

POLICIES OF THE MICHIGAN DENTAL HYGIENISTS' ASSOCIATION

LICENSURE

- HOD 25-91:** The Michigan Dental Hygienists' Association does NOT recommend routine or mandatory HIV or HBV testing of dental hygienists or other health care workers, NOR should testing be a requirement for employment, credentialing, licensure, or insurance.
- HOD 15-00:** The Michigan Dental Hygienists' Association believes that only graduates and graduate eligible students of accredited dental hygiene programs be eligible to take the National Board Dental Hygiene Examination, administered by the Joint Commission on National Dental Examinations.
- HOD 16-00:** The Michigan Dental Hygienists' Association supports the continued administration of a national board examination for the profession of dental hygiene, which assesses the ability to recall important information from the basic biomedical, dental and dental hygiene sciences and to apply such information in a problem-solving context. This knowledge is acquired through the completion of an accredited dental hygiene program.
- HOD 04-01:** The Michigan Dental Hygienists' Association supports diversity in the content of continuing education courses.
- HOD 11-01:** (amending HOD 08-00) The Michigan Dental Hygienists' Association supports the appointment of the proportionate representation of dental hygienists, who are graduates of an accredited dental hygiene program, as full voting and policy members of boards/committees/agencies that administer dental hygiene examinations or regulate the practice of dental hygiene and as professional consultants to other agencies.
- HOD 07-02:** The Michigan Dental Hygienists' Association advocates that regional and/or state testing agencies adopt policies that ensure the highest ethical standards to protect the safety and welfare of patients who participate in clinical dental hygiene examinations.
- HOD 08-04:** The Michigan Dental Hygienists' Association advocates that dental hygienists who have met the requirements for the administration of local anesthesia and/or nitrous oxide analgesia be certified by the Board of Dentistry and the Michigan Department of Community Health.
- HOD 04-05:** (rescinding HOD 06-02) The Michigan Dental Hygienists' Association supports a national dental hygiene examination for licensure that is a valid, reliable and cost-effective assessment of clinical skills.

- HOD 11-05:** (rescinding HOD 03-01) The Michigan Dental Hygienists' Association advocates that licensing agencies accept higher education credits pertaining to any of the professional roles of the dental hygienist for continuing education credit.
- HOD 07-10:** (rescinding HOD 06-08) The Michigan Dental Hygienists' Association supports the MBOD in offering 1 hour of continuing education credit for two hours of dental related community services for licensure.
- HOD 01-12:** (rescinding HOD 13-00 - amend HOD 25-89) The Michigan Dental Hygienists' Association advocates for current or increased educational standards and/or requirements for licensure of dental hygienists.
- HOD 09-16:** (amending *HOD 05-06*) The Michigan Dental Hygienists' Association supports continuing education and "basic life support for professional providers" that meets the standards of the American Heart Association, as requirements for licensure, renewal, and reinstatement as stated in the Administrative Rules.
- HOD 05-18:** The Michigan Dental Hygienists' Association supports the elimination of the patient procedure-based, single encounter clinical examination for candidates who are graduates of Commission on Dental Accreditation (CODA) accredited dental hygiene programs and who are eligible to take the National Board Dental Hygiene Examination.
- HOD 09-21:** The Michigan Dental Hygienists' Association supports dental hygiene licensure portability

EDUCATION

- HOD 11-83:** The Michigan Dental Hygienists' Association supports continuing education as a requirement for licensure renewal and licensure reinstatement.
- HOD 07-85:** The Michigan Dental Hygienists' Association supports the study of dental hygiene specialties.
- HOD 22-88:** The Michigan Dental Hygienists' Association supports the development of articulation agreements between certificate/associate degree programs and colleges/universities to allow for development of an integrated baccalaureate degree in dental hygiene.
- HOD 18-90:** The Michigan Dental Hygienists' Association is committed to a policy of non-discrimination.

- HOD 23-91:** The Michigan Dental Hygienists' Association advocates that dental hygienists be the primary professionals to develop, coordinate and evaluate dental hygiene career recruitment programs that include entry, retention, and re-entry into the dental hygiene profession.
- HOD 24-91:** The Michigan Dental Hygienists' Association supports greater utilization of dental hygienists as examiners during clinical testing for dental and dental hygiene candidates involving preventive oral hygiene care.
- HOD 15-92:** (amending HOD 14-88) The Michigan Dental Hygienists' Association advocates that all accredited dental hygiene programs prepare students for licensure in any state or Canadian jurisdiction.
- HOD 06-97:** The Michigan Dental Hygienists' Association supports guidance and education for dental hygienists seeking alternative dental hygiene careers.
- HOD 09-97:** The Michigan Dental Hygienists' Association supports externships and internships within accredited dental hygiene programs enabling students to gain practical experience in alternative practice settings.
- HOD 17-99:** (amending HOD18-93) The Michigan Dental Hygienists' Association advocates that dental hygiene educational programs be administered or directed by an actively licensed educationally qualified dental hygienist.
- HOD 14-00:** (amending HOD 09-90**, HOD 15-90, and HOD 10-98) The Michigan Dental Hygienists' Association supports the development and implementation of flexibly scheduled and/or technologically advanced educational delivery systems only when clinical, didactic, and laboratory education is provided through an accredited dental hygiene program.
- HOD 02-03:** The Michigan Dental Hygienists' Association advocates Educational loan forgiveness programs for occupational debts accrued by registered dental hygienists who provide dental hygiene services to underserved sectors of the population.
- HOD 02-04:** The Michigan Dental Hygienists' Association advocates and supports a standardized educational curriculum developed by the American Dental Hygienists' Association, for the advanced dental hygiene practitioner.
- HOD 07-05:** (amending HOD 12-83) The Michigan Dental Hygienists' Association promotes cooperative continuing education efforts with other health disciplines to facilitate exchange of information and to foster a multidisciplinary approach to optimal total health.
- HOD 02-07:** The Michigan Dental Hygienists' Association supports the American Dental Hygienists' Association in declaring its intent to be the

credentialing authority for the dental hygiene profession beyond initial licensure.

- HOD 16-07:** The Michigan Dental Hygienists' Association advocates cultural and linguistic competence for health professionals.
- HOD 19-07:** The Michigan Dental Hygienists' Association advocates that all dental hygienists become members of their professional organization, the American Dental Hygienists' Association.
- HOD 01-08:** (rescinding HOD 12-98) The Michigan Dental Hygienists' Association supports The American Dental Hygienists' Association which states that student chapter advisors must be current, voting members of the American Dental Hygienists' Association.
- HOD 11-10:** (amending HOD 14-94) The Michigan Dental Hygienists' Association supports dental hygiene curricula and continuing education courses that lead to competency in the dental hygiene process of care.
- HOD 01-11:** (rescinding HOD 10-88) The Michigan Dental Hygienists' Association supports the initiation of new dental hygiene educational programs when:
- any proposed program has conducted a comprehensive evidence-based needs assessment to support the development and sustainability of the program. It is further documented that an existing institution of higher education cannot meet these needs.
 - there is a documented evidence-based, ongoing manpower need that cannot be met by currently licensed dental hygienists in the region
 - the program offers an integrated curriculum that culminates in baccalaureate degree in dental hygiene
 - the program has financial resources to initiate and maintain dental hygiene educational standards
 - the program is endorsed by the component and constituent dental hygienist associations, community partners, and potential employers
 - the program meets or exceeds accreditation requirements
- HOD 06-15:** The Michigan Dental Hygienists' Association advocates that the Advanced Dental Hygiene Practitioner has completed a graduate level curriculum.
- HOD 10-16:** The Michigan Dental Hygienists' Association advocates for the integration of interprofessional education in the dental hygiene curriculum.
- HOD 11-16:** The Michigan Dental Hygienists' Association supports training to identify signs of human trafficking as a requirement for all classifications of licensure.

- HOD 03-18:** (amending HOD 12-09) The Michigan Dental Hygienists' Association advocates dental hygiene accreditation standards that prepare entry level dental hygienists to assume all professional roles of a registered dental hygienist in a variety of settings to address the preventive, restorative and therapeutic oral and overall health care needs of the public upon licensure.
- HOD 04-19:** Amend HOD 06-01 (amending HOD 11-90): The Michigan Dental Hygienists' Association supports accreditation of all entry-level, degree completion, graduate and doctoral dental hygiene education programs.
- HOD 05-19:** Amend HOD 21-88: The Michigan Dental Hygienists' Association supports all graduates of associate, certificate, baccalaureate, graduate and doctoral degree programs. Furthermore, we support the American Dental Hygienists' Association in its efforts to promote baccalaureate degree as minimum entry-level for dental hygiene practice.
- HOD 08-19:** (Amending HOD 15-95, 11-85, 54-92) The Michigan Dental Hygienists' Association advocates for the utilization of dental hygienists who have completed both clinical and didactic education offered by an accredited program in the administration of appropriate pain and anxiety control modalities.
- HOD 03-20:** The Michigan Dental Hygienists' Association is committed to a policy of non-discrimination, equity, and inclusion
- HOD 06-21:** The Michigan Dental Hygienists' Association supports diversity, equity, and inclusion in dental hygiene educational programs.

DENTAL HYGIENE PRACTICE

- HOD 14-83:** The Michigan Dental Hygienists' Association supports efforts to develop mechanisms for quality assurance of dental hygiene care.
- HOD 22-83:** The Michigan Dental Hygienists' Association believes that dental hygienists should be involved in measuring and recording blood pressure on patients as part of conducting a thorough health history.
- HOD 05-85:** The Michigan Dental Hygienists' Association supports research on the effect of preventive oral health services provided by the dental hygienist in alternate practice settings.
- HOD 09-88:** (amending HOD 08-83) The Michigan Dental Hygienists' Association supports the development of alternative practice settings for dental hygienists that will meet the dental health needs of the public.

- HOD 11-88:** (rescinding HOD 07-86) The Michigan Dental Hygienists' Association considers demonstration of continued competence essential to assure the highest quality of service.
- HOD 20-88:** The Michigan Dental Hygienists' Association supports self-regulation for the profession of dental hygiene.
- HOD 26-88:** (rescinding HOD 23-83 and HOD 1-87) The Michigan Dental Hygienists' Association supports evaluation of the patient's radiographic needs prior to exposure of dental radiographs, based on past radiographic exposure, dental history, and present health status. Additionally, all measures should be taken to insure the safety of the patient and clinician during dental radiographic exposure.
- HOD 14-91:** The Michigan Dental Hygienists' Association recommends that all registered dental hygienists carry personal professional liability insurance.
- HOD 16-92:** The Michigan Dental Hygienists' Association supports broadening the scope of dental hygiene practice through state dental hygiene and/or dental practice acts, to meet the health care needs of the public.
- HOD 40-92:** The Michigan Dental Hygienists' Association acknowledges that the scope of dental hygiene practice includes the assessment and evaluation of orofacial myofunctional dysfunction and further advocates that dental hygienists complete advanced clinical and didactic continuing education in an accredited program prior to providing treatment.
- HOD 43-92:** (amending HOD 8-90) The Michigan Dental Hygienists' Association advocates Hepatitis B vaccination of all dental hygiene students and dental hygienists.
- HOD 19-93:** (rescinding HOD 08-85) The Michigan Dental Hygienists' Association advocates that pit and fissure sealants be included as payable benefits by both private and government funded insurance programs.
- HOD 20-93:** (rescinding HOD 24-83) The Michigan Dental Hygienists' Association advocates that dental hygienists report suspected abuse and neglect to the proper authorities.
- HOD 23-95:** (amending HOD 27-88) The Michigan Dental Hygienists' Association supports scientific research in health promotion/disease prevention, especially in areas of dental and dental hygiene care.
- HOD 12-96:** The Michigan Dental Hygienists' Association advocates positive relations and image promotion of the dental hygienist.

- HOD 13-96:** (amending HOD 13-91) The Michigan Dental Hygienists' Association advocates research to assess the potential for transmission of communicable disease during the delivery of professional and health services.
- HOD 10-99:** (amending HOD 22-92) The Michigan Dental Hygienists' Association recognizes the Occupational Safety and Health Administration standards.
- HOD 13-99:** The Michigan Dental Hygienists' Association supports the education of dental personnel regarding latex allergy guidelines pertaining to the safety of patients and staff.
- HOD 18-99:** The Michigan Dental Hygienists' Association supports collaborative efforts with corporations, associations, and individuals that enhance the dental hygiene professional and assist the public in obtaining optimal total health.
- HOD 20-99:** (amending HOD 65-92) The Michigan Dental Hygienists' Association supports all efforts to identify and position dental hygienists as primary care providers by the legislature, the public and the third party payers.
- HOD 07-01:** The Michigan Dental Hygienists' Association advocates a work environment free of discrimination and harassment.
- HOD 05-02:** The Michigan Dental Hygienists' Association advocates dental hygienists, who are graduates of accredited dental hygiene programs, to utilize evidence based treatment modalities that are within the scope of dental hygiene practice and are considered the standard of care.
- HOD 01-05:** (rescinding HOD 8-97 and HOD 13-97) The Michigan Dental Hygienists' Association advocates evidence-based oral health management strategies for the prevention of oral and systemic diseases.
- HOD 03-05:** The Michigan Dental Hygienists' Association advocates the systematic collection of data by dental hygienists to aid in identification purposes.
- HOD 06-05:** The Michigan Dental Hygienists' Association supports dental hygienists performing dental triage.
- HOD 08-05:** (rescinding HOD 27-89) The Michigan Dental Hygienists' Association supports that radiation-producing imaging devices be operated only by qualified individuals who have successfully completed approved courses that meet all state and/or federal regulations for radiation safety.
- HOD 09-05:** The Michigan Dental Hygienists' Association recognizes the professional roles of the dental hygienist to include, but not be limited to, those of

clinician, educator, advocate, administrator/manager, and researcher, with public health being an integral component of all these roles.

- HOD 06-06:** The Michigan Dental Hygienists' Association advocates the adherence to the Centers for Disease Control and Prevention (CDC) guidelines for preventing the transmission of infectious diseases.
- HOD 20-07:** (amending HOD 14-96) The Michigan Dental Hygienists' Association supports the Family Medical Leave Act.
- HOD 02-08:** (rescinding HOD 16-88) The Michigan Dental Hygienists' Association actively encourages all licensed and student dental hygienists to serve as recruitment agents for the profession of dental hygiene.
- HOD 04-09:** (rescinding HOD 12-96) The Michigan Dental Hygienists' Association supports dental hygienists as advocates for the profession of dental hygiene and oral health related issues.
- HOD 15-09:** The Michigan Dental Hygienists' Association supports the administration/delivery of preventative and therapeutic procedures as outlined in the dental hygiene scope of practice by licensed personnel only; specifically those who have graduated from a CODA accredited dental hygiene program and who have successfully completed and maintained all state licensing requirements.
- HOD 16-09:** The Michigan Dental Hygienists' Association supports scientifically proven agents that provide preventive and therapeutic benefits, including but not limited to xylitol.
- HOD 13-10:** The Michigan Dental Hygienists' Association advocates that dental hygienists perform screenings and risk assessments for the prevention and interdisciplinary management of diseases as a component of patient assessment.
- HOD 07-11:** (amending HOD 21-94) The Michigan Dental Hygienists' Association advocates that dental hygienists, as primary care providers, be recognized by third party payers for direct payment and/or reimbursement of services legally provided within the scope of dental hygiene practice.
- HOD 03-12:** (rescinding HOD 13-88) The Michigan Dental Hygienists' Association advocates for non-discrimination against any individual or company, resulting from professional differences of opinion, with respect to legislative and regulatory issues concerning the availability and accessibility of quality, cost-effective, oral health care.
- HOD 04-12:** (rescinding HOD 23-88) The Michigan Dental Hygienists' Association advocates for equal opportunity practice in credit and purchasing.

- HOD 05-12:** The Michigan Dental Hygienists' Association advocates the role of the dental hygienists in research including interdisciplinary studies and practices.
- HOD 06-12:** (amending 18-90) The Michigan Dental Hygienists' Association is committed to a policy of non-discrimination and equality for all.
- HOD 07-13:** The Michigan Dental Hygienists' Association supports the inclusion of perinatal oral health care as part of optimal health care and recognizes the dental hygienist as the primary provider of dental educational and preventive services.
- HOD 09-13:** (amending HOD 17-90) The Michigan Dental Hygienists' Association advocates for current association membership of all dental hygiene faculty from all accredited dental hygiene programs.
- HOD 10-14:** The Michigan Dental Hygienists' Association advocates that direct and third party reimbursement payors, and the laws that govern them, shall have non-discriminatory policies toward any dental hygiene provider acting within the scope of that provider's license.
- HOD 01-15:** (amending HOD 02-04, rescinding HOD 03-04) The Michigan Dental Hygienists' Association supports the ADHA's conceptualization of an Advanced Dental Hygiene Practitioner (ADHP) and continues to promote the ADHP model.
- HOD 02-15:** (amending HOD 07-00) The Michigan Dental Hygienists' Association maintains that dental hygienists are ethically, legally and directly accountable for their professional services and actions.
- HOD 03-15:** (amending HOD 02-06 and amending HOD 15-91) The Michigan Dental Hygienists' Association supports diversity and recognizes the value it adds to our organization, our mission and the quality of our programs and services.
- HOD 11-15:** (rescinding HOD 02-13, rescinding HOD 26-95) The Michigan Dental Hygienists' Association advocates for dental hygienists, acting within their scope of practice, to own and operate dental hygiene practices, to enter into provider agreements and receive direct third party reimbursements for services rendered.
- HOD 01-16:** The Michigan Dental Hygienists' Association advocates for the expansion of dental hygiene diagnostic and treatment codes appropriate for services provided.

- HOD 02-16:** The Michigan Dental Hygienists' Association advocates for appropriate dental hygiene representation on committees and work groups for the development of dental hygiene treatment and diagnostic codes.
- HOD 03-16:** The Michigan Dental Hygienists' Association advocates the utilization of only a dental hygienist in the dental hygiene process of care. Furthermore, dental hygienists should provide dental hygiene process of care when practicing in both public and private settings.
- HOD 04-16:** The Michigan Dental Hygienists' Association advocates for dental hygienists to provide services according to the Michigan Public Health Code and the Administrative Rules of the Michigan Board of Dentistry without supervision.
- HOD 03-17:** The Michigan Dental Hygienists' Association supports interprofessional collaboration practice.
- HOD 04-17:** The Michigan Dental Hygienists' Association supports the utilization of technologies including, but not limited to, telehealth as a means to reduce oral health disparities and increase access to care.
- HOD 01-18:** The Michigan Dental Hygienists' Association advocates that all dental hygiene faculty be members of the American Dental Hygienists' Association. Furthermore, all student chapter advisors be current, voting members of the American Dental Hygienists' Association.
- HOD 06-18:** Michigan Dental Hygienists' Association advocates dental hygienists' ability to prescribe, administer and dispense all evidence-based preventive and therapeutic agents.
- HOD 08-19:** (Amending HOD 15-95, 11-85, 54-92) The Michigan Dental Hygienists' Association advocates for the utilization of dental hygienists who have completed both clinical and didactic education offered by an accredited program in the administration of appropriate pain and anxiety control modalities.
- HOD 01-20:** The Michigan Dental Hygienists' Association advocates for a work environment that promotes safety and wellness for all.
- HOD 03-20:** The Michigan Dental Hygienists' Association is committed to a policy of non-discrimination, equity, and inclusion.
- HOD 04-20:** The Michigan Dental Hygienists' Association recognizes the professional roles of the dental hygienist to include, but not be limited to clinical, educational, administrative, research, entrepreneurial, public health, and

corporate positions, with advocacy being an integral component in all aspects of these roles.

HOD 06-20: The Michigan Dental Hygienists' Association supports the federal government's Fair Labor Standards Act in which dental hygienists must, as employees, be issued a W2 by their permanent or temporary employers with appropriate government withholdings made from their wages, as appropriate to this statute.

HOD 08-20: The Michigan Dental Hygienists' Association supports credentialed dental hygiene specialists to provide care for patients of all ages without direct supervision, where applicable.

PUBLIC HEALTH

HOD 03-85: The Michigan Dental Hygienists' Association shall seek recognition as a health profession, for dental hygiene, under Article 15 of the Michigan Public Health Code.

HOD 12-88: (amending HOD 23-83) The Michigan Dental Hygienists' Association supports the Mission and Goals of the American Dental Hygienists' Association.

HOD 17-91: The Michigan Dental Hygienists' Association supports the utilization of dental hygienists as members of State Regulatory Boards with full voting privileges and as professional consultants to other state agencies.

HOD 67-92: (amending HOD 25-83) The Michigan Dental Hygienists' Association advocates the dental hygienists' involvement in the legislative process as an effective means of promoting the oral health of the public and assuring quality care.

HOD 70-92: The Michigan Dental Hygienists' Association supports conscientious selection of dental products, keeping in mind environmental concerns.

HOD 11-94: The Michigan Dental Hygienists' Association supports nutritional guidelines and food programs that promote total health. Further, the MDHA encourages media advertising and public education to promote healthy eating habits and wellness.

HOD 20-94: (rescinding HOD 20-83 and HOD 50-92) The Michigan Dental Hygienists' Association advocates a multiple approach to the prevention of dental caries including, but not limited to, all fluoride modalities and pit and fissure sealants, in all oral health care programs and settings.

- HOD 23-95:** (amending HOD 18-83) The Michigan Dental Hygienists' Association supports scientific research in health promotion/disease prevention, especially in areas of dental and dental hygiene care.
- (amending HOD 08-96) The Michigan Dental Hygienists' Association advocates that public health programs addressing oral health or oral conditions be administered by an educationally qualified dental hygienist or dentist.
- HOD 15-96:** The Michigan Dental Hygienists' Association believes that any type of reimbursement be considered valid and not be directed solely to managed care.
- HOD 16-99:** The Michigan Dental Hygienists' Association advocates school-based delivery of dental hygiene services by dental hygienists who are actively licensed and are graduates of an accredited dental hygiene program.
- HOD 04-02:** (amending HOD 6-99) The Michigan Dental Hygienists' Association endorses early health assessment, education, and preventive intervention for infants and children beginning at age one or within six months of initial tooth eruption.
- HOD 03-03:** The Michigan Dental Hygienists' Association supports legislation granting immunity to dental hygienists when responding to any disaster or emergency situation, so declared by an appropriate authority.
- HOD 05-04:** The Michigan Dental Hygienists' Association supports mandating the use of mouth and head protection for participants during sports activities where there is risk of dental and/or craniofacial injuries.
- HOD 01-06:** The Michigan Dental Hygienists' Association advocates optimal total health through education and promotion of preventive measures.
- HOD 07-06:** The Michigan Dental Hygienists' Association supports education of the public, community leaders and other health professionals regarding the preventive and therapeutic benefits of fluoride.
- HOD 09-06:** The Michigan Dental Hygienists' Association supports public education regarding the negative health consequences related to intra/perioral piercing and tongue splitting.
- HOD 13-06:** The Michigan Dental Hygienists' Association encourages all health professionals implementing water fluoride content testing and fluoride supplementation beginning with infants who are six months of age, utilizing the CDC recommendations for fluoride intake levels.

- HOD 09-08:** (rescinding HOD 07-07) The Michigan Dental Hygienists' Association supports expanding access to oral health care initiatives through utilization of licensed dental health care professionals.
- HOD 10-08:** (rescinding HOD 18-89) The Michigan Dental Hygienists' Association supports public education regarding substance abuse. The Michigan Dental Hygienists' Association further supports the identification, non-punitive intervention and treatment of chemically dependent individuals while collaborating with organizations to identify, promote and utilize available substance abuse and addiction resources and programs
- HOD 05-09:** The Michigan Dental Hygienists' Association advocates that state dental hygiene and/or dental practice acts be amended so that the services of dental hygienists' can be fully utilized in all public and private settings.
- HOD 08-09:** (rescinding HOD 04-07 and amending HOD 17-92) The Michigan Dental Hygienists' Association advocates the design and implementation of health care programs which include comprehensive oral health services for at-risk populations.
- HOD 10-09:** (amending HOD 66-92) The Michigan Dental Hygienists' Association advocates the inclusion of preventive, restorative and therapeutic oral health care benefits in any national health care program.
- HOD 11-09:** (amending HOD 16-92) The Michigan Dental Hygienists' Association supports expanding the dental hygiene scope of practice in order to increase access to preventive, restorative, and therapeutic oral health care, through state dental practice acts.
- HOD 13-09:** The Michigan Dental Hygienists' Association encourages all dental hygienists to get an annual TB test.
- HOD 01-10:** The Michigan Dental Hygienists' Association advocates for the development and expansion of evidence based comprehensive community oral health programs.
- HOD 03-10:** The Michigan Dental Hygienists' Association advocates delivery of evidence-based dental hygiene services by dental hygienists in all settings.
- HOD 04-10:** (amending HOD 11-97) The Michigan Dental Hygienists' Association advocates total health education in schools through oral health programs.
- HOD 08-10:** (rescinding HOD 18-99) The Michigan Dental Hygienists' Association supports programs that inform stakeholders of the scope of dental

hygiene practice and its contribution to total health in collaboration with health care providers.

- HOD 09-10:** (amending HOD 17-89) The Michigan Dental Hygienists' Association advocates comprehensive, evidence-based treatment plan options be offered to all patients regardless of economic status, third-party coverage or other remuneration methods.
- HOD 14-10:** The Michigan Dental Hygienists' Association supports raising consumer awareness by advocating labeling all products for potential adverse effects on oral health.
- HOD 19-10:** (amending HOD 16-95 and HOD 03-07) The Michigan Dental Hygienists' Association advocates the utilization of dental hygienists in the dental hygiene process of care in both public and private practice settings.
- HOD 07-12:** (rescinding HOD 12-95) The Michigan Dental Hygienists' Association advocates for truth in advertising supported by evidence-based research and supports recognized professional and consumer groups who promote those efforts.
- HOD 08-12:** (rescinding HOD 11-98) The Michigan Dental Hygienists' Association supports the role of the dental hygienist in prevention and cessation of tobacco usage education and advocates for laws which prohibit the marketing and distribution of tobacco products and promotional look alike products.
- HOD 09-12:** (rescinding HOD 09-01) The Michigan Dental Hygienists' Association advocates for contractual arrangements between school districts and vendors that promote healthy food and beverage choices.
- HOD 04-13:** (amending HOD 02-05) The Michigan Dental Hygienists' Association advocates for a tobacco-free environment.
- HOD 05-13:** The Michigan Dental Hygienists' Association advocates that dental patients have access to all available information regarding the manufacturers of and materials used in their dental care.
- HOD 10-13:** The Michigan Dental Hygienists' Association advocates dental hygienists promote health literacy.
- HOD 09-14:** (Amending HOD 12-12) The Michigan Dental Hygienists' Association advocates utilizing dental hygienists to increase public access to dental hygiene care and to regulate the number of dental hygienists within any practice setting in order to protect the public.

- HOD 12B-14:** The Michigan Dental Hygienists' Association advocates the inclusion of a dental assessment performed by a dental hygienist as a requirement for kindergarten entry.
- HOD 07-15:** The Michigan Dental Hygienists' Association advocates the systematic collection of data by a dental hygienist to aid in the forensic identification of individuals.
- HOD 05-16:** The Michigan Dental Hygienists' Association advocates for patient-centered outcomes research in all practice settings that focus on preventive and oral health interventions, which lead to improved health outcomes, higher quality care and increased patient satisfaction.
- HOD 07-16:** The Michigan Dental Hygienists' Association advocates for dental hygienists, operating in full scope of practice, to be included in the development of federal, state and local policies which include oral health care programs to support optimal health.
- HOD 08-16:** (amending HOD 08-96) The Michigan Dental Hygienists' Association advocates that public health programs addressing oral health or oral conditions be administered by licensed dental health care professionals.
- HOD 01-17:** (rescinding HOD 3-11) The Michigan Dental Hygienists' Association advocates for diagnostic and procedure codes, nomenclature and descriptors that are consistent with scientific evidence regarding best-practices in dentistry and dental hygiene.
- HOD 03-19:** The Michigan Dental Hygienists' Association encourages health professionals to advocate for legislation, policies, programs, research and education to foster reduced consumption of SSBs
- HOD 02-20:** (amending HOD 08-13) The Michigan Dental Hygienists' Association advocates for comprehensive oral examinations and treatment during all phases of pregnancy.
- HOD 05-20:** (amending HOD 10-15) The Michigan Dental Hygienists' Association supports the inclusion and utilization of dental hygienists in policy development and in response efforts to local, state, national, and global crises.
- HOD 07-20:** The Michigan Dental Hygienists' Association advocates for every dental hygienist to obtain a National Provider Identification (NPI) number.
- HOD 02-21:** The Michigan Dental Hygienists' Association supports the dental hygienists' role in community outreach, care coordination, and the addressing of social determinants of health.

HOD 10-21:

(amending HOD 02-09) (rescinding HOD 12-91 and HOD 18-99 and HOD 06-07) The Michigan Dental Hygienists' Association affirms its support for optimal health for all populations and is committed to collaborative partnerships and coalitions that utilize an Oral Health Equity Framework to improve access to care.

POLICY DEFINITIONS

Accreditation: a formal process establishing a minimum set of national standards which promote and assure quality in educational institutions and programs, serving as a mechanism to protect the public. (HOD 10-00)

Accredited Dental Hygiene Program: a dental hygiene program that achieves or exceeds the established minimum standards set by a United States Department of Education (USDOE) recognized regional accrediting agency and the Commission on Dental Accreditation. The curriculum, a minimum of two years, shall be at the appropriate level to enable matriculation to a baccalaureate, masters, or doctorate degree program.

The program shall also:

- award a minimum of an associate's level degree, the credits of which are transferable to a four year institution and applicable to a baccalaureate degree.
- retain control of curricular and clinical components include at least two academic years of full time instruction or its equivalent in academic credits earned at a post secondary college level.
- encompass both liberal arts and dental hygiene science course work sufficient to prepare the practitioner to assume licensure in any jurisdiction. (HOD 09-00)

Advanced Practice Dental Hygiene: Provision of clinical and diagnostic services in addition to those services permitted by an entry level dental hygienist, including services that require advanced clinical decision making, judgment and problem solving. Completion of a clinical and academic educational program beyond the first professional degree required for entry level licensure which qualifies the dental hygienist to provide advanced practice services and includes preparation to practice in direct access settings and collaborative relationships. Documentation of proficiency such as a professional certification. (HOD 11-13)

Advanced Dental Hygiene Practitioner: (amending HOD 01-04) A dental hygienist who has completed an advanced, graduate level curriculum that allows for the acquisition of competencies that 1.) build upon the fundamental knowledge and skills achieved at the entry level 2.) prepares individuals for a level of evidenced-based clinical decision-making and scope of practice and responsibility required of the advanced practitioner. (HOD 04-15)

Assessment: A clinical evaluation performed by a dental hygienist to identify signs of oral or systemic disease, malformation or injury and the need for referral for examination, diagnosis and treatment. (HOD 12A-14)

At-Risk Population: a community or group of people whose social or physical determinants, environmental factors, or personal behaviors increase their probability of developing disease. (HOD 04-11)

Care coordination: Person- centered actions designed to connect the person, caregivers, care team, providers, and specialists to share information and create strategies to meet the needs of the person. (HOD 03-21)

Collaborative Practice: a cooperative working relationship with other health care providers in the provision of patient care. (HOD 05-11)

Community outreach: Efforts to connect populations to resources, information, treatment, and referrals. (HOD 04-21)

Credentialing: the process by which an authorized and qualified entity evaluates competence and grants the formal recognition to, or records the recognition status of, an individual that meets predetermined and standardized criteria. (HOD 13-07)

Cultural Competence: awareness of cultural difference among all populations, respect of those differences and application of that knowledge to professional practice. (HOD 14-07)

Dental Home: a relationship between a person and a specific team of health professionals, led by a dental hygienist or a dentist. The dental home is an ongoing partnership that coordinates comprehensive, accessible and culturally sensitive care through delivery of oral health services as part of integrated health care. (HOD 03-09)

Dental Hygiene: (Amending HOD 06-10 and HOD 15-94) The science and practice of the recognition, prevention, and treatment of diseases and conditions as an integral component of optimal health. This includes the Dental Hygiene Process of care; the profession of the dental hygienist. (HOD 03-14)

Dental Hygienist: (rescinding HOD 03-08 and HOD 16-94) A primary care oral health professional licensed in dental hygiene who has graduated from an accredited dental hygiene program. (HOD 04-14)

Dental Hygiene Process of Care: Assessment, Diagnosis, Planning, Implementation, Evaluation, Documentation (HOD 10-10)

Dental Public Health Setting: any setting where population-based, community-focused oral health interventions are assessed, implemented, and evaluated as a means to prevent or control disease. (HOD 11-11)

Dental Triage: the screening of patients/clients to determine the priority of treatment needs. (HOD 05-05)

Diagnosis: The identification of an individual's health behaviors, attitudes, and oral health care needs for which a dental hygienist is educationally qualified and licensed to provide. The dental hygiene diagnosis requires evidence-based critical analysis and interpretation of assessments in order to reach conclusions about the patient's dental hygiene treatment needs. The dental hygiene diagnosis provides the basis for the dental hygiene care plan. (HOD 01-14)

Direct Access: The ability of a dental hygienist to initiate treatment based on their assessment of a patient's needs without the specific authorization of a dentist, treat the patient without the presence of a dentist, and maintain a provider-patient relationship. (HOD 09-15)

Direct Payment: payment made directly to the provider without sending it through an intermediary or a third party. (HOD 06-11)

Diversity: an inclusion of varied characteristics, ideas and world views in a community. (HOD 08-11)

Documentation: The complete and accurate recording of all collected data and other information relevant to patient care and treatment. (ADHA Standards of Clinical Dental Hygiene Practice – SCDHP) (HOD 14-16)

Evaluation: The measurement of the extent to which the patient has achieved the goals specified in the dental hygiene care plan; used to make evidenced-based decisions regarding patient care. (HOD 05-14)

Evidence-based: derived from peer-reviewed scientific literature. (HOD 15-16)

Evidence-based practice: the “conscientious, explicit, and judicious use of the current best evidence in making decisions about the care of individual clients. The practice of evidence-based dental hygiene requires the integration of individual clinical expertise and client preferences with the best available external clinical evidence from systematic research.” (HOD 08-07)

Health Equity: Attainment of the highest level of health for all people. All efforts to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives. (HOD 12-16)

Health Literacy: The capacity for an individual to obtain, process and communicate his or her understanding of basic health information and services needed to make appropriate health decisions. (HOD 13-12)

Inclusion: The act of ensuring all people feel welcome, safe, and empowered to contribute, influence, and participate. (HOD 08-21)

Implementation: The delivery of dental hygiene services based on the dental hygiene care plan in manner of minimizing risk and optimizing oral health. (HOD 14-16)

Independent Practitioner: (rescinding HOD 04-03) A dental hygienist who provides dental hygiene services to the public through direct agreement with each client. (HOD 01-13)

Interdisciplinary Care: Two or more healthcare providers working within their respective disciplines who collaborate with the patient and/or caregiver to develop and implement a care plan. (HOD 20-10)

Interprofessional Education: collaboration of two or more professionals learning about, from and with each other to improve health outcomes (HOD 13-16)

Interprofessional Collaboration: Healthcare professionals from various disciplines who use evidence-based practices to work together to achieve a common goal. (HOD 15-21)

Intraprofessional Collaboration: Healthcare professionals within the same discipline who use evidence-based practices to work together to achieve a common goal. (HOD 14-21)

Linguistic Competence: the capacity to communicate effectively and respond appropriately to the health literacy needs of all populations. (HOD 15-07)

Mid-Level Oral Health Practitioner: A dental hygienist who has graduated from an accredited dental hygiene program and who provides primary oral health care directly to patients to promote and restore oral health through the dental hygiene process of care and referral services. The Mid-level Oral Health Practitioner has met the educational requirements to provide services within an expanded scope of care and practices under regulations set forth by the appropriate licensing agency. (HOD 21-10)

Needs Assessment: (Amending HOD 10-11) A systematic process used to establish priorities for future action using the dental hygiene process of care. (HOD 02-14)

Optimal health: as a standard of health of the oral cavity and related tissues which enables an individual to eat, speak, and socialize without active disease, discomfort, or embarrassment, and which contributes to general well being and overall total health. (HOD 15-99)

Oral Health Equity Framework: A tool that provides resources and assistance to achieve successful health outcomes for all populations. (HOD 11-21)

Oral Prophylaxis: The sub and supragingival removal of biofilm, calculus, and extrinsic stains from the anatomical crowns of teeth and prosthetic structures, to preserve health and prevent disease. (HOD 01-19)

Perinatal: The period of time before conception and continuing until the infant is 36 months of age. (HOD 06-13)

Planning: The establishment of realistic goals and the selection of dental hygiene interventions aimed at the patient achieving optimal health. (HOD 14-16)

Preventive: adjective

Preventative: noun

Example "Airbags act as a preventive measure (adjective describing the noun) for automobile accident fatalities. Indeed, they are a common preventative (noun). (HOD 01-09)

Primary Dental Hygiene Care Provider: The dental hygienist is a primary care oral health professional who administers a range of services which are defined by a scope, characteristics and integration of care. (HOD 06-14)

- **Scope of Primary Care:** Consists of the assessment, diagnosis, planning, implementation, evaluation and documentation of procedures for promoting the highest level of health possible to the patient.
- **Characteristics of Primary Care:** First contact for care is initiated by the patient or other person who assumes responsibility for the patient and takes place in a variety of practice settings.
- **Integration of Primary Care:** Providers serve as the entry and control point linking the patient to total health care systems by providing coordination with other specialized health or social services to ensure that the patient receives comprehensive and continuous care at a single point in time, as well as over a period of time.

Self-Regulation: (Amending HOD 10-01 and HOD 12-00) Governance of the practice of dental hygiene by licensed dental hygienists, who are authorized by state government to define the

dental hygiene scope of practice, set educational and licensure standards, and to govern and discipline dental hygienists. (HOD 13-14)

Social determinants of health: Conditions in a person's environment that affect a wide range of health, function, and quality-of-life outcomes. (HOD 05-21)

Sugar Sweetened Beverages (SSB's): Any liquids that are sweetened with various forms of added sugars. (HOD 02-19)

Professional Autonomy: A profession's authority and responsibility for its own standards of education, regulation, practice, licensure, and discipline. (HOD 12-10)

Profession of the dental hygienist: the science and practice of the recognition, treatment, and education directed toward prevention of oral diseases and the advancement of oral health. (HOD 10-06)

Reimbursement payment: of monies by an intermediary or a third party made to the beneficiary for services rendered. (HOD 13-11)

Social Media: Interactive web based platforms where users in virtual communities create and share user generated communications. (HOD 03-13)

Third Party Payment: payment by someone other than the beneficiary for services rendered. (HOD 12-11)

White paper: an authoritative report or guide that provides information about emerging knowledge and issues on a specific topic.

Position paper: a written document that summarizes the organization's viewpoint on a specific topic which includes supporting research. The purpose is to communicate to members and external audiences. (HOD 07-09)

**These three policies (13-90, 14-90, 9-90) were all amended by deletion of all reference to CODA. Original action numbers appear rather than listing three separate policies with the same number. REVISED 11.5.21

This is a complete and accurate listing of the Policies of the Michigan Dental Hygienists' Association as established by its members through representation at the Annual House of Delegates. For further information on the administration of the association, please refer to the association's Constitution and Bylaws and Policies and Procedures Manual.