

MINNESOTA'S 21ST CENTURY DENTAL TEAM TOOLKIT

Collaborative Dental Hygiene Practice

Frequently Asked Questions

Q: Can a dental hygienist who is **not associated with a dentist/dental practice** provide clinical dental hygiene services in community settings, e.g. nursing homes, schools, Head Start Centers **without** a written collaborative agreement? (11/18/19)

A: No. A dental hygienist needs to have a written collaborative agreement in place in order to legally provide clinical dental hygiene services in a community setting.

Q: Can a dental hygienist who is **employed by or works for a dentist/dental practice** provide clinical dental hygiene services in community settings, e.g. nursing homes, schools, Head Start Centers **without** a written collaborative agreement? (11/18/19)

A: No. A dental hygienist needs to have a written collaborative agreement in place in order to legally provide clinical dental hygiene services in a community setting.

Q: Is there a point at which a site such as a nursing home, Head Start center etc. is considered a component (some might say a 'satellite') of a dental practice and therefore the clinical care would be considered to be dental hygiene services provided under general supervision? (11/18/19)

A: No. Nursing homes, Head Start centers etc. are two examples listed as "community settings" per MN Statute 150A.10 and should not be considered a component or "satellite" location for a dental practice, unless the site is permanently set up as a dental clinic and serves no other purpose than delivering dental services in that location.

Q: How many dental hygienists can a dentist enter into a collaborative agreement with? (11/18/19)

A: A dentist can enter into a collaborative agreement with up to 4 licensed dental hygienists, "unless otherwise authorized by the board."

Q: How many dentists can a dental hygienist enter into a collaborative agreement with? (11/18/19)

A: A dental hygienist may have collaborative agreements with any number of dentists—often determined by the community sites they serve.

Q: Some mobile programs serve many buildings/sites. Does the law require the mobile program to identify in the collaborative agreement every site, e.g. school building(s), Head Start center(s), nursing home(s), etc. served by the mobile program? Or, does the collaborative agreement only require the name of the setting or organization being served to be listed? (11/18/19)

*A: The statute is grey in this area, i.e. "The collaborative agreement must be signed and maintained by the dentist, the dental hygienist, and the facility, program, or organization." * Attaching a separate document to the dental hygienist's collaborative agreement is a way to keep the list of sites served current for the required annual review of the collaborative agreement and available, should it be requested by the Board.*

Q: Does a dental hygienist need a collaborative agreement to participate in public 'screening' events such as Head Start or WIC clinic screening; Minnesota Department of Health state-wide Basic Screening Survey (BSS), community events, etc. that may result in a referral but "does not include the establishment of a final diagnosis or treatment plan for a dental patient". * (11/18/19)

A: A dental hygienist does not need a collaborative agreement to participate in this public health effort.

Q: Is registration of my collaborative agreement with the Board of Dentistry required or is it just recommended? (11/18/19)

*A: Minnesota Statute 150A.10 states that the collaborative agreement "must be made available to the board upon request." * The Minnesota Board of Dentistry strongly encourages registration of the dental hygiene collaborative agreement through the Board's online portal. Submission of the written agreement itself is not required although the Board may, at any point, request a copy to be delivered for review. <https://mn.gov/boards/dentistry/current-licensee/collaborative-agreements/>*

Q: Does a dental hygienist who works in a traditional dental practice in which a dentist is the owner or on staff, need a collaborative agreement to provide services within their scope of practice at times/on days when a dentist is not present in the office? (11/18/19)

*A: No, a dental hygienist working at a dental office while the dentist(s) are not present can work and deliver services under general supervision as detailed in the dental hygiene scope of practice. ***

Q: Does a dental hygienist need a collaborative agreement in order to "see new patients first" i.e. to initiate preventive services/take radiographs in the dental office when a dentist is **onsite/ in the office**? (11/18/19)

*A: A collaborative agreement was **never** intended for use within a traditional dental practice, particularly when a dentist is onsite. An office protocol describing determination of need for and exposure of radiographs guided by the ALARA principle- as low as reasonably achievable- should be clearly communicated. ***

* Minnesota Statute (2019)

150A.10 Allied Dental Personnel. <https://www.revisor.mn.gov/statutes/cite/150A.10>

** Minnesota Administrative Rules 3100.0100

General supervision means the supervision of tasks or procedures that do not require the presence of the dentist in the office or on the premises at the time the tasks or procedures are being performed but require the tasks be performed with the prior knowledge and consent of the dentist. <https://www.revisor.mn.gov/rules/3100.8700/>