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Who is building the future of dental hygiene licensure?

Dental hygiene licensure is evolving, but who is shaping its future? This author examines concerns about ADA influence, testing agency independence, and why dental hygienists must lead decisions affecting professional autonomy and licensure standards.

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Key Highlights

- The ADA, JCNDE, and ADEX are discussing aligning dental hygiene licensure assessments, raising concerns about the lack of dental hygiene organization involvement.
- Greater coordination among testing agencies could affect professional autonomy, exam competition, and control over dental hygiene licensure.

- Dental hygienists need a stronger leadership role in shaping licensure standards and decisions that determine the future of their profession.

Dental hygienists should be paying very close attention to an announcement that, on its surface, sounds fairly routine.

The American Dental Association (ADA), Joint Commission on National Dental Examinations (JCNDE), and the American Board of Dental Examiners (ADEX) recently announced they are discussing ways to align dental hygiene licensure assessment. According to the announcement, that includes examination content, evaluation methods, and even the candidate experience.

Noticeably absent as an organizational partner is any dental hygiene group such as the National Dental Hygienists' Association or the American Dental Hygienists' Association. That should make us ask a much larger question:

Who exactly is building the future of dental hygiene licensure, and why aren't dental hygienists leading the conversation?

Consider how much influence already exists within the ADA ecosystem

The Commission on Dental Accreditation (CODA) is the sole federally recognized programmatic accreditor of dental hygiene education and was founded by the ADA. The JCNDE, an agency of the ADA, governs the National Board Dental Hygiene Examination. JCNDE has also developed the Dental Hygiene Licensure Objective Structured Clinical Examination (DHLOSCE), its clinical judgment examination for dental hygiene licensure that is not currently adopted into practice but does exist.

All of that, however, is the past, and we cannot change much of that. But we should be concerned about the future because it is already here for the dental (not dental hygiene) board exams!

The Dental Licensure Objective Structured Clinical Examination (DLOSCE) was developed by the JCNDE and has now been incorporated into the ADEX Dental Examination. The new announcement explicitly says that arrangement is serving as a model for discussions about dental hygiene.

It should worry us greatly that entities outside of our profession are making these decisions and forcing them on us.

Professional autonomy and leadership

If we are serious about advancing professional autonomy, shouldn't that include taking a leadership role in determining how future dental hygienists are evaluated and licensed?

If we continue to sit idly by without representation, let's imagine where this could lead.

What happens if the national written examination, an ADA-developed clinical judgment examination, and the dominant clinical examination eventually become pieces of one integrated licensure pathway?

The ADA wouldn't need to administer the clinical examination itself. Central Regional Dental Testing Service (CRDTS) or ADEX could effectively become its proxy in the clinical testing space, giving the ADA ecosystem influence from accreditation through the written examination and into clinical

assessment. When that power is given to them, it will be nearly impossible to gain it back as a dental hygiene community.

We have a pressing need here to keep the ADA out of our independent testing agencies, and we have a need to support pathways that ensure third-party verification exists. Competition is important in preserving the integrity of the exams and to push for excellence as our standard.

What happens when that competition disappears?

CRDTS and ADEX are no longer simply regional testing agencies. Both operate nationally, and CRDTS currently has a significant presence in dental hygiene programs. Competition gives schools, state boards, and candidates choices. It also forces testing agencies to compete on price, service, examination design, candidate experience, and innovation.

Maybe nothing nefarious happens. And maybe there are alternate pathways that could be created to ensure that what is taught in our dental hygiene programs is adequate for minimal competency without putting them in a compromising position. But the decisions should be made at our local, state, and national levels by people who are responsible for leading and directing the dental hygiene profession.

We are a separately licensed profession discussing autonomy, expanded practice, workforce solutions, and even the future educational requirements of dental hygienists. Yet some of the most consequential decisions about how people enter our profession continue to be shaped by organizations led primarily by dentists.

If the future of dental hygiene licensure is being redesigned, dental hygienists shouldn't simply have representation somewhere in the room.

We should have a hand on the drafting pencil.

Additional reading:

- ADHA opposed to ADA statements regarding workplace shortages and dental hygiene education for nonhygienists
- National Dental Association announces support for dental licensure compact
- What you need to know about the ADHA's recent policy updates

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