



TEXAS STATE BOARD OF DENTAL EXAMINERS

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Board Meeting Minutes October 31, 2003

1. CALL TO ORDER: Dr. Tippit called the meeting of the Texas State Board of Dental Examiners to order on October 31, 2003. The time was 8:08 a.m.

2. ROLL CALL: Dr. Irons called the roll. It was noted for the record that a quorum was present.

a. Members Present:

Dr. Nathaniel Tippit	Presiding Officer
Dr. J. Kevin Irons	Secretary
Ms. Amy Juba	Public Member
Mr. Oscar Garcia	Public Member
Dr. Gary McDonald	Member
Ms. Helen McKibben, RDH	Member
Dr. Martha Malik	Member
Dr. Norman Mason	Member
Ms. Phyllis Stine	Public Member
Dr. Paul Stubbs	Member
Dr. George Strunk	Member
Dr. Juan Villarreal	Member
Mr. Charles Wetherbee	Public Member

b. Members Absent:

Ms. Tammy Allen, RDH	Member (Excused)
Ms. Marti Morgan	Public Member (Excused)

c. TSBDE Staff Present:

Mr. Bobby D. Schmidt, M.Ed.	Executive Director
Mr. Ben Ablon	Director of Enforcement
Mr. Fread Houston	General Counsel
Ms. Carol McPherson	Director of Administration, Finance and Personnel
Ms. Sherri Sanders	Director of Licensing and Examinations
Ms. Vicki Shoemith	Executive Assistant

d. Others Present:

Ms. Renee Cornett	Chair, Dental Hygiene Advisory Committee
Dr. Larry Spradley	Texas Dental Association
Mr. Jay Bond	Texas Dental Association
Mr. Bob Hull	Texas Peer Assistance Network for Dentists and Pharmacists
Ms. Holly Johnston	Texas Peer Assistance Network for Dentists and Pharmacists
Ms. Lana Crawford	Texas Dental Hygienists' Association
Ms. Andrea Scott	Texas Dental Hygienists' Association
Ms. Lois Palermo	Texas Dental Hygienists' Association
Ms. Alicia Grant	Texas Dental Hygienists' Association
Mr. Jerry Valdez	Texas Dental Hygienists' Association
Ms. Rebecca Fontenot	Texas Dental Hygienists' Association
Ms. Hope Garza	Texas Dental Hygienists' Association
Ms. Joanne Wineinger	Texas Dental Assistants Association
Ms. Sharon Dickerson	Texas Dental Assistants Association
Mr. John Ware	Thomson-Prometric

MOTION BY MS. JUBA, SECONDED BY MS. MCKIBBEN TO EXCUSE MS. ALLEN AND MS. MORGAN. (FOR – 13 / OPPOSED –0) MOTION CARRIES

3. REVIEW AND APPROVAL OF PAST MINUTES. The Board reviewed and approved the minutes of the August 22, 2003 Board Meeting.

MOTION BY DR. MCDONALD, SECONDED BY DR. STUBBS TO APPROVE THE MINUTES FROM THE AUGUST 22, 2003 MEETING. (FOR - 13 / OPPOSED - 0) MOTION CARRIES

4. APPEARANCES BEFORE THE BOARD. Mr. Robert (Bob) Hull, M.Th., LCDC, Director of the Peer Assistance Network for Dentists and Pharmacists appeared before the Board. Mr. Hull provided the Board a synopsis of current participants in the Peer Assistance Program. Mr. Hull presented Ms. Holly Johnston with Dr. Tippit welcoming her on behalf of the Board.

Dr. Tippit asked Mr. Hull if there were any concerns regarding the transition of this program. Mr. Hull responded that Board Ordered participants are comfortable with the transition and that more volunteers will be coming in to the program as time passes. Dr. Tippit stated that he isn't clear on the policies and rules concerning voluntary participation, in particular, at what point would the Peer Assistance Network report a voluntary participant for a drug infraction. Mr. Hull responded by saying that in his talks with Dr. Strunk, if a relapse occurs with a participant, a participant will be asked to call Mr. Hull, followed by a request to call Dr. Strunk.

Dr. Tippit covered the basic process of volunteers who are way out of line in relapsing, and possibly being a threat to the public, would be reported to the Liaison to the Board for Peer Assistance, who will make the determination whether or not that individual would come to the attention of the Enforcement Division.

Dr. McDonald asked if a person enters the program are they directed to terminate all patient care activities during that period of treatment. Mr. Hull indicated that he does not have the authority to direct a volunteer participant to terminate patient care activities; however, he will request they cease and desist or either go into treatment or report to an emergency room so they can be properly evaluated for detox.

Dr. Villarreal asked what type of abuse is being seen the most. Mr. Hull reported that Demerol and Hydrocodone as being the most prevalent.

Mr. Wetherbee asked if the Board has provided Dr. Strunk enough guidance, or guidelines, to serve as the liaison and work closely with Mr. Hull. Dr. Tippit replied that Dr. Strunk, or the individual who serves as the liaison, will work closely with Mr. Hull and err on the side of caution.

5. COMMITTEE REPORTS:

a. Enforcement Committee. Dr. Irons reported that the Enforcement Committee met on October 30, 2003. A quorum of Committee members were present.

(1) Reports. Dr. Irons reported the Committee's review on a number of statistics and graphs as they relate to Enforcement and Legal. He added his gratefulness to Mr. Ablon for the effectiveness of the Enforcement Division and the job Legal is doing now due to the efforts of Mr. Houston. Things are moving in the right direction. The proposed Board Orders have received a very positive response.

(2) Rule 107.63, Informal Disposition. A copy of this rule was provided to members of the Committee for their consideration at the January Board Meeting. Once approved by the Board as proposed rules the rule will be published in the Texas Register for a 30-day comment period. These changes were brought about by SB 263 in an effort to expedite the Enforcement/Legal process.

(3) Rule 108.8, Records of the Dentist. Dr. Irons reported that Dr. McDonald made an effort to pole Pediatricians, Pedodontists, and all stakeholders regarding the recording of vital signs on children. He further added that Dr. McDonald discovered there is no set age for the validity of a blood pressure that gives any kind of information that can be useful unless the patient is medically compromised. Dr. McDonald also found that there was no consensus among professionals in terms of when the vital signs are relevant. Dr. Irons added that Mr. Ablon and Mr. Houston will be modifying the language to meet the parameters for Enforcement and Legal and that this rule will be discussed at the January Committee Meeting before it is introduced to the Board.

DR. TIPPIT CALLED FOR A BREAK AT 9:52 A.M.

DR. TIPPIT CALLED THE BOARD MEETING TO ORDER AT 10:18 A.M.

b. Licensing Committee. Dr. Malik reported the Licensing Committee met on October 30, 2003. A quorum of the Committee members were present.

(1) Registering Dental Assistants – SB 263. Dr. Malik reported on the discussion and consideration of a new requirement for SB 263, registering Dental Assistants. After much deliberation, the Committee is proposing to the Board that it contract with Tompson Prometric to assist with exam development and the implementation of the new exams. She also shared that at the August 21, 2003 Committee Meeting there were discussions with, and presentations from, the University of Texas (UT) Distance Education Center and Tompson Prometric. The Committee asked both organizations to work together, drawing from the best of both programs, to develop one program that will assist the Board in the development of the Dental Assistant Testing Program. Ultimately UT declined to participate in a letter dated October 6, 2003; therefore Prometric was offered a contract that included the addition of two more testing sites, one in Harlingen and one in Lubbock. Dr. Malik stated that this will provide greater access for the testing candidates, that 90% of the testing population will be within 50 miles of a Prometric Center and 99% will be within 100 miles.

Dr. McDonald asked who will have input to Prometric with respect to the areas of concentration and the areas of examination. Dr. Malik responded that Prometric psychometricians will work with Ms. Sanders and the Committee to develop a blue print and a job task analysis and then we will ask for input from educators, professional organizations, and any other entity who wants to submit questions for these exams.

MOTION MADE BY DR. MALIK, SECONDED BY MS. MCKIBBEN TO DIRECT BOARD STAFF TO EXECUTE THE CONTRACT WITH TOMPSON PROMETRIC TO DEVELOP AND IMPLEMENT THE NEW EXAMINATIONS REQUIRED BY SB 263. (FOR – 13 / OPPOSED – 0) MOTION CARRIES

(2) Continuing Education (CE). Dr. Malik reported that the Licensing Committee discussed possible amendments to CE requirements that would include an annual mandatory course in Record-keeping, Ethics, Jurisprudence and/or Risk Management. Dr. Malik would like to discuss the possibility with the full Board and bring the rule amendments before the Board. The Committee discussed the possibility of a course and/or exam through Prometric, or just requiring a yearly course, above and beyond the 12 hours of CE required at this time. Dr. Tippit opened the floor for discussion.

Dr. Mason asked why these courses should be required annually. Dr. Malik responded that it was discussed in Committee that perhaps the courses should be required every three to five years, but it was felt that in three years there could be a number of law or rule changes.

Dr. Stubbs stated that he agreed with Dr. Mason that the new CE not being required annually. He supports any help for the licensees of Texas to become familiar with our rules and regulations.

Mr. Garcia shared that he would like to have a feel for what other health professions are doing along a similar vein; maybe what other states are doing and lastly, he would like to know why do the additional hours have to be in addition to, and not be a part of the current CE requirement. Dr. Malik responded by saying that 12 hours of CE a year is minimal compared to most states. Many states do have an ethics requirement and it is mandatory. Dr. Malik also added that she can look into what other states are doing and that of those 12 hours of CE, 4 could be interactive on the internet, 4 hours could be dental journal work and 4 hours could be classroom lecture time. Dr. Stubbs added that the local dental societies also offer CE as well.

Dr. Mason asked if these subject areas are all inclusive or are licensees to take each class individually. Dr. Malik responded that subjects will be all inclusive in a three-hour course and stressed that what the Committee wants is an emphasis on the Texas Occupations Code and the TSBDE Rules and Regulations.

Dr. McDonald shared that the Texas Medical Board requires one hour of ethics per year. He also stated that statisticians deal mainly with validity and reliability in examining things and from Dr. Malik's presentation, the genesis of this came from our experience at settlement conferences. He also shared that at settlement conferences there is a fair amount of recidivism and in most all cases they are asked to take and write the Jurisprudence Examination. Dr. McDonald shared that he thinks we have a real good opportunity to post on our website rule changes and/or modifications.

Ms. Juba shared a point of comparison. She stated that to renew her insurance license every two years, she must complete 30 hours of CE every 2 years, 3 hours must be in ethics and it must be completed in a class.

Dr. Irons stated that from his view, the element that Dr. Malik brings up is do dentists incorporate the knowledge and do dentists have an understanding. Telling people to take a course may or may not accomplish what this Board wants. Dr. Malik agreed and stated again that this is an attempt to inform dentists. Dr. Irons stated that he supports the concepts of an exam on a three or five-year basis and that it holds more validity than a course.

Mr. Garcia commented that if people are not concerned about the rules in their own profession, then they do so at their own peril. Dr. Malik responded by saying that the loser in this is the public.

Mr. Wetherbee asked if we have the ability, in house, to make all changes on an annual basis or more frequently if necessary, and asked if we know how many people are hitting the website. Mr. Schmidt responded by saying we can make changes as needed and that a generic number of hits to the website would not provide an accurate account if the visitor was a dentist versus a member of the general public.

Ms. Sanders added that the Committee is concerned and aware of where these types of courses might be found and it was discussed to notify CE providers so there would be adequate time to develop the courses. She further added that she is aware of a couple of schools that are currently building a jurisprudence course.

Dr. Stubbs asked if there would be a proposal from the Licensing Committee at the next Board Meeting. Dr. Malik stated that the Committee would like to have a proposal ready.

Dr. Tippit closed the discussion by directing Dr. Malik and the Licensing Committee to bring a proposal to the Board concerning these issues to the next meeting.

c. Legislative Committee. Ms. Juba reported that the Legislative Committee met on October 30, 2003. A quorum of Committee members were present.

(1) Parity of Compensation for Staff Positions with that of other State agencies. Ms. Juba reported that the Committee has become aware that several of the TSBDE agency staff positions are classified and compensated differently from positions in other agencies. She further stated that the Committee feels it is time to determine why our agency staff are not on parity with other agencies, particularly concerning the nature of the fact that our staff have to deal with very complex issues, etc. Ms. Juba cited an example that a TSBDE Enforcement Investigator makes considerably less than that of the Lottery Commission or a Pharmacy Board Investigator. A solution to this may involve reclassifying positions and this would involve a recommendation and approval of the Legislative Budget Board. The Committee has asked staff to gather this information, be aware of the comparison between the agencies and make people aware during the off session.

(2) Forecast Enforcement and Legal Needs. Ms. Juba reported to the Board that Mr. Houston and Mr. Ablon have been requested to forecast their future needs by reviewing future case volume, acquire and staff higher in their departments and continue to look at the parity issue due to salary variances between agencies. Ms. Juba concluded her report stating that the Committee, with the help of Mr. Schmidt and staff will be taking steps to proactively ask for what this Agency requires to fulfill its mission.

d. Data Base Ad-Hoc Committee. Dr. McDonald deferred to Ms. Sanders for comment. Ms. Sanders reported that the Directors have met with Northrop Grumman to discuss options with Northrop- Grumman. The primary concern is that when Northrop-Grumman originally submitted a proposal to this agency, the Enforcement and Legal Divisions were headed by different directors and the need has changed significantly since that time. We have funding for the program to produce a system that will work for Legal and Enforcement. Ultimately it would be ideal for all divisions to utilize one database; however, it is uncertain that this will be possible given the amount of funding we have at this time.

Dr. Tippit pointed out that historically the database has been an issue with this agency. It has been brought up by the State Auditors and the Sunset Advisory Commission. The database is the control mechanism by which this agency keeps track of everything and report statistical data.

Dr. Tippit recalled that this database was an exceptional items request and that \$105,000 was appropriated. So we're more or less in a holding pattern while we redefine our needs.

Ms. Sanders wanted to make clear that the database used by Licensing is separate from the one used by the Enforcement and Legal Divisions. The database used by the Licensing Division is managed by the Department of Information Resources who has subcontracted with Northrop Grumman to manage their database. There is no Enforcement or Legal component to that system. Those systems are in-house and have been designed in-house. Ms. Sanders further shared that it is her perception that previous directors could not manage that database and had a lot of difficulty in reconciling data. After an audit two years ago, when the numbers couldn't be validated, the Agency was compelled to take affirmative action to resolve the problem, calling in Northrop Grumman, in an emergency status, and asked what they could do to get us to where we have some solid data. They bid the job, offered a resolution; however, a lot of details were not communicated to them. Now, with new directors, we're providing them new information, so essentially we're starting over.

Ms. Juba asked if the Enforcement and Legal Divisions are looking for a method of tracking cases. Mr. Ablon stated that they are looking for a program that will track cases, providing a detail record of case transference between the Enforcement and Legal Division as well as provide statistical information.

Dr. Irons asked if we're able to make a better diagnosis of what our problems are and report back to Northrop Grumman what it is we need and also asked if we are further refining our processes. Mr. Ablon stated that he feels we do have a clearer picture of what we need. Dr. Irons commended the Division Directors for using what we have currently and making the diagnosis for moving forward.

Dr. Tippit stated that the Committee is still reevaluating in terms of a new system and Dr. McDonald is making certain there will be an integration of the various disciplines.

Dr. McDonald added that there are areas we can continue to explore with Northrop-Grumman, or another company, to facilitate this.

Dr. Tippit suggested that Ad-Hoc Database Committee meet on January 29, 2004 and formulate these ideas and report back to the Board at the January 2004 meeting.

e. Medicaid Fraud Ad-Hoc Committee. Dr. McDonald reported that he has spoken to Ms. Amy Erban with the Governor's office and there has been no action taken on this issue. He further added that Ms. Erban has spoken to the Governor, through his Chief of Staff, that there has been a committee formed and discussions may begin in the near future. Dr. McDonald also stated that when the Governor's committee meets this Agency's Ad-Hoc Committee is ready to convene. Dr. McDonald shared that there maybe be an effort afoot for certain agencies to develop a pharmacology list of state-funded Medicaid prescription drugs that will initiate exploration into these areas of fraud and abuse.

Dr. Tippit shared that it is his understanding that it is the Governor's intention to attack this from a multi-disciplinary approach. Dr. McDonald agreed.

f. Staff Dentist Search Ad-Hoc Committee. Dr. Irons stated that this committee has nothing to report.

g. American Association of Dental Examiners (AADE) Report. Dr. Malik reported on the annual meeting of the AADE. Dr. Malik highlighted some of the suggestions the AADE has made to include, public members should observe an examination process; the role of State Boards is public protection; and Board disciplinary decisions must be consistent. She also shared that AADE has issued a challenge to public members. Public members should be considered an equal partner, not a place holder to avoid politics and the role they have in earning and maintaining mutual respect, and that they

are solely there to protect the public, and that on some Boards, public members served as officers, they write, or edit newsletters, and they serve as peer provider procedure liaisons. Dr. Malik also reported on the actions taken by the Maryland Board in urinalysis screening. She also reported that the AADE has dental simulated clinical exercises developed to hopefully identify areas of deficiencies and then assign appropriate education. She also indicated that the AADE still supports the use of a live patient for examination until equal testing procedures or solutions can be produced. AADE still supports licensure by examination and opposes Post Graduate Year One (PGY1) programs in lieu of examination. She cited an example that in New York instead of the North East Regional Board (NERB) or Western Regional Examining Board (WREB) they can go into a one year post graduate program (General Practice Residency) anywhere in the U.S. and then come back to New York and be licensed.

Dr. Malik also made available to members of the Board the AADE Guide entitled, "Guidance for Clinical Licensure Examinations in Dentistry."

Dr. Villarreal asked if the guidelines for Regional Exams was passed at this meeting. Dr. Malik indicated that this item was passed at this meeting.

Dr. Stubbs reported that he attended the AADE meeting and shared that he has been appointed as the AADE Representative to the Dental Assistant National Board. He wanted to emphasize that the PGY1 was before the AADE House of Delegates, Resolution 6. The Resolution is to validate/pass as a policy to support the one year residency for licensure. The Texas Delegation was opposed to it.

Dr. Malik shared that the State of Ohio is currently using an alternative to formal adjudication of licensees called "Quality Intervention Program." This program is based on the specifics of each case, most cases being where a licensee demonstrates poor practice patterns or fails to keep within practice standards. The licensee may have skill issues in one specific area so they could remediate through education and training in those areas of practice that need attention and possibly forego the disciplinary process if successful.

Dr. Malik stated another focus of the AADE Meeting was on conscious sedation and the regulations passed in many states. She stated that the AADE has a database of disciplinary actions taken by State Boards. Also available is a National Practitioner's Database which licensees can do queries on themselves for a fee of \$10.

Dr. Stubbs shared an interesting comment made regarding a new category the Federal Government is creating, Dental Therapist. This program is a two-year course in New Zealand and individuals who complete the course are sent to Alaska to the Indian Health Service to practice. The ADA sees this as a real problem with jurisdiction and monitoring of complaints.

h. Examination Ad-Hoc Committee. Dr. Villarreal reported that the Examination Ad-Hoc Committee met on October 30, 2003. A quorum of Committee members were present. Members of the Committee and Board were provided the following reference materials: "CRDTS, NERB, SRTA, WREB, CITA What's the Diff?," a Briefing by Dr. Pattalochi, an excerpt covering the guidance for Clinical Licensure Examination in Dentistry recently passed by the AADE, Clinical Examinations Accepted for Initial Licensure, a copy of Page 31, Issue 7, from the Sunset Commission Decision Material presented to the TSBDE and the State Board of Dental Examiners and WREB Position on Acceptance of Clinical Examination Programs.

(1) Texas Joining the Central Regional Dental Testing Service (CRDTS). Dr. Villarreal reported that the Examination Ad-Hoc Committee feels it is important for the State of Texas to be a part of CRDTS and that we have input into the CRDTS exam and thereby recommends to the full Board that the State of Texas join CRDTS as a member state.

Dr. Stubbs asked if Board Members, as examiners, will be obligated to perform their examinations as we are already scheduled with WREB. Dr. Tippit stated that with regard to the manpower issue, and Board Members taking on additional responsibility his answer would be "No." Dr. Villarreal agreed.

Dr. McDonald asked if most states participate in CRDTS. Dr. Villarreal indicated that 12 states use CRDTS and asked Members to refer to the handouts provided to them that show the participating states.

A MOTION MADE BY DR. MASON, SECONDED BY MR. GARCIA, FOR THE STATE OF TEXAS TO JOIN CRDTS AS A MEMBER STATE. (FOR – 13 / OPPOSED –0) MOTION CARRIES

(2) Texas Accepting the Results of the Southern Regional Testing Agency (SRTA) and North Eastern Regional Board (NERB) Exams for Licensure in Texas.

Dr. Villarreal reported that these two examination agencies cover the East side of the United States and that CRDTS and WREB cover approximately 30 states of which Texas does accept. The difference between the SRTA and NERB exams, from that of CRDTS and WREB, is basically that the grading criteria and style of exams are different. There are two words that describe the style of exams, "Compensatory and Conjunctive." A compensatory style consists of the different parts of an exam being totaled up to one score (75) which is a passing score. This method is used by CRDTS and WREB. A conjunctive style examination means one must pass all parts of the test in order to obtain a license. NERB having four parts and SRTA having five parts. The difference in retaking a NERB/SRTA exam, a person would only retake the part(s) failed. If you miss more than two parts you must retake the entire exam. With WREB/CRDTS if a person does not obtain a passing score of 75 they must retake the entire exam.

Dr. Villarreal introduced Ms. Lana Crawford to the Board. Ms. Crawford is a past Chair of the Dental Hygiene Advisory Committee and considered an expert on regional testing.. He further stated that she has been asked here today to answer any questions regarding the Hygiene portion of these tests. Ms. Crawford gave a brief summary of her examination history, stating that while serving a six-year term on DHAC she was appointed to serve on WREB and that she currently serves as a Chief Examiner for Dental Hygiene for WREB. She also shared that she has served three years as a NERB consultant examiner, serving five times as an examiner and that she has served as an examiner for CRDTS for two years.

Dr. Villarreal reported his discussions with Dr. Robert Pattalochi, member of the AADE, who is the only individual he could locate who can speak on the subject of all four examinations. He further added that Dr. Pattalochi lectures throughout the country on the regional exams. Dr. Villarreal also shared that he has spoken to the Director of NERB, Dr. Joseph W. Rossa, Chief Staff Executive and General Counsel of NERB regarding their test as well.

Dr. Tippit added that the impetus behind this is that the Sunset Commission required us to look at the four major regional exams that are represented by AADE and if we don't accept any exam, we must explain to the Sunset Commission why we don't accept that exam. He then opened the floor for discussion on the acceptance of these two additional exams to the State of Texas.

Ms. Juba asked Dr. Villarreal to comment on the 110:1 ratio of Hygiene Examiners for SRTA as indicated on Page 5 of Dr. Pattalochi's presentation. Dr. Villarreal responded by saying that when he graphed the statistics, his analysis showed the ratio of examiners-to-candidates as being 17:1 for WREB, 14:1 for SRTA, CRDTS has 7:1, and NERB has a 10:1 ratio. He also pointed out that one portion of the NERB and SRTA exam is computerized and no examiner is utilized.

Dr. Tippit asked if Ms. Crawford had any comments on this. Ms. Crawford shared that Dental Hygienists have more influence on the WREB and CRDTS Board's and based on her knowledge and experience, Dental Hygienists in the Northeast have more impact on their exam than those hygienists in the Southern Region. She further explained that at every WREB Dental Hygienist Exam a dentist is always present and in the SRTA only one dental hygienist is present. Ms. Crawford closed her comments saying that at SRTA the dentists are examining both a dental exam and dental hygiene exam at the same time.

Mr. Garcia offered a public view and concern on access to care and removal of barriers. He asked if so many states have allowed these exams, what is the case for not allowing them in Texas? He also added at this time that he feels he has not heard adequate justification for not allowing these exams, and that it appears we have been charged to look at this and explain why we would not allow these exams. His recommendation is that the Board approve these exams to Texas. He concluded his statement saying he isn't certain the case will be made in increasing the numbers to access to care, but hopes it will have some effect.

Ms. McKibben asked Dr. Villarreal to clarify if Dr. Pattalochi has suggested Texas accept these two exams. Dr. Villarreal responded by saying that Dr. Pattalochi gave a neutral opinion on this subject. Mr. Garcia clarified for the record that Dr. Pattalochi did not present any arguments, or validate any reason why we should not, and seemed to have the impression that all of the exams accomplish the same goal of weeding out incompetents.

Dr. Stubbs shared that he shares the same concern as Mr. Garcia does, access to care. He shared his experience being a Chief Examiner with Dental Hygiene and shared that in talking to hygienists who have participated in these different examinations, besides WREB, the concern has been quality of care and quality of access to care.

Dr. Stubbs feels he is getting the reading that CRDTS is an exam that maintains good quality as does WREB. He shared that he is not getting the same reading from those he has spoken to about NERB, that they don't sense the same quality of examination.

Dr. Tippit added that Texas already accepts the NERB exam for credentialing and further stated personally that he's uncertain that this Board is here to evaluate which is the best exam, but what is relevant is if these four regional examinations meet the minimum threshold of the Standard of Care in Texas for licensure. He also shared that the WREB exam is a great exam, but by the same token he would have a difficult time sitting before a Senate Committee, who will ask why 21 states accept NERB and the State of Texas does not.

Dr. Malik shared that she has talked to several examiners that have been to NERB and SRTA and she is getting the same feedback that Dr. Stubbs is getting. She further pointed out that this Board sent examiners to CRDTS for several years to experience it and see what the exam was really like. She also stated that simply because a licensee comes to the State of Texas to practice does not mean that they will establish a practice where they are needed, that they will be going to Houston, Dallas, Austin and San Antonio unless they are offered financial incentive. Returning to the main topic of discussion, Dr. Malik further added that this Board should consider funding someone that has exam experience go to NERB and SRTA and observe to make certain what these tests do in reality since she has heard issues surrounding anonymity, security, faculty members being on the floor, consultations with candidates, and team diversity. These observations can be the basis of what information we take forward to the Legislature to substantiate why the State of Texas should not accept these exams.

Dr. Villarreal acknowledged the position of Drs. Stubbs and Malik's and shared a comment made by Ms. McKibben at the Committee Meeting, that the CRDTS exam, has different criterion from WREB, that this doesn't make them an unfair exam, but it does show a different modality of doing things.

Dr. Tippit asked what the AADE position on NERB is. Dr. Malik responded saying she is not aware they have one. Dr. Villarreal indicated that the AADE consists of examiners from all four Regional Exams, and that as a group, they agree to the new guidelines.

Mr. Wetherbee asked if we have any pass/fail rate statistics on these exams. Dr. Villarreal reported that NERB had the highest failure rate and adjusted the exam because the standard was too high.

Ms. McKibben stated that she feels no one on the Committee, or the Board, wants to 'not' allow NERB and SRTA for licensure, that she wants to participate in the NERB and SRTA examination process. She further shared that Ms. Allen has served as a CRDTS Examiner and that in a conversation with Ms. Allen regarding the CRDTS exam, examiners, over the patient, discuss treatment options, and it's the best debater who wins in that given situation. She shared again that as she indicated in the Examination Ad-Hoc Committee Meeting, personally and professionally she doesn't agree with that, but the integrity of CRDTS exam is there, and that's why we accept it. Ms. McKibben further stated she voted "no" at the Committee Meeting because in her view it is premature at this point to accept these exams. By viewing the exam a person can observe what is seen and written between the lines and look at security and the integrity of the exam.

Ms. Juba stated that she has heard some very good points on this issue and that Dr. Malik raised some valid concerns in terms of anonymity, security, and faculty members on the floor. She further added that it is very difficult for her to cast her vote until examiners on this Board have been able to observe it and develop a comfort level. She asked if there is a timeframe in presenting our rationale for accepting, or not accepting these exams to the Legislature. Dr. Tippit responded that he doesn't believe there is a timeframe per se', but this Board has been instructed to evaluate these exams and if they are not accepted, then it must be put in writing why they are accepted. He personally feels the State of Texas should be on the leading edge of helping to consolidate these tests and that it's not an undue leap of faith to accept the fact that 21 States, and the AADE accept them.

Mr. Wetherbee stated that if we need to have a reason to not to accept these exams today, he feels we have that before the Board today based on what has been shared. He continued that if it is within our means to have some representatives take a look, that this might be the appropriate thing to do until we develop a comfort level.

Dr. Tippit reiterated to the Board that this is a topic for discussion, that can be tabled. We need at least a year in order to get everything in line, i.e., funding, the database, etc., so that will be considered.

Ms. McKibben asked Ms. Crawford if she knew if NERB and SRTA would cover the cost of the trips to observe the exams if this Board were looking at accepting these exams. Mr. Crawford responded that as a WREB consultant they paid for her to attend the General Assembly and to travel to each exam site. When she examines for CRDTS, CRDTS pays WREB, who subsequently pays her. Commenting on NERB, Ms. Crawford stated that NERB has been examining since 1969 and were the first regional board, they are the largest regional board. They have 14 states and DC. They examined 6,200 individuals in 2002. A typical NERB exam has a very brief calibration. Every NERB examiner has to go to the General Assembly. A lot of that is organization and policy and is a necessity to have if you serve as an examiner. Ms. Crawford reports that the process is entirely different than WREB and CRDTS. She also stated that NERB utilizes retired examiners who may live as far away as Florida or California. In WREB or CRDTS you must be an active clinician. In NERB and also in SRTA for the dental hygiene portion of the exam, there is no local anesthesia allowed. That makes for some difference for the dental hygiene exam because a topical anesthetic is the only thing allowed. Ms. Crawford reported that after NERB and SRTA exams you get less feedback back from the psychometrician on how you calibrate and examine.

Ms. McKibben stated that credentialing requirements used to be five years, and is now three years. Three years of experience is better than no years of experience. She also shared her feeling that at this point in time we don't know that NERB or SRTA is to the standard that we want to expect.

Dr. Mason shared that the thrust is for this Board to have some type of hands-on experience and questions if there is some type of objective analysis for evaluating these regional boards. Lastly, he asked if this Board were to visit these regional exams would our observation be objective or subjective, and what would we hope to accomplish.

Dr. McDonald asked for clarification on voting to accept SRТА. He questioned the difference between credentialing and licensure. Dr. Tippit stated 36 months is the difference. Dr. McDonald asked what steps this Board took when it started to investigate participating and accepting CRDTS. Dr. Tippit shared that what he felt happened is that CRDTS and WREB developed a relationship integrating both their examiners and philosophies and speculates that this may be what is happening with AADE and all four examinations at the national level. Dr. Malik commented that down the road there might be a national exam.

Dr. McDonald asked another question discerning between the licensure of a student who matriculates and takes the NERB exam, passing it and practices in the State of New York and a student who receives licensure through the PGY1 program, when passed, who will practice in the State of New York. Ms. Sanders responded by saying that the rules require any individual applying for licensure by credentials meet an extensive list of criterion, included is a General Dentistry Clinical Examination at a State or Regional level. This Board has mandated that a State or Regional General Dentistry Clinical be accomplished. Ms. Sanders stated that an individual as described under the second scenario (PGY1) will not qualify for licensure in the State of Texas. Dr. McDonald asked if Ms. Sanders feels there will be any cost implication as a result. Ms. Sanders shared that we do not have adequate staff to cover the influx of license applications. Dr. McDonald asked if any anticipated number has been arrived at. Ms. Sanders replied that she has no way of knowing without polling some of these other organizations.

Dr. Irons shared that he is in agreement with Dr. Villarreal that we are evaluating bare minimum competence.

MOTION BY MR GARCIA, SECONDED BY DR. MASON TO ACCEPT NERB AND SRТА EXAMINATIONS FOR LICENSURE IN THE STATE OF TEXAS, IN ADDITION TO BE A VOTING AND PARTICIPATING MEMBER OF CRDTS WITH CONCURRENT INSTRUCTIONS TO STAFF TO WRITE THE RULES FOR PUBLISHING WHICH WILL BE DISCUSSED IN JANUARY 2004. (FOR – 8 / OPPOSED - 4 / ABSTENTIONS - 1) MOTION CARRIES.

DR. TIPPIT CALLED FOR A LUNCH BREAK AT 11:25 A.M.

DR. TIPPIT CALLED THE BOARD MEETING TO ORDER AT 12:11 P.M.

6. RULES.

a. Rule 101.7, Licensure by Credentials – Dentists. MOTION MADE BY DR. STUBBS, SECONDED BY DR. VILLARREAL TO ADOPT AMENDMENTS TO RULE 101.7. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

b. Rule 102.1, Fee Schedule. MOTION MADE BY DR. STRUNK, SECONDED BY MS. MCKIBBEN TO ADOPT AMENDMENTS TO RULE 102.7. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

c. Rule 103.2 – Licensure by Credentials – Dental Hygienists. MOTION MADE BY MR. WETHERBEE, SECONDED BY DR. VILLARREAL TO ADOPT AMENDMENTS TO RULE 103.2. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

d. Rule 104.3 – Retired Status. MOTION MADE BY DR. MASON, SECONDED MR. WETHERBEE TO ADOPT THE REPEAL OF RULE 104.3. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

f. Rule 107.63 – Informal Disposition. Mr. Houston stated to comply with the mandates and requirements of SB 263, regarding the use of Staff Settlement Conferences in order to give staff great ability to address some of the case load and make sure that staff has input on the resolution of cases as well as to take into account the new ADR Requirements of SB 263, we are proposing to publish Amendments to Rule 107.63 for vote at the January 2004 Board Meeting.

Mr. Houston stated that this rule creates a Staff Settlement Conference and distinguishes between the current settlement conferences as being Board Settlement Conferences; however, there will be slight differences between the two. One of the issues with regard to the Board Settlement Conferences that may be new will be a delegation of the authority to close cases at the settlement conference. In particular, if there is a case being heard by a settlement panel, and a vote by that panel, and a decision is made to close that case, or dismiss it, that dismissal will be effective immediately instead of waiting for a Board vote. It is felt that this will shorten the time respondents will have to wait for a case to be dismissed.

Mr. Houston then covered the language and procedures that bring into existence the staff settlement conferences. To note briefly, at a minimum requirement this panel will be staffed by an Attorney of the Board and either the investigator responsible for the case or Director of Enforcement. This panel will also require the participation of a Board Member to advise on any standard of care matters. Cases that don't involve Standard of Care issues will be passed on by staff exclusively without Board Member participation.

The dismissal of a case by a Staff Settlement Conference can be appealed to a PEC in accordance with 107.102(H). This would be an agreed mechanism if a complainant is not in agreement with a case being dismissed by staff. The other significant change in the rule is the addition of alternative dispute resolution that gives the Board the ability to look at full range of types of resolution in resolving the cases before the Board.

Mr. Houston stated that any matter that is resolved by alternative dispute resolution would have to come before the Board for approval. Care was given to ensure that there will be no wholesale delegation of the Board's power. The Board has to take action on these matters.

Mr. Houston reported that the last item added to Rule 107.63 was a section regarding restitution. This adopts the requirements of SB 263 that gives the Board the ability to use restitution to resolve cases.

Mr. Houston closed his comments by suggesting Board Members review this rule and asked everyone to address comments and questions to him. Staff will attempt to finalize this rule for possible proposal for publication to the Board at the January 2004 Meeting. Copies of this rule will be provided to stakeholders for comment as well.

g. 108.8 –Records of the Dentist. NO BOARD ACTION NECESSARY.

h. 108.33 – Sedation/Anesthesia Permit. Dr. McDonald reported that staff was directed to bring language and he is reviewing them at this time. **TABLED FOR DISCUSSION AT THE JANUARY 2004 MEETING.**

i. 108.34 – Permit Requirements and Clinical Provisions. Dr. McDonald reported that this rule is under review at this time. **TABLED FOR DISCUSSION AT THE JANUARY 2004 MEETING.**

j. 117.1 – Exemptions. Mr. Houston proposed for consideration and approval for publication for comments in the Texas Register. This rule was originally considered by the Board at the August Board Meeting. Staff were directed to correct some additional language with regarding clarifying the Scope of Practice of faculty licensure. **MOTION MADE BY MR. WETHERBEE, SECONDED BY DR. STUBBS TO PROPOSE AMENDMENTS TO RULE 117.1 AND PUBLISH RULE 117.1 IN THE TEXAS REGISTER FOR A 30-DAY COMMENT PERIOD. (FOR – 13 / OPPOSED - 0) MOTION CARRIES.**

k. 117.2 – Faculty Licensure – Dental. **MOTION MADE BY STRUNK , SECONDED BY MASON TO PROPOSE NEW RULE 117.2 TO ALLOW FOR LICENSURE OF A DENTAL SCHOOL FACULTY MEMBER AND SUBMIT TO THE TEXAS REGISTRY FOR A 30-DAY COMMENT PERIOD. (FOR – 13 / OPPOSED - 0) MOTION CARRIES.**

l. 117.3 - Faculty Licensure – Dental Hygiene. **MOTION MADE BY STRUNK , SECONDED BY MASON TO PROPOSE NEW RULE 117.2 TO ALLOW FOR LICENSURE OF A DENTAL HYGIENE SCHOOL FACULTY MEMBER AND SUBMIT TO THE TEXAS REGISTRY FOR A 30-DAY COMMENT PERIOD. (FOR – 13 / OPPOSED - 0) MOTION CARRIES.**

7. LICENSING AND EXAMINATION DIVISION REPORT

a. Permits. Dr. McDonald presented the following permits for approval:

(1) Parenteral Anesthesia Permits. **A MOTION BY DR. MCDONALD, SECONDED BY DR. MASON TO APPROVE SIX PARENTERAL SEDATION/ANESTHESIA APPLICATIONS AS PRESENTED. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.**

(2) Nitrous Oxide Permit Applications. **A MOTION BY DR. MCDONALD, SECONDED BY MR. GARCIA TO APPROVE 45 APPLICATIONS AS PRESENTED. (FOR - 13 / OPPOSED – 0) MOTION CARRIES.**

(3) Enteral Conscious Sedation Permits. **A MOTION BY DR. MCDONALD, SECONDED BY DR. STUBBS TO APPROVE 48 APPLICATIONS AS PRESENTED. (FOR - 13 / OPPOSED – 0) MOTION CARRIES.**

b. Licensing and Examination Division Report. Ms. Sanders provided the 4th Quarter targets as well as the Fiscal Year totals for review and comment. She also provided the Board an update on Dentist Profiling, stating that a postcard mailing has been sent to licensees by the Department of Information Resources notifying licensees that profiling is available on the Texas Online website with a request for dentists to review their information and update it accordingly. The public will have access to this website information in January 2004.

8. ENFORCEMENT DIVISION REPORT.

a. Program and Staffing Report. Mr. Ablon presented Monthly Activity and Case Aging Reports for September and October as well as the 4th Quarter Statistics and Year End data. Also provided was a report on Closed/Dismissed Cases for August and September 2003. Mr. Ablon also shared that he has hired a new administrative staff member, Ms. Barbara Bostick who is replacing Ms. Guillen who

accepted a position with another State agency. He also reported that funding became available to hire an investigator for the Houston office and that position has been filled by Mr. Ron Sillavan. He further shared that relations with the Peer Assistance Network staff has been strong.

c. Task Force Matters. Mr. Ablon is requesting approval from the Board to add two more consultants to the Task Force, Dr. Norman Sawyers an Endodontist from Victoria who comes recommended by Dr. Malik and Dr. John Ross, an Endodontist from Longview known well by Dr. Strunk . Both gentlemen meet all the criteria and have indicated an interest in serving.

MOTION MADE BY MS. MCKIBBEN, SECONDED BY DR. MALIK TO ACCEPT DRS. SAWYERS AND ROSS AS CONSULTANTS TO THE ENFORCEMENT TASK FORCE. (FOR - 13 / OPPOSED - 0) MOTION CARRIES.

9. ADMINISTRATIVE DIVISION REPORT.

a. Actual Performance for Output/Efficiency Measures for Fourth Quarter Report.

Ms. McPherson presented the FY03 Budget Review for the Fourth Quarter which reflects:

		Above / Below Targeted Performance
Complaints	+ 51%	Above
Peer Assistance Program	- 22%	Below
Licenses Issued	+ 17%	Above
Licenses Renewed	+ 6%	Above
Average Time for Complaint Resolution	+ 54%	Above
Average Individual Licensing Cost	On Target	
Average Licensing for Dental Laboratories	- 6%	Below

b. Actual Performance for Outcome Measures Report.

Complaint Resolution	+ 14%	Above
Licenses with No Violations	On Target	
Jurisdictional Complaints Received	+ 72%	Above
Laboratories Licensed	On Target	

c. Performance Measures for FY 2003 (Review of Total 23 Measures). Ms. McPherson reported on all 23 attainable measures stating that 17 measures were attained in FY 2003 reaching 74%. In FY 02 this Agency attained 70%.

10. LEGAL DIVISION REPORT.

a. Agreed Settlement Orders. Mr. Houston presented 27 Board Orders that addressed 33 Agreed Settlement Order Cases to the Board for approval.

#	ASO #	MOTIONED	SECOND	VOTE	ACTION
1.	02-053-1001BA	Mr. Wetherbee	Ms. Juba	For – 13 / Opposed – 0	Motion Carries
2.	03-046-0916	Dr. McDonald	Dr. Stubbs	For – 13 / Opposed – 0	Motion Carries
3.	03-341-0114	Dr. Mason	Ms. McKibben	For – 13 / Opposed – 0	Motion Carries
4.	02-077-1016BA	Dr. Villarreal	Dr. Strunk	For – 13 / Opposed – 0	Motion Carries
5.	02-428-0304DI	Dr. Stubbs	Dr. Mason	For – 13 / Opposed – 0	Motion Carries
6.	02-887-0829DF	Ms. Juba	Dr. Strunk	For – 13 / Opposed – 0	Motion Carries
7.	02-710-0624DI	Mr. Garcia	Dr. Strunk	For – 13 / Opposed – 0	Motion Carries
8.	02-437-0304JS	Dr. Villarreal	Mr. Wetherbee	For – 13 / Opposed – 0	Motion Carries
9.	02-819-0731 and 02-656-0530	Dr. Villarreal	Dr. Mason	For – 13 / Opposed – 0	Motion Carries
10.	02-482-0318	Mr. Wetherbee	Dr. Mason	For – 10 / Opposed – 0	Motion Carries
11.	98-236-0113 and 98-543-0707	Dr. Stubbs	Dr. Strunk	For – 10 / Opposed – 0	Motion Carries
12.	02-520-0408	Dr. Mason	Ms. McKibben	For – 10 / Opposed – 0	Motion Carries
13.	03-540-1313	Dr. Strunk	Dr. Stubbs	For – 13 / Opposed – 0	Motion Carries
14.	03-412-0128	Mr. Wetherbee	Dr. Villarreal	For – 13 / Opposed – 0	Motion Carries
15.	02-729-0701DI	Mr. Wetherbee	Dr. Mason	For – 10 / Opposed – 0	Motion Carries
16.	02-455-0307DI	Dr. Stubbs	Mr. Wetherbee	For – 13 / Opposed – 0	Motion Carries
17.	02-803-0729RG	Dr. Strunk	Dr. McDonald	For – 13 / Opposed – 0	Motion Carries
18.	02-380-0212BA	Ms. McKibben	Dr. Mason	For – 13 / Opposed – 0	Motion Carries
19.	01-735-0810	Dr. McDonald	Mr. Wetherbee	For – 10 / Opposed – 0	Motion Carries
20.	02-884-0829FJ	Dr. Stubbs	Ms. McKibben	For – 13 / Opposed – 0	Motion Carries
21.	02-885-0829DF	Mr. Wetherbee	Dr. Strunk	For – 13 / Opposed – 0	Motion Carries
22.	02-627-0515DI	Dr. Stubbs	Mr. Wetherbee	For – 13 / Opposed – 0	Motion Carries
23.	02-115-1031CC	Dr. McDonald	Dr. Mason	For – 13 / Opposed – 0	Motion Carries
24.	02-472-0318JS	Dr. Villarreal	Dr. Mason	For – 13 / Opposed – 0	Motion Carries
25.	02-507-0402BA	Dr. Mason	Mr. Wetherbee	For – 10 / Opposed – 0	Motion Carries
26.	01-258-1221 and 02-316-0118	Dr. Strunk	Dr. Stubbs	For – 10 / Opposed – 0	Motion Carries
27.	02-780-0719BA	Dr. Mason	Dr. Stubbs	For – 13 / Opposed – 0	Motion Carries
28.	02-071-1015BA	Dr. Strunk	Mr. Wetherbee	For – 10 / Opposed – 0	Motion Carries
29.	03-763-0530	Dr. Stubbs	Dr. Mason	For – 10 / Opposed – 0	Motion Carries
30.	02-718-0626JS	Mr. Wetherbee	Mr. Garcia	For – 13 / Opposed – 0	Motion Carries
31.	00-475-0511 and 02-306-0117 and 03-005-0906	Dr. Stubbs	Dr. McDonald	For – 10 / Opposed – 0	Motion Carries

b. Proposal For Decision (PFD). Mr. Houston presented one PFD from the Administrative Law Judge to the Board for approval, Clara L. Harris, D.D.S., SBDE Nos. 03-452-0213, SOAH No. 504-03-3740. **A MOTION BY DR. STUBBS, SECONDED BY DR. MASON TO APPROVE THE PROPOSAL FOR DECISION ON THE REVOCATION OF DENTAL LICENSE TO CLARA L. HARRIS. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.**

c. Letters of Dismissal. Mr. Houston presented seven Letters of Dismissal to the Board for approval.

1. 02-676-0606
2. 01-601-0608
3. 02-157-1115
4. 02-600-0506
5. 02-001-0904
6. 03-199-1108
7. 02-654-0529

A MOTION BY DR. STUBBS, SECONDED BY DR. MASON TO APPROVE THE SEVEN LETTERS OF DISMISSAL. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

d. Division Report. Mr. Houston presented the Legal Division Report highlighting statistics regarding Informal Settlement Conferences, Initial Proposed Board Orders, SOAH Actions and Future Activities. He also provided a Case Report for September 2003 and charts covering FY03 case trends.

e. Staffing. Mr. Houston introduced Mr. Rob Hill as a new attorney joining the Agency and shared that two additional attorneys will be joining the Agency in mid-November.

f. Orientations and Training. Mr. Houston reported that Legal staff will be attending an Alternative Dispute Resolution Center Orientation required for all State Agencies who are adopting the new ADR procedures. This orientation will provide consistency between Agencies and ensure each Board provide a point of contact to streamline dispute resolutions. He further added that the Legal Division attended the Advanced Administrative Law Conference in September 2003 and there is a task force which will be following up on open government issues, conflicts and ethical issues with regards to all State Agencies. Mr. Houston closed by stating Legal and Enforcement Division staff will be attending a Drug Diversion Course held on Controlled Substances in at the end of the month.

e. Report of Liaison to Legal Division for State Office of Administrative Hearing (SOAH) Resolution. Mr. Garcia reported that the Legal Division has approximately 189 cases where respondents have decided they do not want to settle their case, so the only avenue is SOAH. He reported that in 2001, the total number of cases filed in SOAH was three. In 2002, the number was 28, and met resolution within an average of 5- to 6-month period. This year, 26 cases have been filed at SOAH with 11 more to be filed soon. Mr. Garcia reported that Mr. Houston and Mr. Schmidt have developed monthly targets for filing cases with SOAH, filing a minimum of five cases at current staff levels and 10 cases a month when the Legal Division is fully staffed. Mr. Garcia feels this process is heading in the right direction.

11. DECLARATION OF INTEREST TO SERVE AS BOARD SECRETARY. Dr. Tippit covered the history of the election process and the selection of Board Secretary. He further explained that SB 263 has changed such that the title of ‘President’ no longer exists, and is now called the ‘Presiding Officer’ and is appointed by the Governor. As such there are changes in protocol and in the dynamics of the election of the Board Secretary.

An individual who cares to seek the Office of Secretary of this Board will declare they are interested in serving as the Secretary. Formal nominations will be held at the next TSBDE Board Meeting on January 30, 2004. At that Board Meeting, someone will specifically nominate that individual, or individuals who care to seek the position of Board Secretary.

Immediately following that there will be a secret ballot vote. Votes will be collected and counted by TSBDE Executive Director and General Counsel followed by an announcement of the newly elected Board Secretary. The term of the newly elected Secretary will begin at the end of the January 2004 Board Meeting. Dr. Tippit then opened the floor for declarations from Board Members interested in serving as TSBDE Secretary.

Dr. McDonald apprised the Board of his interest in serving as the TSBDE Secretary. He shared his hope that everyone will view his qualifications, positions, and his articulation of the issues, should Members choose to elect him to the position of Secretary.

12. EXECUTIVE DIRECTOR'S REPORT. Mr. Schmidt presented the Board with the Executive Director's Report focusing on the implementation of the Sunset Advisory Commission's Recommendations (June 2002) and SB 263 Requirements (effective date 2003) by the TSBDE. Mr. Schmidt's report highlighted the seven main recommendations and reported actions taken and reported that staff continues to monitor each as well as the procedures necessary for implementing SB 263.

Mr. Schmidt reported that close attention to the recommendation brought forward in Issue 2 that warns us to separate the duties and responsibilities of Board and Staff. He shared that any efforts to ignore or circumvent the concerns that are evident in this recommendation could result in additional investigations from other State agencies. Mr. Schmidt shared that these types of issues have surfaced before in this Agency and were the cause of much scrutiny in resulting investigative reports. He states that we must stay focused on our mission and our direction from the State Legislature.

Mr. Schmidt shared that the staff of this Agency is the most competent staff he has ever been associated with and an annual review of the Executive Director will occur at the January 2004 Board Meeting. He will be developing and submitting a draft for Dr. Tippit and Ms. Juba concerning his views on a plan of action to implement the Legislative Agenda for the 79th Legislative Session.

12. PRESIDENT'S REPORT. Dr. Tippit provided a report to the Board those topics listed below:

a. Appointment Confirmations.

(1) Mr. LeeRoy Marsden, CDT – Dental Laboratory Certification Council

MOTION BY MR. WETHERBEE, SECONDED BY DR. MASON TO CONFIRM THE APPOINTMENT MR. LEEROY MARSDEN, CDT TO THE DLCC. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

(2) Dr. Charles Stephen Caldwell – Anesthesia Consultant

A MOTION BY DR. MCDONALD, SECONDED BY MR. GARCIA TO CONFIRM THE APPOINTMENT OF STEPHEN CHARLES CALDWELL, DDS AS AN ANESTHESIA CONSULTANT. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

(3) Dr. Carolyn F. Wilson – Anesthesia Consultant

A MOTION BY DR. STRUNK, SECONDED BY DR. MCDONALD TO CONFIRM THE APPOINTMENT OF CAROLYN F. WILSON, DDS AS AN ANESTHESIA CONSULTANT. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

b. Announcements. Dr. Tippit made the following announcements:

(1) **Executive Session – January Board Meeting.** There will be an Executive Session at the January 2004 Board Meeting for evaluation of the Executive Director.

(2) **Examination Ad-Hoc Committee Meeting.** Dr. Tippit directs this Committee to meet to discuss the future acceptance of NERB and SRTA which was discussed at this meeting. The purpose of that would be to review and clarify rule making and also receive the public comments and input which could be considerable.

13. PUBLIC COMMENTS. None were made.

14. ANNOUNCEMENTS.

a. Settlement Conferences. Dr. Tippit announced that the next Informal Settlement Conferences will be held on December 4-5, 2003 and serving Board Members will be himself, Dr. Strunk and Ms. Juba.

b. Next Board Meeting. Dr. Tippit announced that the next TSBDE Board Meeting will be held on Friday, January 30, 2004.

c. Next Committee Meetings. Dr. Tippit announced that Committee Meetings will next be held on Thursday, January 29, 2004.

d. Personal Announcements. Dr. Tippit congratulated Ms. Allen and her husband on the adoption of their baby.

15. ADJOURN. A MOTION BY DR. STUBBS, SECONDED BY DR. MASON TO ADJOURN THE MEETING AT 2:00 P.M. (FOR – 13 / OPPOSED – 0) MOTION CARRIES.

- SIGNED -

- SIGNED -

DR. NATHANIEL G. TIPPIT
Presiding Officer
Texas State Board of Dental Examiners

DR. J. KEVIN IRONS
Secretary
Texas State Board of Dental Examiners

Date Signed: January 30, 2004

Date Signed: January 30, 2004