

## POLICY ON ACCEPTABLE SUBSTANCE ABUSE CONTINUING EDUCATION COURSES FOR LICENSURE RENEWAL

Preamble: The purpose of this policy is to address the minimum acceptable curriculum requirements and instructor qualifications for the substance abuse continuing education hours for licensure renewal during a biennium.

Beginning in the 2002-2003 biennium, any dentist who intends to renew his/her license at the end of a biennium must obtain forty (40) continuing education hours. A minimum of two (2), maximum of seven (7) hours must be in substance abuse education from a Board-approved Permanent or Biennial Continuing Education Sponsor, or an *American Dental Association* CERP Sponsor. As set forth in Section 4715-8-01(B) of the Ohio Administrative Code, the education experience must be provided in a directly interactive presentation format<sup>1</sup> and cover causes, prevention, detection and treatment alternatives.

The purpose of the substance abuse continuing education is to provide an overall awareness and fundamental education for the dentist, as well as to assist the dentist in identifying problems in fellow dental professionals, patients, staff, and family members.

Therefore, the Board recommends the following guidelines with respect to course construction:

- 1) Course Content
  - a) Causes (the genetic, biochemical and physiological aspects of the effects of alcohol or drugs on living systems and on chemical/substance abusers and their families)
    - i) Biogenetics
    - ii) Environmental factors
    - iii) Psychosocial components
    - iv) Theories of addiction
    - v) Genetic vulnerability
  - b) Prevention (planned process of approaches and activities designed to preclude the onset of alcohol and other drug problems and/or addiction)
    - i) Education and training
    - ii) Moderation

---

<sup>1</sup> Defined in Ohio Administrative Code Section 4715-8-01(A)(1) as "...a presentation format in which each participant is able to provide direct feedback and have interaction with the instructor through a question and answer format in real time."

- iii) Lifestyle changes
- iv) Reduction of supply and demand
- v) Professional growth and responsibility
- c) Detection (an opportunity to recognize, identify, and intervene in cases of chemical dependency/substance abuse problems and related disorders)
  - i) Stages of drug/alcohol use
  - ii) Observation of behavior patterns and symptoms
  - iii) Effects on behavior and performance
  - iv) Assessment, diagnosis and evaluation
- d) Treatment Alternatives (planned, intentional intervention in the health, behavior, personal and/or family life of an individual suffering from alcoholism or from another drug dependency designed to enable the affected individual to achieve and maintain sobriety, physical and mental health, and a maximum functional ability)
  - i) Intervention
  - ii) Resources
    - a) Ohio Physicians Effectiveness Program (OPEP)
    - b) Alcoholics Anonymous (AA)
    - c) Narcotics Anonymous (NA)
    - d) Cocaine Anonymous (CA)
    - e) Marijuana Anonymous (MA)
    - f) Caduceus
  - iii) Referral
  - iv) Recovery
  - v) Medical and/or behavioral therapies
  - vi) Factors affecting relapse

Course topic content may also include instruction in the following areas:

- Codependency
- Relationship counseling
- Pathophysiology of addiction
- Impact of abuse
- Genetic/educational/occupational risk factors for dentists
- Pharmacology
- Prescribing controlled substances
- Office dispensing
- Chronic pain issues as they relate to chemical dependency or recovery
- Post-Op Pain management for the addicted/recovering patient

- Legal and ethical issues pertaining to chemical dependency/substance abuse

In order for the continuing education hours in substance abuse education to be effective and meaningful, the presentations must be given by qualified instructors with a background or knowledge of chemical dependency/substance abuse.

Therefore, the Board recommends the following with respect to course instructor qualifications (any **one** may apply):

- 1) Dentist or Physician with training/background in chemical dependency/substance abuse
- 2) Licensed Psychologist with training/background in chemical dependency/substance abuse
- 3) Licensed Counselor or Social Worker with training/background in chemical dependency/substance abuse
- 4) Certified Chemical Dependency Counselor (CCDC I/CCDC II/CCDC III/ CCDC III-E)
- 5) Certified Clinical Supervisor (Certified through the Ohio Department of Alcohol and Drug Addiction Services)
- 6) Certified Prevention Specialist (Certified through the Ohio Department of Alcohol and Drug Addiction Services)
- 7) Certified Addiction Nurse

If you have an individual that has similar qualifications and experience but does not specifically fit into one of these categories, please contact the Board in advance for approval.

The above recommendations are an effort to ensure that the continuing education in substance abuse is a quality experience. Therefore, the following types of programs will not be considered acceptable towards the renewal requirement:

- Drug Abuse Resistance Education (DARE) programs
- Just Say No programs
- Pharmacology courses
- Attendance at AA, NA, CA , or MA meetings
- Programs leading to a high school diploma or equivalency certificate

Chemical dependency is a significant health problem and is a chronic, progressive illness that can be treated effectively. As with all chronic

illnesses, early identification and treatment, should result in a positive prognosis.

**ADA Policy Statement on Chemical Dependency (1986:519)**

RESOLVED, that the following ADA Policy Statement on Chemical Dependency be adopted:

- 1) The ADA recognizes that chemical dependency is a disease entity that affects all of society.
- 2) The ADA is committed to assisting the chemically dependent member of the dental family toward recovery from the disease by education, information and referral. The establishment of constituent and component society chemical dependency programs is essential to this effort.
- 3) The ADA encourages those institutions responsible for dental education to allocate adequate curriculum on substance use, misuse and addiction.
- 4) In meeting the needs of the public and profession, the ADA also encourages ongoing liaison between constituent society chemical dependency committees and their state boards of registration.
- 5) The ADA recognizes the need for research in the area of chemical dependency in dentistry.

(February 21, 2002)