January 23, 2018

Dr. Sherin Tooks
Director, Commission on Dental Accreditation (CODA)
211 East Chicago Avenue
Chicago, Illinois 60611

Dear Dr. Tooks,

I write to you on behalf of the National Council on Disability (NCD), an independent federal agency charged with providing advice and recommendations regarding disability policy to the President, Congress, and other federal agencies, including the US Department of Education (CODA’s certification granting agency), to request that the Commission revise its accreditation standard 2-24 (regarding the treatment of patients with specialized dental care needs) for dental education programs. Presently, due to insufficiencies of the relevant standard, patients with intellectual and developmental disabilities regularly face unreasonable difficulties in finding clinicians properly trained to treat them. NCD requests a meeting with you and your staff to engage in a constructive dialogue regarding this matter.

NCD acknowledges that CODA previously revised standard 2-24 in 2004 to reflect that dental students must be “competent in assessing the treatment needs of patients with special needs;” however, it is NCD’s position that the standard in its current form still does not fulfill the intent of both the Americans with Disabilities Act\(^1\) and the Rehabilitation Act\(^2\) as amended. Because the relevant standard merely requires dental students to be able to assess the needs of patients with specialized dental care needs, as opposed to requiring that dentists actually be able to treat them, patients with certain intellectual and developmental disabilities must travel unreasonably long distances to find proper dental treatment, or forgo treatment altogether, an outcome that can and does lead to larger healthcare concerns and costs.

With respect to CODA’s standard 2-24, NCD recommends that more robust training be required. NCD recommends students be required to demonstrate clinical practice skills to perform the designated treatment. For further insights regarding NCD’s positions on the need for improved dental care for individuals with intellectual and developmental

\(^1\) 42 U.S.C. § 12101, et seq.
disabilities, please find attached NCD’s policy brief on the subject, including NCD’s recommendation that CODA’s standard 2-24 be revised.

Again, we respectfully request a meeting with your staff to engage in further dialogue on this topic, to assist in the convening of stakeholders from the disability community and representatives of CODA, and to discuss the information and perspectives of NCD on this matter. Thank you for your time and consideration of this issue. Please contact Amged M. Soliman, NCD Attorney Advisor, at asoliman@ncd.gov or 202-272-2116, to arrange a time to meet. We look forward to further discussion on this important issue.

Sincerely,

Clyde Terry
Chair, National Council on Disability