





Washington's Health Workforce Sentinel Network Findings Briefs: Dentist Offices/Dental Clinics

Dentist Offices and Dental Clinics provided information about their workforce needs to the Washington State Health Workforce Sentinel Network, most recently in April/May 2021. This Findings Brief provides response themes as well as examples of specific comments, with an emphasis on the most recent findings. Responses from Dental Offices and Dental Clinics since 2016 may be viewed at www.wa.sentinelnetwork.org/findings/.

Themes from dental offices' and dental clinics' responses to pandemic-related questions are highlighted below. More pandemic-related findings from earlier in the pandemic are at www.wa.sentinelnetwork.org/findings/covid-19/.

Effects of the COVID-19 pandemic reported by Dentist Offices and Dental Clinics: Themes and examples

In the past 6 months, have there been overall staffing changes at your facility due to the COVID-19 pandemic?

- Many [dental] assistants have moved away from the field. I feel they are making more or as much on unemployment.
- Overall staff with kids work 1-2 days less in order to help with school.
- An additional dental assistant was brought on board to help with the additional tasks and patient flow changes due to COVID. Administrative staff hour changes to adjust to the new protocols and paperwork due to COVID.

What about the staffing arrangements at your facility made it easier/harder to respond to the pandemic?

- The administrative accommodations and the flexibility of the staff have made it easier. Challenges continue to be time per appointment and patient fatigue to the pandemic.
- Patients were hesitant to come in. Before vaccine we couldn't use some equipment that caused aerosols.
- It was made harder by reduction in supply of dental assistants as some withdrew from the labor market and stayed out.
- PPE procurement and cost, aerosol mitigation, and Respiratory Protection Program requirements have made it harder.

Describe the workforce impact, if any, of the use of telehealth at your facility over the past 6 months.

THEMES: Telehealth can be used for some patient consultations, but overall is not as useful in dentistry as in other settings.

- We instituted telehealth after the shutdown and continue to utilize this option for patients on a weekly basis to communicate, discuss, and present treatment modalities.
- Minimal impact. Most urgent dental needs need to be addressed/treated in-office. Tele-visits are only offered to established patients with a comprehensive exam and x-rays on file.
- We do not use telehealth.
- I don't think it works well for dentistry.

Did your organization do anything to encourage your staff to receive the COVID-19 vaccine? If so, what strategies were or were not successful?

THEMES: Some offices/clinics provided information and time off. Achieving 100% vaccination was challenging.

- We arranged for the vaccine to be given during working hours and paid them for that time along with any time off needed after receiving the vaccine doses.
- Shared vaccination info as soon as it was available. Most patient-facing staff needed no convincing.
- We asked them to get vaccinated. They are health professionals and they got vaccinated.
- Employees were strongly encouraged to get vaccinated. Half of the staff received the vaccine. The ones that didn't are from the anti-vax tribe.

What are your top workforce needs that could be alleviated by policy, regulatory, and/or payment changes?

- There is a shortage of hygienists. Short term solution, let licensed hygienists from other states be able to get licensure in WA easily. Reform the licensure policy. Long term, more schools to graduate hygienists.
- I would like a clear consistent COVID-19 protocols. Do I listen to CDC? Do I listen to DOH? ADA? Governor?
- Trained dental assistants are always hard to find. Perhaps programs could expand class sizes?
- A way for offices to sign up to have a hygienist do their clinical experience in their office with a potential job after graduating (direct hire), and the benefit to the office is that hygienist will already be trained with their equipment.

Dentist Offices/Dental Clinics (Spring 2021)

Between 2016 and 2021, over the course of 10 reporting periods, Dentist Offices, Dental Clinics, and other health care facilities in Washington provided key, on-the-ground information to the Washington State Health Workforce Sentinel Network. Below are highlights of trends over time and recent findings. More findings from Dentist Offices and Dental Clinics, along with those from other health care facilities, are at wassentinelnetwork.org.

Dentist Offices/Dental Clinics - Occupations with exceptionally long vacancies: 2018-2021

Top occupations cited as having exceptionally long vacancies by date of reporting*							
Rank	Summer 2018	Spring 2019	Fall 2019	Spring 2020	Fall 2020	Spring 2021	
1	Dental assistant	Dental hygienist	Dental assistant	Dental hygienist	Dental assistant	Dental assistant	
					Dental hygienist	Dental hygienist	
2	Dental hygienist	Dental assistant	Dental hygienist	Dental assistant		Dentist	← Most cited
3	Dentist	Dentist	Dentist	Dentist		Office personnel	
				Office personnel		Medicaid navigator	
4	Multiple occupations cited at same frequency	Office personnel	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency		No additional occupations reported	

^{*}Responses prior to Summer 2018 not shown due to low response counts

Demand for healthcare workforce reported by Dentist Offices and Dental Clinics

- Dental Assistants are high turnover; e.g. as soon as we get one trained they leave for better pay or benefits at another clinic and we have to try to recruit again. We have a hard time finding trained/experienced dental assistants.
- [Dental assistant, administrative personnel] More hands needed due to the changes in COVID prevention practices.
- [Dental hygienist] High demand resulting from many dental personnel being disincentivized to return to work as a result of additional federal unemployment payments.

Reasons for vacancies reported by Dentist Offices and Dental Clinics

Employers report that people are reluctant to work in an environment they perceive as high-risk.

- [Dental hygienist] Some have chosen to leave the field and others have reduced the days/hours they work.
- [Dental hygienist] State-wide shortage of hygienists, due to pandemic concerns and general shortages.
- [Multiple occupations] Covid.

Reasons for worker retention/turnover problems reported by Dentist Offices and Dental Clinics

Some turnover issues related to the COVID-19 pandemic, but other issues were present before the pandemic.

- [Dental hygienist] Because of limited personnel, dental offices try to lure employees away from other offices by offering much higher salary and benefits.
- [Dental hygienist] Retirement or decrease in working hours.
- [Dental hygienist] 1 part time hygienist retired, and 1 full time hygienist left for maternity leave and decided to stay at home from now on..

Dentist Offices/Dental Clinics (Spring 2021)

New roles for existing employees and new occupations hired by Dentist Offices and Dental Clinics

- [Dental hygienist, dental assistant, administrative personnel] Same basic role of treatment with additional tasks due to COVID.
- [Dental assistant] Moved to administration section of our practice.

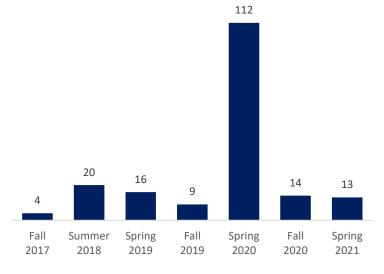
Changes in Dentist Offices and Dental Clinics 'priorities regarding orientation/onboarding for new employees and training for existing/incumbent workers

Content focused primarily on COVID-19 protocols.

- Additional training needed for proper and cost-effective use of additional PPE.
- Cross train in reception as this is also a high-turnover position for us.
- Training on COVID-19 protocols. Also updates, feels like things are constantly changing and hard to predict what future will be.
- Greater emphasis on cleaning protocols and operatory turnover, patient distancing/safety.

Number of Sentinel Network Responses from Dentist Offices Number of Dentist Offices and Dental Clinics Responses by and Dental Clinics in WA by Data Collection Date*

Accountable Community of Health (ACH) (Spring 2021)





^{*} Summer 2016 (3 responses), Winter 2016 (3 responses) and Spring 2017 (zero responses) not shown due to space constraints

About the Washington Health Workforce Sentinel Network

The Sentinel Network links the healthcare sector with policymakers, workforce planners and educators to identify and respond to changing demand for healthcare workers, with a focus on identifying newly emerging skills and roles required by employers. The Sentinel Network is an initiative of Washington's Health Workforce Council, conducted collaboratively by Washington's Workforce Board and the University of Washington's Center for Health Workforce Studies. Funding to initiate the Sentinel Network came from the Healthier Washington initiative, with ongoing support from Governor Inslee's office and the Washington State Legislature.

Why become a Sentinel? As a Sentinel, you can:

- --Communicate your workforce needs and ensure that the state is prepared to respond to the transforming healthcare environment.
- --Have access to current and actionable information about emerging healthcare workforce needs.
- --Compare your organization's experience and emerging workforce demand trends with similar employer groups.

To view an interactive summary of findings and to provide information from your organization: www.wa.sentineInetwork.org.

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