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UDA to RDA: A Pathway to Greater Success

By Margaret Gingrich, DDS

ave you ever thought to yourself that you would like to be more efficient at work? Are there times where you end up working through your lunch to finish up that crown prep? Or do you find yourself staying after the end of the day, just a little, to finish up that last procedure? Are you booked out and can't find space for an emergency?

If this is the case, you should consider hiring a registered dental assistant! Now, I know you are going to roll your eyes and say, "If I could find one, I would have one!" Well, here's another option — have you ever considered sending your current unregistered dental auxiliaries (UDAs) to be registered?

A registered dental assistant is a licensed dental assistant, different from your UDA. An RDA must graduate from a CODA-accredited dental assisting program, pass a comprehensive written and clinical exam, and maintain their license through further educational requirements. The RDA exam consists of both a written and hands-on clinical components. The clinical portion of the RDA exam is supervised through the Michigan Board of Dentistry and is administered at several colleges in Michigan with CODA-accredited dental assisting programs.

I work and live in a rural community, where the access to RDAs is far and few. When I entered the dental profession, I advertised for an RDA. Unfortunately, there was a lack of applicants, and I instead hired a person to train as a UDA. Over the years, I became accustomed to having assistants who I had trained in the office. allowing them to learn and be trained in how I perform dentistry. This was important, as it increased my effectiveness and eased the pace of our already intense schedule, as we learned to ebb and flow with each other productively. Then, as my practice grew, my lunch hour became shorter, and my wait list grew longer.

I knew it was time to change the status quo to meet the demands of my expanding practice. My first inclination was to begin working extra days to take care of the needs of my patients — a good problem to have for a dental practice, but it only added to the wear and tear on me and my staff.

I come from a line of dentists that included my father and grandfather. My father's practice came at a time when "wet-fingered" dentistry was

the norm, and the use of gloves was a costly nuisance. Can you imagine that in 2024?! Back in 1976, my father, Dr. Art Gingrich, joined the practice of my grandfather, Dr. Y.O. Morris. Ever since he started his practice in 1939, Y.O. had performed all dental services to his patients, including cleaning teeth. When Art mentioned hiring a hygienist, my grandfather was resistant to this change, because he believed the quality of care would suffer if the dentist took a step back and delegated duties to the hygienists. But it didn't take long before Y.O. realized that just the opposite was true. Having a hygienist freed up the dentist to perform more-involved procedures in the same time frame. This opened the doors for more patients to be seen, and a higher standard of care for all. The benefits far outweighed the cost of maintaining these extra employees, and his production substantially increased.

Today, most dentists have a chairside assistant, many employing multiple assistants. Having someone to hand me instruments and aid in the procedures is essential to maintain the daily flow. Assistants make procedures go faster and more efficiently, *(Continued on Page 52)*

Encouraging your unregistered dental auxiliaries to become registered dental assistants can bring new benefits to your staff, but also to you as a practicing dentist. Here's why.

A dental assisting student is shown in the lab at Washtenaw Community College. (Photo courtesy of WCC.)

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ultimately freeing the dentist to move on to other problems. The increase in tasks a dental assistant can do, for the dentist, correlates to the increased level of care a dentist can provide for patients, and how many procedures and patients can be seen.

Lately, due to retirement or health reasons, I'm noticing a trend of more

dentists leaving my area than we have coming in to fill the void. This is putting even more strain on our already hectic schedules. I was at the point of wanting an associate, but being in a rural area, those are also hard to recruit. I was faced with becoming more efficient with what I have, leading to an increased delegation of tasks to my assistants.

First, I enrolled both of my UDAs in the MDA Radiography Training Program (more information is at michigandental.org/Radiography). What a difference that made! This was a scary step at first, because I didn't want to pay for training and was afraid that my employees might leave my employment for another office. But instead, I found my assistants feeling more empowered and happier with their jobs. They were able to advance in their career, help more in the office, and have a little more autonomy. I began to assign my assistants to the beginning of an appointment, which allowed me to finish my last procedure while they were start-

Figure 1: CODA-Accredited Dental Assisting Schools in Michigan

Delta College

1961 Delta Road University Center, MI 48710 Program Director: Pamela Livingston Email: Pamelalivingston@delta.edu Phone: 989-686-9483 www.delta.edu Programs start in the fall.

Grand Rapids Community College

143 Bostwick Street, N.E. Grand Rapids, MI 49503 Program Director: Jamie Klap E-mail: jamieklap1@grcc.edu Phone: 616-234-4240 www.grcc.edu

Ten-month certification program or two-year associate degree program. Program starts in the fall.
Pathway II program allows working CDAs to obtain RDA credential in one semester.
(See advertisement, Page 72.)

Mott Community College

1401 East Court Street Flint, MI 48503 Program Director: Dr. Denise Polk E-mail: denise.polk@mcc.edu Phone: 810-762-0329 www.mcc.edu Programs start in the fall.

Northwestern Michigan College

1701 East Front Street Traverse City, MI 49686 Program Director: Deborah Kaser E-mail: dkaser@nmc.edu Phone: 231-995-1250 www.nmc.edu Certificate and associate degree programs available.

Washtenaw Community College

4800 East Huron River Drive Ann Arbor, MI 48105 Program Director: Kristina Sprague E-mail: ksprague@wccnet.edu Phone: 734-973-3337 health.wccnet.edu

Traditional program begins each fall.

Pathway II program, beginning each semester, is available for those dental assistants who have passed the Dental Assisting National Board CDA exam and are currently employed in a dental office. Program completion leads to a certificate in dental assisting and/or associate degree. (See advertisement, Page 4.)

Wayne County Community College District

8200 West Outer Drive Detroit, MI 48219 Program Coordinator: Sonya Taylor E-mail: staylor2@wcccd.edu Phone: 313-943-4009, ext. 4033 www.wcccd.edu Program starts in the fall. ing with health history, blood pressure, reviewing and triaging complaints, and taking X-rays. This led to both of my assistants wanting to go through CDA — certified dental assistant — training with DANB, the Dental Assisting National Board (www. danb.org). Since then, I have also paid for one CDA to go through an RDA program, and I couldn't be happier.

With ever-increasing overhead costs, dentists are finding themselves pinching pennies more than ever. The cost of dental equipment and supplies is on the rise. Inflation has resulted in an increase in the already upward-sloping pre-pandemic trend. This, coupled with the reimbursement rates of dental insurances not keeping up with inflation, has left dental offices in a tough spot. We are either forced to eat the higher costs, leading to a reduced bottom line, or we have to pass the buck onto our patients with increased fees, if we can.

It's essential to the success of our practices that our schedules are not only full, but at maximal functionality. If dentists are wasting valuable

For more information on the CDA-to-RDA Pathway:

Grand Rapids Community College Jamie Klap, program director jamieklap1@grcc.edu

Washtenaw Community College Kristina Sprague, program director ksprague@wccnet.edu

time with procedures we could assign to RDAs, it's only sabotaging the practices we love. We've also seen an increase in complaints to the Michigan Board of Dentistry as a result of dentists delegating RDA duties to UDAs. That brings up the issue of safety and potential malpractice to the public, and it is a serious problem. The Board of Dentistry may assess fines, sanctions, additional CE, and limitations on a dental license including suspension — for violation of the rules.

An RDA can perform many func-



Accredited program – CODA-accredited dental assisting programs like that at Grand Rapids Community College help increase the supply of registered dental assistants in Michigan. See Page 52 for a listing of programs. (Photo: GRCC/Andrew Schmidt.)

tions that a UDA cannot. UDAs are capable of performing tasks with a dentist to make them more efficient, such as four-handed dentistry and suctioning, though the list of delegated duties are significantly less than that of an RDA. I encourage you to refer to the new "Delegation of Duties" from the Board of Dentistry that was published in October 2023. A copy is enclosed in this issue of the MDA *Journal.*

Having your current UDA go through educational courses necessary to become an RDA simply makes good business sense. There are six CODA-accredited dental assisting schools in Michigan. A listing of these CODA-accredited dental assisting schools with contact information appears in Figure 1. However, two of them, Grand Rapids Community College and Washtenaw Community College, offer something special - Pathway II programs that provide a path for assistants with the Certified Dental Assistant (DANB CDA) credential working in dental offices to obtain RDA status without enrolling in a long-term, on-campus program.

For example, a UDA who has worked for you for at least two years qualifies to take the CDA exam through DANB and can then attend a Pathway II course at Grand Rapids Community College or Washtenaw Community College. The Pathway II at GRCC allowed my dental assistant to continue to work full-time while taking the courses. She completed classwork on her days off, and any required hands-on procedures were supervised by me during regular business hours on patients in the operatory. The cost to attend is also much less than a traditional, on-campus course. The dental assisting student must come to campus for three hands-on learning experiences. This is a wonderful option for dental assistants who are already working, but would like to earn their RDA.

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I will admit that, again, I was worried if I put my assistant through RDA training that they might leave my employment before I could recoup my costs and recognize any rewards. As a safeguard, I did have my assistants sign a contract promising to work for two years after the completion of the RDA degree or pay back some or all the cost of the schooling if they quit before the contract was up. I also rewarded my assistant with a large increase in pay when she completed the credential. After all, if we want to continue to recruit and retain the best and brightest to our profession. we need to pay competitive and livable wages. Our MDA president, Dr. Eric Knudsen, stressed this point in his recent President's Message in the December 2023 MDA Journal.

The next step to help increase production after my RDA was licensed was to start scheduling in a Z-schedule fashion (opposite page). I now overlap all of my appointments by at least 10 minutes, and crown preps by 25 minutes. This has allowed me to see two to three more patients a day, and that alone pays for the increase in pay to my assistant. The cost of putting your staff through the RDA certification program will pay for itself in time and should be strongly encouraged.

Since I'm on my soapbox encouraging employees to go for further training, I also want to mention it is our duty as a profession to encourage high school students to explore the careers of dental assistant and dental hygiene. Since the shortage of RDAs and RDHs has become so apparent, I try to make it a point to mention a career in the dental profession to middle and high school students coming through my office. Currently, I have three patients attending school for



GRCC program — Grand Rapids Community College offers a Pathway II program, offering accelerated coursework towards RDA certification. (Photo: GRCC/Andrew Schmidt.)

hygiene. They could possibly fill a vacancy in my office or help my office to expand if I find an associate! We never know what the future holds for our practices, but it never hurts to plant seeds that could help us grow in the future.

It's up to us as dentists to advocate for the inclusion of registered dental assistants in our practices. If we don't, who will? This simple act will bolster your success across the board. Just think — how much time do you spend removing excess cement from supragingival surfaces, packing cord, taking impressions for crowns, or fabricating temporary crowns or temporary bridges? The inclusion of an RDA in your office will open your schedule in these areas by allowing your registered dental assistant to take on these tasks!

The author thanks Dr. Dan Peters for his permission in republishing the information appearing opposite.

About the Author

Margaret Gingrich, DDS, is a former president of the MDA, serving during the 2019-2020 administrative year. Currently she serves as the 9th District representative to the ADA Council on Dental Practice, as a delegate to the ADA House of Delegates, as chair to the 2024 MDA Foundation Mission of Mercy, and on several committees at the MDA, including the MDA's Certified Dental Assistant Workgroup. She has a solo general practice in Big Rapids.



Gingrich

A Doctor's Schedule Working with Two RDAs in a 'Z' Pattern

This image demonstrates a well-laid schedule for one doctor working out of two or three chairs with two RDAs.

In this example, "Fillings" refers to placing fillings or doing other things such as a root canal. "RDA" refers to things an RDA can do unsupervised, such as placing sealants or taking bite splint impressions. RDA time is also a good place to pop in emergency exam appointments. Please note that whether the doctor is working out of two or three chairs, only two columns are booked for the doctor and the RDAs. Columns are not dedicated to individual chairs or individual RDAs. Which patient gets into what chair with which RDA is determined by flow of the day. This is easier with three chairs, since that adds more flexibility to leave a room dirty to be cleaned up later or to squeeze in an emergency or two if the need arises.

It is easy to picture the doctor moving back and forth in the schedule in a "Z" pattern, moving from anesthetizing the 8 a.m. crown patient, then moving over to adjust and cement the crown that the second RDA-2 has already tried in while RDA-1 makes a matrix for the temporary crown, selects a shade, and answers any questions that the crown patient may have. The doctor than moves back to RDA-1 and preps the crown before heading back to RDA-2 to anesthetize for the drill and fill and getting a couple hygiene checks done while RDA-1 tissue packs, takes the impression, and makes the temporary crown. By the time the doctor is finished with the drill and fill, RDA-1 has seated the new patient and have them ready for the doctor to perform the comprehensive exam. The pattern of the doctor working between the two columns in a back-and-forth "Z" fashion continues throughout the day.

DOCTOR'S SCHEDULE WORKING WITH 2 RDAs

