is doing well since he has a new associate, Dr. Lowry, who has gotten along great with all his patients. Dr. Backiewicz explained that his staff loves Dr. Lowry and that he considers her a blessing. He stated that in regards to going back to practice, he feels that 20 hours/week to start off would be more than enough. Dr. Backiewicz stated that he has discussed this with his wife and they feel that just starting off with two (2) days/week would be fine, that he does not plan on going in right away full time and would like to start slowly and go from there. He stated that in that way he would be able to continue to maintain his meetings.

Dr. Leffler thanked Dr. Backiewicz for attending and stated that the Board would consider his request during the upcoming Executive Session.

Christy A. Dove, D.D.S.
Ms. Yehnert introduced Christy A. Dove, D.D.S. to the Board, stating that this was her first appearance before them, and that she was requesting consideration for reinstatement of her license to practice dentistry. Ms. Yehnert explained that the matter regarding Dr. Dove was brought to the Board's attention by way of Agent Kinneer of the Ohio Board of Pharmacy. She said that on February 12, 2014, Dr. Dove admitted to Agent Kinneer that she had used prescription blanks from her employer dentist to forge prescriptions in her parents' names for Percocet for her own intended use.

Continuing on, Ms. Yehnert informed the members that she had met with Dr. Dove and Dr. Dove's employer on February 18, 2014. She said that Dr. Dove elected not to seek legal counsel but invited her employer, whose prescription blanks she stole, to sit in on the review of her proposed consent agreement. At that time, Ms. Yehnert stated that Dr. Dove commented that she did not feel she had an addiction but rather the stress of her divorce and health issues were not allowing her to function and the Percocet provided her relief. Ms. Yehnert stated that she had several more conversations with Dr. Dove to assist her in finding an approved treatment facility and detailing the terms and conditions of her consent agreement. She informed the members that on March 30, 2014 she received a telephone call from Dr. Dove's mother requesting information on aftercare facilities and that Dr. Dove be permitted to return to practicing dentistry immediately upon release from treatment from the Center for Chemical Addictions Treatment (CCAT). Ms. Yehnert stated that she explained to Ms. Cox that historically, the Board requests that the dentist return for a personal appearance after a short period of time wherein they have demonstrated a period of continued sobriety and full compliance with their consent agreement with the Board. She stated that she informed Ms. Cox that this had been explained to Dr. Dove in detail prior to her admission to CCAT.
Ms. Yehnert said that she was contacted on April 1, 2014 by Dr. Dove’s counselor, Katie Shaw who informed her that Dr. Dove would be discharged the next day. She stated that Ms. Shaw advised her that Dr. Dove had expressed a desire to relocate to the Columbus area and then they discussed Dr. Dove’s aftercare.

She stated that Dr. Dove in February, Dr. Dove had stated that she was depressed over her divorce, that she felt she needed the Percocet to function, and that she knew it was wrong to have forged the prescriptions and write them out in her parents’ name. Further, informed Ms. Yehnert that Dr. Dove claimed not to have known that these were chargeable felonies, that she had practiced outside her scope of dentistry in treating her mother for Fibromyalgia, and that she had no medical charts for the treatment she had prescribed for her parents. Indicated to Ms. Yehnert that Dr. Dove had explained that the prescriptions she had written out for her father in the amounts for 55 tablets were actually for her because that is how Dr. Dove tracked her own drug usage.

In her follow-up conversation with Ms. Shaw, Ms. Yehnert stated that she indicated that Dr. Dove acted surprised.

Further, Ms. Yehnert stated that Dr. Dove’s discharge summary clearly details that Dr. Dove undergo mental health counseling.

Concluding, Ms. Yehnert stated that as of April 16, 2014, she had only received one (1) e-mail communication from Dr. Dove in which she had inquired about caduceus meeting. Ms. Yehnert said that she had informed Dr. Dove that those meetings were not publicly offered, that she should reach out to Dr. Mark Wenzel for direction and provided her with his contact information. She stated that she contacted Dr. Wenzel to confirm that Dr. Dove contacted him.

Upon questioning by the Board, Dr. Dove stated that she has practiced for approximately 17 years, most of which was part-time since she was also rearing her four (4) children. She then confirmed Ms. Yehnert’s statements in regard to beginning her divorce process about two (2) years ago and that she had mentioned to Agent Kinnear about her depression. Dr. Dove said that these were not the only issues. She stated that she too, had Fibromyalgia but did not know that was the problem. She stated that she would have “episodes” where she would spend days in bed, not understand what was going on, thinking she had the flu but without other symptoms. Dr. Dove said that this started before the divorce process and that her health kept declining. She stated that she had restless arm and leg syndrome, was not sleeping at all, and that her carpal tunnel had gotten to the point that if she drilled for very long she would have to stop as it became very painful. Dr. Dove informed the members that it got to the point where she would have total body...
aches, could not seem to get out of bed, and her weight dropped to 88 pounds. She indicated that her health issues peaked about the same time in her divorce process as her ex-husband moved out.

When asked if she had anything to say with relationship to her proposed consent agreement with the Board, Dr. Dove commented that she did not have words to describe what she was going through, that it had been a “crazy” situation for about 17 years, but that there just was not any justification.

Dr. Leffler thanked her for appearing and speaking to the Board regarding this matter and then explained that the Board would be considering a proposed consent agreement later in the meeting. He offered that she might wish to stay to hear their decision.

Lawrence H. Kaiser, III, D.D.S.

Ms. Yehnert introduced Lawrence H. Kaiser, D.D.S. to the Board, stating that he was appearing before them to request consideration for reinstatement of his license to practice dentistry. She indicated that this was not Dr. Kaiser’s first appearance before the Board and then provided the Board with a brief history. Ms. Yehnert explained that Dr. Kaiser had entered into an impairment consent agreement in February, 2006 wherein he was suspended pending treatment. On January 10, 2007, Ms. Yehnert stated that Dr. Kaiser was reinstated, completed his probationary terms, all requirements of his impairment consent and came off probation on January 10, 2012. She said that Dr. Kaiser suffered a relapse on February 13, 2012, self-reported, and his license was suspended indefinitely on March 13, 2012.

Continuing on, Ms. Yehnert explained that Dr. Kaiser entered into treatment at Stella Mari on February 27, 2012 and was discharged on June 1, 2012. She stated that Dr. Kaiser completed the aftercare that was required by Stella Maris and intends to meet the Board’s aftercare requirements. However, she indicated that the cost of the aftercare outside of his insurance coverage prohibits him from attending; unless the Board considers approving him to attend aftercare at a non-Board approved facility that accepts his insurance. Ms. Yehnert informed the members that Dr. Kaiser has provided her with information on a new treatment program through MetroHealth Hospital (MetroHealth) in Cleveland, Ohio which would be financially attainable for him. She stated that Dr. Kaiser currently attends his AA meetings, caduceus meetings, and is seeing a therapist all at MetroHealth. Additionally, Ms. Yehnert indicated that due to his financial situation, Dr. Kaiser is also seeking the Board’s approval to have his urine screens performed by the same lab that he used in 2012 so long as they meet the Board’s requirements.

Ms. Yehnert explained that Dr. Kaiser has had major financial issues. She stated that due to his divorce and suspension of his license, Dr. Kaiser at times, was homeless, living out of his car, had no viable means of supporting himself, and his mounting financial issues continue to grow. Ms. Yehnert stated that throughout these stresses of being homeless and nobody willing to give him a job, Dr. Kaiser has remained sober. She stated that he currently has employment driving for an ambulance service and a service car for funerals. She indicated that Dr. Kaiser is currently living with his parents in Lakewood, Ohio, expressed that he feels blessed to have a place to live, but looks forward to becoming independent again.

Upon questioning by the Board, Dr. Kaiser informed the members that he continues to do what he has been doing since his release from treatment at Glenbeigh in 2006. He said that he attends about seven (7) meetings a week on average, has two (2) sponsors, one (1) of which he considers his spiritual advisor, and
has a support group on Fridays. Dr. Kaiser explained that in February 2012 he was living with a significant other and while he felt he is not qualified to say whether she is an alcoholic, he expressed to the Board that his relapse was his own fault. He stated that he had picked up drinking again and things progressed very quickly, very badly and had deteriorated to the point where he began to shake and it became a physiological and biological issue. Dr. Kaiser stated that a good friend from his caduceus group, who was also the former medical director at Stella Maris, talked to him and explained that he would help him get “back on track”. Shortly thereafter, Dr. Kaiser explained, he was admitted to Stella Maris and his friend advised him to self-report and so he did. Dr. Kaiser informed the Board members that his new sobriety date is February 14, 2012. He stated that he completed his out-patient treatment with Stella Maris in June, 2012, that they allowed him to stay on in a residential hall to assist with some of the new people coming in, that he began his aftercare there, and was subsequently discharged at the end of August, 2012. Dr. Kaiser said that since that time he has been working toward getting his license to practice dentistry reinstated. However, he said, he has had some extreme financial hurdles and he did not want to present himself before the Board until he was sure that they would have confidence in him and no doubts in any decision to reinstate his license when he came before them.

Further questioning by the Board revealed that Dr. Kaiser is no longer in contact with his significant other from February 2012. Additionally, Ms. Yehnert explained that the time lapse between Dr. Kaiser’s release from aftercare until now was due to his financial inability to attend a Board-approved aftercare facility. She stated that the terms of his consent agreement specify that he has to complete aftercare in a Board-approved facility prior to reinstatement of his license to practice. Ms. Yehnert explained that Dr. Kaiser was here before them to explain his financial hurdles and appeal to the Board to approve the new aftercare program at MetroHealth in a limited capacity until they receive an application for the Board to consider at a later date.

Dr. Kaiser stated that with the exception of his attendance to a Board-approved aftercare facility, he has been in compliance with the terms of his consent agreement since February 2012. He also explained that he had been informed the previous day by the new Coordinating Director at Stella Maris, a Board-approved facility, that he would be welcome to attend their aftercare program free of charges. Therefore, he stated, it might be possible for him to have two (2) options for aftercare, if the Board approved MetroHealth, which he could handle financially.

Board members asked Dr. Kaiser whether he had maintained his continuing education during this time and expressed concern regarding his clinical skills in light of his license being suspended for a year and a half. Dr. Kaiser stated that he prided himself and has been told by other that he has tremendous handskills and that he is an excellent clinician. He stated that he had not completed the required 40 hours of continuing education as it had been explained that they were not required until immediately prior to reinstatement of his license. He informed the Board members that he had completed 32 hours of continuing education to date.

Dr. Leffler thanked Dr. Kaiser for appearing and requested that he remain at the meeting as they would be discussing this matter during executive session.
Agnes R. Manning-Poluka, E.F.D.A., Dental Assistant Radiographer

Ms. Yehnert introduced Agnes R. Manning-Poluka, EFDA, Dental Assistant Radiographer to the Board. She stated that Ms. Poluka was making her first appearance before them and requesting reinstatement of her Expanded Function Dental Auxiliary (EFDA) registration and Dental Assistant Radiographer (radiographer) certificate. Ms. Yehnert explained to the members that Ms. Poluka was charged with drug possession in July 2012 and was placed on probation for these drug charges. She stated that in November 2012, Ms. Poluka was charged with violation of her probation, went before the court for a second drug possession charge and violation of probation, and was sentenced to a 12-month term in prison. She stated that Ms. Poluka served her sentence and was released on April 7, 2014.

Ms. Yehnert stated that she had met with Ms. Poluka to provide her with the proposed consent agreement and that she appears to be doing well. She stated that Ms. Poluka has begun attending AA/NA meetings and intends to locate a lab to provide urine screenings upon the Board’s request. Ms. Yehnert stated that Ms. Poluka had indicated that she has an EFDA position waiting for her with her former employer when the Board decides to reinstate her registration. She stated that she had contacted Ms. Poluka’s former/future employer, Dr. Gentilcore, who informed her that he feels Ms. Poluka made a mistake, felt she was a valued member of his dental team, and he looks forward to having her back in his office. Ms. Yehnert informed the members that she explained to Dr. Gentilcore that the Board would need to reinstate Ms. Poluka’s registration and certificate prior to her being able to work in her previous capacity as an EFDA, radiographer. She stated that Dr. Gentilcore informed her that he will hire Ms. Poluka back as a chairside assistant regardless of any decision to reinstate Ms. Poluka’s registration or certificate.

Concluding, Ms. Yehnert stated that Ms. Poluka became involved in the prison ministries while incarcerated, and she hopes to attend a new church with a strong spiritual environment wherein she remains involved. She stated that Ms. Poluka informed her that she feels blessed, thankful at the second chance God has provided, and that she has no intention of letting Him or her family down again.

Upon questioning by the Board, Ms. Poluka expressed that going to prison had been a rude awakening for her. She commented that she would not be appearing before them today without the grace of God and that she is completely grateful every morning when she awakens. She stated that good people make bad decisions and that there are a lot of good people out there, that we are all human, and that we can all make bad mistakes. Ms. Poluka stated that realizing this and knowing this and taking that attitude with her into her recovery is essential to her part in her survival and to lead a normal life. She informed the Board that her sobriety date is March 24, 2013.

Ms. Poluka explained some of the adjustments she has made in her life, including letting go of her past and that she is no longer the same person she was before. She stated that she has changed the people she is around and that her friends are now her “true” friends and that recovery for her is everything. She stated that every day is a battle in her mind, that she reprograms her thought processes every moment of every day to gear them towards recovery.

When asked where she had obtained drugs, Ms. Poluka explained that she had surgery four (4) years ago for a torn ACL and had a torn meniscus on the same knee two (2) years ago. She stated that both instances she
was on prescription medications for the pain. She informed the Board that she slowly became addicted to the pain medications due to her injuries and that she obtained drugs off the street after that. Ms. Poluka stated that she was charged in 2012 and briefly explained about her incarceration.

The Board members then questioned her about reinstatement of her EFDA registration. Ms. Poluka explained that she would like to have her EFDA registration reinstated but regardless, her former employer has offered to rehire her as a chairside assistant. She explained that she intends to go back to work for her former employer but would like to return to work as an EFDA.

Dr. Leffler requested that Ms. Poluka remain at the meeting and informed her that they would be discussing this matter during executive session.

Dr. Leffler stated that they would be postponing the next agenda item, the Executive Session, to allow former Board member Mark Armstrong, D.D.S. to provide a brief presentation to the members on his earlier testimony to the Ohio House of Representatives, Health and Aging Committee.

**Presentation by Mark T. Armstrong, D.D.S., Former Board Member**

Mark T. Armstrong, D.D.S. introduced himself and then thanked the Board members for allowing him to speak to them. He explained that he had just provided testimony on House Bill (HB) 463 and wanted to give the members an update on his testimony. He stated that his testimony before the House Aging and Health Committee (Committee) regarded the regional board examinations.

Dr. Armstrong stated that Ohio is a member state of the North East Regional Board (NERB) and that the Board is not a member of the other four (4) examination boards; Southern Regional Testing Agency (SRTA), Central Regional Dental Testing Service (CRDTS), Western Regional Examining Board (WREB), and Council of Interstate Testing Agencies (CITA). He explained that Ohio accepts all the regional board examinations except CITA for initial licensure. He stated that his discussion with the Committee concentrated on the differences between the examinations and not on their similarities. He said that the importance of his discussion of the four (4) exams was in 1) what was appropriate; and 2) are the examinations equivalent. Dr. Armstrong stated that Ms. Reitz had printed out his presentation (Appendix A) for the members and that he would not go through the requirements and similarities for the exam but rather the differences is between the exams that really matter for Ohio and our licensees.

Continuing on, Dr. Armstrong informed the members that an occupational analysis was done by Alpine Testing Solutions, a company that does psychometric validity evaluations of tests, in a report dated December 21, 2011. He explained that the report identified the dental procedures done and their frequency for entry level dentists five (5) years or less out of graduation. He indicated that the their report showed that the American Board of Dental Examiners (ADEX) examination is the only exam that tests dental candidates in all four (4) area identified as critical. He said that one of the initial steps in test development is to outline the depth and breadth of the content area domains that will form the basis for the examination. Dr. Armstrong informed the members that by accepting multiple board exams, Ohio has already licensed candidates who may not have:
• Demonstrated competence in oral diagnosis, as this is not tested by WREB or CRDTS;
• Demonstrated competence in treatment planning as this is not tested by CRDTS;
• Demonstrated competence in endodontics as there is no choice of teeth in the WREB; and
• Demonstrated competence in prosthodontics as this is not tested at all on the WREB exam.

Dr. Armstrong asked the members to think to themselves if they or a family member had a toothache, their dentist recommended a root canal, they would want to be sure that the correct tooth is treated. He stated that the WREB exam only tests on a root canal therapy on a given tooth, not whether it is done on the correct tooth as the examination only provides examination on two (2) teeth. Further, Dr. Armstrong explained, senior dental students have failed the ADEX dental exam because they did the root exam on the wrong tooth. He said that obviously the Board would not want that to happen to our citizens of Ohio.

Dr. Armstrong questioned “So why the ADEX exam?” He explained that the ADEX is the only dental exam in which the state of Ohio has any input. He stated that ADEX is a test development board serving its member state dental boards in developing valid and reliable initial licensure exams in dentistry and dental hygiene. He informed the members that ADEX has 34 member states and territories and that the ADEX exam is accepted in 46 licensing jurisdictions. He said that ADEX does not administer any exams, nor does it obtain additional compensation increase as market share increases, therefore whether there are 100 ADEX examinations given or 5000 ADEX examinations given, ADEX does not receive additional compensation. Dr. Armstrong noted that it is important to remember that ADEX is an organization of state dental boards not testing agencies such as NERB, CRDTS, SERTA, WREB and CITA.

Continuing, Dr. Armstrong explained why Ohio should not accept the CRDTS or the WREB exam. He stated that both CRDTS and WREB develop their own dental exams of which Ohio has no input on content development or administration of the exams. He said that WREB does not test their candidates on crown and bridge and yet this is one of the primary duties performed by a dentist. He stated that CRDTS does not test their candidates on comprehensive diagnosis and treatment planning and yet every dentist must know how to do this before performing treatment. He explained that a dentist can do a perfect filling but if it is on the wrong tooth because it has been diagnosis incorrectly they have harmed the patient.

In summary, Dr. Armstrong stated that the Ohio State Dental Board (Board) is charged with protecting the citizens of Ohio. He explained that in order to fulfill its duties, dentists and dental hygienists should pass the licensing exam in which the Board has input. Again, he clarified, that the ADEX exam is the only examination in which Ohio has input. He said that the Board has no voice in the content of the WREB or the CRDTS examinations and therefore, he asked the Committee to amend ORC 4715.10 as follows:

(D) To be granted a license to practice dentistry, an applicant must meet any one of the following requirements:

(1) Have taken an examination administered by any of the following regional testing agencies the ADEX exam and received on each component of the examination a passing score as specified in division (A) of section 4715.11 of the Revised Code: the central regional dental testing service, inc., northeast regional board of dental examiners, inc., the southern regional dental testing agency, inc., or the western regional examining board;
When questioned by the Board, Dr. Armstrong stated that the Committee’s primary concern appeared to be whether the ADEX examination could be provided to all dental and dental hygiene candidates in Ohio, which he explained that it is already being given. He further explained to the Committee again that it is not ADEX that is providing the examination, but rather, the regional boards are administering the examination in the two (2) dental schools and 19 dental hygiene programs throughout the state.

When asked if he had testified regarding PGY1, Dr. Armstrong explained that he concentrated his testimony on the regional board examination. However, he indicated that there is an obvious concern regarding the issuance of a license without minimal competency examination and that he is already working with his local legislator, who is a co-sponsor of the bill, regarding the concerns about PGY1 and a few other areas of concern in the amended bill. He concluded by stating that he has another meeting with the co-sponsor next Wednesday.

Dr. Leffler thanked Dr. Armstrong for his presentation and stated that the Board looked forward to any further testimony he might provide.

**Executive Session**

*Motion by Ms. Aquillo, second by Ms. Johnston, to move the Board into executive session pursuant to Ohio Revised Code Section 121.22(G)(3) to confer with counsel on matters that are the subject of pending or imminent court action and pursuant to Ohio Revised Code Section 121.22(G)(1) to consider the matters involving Dr. Timothy Backiewicz, Dr. Christy Dove and Agnes Manning-Poluka, E.F.D.A., Dental Assistant Radiographer.*

Roll call vote:  
Ms. Aquillo – Yes  
Dr. Beard – Yes  
Ms. Clark – Yes  
Dr. Das – Yes  
Dr. Hanners – Yes  
Ms. Johnston – Yes  
Dr. Leffler – Yes  
Dr. McDonald - Yes  
Ms. Missig – Yes  
Dr. Shaffer – Yes  
Dr. Smith – Yes  
Dr. Wallace – Yes

Motion carried unanimously.

Dr. Leffler requested Ms. Bockbrader and Mark Wenzel, D.D.S. to attend the Executive Session. Ms. Bockbrader stated for the record that she would not be in attendance for the consideration of the matters of Drs. Backiewicz and Dove and Ms. Poluka. She stated that she would attend the executive session for the matters that are the subject of pending or imminent court action.
Open Session
The Board resumed open session at approximately 2:27 p.m. Dr. McDonald and Ms. Reitz were in attendance for the rest of the meeting.

Decision in the Matter of Timothy Backiewicz, D.D.S.
Motion by Dr. Das, second by Dr. Wallace, to reinstate the license of Timothy Backiewicz D.D.S. to practice dentistry up to twenty (20) hours per week and pursuant to the terms of his consent agreement.

Roll call vote: Ms. Aquillo – Yes
Ms. Clark – Absent
Dr. Das – Yes
Dr. Hanners – Absent
Ms. Johnston – Yes
Dr. Kaye – Yes
Dr. Leffler – Yes
Dr. McDonald - Abstain
Ms. Missig – Yes
Dr. Shaffer – Yes
Dr. Smith – Yes
Dr. Wallace – Yes

Motion carried.

Decision in the Matter of Christy A. Dove, D.D.S.
Dr. Leffler informed Dr. Dove that the Board would be considering a consent agreement later in the meeting regarding this matter. He stated that if the Board ratified the consent agreement, then Dr. Dove would be bound by the terms set forth in the consent agreement.

Decision in the Matter of Lawrence H. Kaiser, III, D.D.S.
Dr. Leffler informed Dr. Kaiser that once he had completed the terms of his consent agreement, they would consider having him appear before the Board and consider possible reinstatement of his license to practice dentistry. He stated that those terms included his aftercare and they would approve MetroHealth for his aftercare later in the meeting. Dr. Leffler stated that the Board has concerns regarding Dr. Kaiser’s clinical skills since he has had such a long time out of practice. Dr. Leffler told Dr. Kaiser that since he must complete his 40 hours of continuing education prior to the Board considering reinstatement, he encouraged Dr. Kaiser to obtain some “hands-on” clinical courses as the Board members have concerns regarding his hands skills. Dr. Kaye suggested that Dr. Kaiser seek guidance from the Board Secretaries (SIP) as to suggestions about where to locate appropriate “hands-on” clinical coursework through Board-approved providers.
Decision in the Matter of Agnes R. Manning-Poluka, E.F.D.A., Dental Assistant Radiographer  
Motion by Dr. Kaye, second by Ms. Missig, to reinstate the registration of Agnes R. Manning-Poluka to practice as an expanded function dental auxiliary and pursuant to the terms of her consent agreement with the Board.

Roll call vote:  Ms. Aquillo – Yes  
Ms. Clark – Yes  
Dr. Das – Yes  
Dr. Hanners – Yes  
Ms. Johnston – Yes  
Dr. Kaye – Yes  
Dr. Leffler – Yes  
Dr. McDonald – Abstain  
Ms. Missig – Yes  
Dr. Shaffer – Yes  
Dr. Smith – Yes  
Dr. Wallace – Yes

Motion carried.

Dr. Leffler then turned the Board meeting over to President McDonald.

Enforcement Report

Review of Proposed Consent Agreement(s)  
The Board reviewed two (2) proposed consent agreements. The names of the individuals/licensees were not included in the documents reviewed by the Board. The names of the individuals/licensees have been added to the minutes for public notice purposes.

Disciplinary

Christy A. Dove, D.D.S.  
Motion by Dr. Wallace, second by Dr. Kaye, to approve the proposed consent agreement for Christy A. Dove, D.D.S., license number 30-020796, case number 14-71-0095.

Roll call vote:  Ms. Aquillo – Yes  
Ms. Clark – Yes  
Dr. Das – Yes  
Dr. Hanners – Yes  
Ms. Johnston – Yes  
Dr. Kaye – Yes  
Dr. Leffler – Yes  
Dr. McDonald – Yes  
Ms. Missig – Yes

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Dr. Shaffer – Yes
Dr. Smith – Yes
Dr. Wallace – Yes

Motion carried unanimously.

Agnes R. Manning-Poluka, E.F.D.A., Dental Assistant Radiographer
Motion by Dr. Wallace, second by Ms. Johnston, to approve the proposed consent agreement for Agnes R. Manning-Poluka, registration number EFDA.00214, certificate number 51-008350, case number 14-18-0148.

Roll call vote:     Ms. Aquillo – Yes
                   Ms. Clark – Yes
                   Dr. Das – Yes
                   Dr. Hanners – Yes
                   Ms. Johnston – Yes
                   Dr. Kaye – Yes
                   Dr. Leffler – Yes
                   Dr. McDonald - Yes
                   Ms. Missig – Yes
                   Dr. Shaffer – Yes
                   Dr. Smith – Yes
                   Dr. Wallace – Yes

Motion carried unanimously.

Notice(s) of Opportunity for Hearing
The Board reviewed two (2) proposed notices of opportunity for hearing. The names of the individuals/licenses were not included in the documents reviewed by the Board. The names of the individuals/licenses have been added to the minutes for public notice purposes.

Annamarie J. Stotler, Dental Assistant Radiographer
Motion by Dr. Leffler, second by Ms. Aquillo, to approve the proposed notice of opportunity for hearing and forward it to Annamarie J. Stotler, Dental Assistant Radiographer, certificate number 51-021266, case number 11-77-0439.

Motion carried unanimously.

Dental Licensees – Failure to Renew
Ms. Reitz explained that this Notice of Opportunity for Hearing would be mailed out to all dental licensees who had failed to renew by April 1, 2014 for the 2014-2015 biennium. She explained that Count 1 addresses the failure to renew and Count 2 addresses the continuing education requirements and provides for the opportunity for hearing. Ms. Reitz informed the Board members that there were approximately 100+/− of these to be sent out via certified mail.
Motion by Dr. Kaye, second by Ms. Johnston, to approve the notice(s) of opportunity for hearing be sent to all dental licensees who have failed to renew by the April 1, 2014 deadline.

Motion carried unanimously.

**Enforcement Update**

Ms. Reitz began the report by informing the Board that there were two (2) cases pending hearings, all of which have been assigned. She stated that there were two (2) matters pending the hearing officer’s report and recommendation. She indicated that there were currently forty-five (45) licensees under suspension and informed the Board members that there were three hundred and thirty-eight (338) active cases. Ms. Reitz said that there were eight (8) licensees currently considering QUIP, and six (6) licensees actively participating in QUIP. She informed the members that there were thirty-six (36) cases which have been investigated and reviewed by the Board Secretaries and are recommended to be closed with eight (8) warning letters issued. Ms. Reitz completed her report by informing the members that she had presented them with a report of cases which were over 90 days old. She stated that there are currently 135 cases over 90 days old and then broke down the number of cases by investigator.

Due to the requirement in Chapter 4715.03(B) of the Ohio Revised Code, that "A concurrence of a majority of the members of the board shall be required to... ...(6) Dismiss any complaint filed with the board.,” Ms. Reitz reviewed the cases to be closed with the Board.

The following cases are to be closed:

<table>
<thead>
<tr>
<th>Case</th>
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<tbody>
<tr>
<td>14-18-0090</td>
<td>13-31-0242</td>
<td>14-43-0118</td>
</tr>
<tr>
<td>13-03-0378-WARNING</td>
<td>13-18-0189-WARNING</td>
<td>13-18-0202</td>
</tr>
<tr>
<td>13-45-0377</td>
<td>14-18-0113</td>
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<td>14-25-0013</td>
<td>14-67-0102</td>
<td>14-18-0079</td>
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<td>13-18-0232</td>
<td>13-47-0370</td>
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<td>14-50-0109-WARNING</td>
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<tr>
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<td>13-36-0369</td>
<td>14-18-0045</td>
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<tr>
<td>13-31-0182</td>
<td>13-18-0348</td>
<td>13-47-0323</td>
</tr>
</tbody>
</table>

Prior to the vote to close the above listed cases, Dr. McDonald inquired as to whether any of the Board members had any personal knowledge that the cases that were being voted on today involve either themselves or a personal friend.

**Roll call:**

Ms. Aquillo - No  
Ms. Clark – No  
Dr. Das – No  
Dr. Hanners – No  
Ms. Johnston - No
Dr. Kaye – No
Dr. Leffler - No
Dr. McDonald – No
Ms. Missig – No
Dr. Shaffer – No
Dr. Smith – No
Dr. Wallace – No

Dr. McDonald then called for a motion to close the cases.

Motion by Dr. McDonald, second by Ms. Clark, to close the above thirty-six (36) cases.

Roll call vote:    Ms. Aquillo – Yes
                  Ms. Clark – Yes
                  Dr. Das – Yes
                  Dr. Hanners – Yes
                  Ms. Johnston – Yes
                  Dr. Kaye – Yes
                  Dr. Leffler – Yes
                  Dr. McDonald - Yes
                  Ms. Missig – Yes
                  Dr. Shaffer – Yes
                  Dr. Smith – Yes
                  Dr. Wallace – Yes

Motion carried.

Licensure Report

License/Certification/Registration Report (Approved by the Executive Office)
Jayne Smith, Licensure Coordinator, had prepared a report of the licenses, certificates, and registrations issued since the previous Board meeting.

Dentist(s)
Motion by Dr. Wallace, second by Ms. Missig, to approve the licensure report for the following dental licenses issued by a regional board examination:

Lauren C. Abrams    Kyle W. Krause
Kevin S. Albert     Jason M. Scherer
Deric R. Budendorf  Meenachi Sellapan
Kristin L. Donaldson Kavita M. Shah
William L. Hull III Heidi A. Stauffer
Bradley R. Johnson

Motion carried unanimously.
Dental Hygienist(s)
Motion by Ms. Clark, second by Ms. Missig, to approve the licensure report for the following dental hygiene licenses issued by a regional board examination:

Lynda S. Babarskis
Rhonda J. Carpenter
Megan J. Ciacci
Moriah M. Eubank
Lauren A. Heisler

Andreah D. Hill
Jessica A. Horton
Lindsey R. Maldonado
Sonja K. Moog
Radhika C. Patel

Motion carried unanimously.

Dental Assistant Radiographer(s)
Motion by Dr. Shaffer, second by Dr. Kaye, to approve the licensure report for the following dental assistant radiographer certificates issued by: acceptable certification or licensure in another state, certification by the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC), or successful completion of the Board-approved radiography course:

Peggy Ackerman
Stephany Alejandro
Autavia Angel
Deidre Arnold
Morgan Baldy
Cynthia Barber
Siaira Becks
Brittney Bevard
Ashley Boden
Kamisha Bonds
Laura Bowling
Elizabeth Bowman
Desiree' Branson
Sarah Bratcher
Katelyn Broughton
Ameenah Brown
Amy Brown
Carol Brown
Haley Bryant
Kelly Burkholder
Candace Burns
Kathryn Chilton
Angela Clark
Courtney Clark
Elly Clary
Aishah Coleman

Carol Cross
Shannon Cruz
Sarah Danks
Amanda D'arcy
Anna Dixon
Kristen Durfee
Jasmine Dye
Megan Dye
Sarah Dye
Jayson Faller
Kesley Farr
Hannah Fender
Arienne Ferguson
Cristina Florio
Amanda Ford
Lacey Frank
Dale Frye
Taylor Gardner
Avis Gary
Brooke Giles
Eric Glaze
Cassandra Gregory
Taylor Guecking
LaQuita Hackett
Brian Harris
Jennifer Harsh
Nicole Hencie
Laura Hensley
Jaylin Hewlett
Hailee Hill
Jennifer Hodginson
Melissa Hoskinson
Hanah Houghton
Kelley Hudson
Molly Huffman
Shelby Hulse
Andrea Hunter
Jessica Hunter
Talya Insley
Ashley Irwin
Kholoud Jallad
Danica Johnson
Elizabeth Johnson
La'kira Jordan
Emily Keller
Brittney Kidd
Brandi Kissel
Denise Kostansek
Amanda Kraska
Whitney Lamont
Makenzie Lauterbach
Brittany Lecomte
Glenna Lewis
Alena Lipaj
Stephanie Lively
Cari Mainous
Mindy Martin
Twana Matthews
Danielle May
Morgan McClure
Molly McMullen
Jessie Metcalf
Cara Mikesell
Jessica Miller
Rachael Milnes
Mohamed Mire
Leyla Mohamed
Jennie Monnin
Sylvia Munodawafa
Marissa Musarra
Ashley Myers
Erica Newsom
Aimee Nolting
Jeffrey Nugent
Kaylee Oiler
Whitney Olson
Brianna Osborne
Nancy Osborne
Nayana Patel
Jason Patterson
Stephanie Perry
Ashley Perrymond
Melina Pujagic
Yaryna Rapko
Chelsea Raymer
Patricia Rehl
Cassie Rice
Christian Riestra
Teresa Riozzi
Kylie Rose
Laerica Ross
Morgan Rucker
Syed Salahuddin
Amanda Shaver
Emilie Shields
Alexandra Simpson
Amber Sizemore
Ashley Smith
Courtney Smith
Hannah Smith
Jennifer Spetnagel
Janika Stanley
Tina Straubing
Cassandra Stuckey
Maria Stursa
Kristen Suchy
Miranda Swyers
Tammy Talucci
Bryana Tarpley
Kimberly Telek
Alyssa Thomas
Christine Thompson
Alexus Torres
Brianna Trivelli
Melanie Truskot
Harshit Upadayay
Carley Van Wye
Marisol Vargas
Emily Varner
Brittany Votroubek
Cayley Wagner

Motion carried unanimously.

Coronal Polishing
Motion by Dr. Hanners, second by Dr. Leffler, to approve the licensure report for the following coronal polishing certificates issued by: certification by the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC) and completion of the requirements necessary to obtain certification:

Leah M. Crum
Melanie A. Dube

Motion carried unanimously.

Expanded Function Dental Auxiliary
Motion by Dr. Kaye, second by Ms. Aquillo, to approve the licensure report for the following expanded function dental auxiliary registrations issued by: certification by the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC) and completion of the requirements necessary to obtain registration:

Cathy D Bollenbacher
Jessica J Brill

Motion carried unanimously.

Oral Health Access Supervision Permit(s)
Motion by Dr. Wallace, second by Ms. Clark, that the following applicants have met the requirements necessary to obtain permits to practice under the oral health access supervision program:

Dentist(s)
Marjolein Ancona, D.D.S.
Michael Wagenhauser, D.D.S.

Dental Hygienist(s)
Krista Ventresco, R.D.H.

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Motion carried unanimously.

**Reinstatement Application(s)**

Motion by Ms. Missig, second by Dr. Wallace, to approve the following reinstatement applications for licensure in Ohio:

**Dentist(s)**
Ronald R. Hathaway, D.D.S.

**Dental Hygienist(s)**
Tracey Conrad Alexander, R.D.H.
Bonnie S. Kahn, R.D.H.
Lisa Kiper, R.D.H.

Motion carried unanimously.

**Ad Hoc Board Operations Committee Report**

Dr. Kaye informed the Board that the Ad Hoc Board Operations Committee met earlier this morning to further its discussions on HB 463, the Ohio Board of Pharmacy proposal on Terminal Distributor of Dangerous Drugs Licensure, and Regional Board examinations. He stated that with regards to HB 463, it was explained to the members that the Board should review the Bill to determine whether the Board should support, oppose, or remain silent on proposed language with the protection of the public in mind. He said that the committee came to consensus and submits the following recommendations:

1) **Certified Dental Assistants practice when the dentist is not present**
   - While concern was expressed regarding the addition of tasks and performing tasks while the dentist is not present, it was decided that allowing this would not jeopardize the safety of the public and therefore the Board should remain silent on this issue.

2) **Temporary Volunteer’s Certificate**
   - The committee has no objections to this language. However, there was concern as to whether the Board has the authority to discipline a certificate holder if substandard care is given. It was determined that the Board still retains this authority under ORC 4715.30. Also, there was a logistical concern regarding implementation of the application within the “90 days after the effective date” of the Bill. It was suggested that the Board seek this language to be amended to read:
     
     “(G) Immediately after the effective date of rules adopted pursuant to paragraph (F) of this section, the state dental board shall make available…”

3) **Expanded Function Dental Auxiliary (EFDA) practice when the dentist is not present**
   - The committee feels that it is the prerogative of the Board to point out to the legislature the EFDA’s are not required to obtain continuing education (CE) to maintain their registration with the Board, unlike the licensed dental hygienist and the certified dental assistant who must obtain 24 hours of CE to maintain their licensure and certification respectively. The Committee would like the Board to suggest to the legislature to consider educational requirements/components for EFDA’s.
Continuing on, Dr. Kaye stated that the committee tabled its discussions regarding the Ohio Board of Pharmacy Proposal on the Terminal Distributor of Dangerous Drugs Licensure for dentists since dentists are now being exempted from the provisions. He said that it is the Board’s wish to continue to approach the Pharmacy Board to consider cross-training of investigative personnel without the need for legislative language.

As to the Committees discussion on the regional board examinations, Dr. Kaye stated that Ohio accepts the four (4) regional board exams; NERB, CRDTS, SR TA, and WREB. He stated that the board looked at the other examinations of testing agencies and at this point in time, SR TA being another administrator of the ADEX examination is a likely candidate for Ohio to pursue membership. He explained that further information involving personal contact would be beneficial before any decision is made.

Anesthesia Committee Report

Provisional Conscious Sedation Privilege(s)
Dr. Wallace stated that the following individuals have applied for conscious sedation permits. He explained that the Anesthesia Committee has reviewed the applications and the applicants are recommended to receive provisional conscious sedation privileges in the appropriate modality.

Dr. Thomas Niederhelman – Columbus - Intravenous
Dr. Vikas Puri – Dublin – Intravenous
Dr. James A. Striebel – Huber Hts - Intravenous

Anesthesia Permit(s)
Dr. Wallace stated that the following individuals have applied for anesthesia permits. He explained that the Anesthesia Committee has reviewed the applications, evaluations have been conducted, and the applicants are recommended to receive anesthesia permits.

Dr. Shaheen Moezzi – Columbus
Dr. Keith Schneider - Mentor
Dr. Jill M. Weber – Pepper Pike

Conscious Sedation Permit(s)
Dr. Wallace stated that the following individual has applied for a conscious sedation permit. He explained that the Anesthesia Committee has reviewed the application, an evaluations has been conducted, and the applicant is recommended to receive a conscious sedation permit.

Dr. Bradley M. Frey – Liberty Township – Intravenous
Dr. Bryan J. Simone – Grove City - Intravenous

Dr. Wallace made the motion from the Anesthesia Committee to accept the report and approve these applicants to receive permits and provisional privileges.

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Motion carried unanimously.

**Education Committee Report**

Ms. Clark informed the Board members that the Education Committee met earlier that day and reviewed two (2) sponsor and two (2) sponsor renewal applications for 2014-2015. She informed the members that the Committee was recommending approval of all the sponsors and courses listed as meeting all the requirements set forth in the Dental Practice Act.

Ms. Clark explained that they reviewed one (1) Continuing Education Extension/Waiver request and the Committee is recommending that the licensee be granted a one-year extension to obtain the required 40 hours of continuing education (CE) due to unusual circumstance and special hardship.

**2014-2015 Biennial Continuing Education Sponsor Application(s)**

Advanced Periodontal Center  
Drs. Benninger, Schween & Schmidt

**2014-2015 Biennial Continuing Education Sponsor Renewal Application(s)**

American Association of Dentists of International Origin  
Karen K. Daw, M.B.A., C.E.C.M.

**Continuing Education Extension Request(s)**

Ms. Clark informed the Board that the Education Committee had reviewed a request for extension of the continuing education requirement based on unusual circumstance, emergency or special hardship and has recommended the following individual to receive an one-year extension of the continuing education requirement for the 2012-2013 biennium:

Taban Lofti, D.D.S. License # 30.021734

Continuing on, Ms. Clark informed the members that Dr. McDonald had presented to the Committee indicating that he would be attending a course on Botox which had been offered at the American Association of Dental Boards (AADB) and that he would be providing information back to the Committee. She stated that Dr. McDonald had also requested to attend a course offered by DOCS Education regarding sedation in dentistry. A brief discussion ensued wherein it was determined that this educational provider is known to the Board and that while their coursework is acceptable for continuing education, it is not education that leads to any type of Conscious Sedation/Anesthesia Permit that is issued in Ohio.

Continuing on, Ms. Clark stated that the Committee revisited its discussions regarding the definitions of the different types of education; initial education, continuing education, and remediation education. She stated that the Board deals with all these modalities of education within the law but that the Committee feels that these definitions should be included. Therefore, she indicated that the Committee members will be providing their thoughts and ideas beginning with the definition remediation education and educational sponsors of remediation education. She stated that the Committee would further their discussions at its next meeting in May.
Concluding, Ms. Clark stated that the members briefly discussed the final topic on their agenda regarding the limited continuing education license with regards to “approved practicums” She stated that she has asked Ms. Franks to obtain information from the Academy of General Dentistry, as one of the approval entities listed in the Dental Practice Act, as to their approval process.

**Ms. Clark made the motion from the Education Committee to accept the report and approve the applications and request for extension of continuing education.**

Motion carried unanimously.

**Scope of Practice Committee Report**
Dr. Das informed the members that the Scope of Practice Committee met earlier that morning to discuss two (2) issues:

1. Whether a Registered Nurse can administer Lidocaine to a patient under supervision of a dentist who is expanding his practice to include administration of Botox and dermafillers. The Nurse also has provided the added service of permanent makeup application under the direction of a licensed medical practitioner; and
2. Whether a Licensed Practical Nurse can induce nitrous oxide-oxygen (N2O-O2) without the supervising dentist being present.

Dr. Das stated that the Committee had a lively discussion ultimately confirming that the administration of Botox and dermafillers, administration of N2O-O2, and application of permanent makeup or tattooing in the maxillofacial area and/or its adjacent and associated structures are within the scope of practice of dentistry. However, although these services are all within the scope of practice of dentistry. He stated that the Committee determined that with regards to these requests, these individuals and/or their supervising dentists should seek guidance from their own attorneys or the regulatory board which issued their license to practice.

**Dr. Das made the motion from the Scope of Practice Committee to accept the report.**

Motion carried unanimously.

**Supervisory Investigative Panel Report**
Dr. Shaffer, as Secretary, attested that she had spent in excess of twenty (20) hours per week attending to Board business. Dr. Das, as the Board’s Vice Secretary, attested that he had spent in excess of twenty (20) hours per week attending to Board business.

**Motion by Dr. Wallace, second by Ms. Aquillo, to approve the Supervisory Investigative Panel report.**

Ms. Reitz informed the members that at Dr. Hanners urging, she had researched and determined that an increase which had been requested in the previous budget submission had been approved. She stated that from this point forward both Board Secretaries would be receiving compensation for up to twenty (20)
hours per week. Additionally, she stated that they would also be receiving back-pay from July, 2013 to present.

Motion carried unanimously.

Office Expense Report

Motion by Dr. Wallace, second by Ms. Aquillo, to approve the expense report and approve payment of the March 2014 Board bills.

Motion carried unanimously.

Executive Director’s Report

Board Member Appointments

Ms. Reitz told the Board the unfortunate news that Dr. Beard had not been reappointed to a second term. She commented that she intends to have a dinner meeting for all the Board members to attend in the near future for him and outgoing member, Dr. Wallace. She offered congratulations to Dr. Shaffer, whom she had earlier that day been informed had been reappointed to the Board. Board members offered their congratulations.

Testimony on House Bill 463

Ms. Reitz informed the members that earlier in the day she had provided testimony to the House Health and Aging Committee (Committee) on behalf of the Board regarding HB 463. She stated that most of her testimony focused on their concerns with PGY1 (Appendix B). She stated that others, including former Board member, Mark Armstrong, D.D.S., had provided testimony on several issues in the bill, specifically, Dental Health Aide Therapists (DHAT’s), regional board examinations, and the expansion of duties for dental auxiliary. Ms. Reitz commented that there was much testimony in support of DHAT’s.

Ms. Reitz stated that the members of the Committee had asked questions of her regarding the opiate issues and were pleased in the Board’s efforts to address the issues of prescription drug abuse. She stated that she was able to share a copy of the Board’s concerns regarding the elimination of an independent examination of skills and assessments with the Committee. She informed the members that the Committee only had five (5) members in attendance and there was no vote taken in regards to the bill.

A copy of the Board’s letter (Appendix C) regarding HB 463 to Dr. Paul Casamassimo, President of the Ohio Dental Association (ODA) was distributed. Ms. Reitz reminded the members that she and Kevin Coughlin had met with Daryl Dever and Keith Kerns, Director of Legal and Legislative Services, regarding two (2) provisions of the Dental Practice Act that have an adverse impact on Board operations: term limits for hearing examiners and the QUIP coordinator. She stated that this letter was sent regarding these two (2) specific concerns, as requested, and sought for the ODA to assist the Board in any legislative changes needed in this regard.
Anything for the Good of the Board

QUIP Update
Dr. Smith explained to the members that it had been tough being appointed as the QUIP Coordinator at his first meeting last December. He stated that prior to this appointment he did not have any knowledge regarding this position, however he felt that the skillset he has brought to QUIP is management. Dr. Smith distributed copies of his curriculum vitae (Appendix D) and then highlighted his qualifications. He then distributed a copy of his document “First Annual QUIP Report to the Board” (Appendix E) for their review.

Dr. Smith commented that he felt that when his predecessor, Dr. Beard, took over as QUIP Coordinator he inherited a lack of an organized approach and that he was trying to keep everything in his head. Dr. Smith stated that having no satisfactory base in which to begin and trying to understand the program he decided to first assess the function of QUIP. He stated that he determined that there was no vision or unified management approach to the program and has made some general observations: there needs to be a tracking of movement through the program by the licensees and a vision or value for licensees of the cost of services vs. the result of the end users. Dr. Smith then highlighted points of his report for the Board.

Discussion ensued wherein Ms. Reitz provided a brief history of the QUIP Coordinator position. She stated that it was originally a paid position of the Board in which a licensed dentist was employed by the Board as coordinator of the program. Subsequently, she stated that the position was changed legislatively to be an appointed member of the Board and that the program lost continuity as the appointments of the coordinator were made annually. She explained that this issue has been discussed several times over the past few years and that the letter to Dr. Casamassimo of the ODA was a request for their assistance in a change in the legislation in this regard. Ms. Reitz commented that while it is commendable that Dr. Smith has expressed his desire to remain as QUIP Coordinator for this four (4) year term, the Board is asking that an amendment be made to HB 463 to allow for the option to hire a QUIP Coordinator as a staff member for such continuity purposes if this becomes necessary.

Dr. McDonald thanked Dr. Smith for providing his report to the Board and offering his viewpoints on the QUIP.

American Association of Dental Boards
Dr. Shaffer briefly reported on her recent attendance to the American Association of Dental Board meeting. She stated that one of the topics of major focus was the recent increase in anesthesia deaths in dental offices and the response from the American Medical Association. She stated that Dr. Joel Weaver was one of the presenters and that he spoke to the possibility in the near future of switching from pulse oximeters to carbon dioxide monitoring and that he sees mandatory coursework on airway management on the horizon.

Continuing, Dr. Shaffer said that the Executive Director of the Oklahoma Board of Dentistry, Susan Rogers, Esq., gave a lively presentation on how to handle a “media event” in light of the recent incidence of the dentist who infected several patients with Hepatitis B. She stated that the most important point that Ms. Rogers provided was that Dental Board members should not provide comments to the media but rather allow an appointed spokesperson for the Board, such as Ms. Reitz, to handle appropriately.
Dr. Shaffer informed the members that one other issue that had been discussed was regarding continued competency testing. She stated that they mentioned that many pediatric dentists and oral surgeons remain testable for every five to ten (5-10) years.

Dr. McDonald thanked Dr. Shaffer for providing this information from the meeting.

**Adjourn**

Dr. McDonald adjourned the meeting at 3:09 p.m. He reminded the Board members that their next meeting would be April 23, 2014.

[Signatures]

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Gregory A. McDonald, D.D.S.
President

Marybeth Shaffer, D.D.S.
Secretary
Appendix A

Testimony on HB 463 by Mark A. Armstrong, D.D.S.
Chairman Wachtmann and Members of the House Health and Aging Committee -

I am Mark Armstrong, a practicing general dentist for the past twenty-four years in Troy, Ohio; ODA member; and past president of the Ohio State Dental Board. Thank you for the opportunity to present interested party testimony for House Bill 463. I would like to discuss how the provisions of House Bill 463 and regional board exams affect the people of Ohio.
FIVE REGIONAL BOARDS THAT ADMINISTER DENTAL EXAMS

1. North East Regional Board - NERB
2. Southern Regional Testing Agency - SRTA
3. Council of Interstate Testing Agencies - CITA
4. Central Regional Dental Testing Service - CRDTS
5. Western Regional Examining Board - WREB

RECOGNITION OF DENTAL EXAMS IN OHIO

- The state of Ohio recognizes four of the five board exams for initial licensure for dentistry. CITA was established in 2005, a year and a half after ORC 4715 was changed to recognize the then-currently existing four regional boards.
- While Ohio recognizes four different regional boards, is this appropriate? Are they equivalent?
WREB EXAM

- Endodontic (root canal) exam on extracted teeth, mounted in arch and performed on a manikin
- Restorative (fillings)
  - 2 procedures from 4 options
    - Posterior class II amalgam
    - Posterior class II composite
    - Anterior class III composite
    - Posterior class II casting
- CSW Computer based exam Patient Assessment & Treatment Planning (PATP)
- Periodontics (prophylaxis or cleaning)
  - Patient-based scaling & root planing of 8 surfaces with a 60% requirement to pass

CRDTS EXAM

- Manikin
  - Endodontics (root canal)
    - Access preparation #14 plastic tooth
    - Anterior #8 access, instrumentation and obturation, plastic tooth
  - Prosthodontics (crowns or bridges)
    - #5 PFM, bridge abutment plastic tooth
    - #3 Full gold, bridge abutment plastic tooth
    - #9 Full ceramic, plastic tooth
- Periodontics (prophylaxis or cleaning)
  - Scaling exercise
- Restorative (fillings)
  - Anterior
    - Class III Composite
  - Posterior
    - Class II Amalgam prep with an amalgam or composite restoration
NERB, SRTA AND CITA

- These three testing agencies all administer the board exam developed by the American Board of Dental Examiners (ADEX)

NERB, SRTA AND CITA

- ADEX Exam
  - Computer Diagnostic Skills Exam (DSE)
    - Comprehensive clinical diagnosis and treatment planning
  - Manikin
    - Endodontics (root canal)
      - Posterior access prep #3, plastic tooth
      - Anterior #8 access, instrumentation and obturation, plastic tooth
    - Prosthodontics (crowns or bridges)
      - #9 full ceramic crown, plastic tooth
      - #21 PFM, bridge abutment, plastic tooth
      - #19 Full gold, bridge abutment, plastic tooth
NERB, SRTA AND CITA

- ADEX Exam (cont.)
  - Restorative (fillings)
    - Anterior
    - Class III Composite
  - Posterior, Candidate’s choice of 1 of the following
    - Class II Conventional Composite
    - Class II Posterior Box prep
    - Class II amalgam
  - Periodontics (prophylaxis or cleaning; patient based/optional 2013)
    - Calculus detection/removal

OCCUPATIONAL ANALYSIS

- Alpine Testing Solutions (a company that does psychometric validity evaluations of tests) report published 12/21/2011 identified the dental procedures done and their frequency for entry level dentists (less than 5 years post-graduation)

- The ADEX exam is the only dental exam that tests candidates in all four areas identified as critical by the most recent occupational analysis

- One of the initial steps in test development is to outline the depth and breadth of the content area domains that will form the basis for the examination
CONSEQUENCES OF ACCEPTING ALL BOARDS

- By accepting multiple board exams, Ohio has already licensed candidates who may not have:
  - Demonstrated competence in oral diagnosis - this is not tested in the WREB or CRDTS exam
  - Demonstrated competence in treatment planning - this is not tested in the CRDTS exam
  - Demonstrated competence in endodontics - there is no choice of teeth in the WREB exam
  - Demonstrated competence in prosthodontics - this is not tested in the WREB exam

WHY THE ADEX EXAM?

- The only dental exams that the state of Ohio has input on are the dental exams developed by ADEX.
- ADEX is a test development board serving its member state dental boards in developing valid and reliable initial licensure examinations in dentistry and dental hygiene.
- ADEX has 34 member states and territories.
- The ADEX exam is accepted for initial licensure in 46 U.S. licensing jurisdictions.
- ADEX does not administer any exams nor does its compensation increase as market share increases.
- ADEX is an organization of state dental boards, not testing agencies.
WHY OHIO SHOULD NOT ACCEPT THE CRDTS OR WREB EXAM

○ Both CRDTS and WREB develop and administer their own dental exams. Ohio has no input on the content, development or administration of these exams.

○ WREB does not test their candidates on crown and bridge, yet that is one of the primary duties performed by a dentist.

○ CRDTS does not test their candidates on comprehensive diagnosis and treatment planning, yet every dentist must know how to do that before performing treatment.

SUMMARY

The Ohio State Dental Board (OSDB) is charged with protecting the citizens of Ohio. In order to fulfill its duties, dentists and dental hygienists should pass a licensing exam in which the OSDB has input. The ADEX exam is the only exam in which Ohio has input. The OSDB has no voice in the content of the WREB or CRDTS exams. Protect the citizens of Ohio and amend ORC 4715 so that Ohio accepts the ADEX exam for initial licensure instead of accepting all regional exams.
PROPOSED AMENDMENT

Please amend the following:

Sec. 4715.10.

(D)(1) Have taken an examination administered by any of the following regional testing agencies: the ADEX exam and received on each component of the examination a passing score as specified in division (A) of section 4715.11 of the Revised Code: the central regional dental testing service, Inc., northeast regional board of dental examiners, Inc., the southern regional dental testing agency, Inc., or the western regional examining board;

Again, I would like to thank the members of the committee for the opportunity to present testimony on House Bill 463. The oral health of the citizens of Ohio will better protected and they will benefit greatly from your support of this important amendment. I would be happy to answer any questions that you may have.
Appendix B

Testimony on HB 463 by Lili C. Reitz, Esq.
Chairman Wachtmann and members of the House Health and Aging Committee, thank you for the opportunity to give interested party testimony regarding HB 463.

My name is Lili Reitz and I am the Executive Director of the Ohio State Dental Board. The mission of the Ohio State Dental Board, as set forth by the Ohio Revised Code, is to protect the public through licensure, regulation and enforcement. Through Licensure, the Board assesses the qualifications outlined in the Dental Practice Act. Those qualifications currently include graduation from an accredited dental school and passing of the independent clinical licensure exam.

The clinical examination process is one unique to the profession of dentistry. In 95% of the states in the United States, in order to be licensed as a dentist, one must pass an independent clinical licensure examination. Most states belong to one of four regional exam agencies who administer a valid clinical licensure exam. While Ohio is a member of the North East Regional Board (NERB), and the Board members serve as examiners for NERB, our law accepts a passing score from any of the regional board exams to qualify for licensure in the state of Ohio.

The Board is a strong supporter of this requirement for licensure, and believes that this requirement should not be eliminated. As previously stated, members of the Board serve as clinical examiners for NERB. They personally see the work performed by the applicants, and determine whether the work that was done in the exam meets the minimal standards of care for the profession. Not every candidate passes the examination. The exam is critical to ensuring that an applicant is safe to practice dentistry on Ohio’s dental care consumers.
While residency training is beneficial, and gives students more experience in directly providing care to patients, residency programs are not structured nor created to serve as a baseline for licensure determination. Residency programs are not standardized and this vary from one hospital or university to another. The clinical exam, however, is standardized, and examiners are calibrated to ensure they are evaluating the work performed by the candidates based on clearly established criteria set forth and approved by the examination entity. The exam is psychometrically evaluated and is deemed a legally reliable and valid measure for assessing clinical skills for licensure purposes.

HB 463 as written contains a provision that allows dental school graduates who, upon subsequent completion of a 1 year residency program referred to as PGY1, can qualify and be issued a license as a dentist in the state of Ohio without having passed the clinical licensure examination.

As all other health care professions (and many other non-health care related professions as well), require an independent examination for licensure purposes, this provision goes against the simple fundamental method of the development of clinical professionals, such as dentists. This method requires the testing of an experiment to prove whether the experiment is a success. In other words, this PGY1 concept of licensure eliminates the control (the examination), that is used to prove that the experiment (dental education), is true (competence).

When the Board grants a dental license to an individual, it is asserting that the experiment was successful; that the applicant graduated from dental school and was able to prove that that education was learned. In order to make that assertion, the use of an independent examination to test competence is a vital component of this method. PGY1 eliminates this measure of proof, which is the standard methodology in the granting of a license in all other health care professions.

The purpose of the exam is to test competence. The occasional discovery of incompetence validates the process. The question “Is this person competent to practice dentistry in Ohio?” can be proven by a method that includes independent examination. This method is fundamental and sound.
The Dental Board applauds the Ohio Dental Association's goals and supports many of the provisions in HB 463. However, our members have strong concerns about the provision I have discussed today.

The Board believes that while there is great value in the experience obtained in participating in a residency after graduation from dental school, and encourages such participation, the Board does NOT believe that eliminating the independent examination is rational when public safety and confidence is at risk. The consensus position of the Board is to respectfully ask for the removal of this provision as written from HB 463.

Thank you and I'd be happy to answer any questions at this time.
Appendix C

Letter to the Ohio Dental Association

Regarding HB 463
April 3, 2014

Dr. Paul Casamassimo, President
Ohio Dental Association
1370 Dublin Road
Columbus, OH 43215

    Re:    HB 463

Dear Dr. Casamassimo,

On behalf of the Ohio State Dental Board (Board), I am writing to inform you of our concerns regarding two provisions of the Dental Practice Act that are having an adverse impact on our operations.

Term Limits for Hearing Examiners:

As you are aware, the Board contracts with attorney hearing examiners to conduct administrative proceedings and to issue Reports and Recommendations to the Board before final action. These examiners are paid $85/hr. and by doing so, agree to take time out of their own practices to work with the Board and the attorneys involved to accommodate requests for hearing.

Section 4715.037 of the Revised Code limits the number of consecutive terms our hearing officers can serve.

The Board seeks to repeal this provision for the following reasons:

- The Ohio State Dental Board is the only board in Ohio that has any such limitations;

- The need for experienced and knowledgeable hearing officers is imperative and beneficial to Board, the licensee, and the public;

- We believe that the provision was championed four years ago by the defense bar and that its origin was a personality conflict at that time.
That conflict no longer exists and the Board has received no complaints about our current hearing officers since passage of this provision;

- The Board believes that the Board’s hearing provisions and the Administrative Procedures Act set forth in the Revised Code adequately protect licensees facing disciplinary hearings without this provision.

QUIP Coordinator

Ohio Revised Code section 4715.031 (B)(3) states that the only a Board member may serve as the QUIP Coordinator.

Prior to this statutory change, the Board had the option to either contract for services for this purpose, or appoint a Board member to serve in this capacity. By mandating that a Board member serve as the QUIP coordinator, the Board is limited in selecting someone with the time, knowledge and motivation to work with dentists who elect to participate in this program. The Board would like to see that limitation removed from the Practice Act as well.

We hope that the Ohio Dental Association will work with us to remedy these issues at the first-available legislative opportunity. Time is of the essence as we are nearing the end of terms for some of our officers, and we would also like to have options to ensure that the QUIP program moves forward successfully.

The Board requests that the ODA and its staff assist in facilitating this change with an amendment to House Bill 463 or to any other related legislation that may see passage this year.

Kindest regards,

THE OHIO STATE DENTAL BOARD

GREGORY A. MCDONALD, DDS
President
Appendix D

Curriculum Vitae of Charles C. Smith, D.D.S., QUIP Coordinator
CURRICULUM VITAE


PERSONAL
Home Address: 220 N. Garber Drive
Tipp City, OH 45371

Date of Birth: December 18th, 1941

Marital Status: Married: Wife, Loraine Helen
Daughters: Jill Catherine; Wendy Elizabeth
Son: Adam Ross

EDUCATION
1960 to 1962 Ohio Wesleyan University
1962 to 1964 The Ohio State University (B.A.)
Arts-Dentistry Program
Major- Sociology
1963 to 1967 The Ohio State University
College of Dentistry (D.D.S.)
1967 to present Postgraduate Courses in Dentistry:
The Ohio State University
Indiana University
University of Kentucky
Case Western Reserve University
Others

RECOGNITION AND HONORS
Vietnamese Cross of Gallantry, 1968
Navy Commendation Medal, 1968
Republic of Vietnam Campaign Medal with Device, 1968
Vietnamese Service Medal, 1968
National Defense Medal, 1968
Fellowship, Academy of General Dentistry, 1976
Mastership, Academy of General Dentistry, 1986
Federation Dentaire International, 1987
Pierre Fauchard Academy, 1992
Blue Chip Award, National Chamber of Commerce, 1992
Honorary degree from Beta Gamma Sigma, Wright State University, 1994
Tipp City Citizen of the Year 2012

PROFESSIONAL ORGANIZATIONS AND MEMBERSHIPS
Western Ohio Dental Society
Member, 1970 to Present
Secretary, 1971 to 1976
Vice-President, 1976
President-Elect, 1977
President, 1978
Alternate Delegate, 1979
Dayton Dental Society
   Associate Member, 1976 to Present
Ohio Dental Association
   Member 1970 to Present
   Committee to Restructure ODA, 1979
   Participation in Options program 2000 to present
American Dental Association
   Member, 1967 to Present
Academy of General Dentistry
   Member, 1972 to Present
Ohio Academy of General Dentistry
   Member, 1970 to Present
   Regional Director 1977 to 1978
Montgomery County Joint Vocational School (Dayton, Ohio)
   Advisory Board, 1976 to 1977
   President, 1978 to 1980
Society for Occlusal Studies
   Member, 1979 to 1987
   Program Coordinator, 1979 to 1984
Tipp City Study Club (AGD approved)
   Member, 1981 to 2001
   President, 1981 to 2001
Better Health Co-op (Yellow Springs, Ohio)
   Member 1973 to 1984
   Board of Directors, 1974 to 1979
Area Health Education Center (Federal)
   Board of Directors, 1979 to 1986
   Secretary, 1979 to 1982
   President, 1983 to 1984
PEP Spokesman for Dentistry, through the Ohio Dental Association
   1978 to Present
American Society of Dentistry for Children
   Member, 1970 to 2000
Organization for safety, Asepsis and Prevention
   Member, 2004 to present
American Equilibration Society
   Member, 1981 to 2010
American Society of Preventive Dentistry
   Member, 1970 to 1980
Society of Geriatric Dentistry
   Member, 1983 to 2006
International Analgesia Society
   Member, 1980 to 1983
American Association of Dental Group Practice
   Member, 1976 to 2008
American Academy of Cosmetic Dentistry
   Member, 1988 to 2009
American Society of Quality
   Member, 1993 to Present
American Academy of Dental Sleep Medicine
   Member, 2006 to Present
World Congress of Minimally Invasive Dentistry
   Member, 2004-2007
American Academy of Pediatric Dentistry
Member, 2010

CIVIC AND SOCIAL MEMBERSHIPS
United Methodist Church, 1941 to present
The Ohio State University Alumni Association (life membbr)
Tipp City Jaycees, 1970 to 1977
Tipp City Chamber of Commerce, 1970 to Present
Tipp City Area United Fund
   President, 1973 to 1975
   Member 1972-1979, 2005-2008
Tipp Monroe Community Services
   Board of Directors, 1975 to 1978
Tipp Improvement Corporation, 1977 to 2005
Association of Retarded Citizens
   Member, 1984 to Present
STEAM (science, Technology, Engineering, and Math)inc.
   President 2005- 2008
   Member 2005- present
American Automobile Association – Miami County
   Board of Trustees, 1981 to 1983
   Board of Directors, 1983 to 2000
   Vice-Chairman, 1985 to 1998
   Chairman 1998 to 2000
American Automobile Association – Cincinnati
   Board of Directors 2000 to 2003
Tipp City Band Parents, 1985 to 1995
Tipp Athletic Boosters, 1982 to 1995
MAAD, 1982 to Present
Business Advisory Council for Tipp City Schools, 1993 to 2001
   Chairman of Curriculum Review Committee, 1994, 1995
Team dentist for all sports at Tippecanoe High School, 1994 to 2005
Community Alive, 1995 to 1997
Science, Technology, Engineering, and Math Inc (STEAM):
   Co-founder and President- 2006 to 2009
   Member 2006-Present

WORK EXPERIENCE
U.S. Navy, assigned to Marines
   Vietnam
   U.S. Navy, assigned to Marines
   Quantico, Virginia
   1967 to 1968
   1968 to 1970

General Practice of Dentistry
Tipp City, Ohio
   1970 to Present

Johnson Nursing Home, Troy, Ohio
   Dental Consultant
   Riverside Adult Day Care Center
   Annual preventive care visit
   1979 to 1990
   1987 to 2006

Miami County Jail inmate emergency care
   1995 to 2005

The Villa Convalescent Center, Troy, Ohio
   Dental Consultant
   Ohio Options program for poor
   1980 to 1990
   1994 to present
Caldwell House, Troy, Ohio 2001 to 2004
Dental Consultant

OTHER RELEVANT DATA
Organized and coordinated Tippecanoe Health Center, Tipp City, Ohio 1977

Organized Planned Health Partners, Inc. to help small companies administer employee health plans. 1981

Reorganized the Tippecanoe Health Center into HealthPark SM, structuring the interrelationships between Good Samaritan hospital, seven different medical specialties, and the existing six dentist facility into a core health facility for the area. 1986

Published article in Ohio Academy of General Dentistry, "How to Choose a Computer System." 1988

Published article in Dental Update, "Using a Manual System for Staff Management" 1989

Western Ohio Dental Society, Peer Review Chairman 1992 to present
Business of the Year, Awarded by Tipp City, Ohio 2005

Citizen of the Year 2011
Awarded by Tipp City Chamber of Commerce


AAAHC Accreditation 2004-2011
Appendix E

First Annual QUIP Report to the Board

By Charles C. Smith, D.D.S.
First Annual QUIP Report to the Board

From QUIP’s funding by legislative action on May 15, 2003 until Dr. Beard assumed the coordinator’s position 2 years ago, I have no knowledge. However, at my first Board meeting in December 2013, I was appointed coordinator of QUIP. When Dr. McDoandal explained to me that its function was to help troubled dentists to improve identified, substandard skills so they could safely and more effectively serve their patients, I was very excited.

I spent December and January learning about the Board - who’s who, functions, and relationships to individuals and groups inside and outside of the Board. During this time, I was the QUIP coordinator and had no idea what I was doing. Fortunately, Dr. Beard, who had been QUIP coordinator since 2011, offered to continue running QUIP unofficially and took on the responsibility of orienting me. I also met Heidi Massaro, the Board’s compliance coordinator, who was assigned as QUIP’s secretary. She proved to be very knowledgeable and quickly showed herself to be “the power behind the throne”. She has the intelligence, experience, and dedicated to QUIP’s goals to keep each troubled dentist on track through the remediation process.

By February, I had learned enough about the general functions of the Board and what was expected of me at Board meetings. In the meantime, Dr. Beard and Heidi kept QUIP running.

Dr. Beard and I had planned to update the Board together on the state of QUIP; however, he found out last week that his term expired in April and he was not reappointed.

This brings us up to February of this year. I found in Dr. Beard a very intelligent, experienced, and caring person who had dedicated a significant portion of his professional life to serving in a variety of capacities to improve organized dentistry while running his 2-location general practice here in Columbus. Unfortunately, Dr. Beard kept QUIP’s management in his head. It is a tribute to Dr. Beard’s intelligence and Heidi’s skill that they kept these 20 or more cases progressing as well as they did through the approximately 10 step remediation process involving SIP, 2 universities, and the 3 person QUIP panel.

Since mid-February, I have been focused on understanding QUIP. I believe, at least in Ohio, that I bring a set of organizational skills to take QUIP from the casual approach I found to a tightly organized and smoothly functioning organization.

My skill set for managing QUIP includes:

1. Building one of the most diverse dental practices combining specialists and GPs in Ohio

2. Focus on my dental skills – I am 1 of about 60 Masters in the Academy of General Dentistry in Ohio, which recognizes several thousands of hours of continuing education. This resulted in HealthPark being 1 of 13 offices to receive
the maximum 3 year accreditation for quality of patient care by the American Academy of Ambulatory HealthCare – the non-hospital branch equivalent to the JCAHO

3. Finally, over 20 years of management training, in the American Society of Quality’s Baldrige Award process, resulting in 14 annual local and state Baldrige awards for organizational excellence. To my knowledge, we are the only office to receive this honor nationally.

So this is the skill set I bring to QUIP. What I found amazed me. Dr. Beard, with very little, if any, training in organizational management, had, through the brute force of caring for the principles of QUIP and Heidi’s support, maintained the general direction. However, none of the functions were documented and, as a result, some things happened, some things didn’t, until a dysfunction became so apparent it would be dealt with.

Recognizing this lack of an organized approach, I began to write down my observations concerning QUIP’s various processes. These observations have grown to 2 volumes.

So, to summarize what I have accomplished so far with QUIP:

- December to mid-February – understand the Board
- February – assess the functioning of QUIP and begin documenting its various processes
  1. There is no unifying vision to measure success or failure
  2. Each case is viewed by itself with no unified management approach
- End of March – basic understanding of QUIP complete and initial documentation complete

This leads me to general observations:

(1) We need to track the speed of movement through the process by licensees

(2) The Baldrige principle implementations:
  (a) A vision – why do we do what we do. I have begun actually talking with the involved dentists. They have my home number to call if they have a problem.
  (b) An evaluation of the processes we use to create value to our licensees during the remediation process.
  (c) The cost of providing these services
  (d) The results as determined by the end users
My understanding and effectiveness has gone from 0% in December to 30% in March, and to 50% today. I project a 65% efficiency by the end of June, and a 75% efficiency by the end of the year. I will do this by instituting many basic, modern organizational concepts

1. Statistical management

2. A value added Baldrige approach to improve communication/service by focusing on the customer

3. Flow chart analysis

4. Annual reviews

5. Vision development

6. Vendor analysis

7. Continuous improvement

8. Quality circles

And more. Now, I will take questions; however, I have one even more important order of business concerning the future of QUIP to discuss and I do not want to impose on the Board’s time. I have copies of this report and my CV.

Questions?