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From: Jaclyn Gleber [mailto:JaclynGleber@comcast.net]

Sent: Sunday, September 28, 2008 11:13 PM

To: IRRC@IRRC.state.pa.us; Grovich, Christopher

Subject: support for RDH scope of practice regulations

Dear Colleagues on the State Board of Dentistry and IRRC,

Please see attached letter in support of the RDH Scope of Practice Regulations and thank you for your time and consideration.

Respectfully,

Jaclyn Gleber, RDH, BS, M.Ed, Ed.D.
Education and Outreach Coordinator,
Chester County Community Dental Center
Coatesville, PA 19320

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2008 OCT -9 AM 9:22
INDEPENDENT REGULATORY
REVIEW COMMISSION

Mr. Chris Grovich, Esq.
PA State Board of Dentistry
Harrisburg, PA 17105-2649

September 26, 2008

Dear Colleagues,

As a Registered Dental Hygienist for 33 years, clinician, faculty member, researcher, advocate, administrator and currently in Public Health as Education & Outreach coordinator for Dental Health Professional Shortage Areas (DHPSA) in Chester County, I am thrilled to see the proposed revisions to the PA Dental Hygiene Scope of Practice. These measures are more reflective of the health promotion and educational mission of our dental hygiene profession.

Dental hygienists began as disease prevention, public health educators visiting schools, homes and institutions in 1903, "promoting and educating the public on mouth hygiene" (Motley, 1986). It was not until several years later that dental hygienists were sequestered in dental offices where more affluent patients would seek regular dental care.

One hundred years later the outcomes of this 'limited access to the public' are apparent with children's cavities being the most common disease of childhood. Approximately 55% of the public visits a dental office regularly; leaving 45% who visit occasionally in pain, use the emergency room services repeatedly or access sporadic care due to lack of financial resources, limited acceptance of welfare insurance, CHIP and MA or simply lack a dental office in many rural townships. The proposed Public Health Dental Hygiene Practitioner (PHDHP) will help refocus and re-allocate preventive, educational and therapeutic dental services to meet the needs of our broader public.

Public Health Dental Hygiene Practitioners will be able to significantly reduce the incidence of cavities, diminish the progression of gum disease and provide health promoting therapeutic services. However, to meet this need, I **encourage the State Board of Dentistry to work with the DPW to facilitate direct reimbursement of RDHs** who choose to provide preventive and therapeutic dental care to our underserved communities. PHDHPs will be positioned to screen/recognize and refer active dental disease to our dentist colleagues in greater numbers as they access more populations in need. This positive oral health influence and increased access to preventive dental care in **free and nonprofit dental centers along with FQHC centers** will decrease the prevalence of dental disease and reduce the excessive costs of emergency dental care.

In closing, I thank you for supporting the proposed revisions to our Dental Hygiene Scope of Practice and ask that the level of RDH **supervision be determined by the DMD and RDH in collaboration**, following the review of each patient's medical and dental records.

Respectfully requested,

Jaclyn Gleber, RDH, BS, M.Ed., Ed.D.