2015 Survey of Texas Dental Hygienists
Summary of Results

In preparation for the 2015 Session of the Texas Legislature, the TDHA Governmental Affairs and Member Services Councils conducted a survey of Texas dental hygienists regarding scope of dental hygiene practice and access to dental care in Texas. The survey was conducted during the Fall of 2014, and the results were collected and analyzed by the Research Department of ADHA.

RESPONDENT DEMOGRAPHICS

- 50% had Associate degrees in dental hygiene and 29% had Bachelor degrees in dental hygiene.
- Majority (58%) of respondents were between ages of 25 and 44.
- 50% had been practicing 10 years or less.
- 60% indicated they were contemplating an advanced degree at some point in their career.
- 63% were working 32 or more hours per week. 80% were working in private or group practice or multi-specialty clinic. Only 4% indicated they are currently not working.
- 78% reported they were satisfied or very satisfied with dental hygiene as a profession.
- 44% were ADHA members. Cost of membership was the most common reason given for not joining ADHA/TDHA. 640 respondents indicated they would be interested in receiving information about membership in ADHA/TDHA.

INCREASE DENTAL HYGIENE SCOPE OF PRACTICE

- 85% agreed or strongly agreed that hygienists in Texas are limited in scope of practice. Changes they would like to see: administer local anesthesia (87%), administer nitrous oxide (70%), use of lasers as adjunct to scaling and root planing (69%), and limited prescriptive authority (66%).
- 66% had current permit to monitor nitrous oxide.
- Of the 87% who were in favor of local anesthesia, 76% agreed or strongly agreed that they would personally administer local anesthesia for pain control for their patients.
- 11% of respondents had permit to administer local anesthesia in another state.
- 75% agreed or strongly agreed that lasers must stay in the scope of practice of a hygienist. 15% were currently using lasers in practice.

INCREASE ACCESS TO DENTAL CARE

- 84% responded they want settings expanded where a hygienist can treat patients without a dentist seeing the patient first.
- Over 80% wanted expansion into each of the following settings: public and private schools, home health care, hospitals, long term care facilities, Head Start programs and community health centers.
- 76% agreed the 6 month limit on seeing patients before the dentist has examined the patient should be removed.
- 87% agreed or strongly agreed with supporting a new workforce model (with more services, collaborative agreements with dentists, nontraditional settings and additional education and licensure).