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By Christopher J. Smiley, DDS
Editor-in-Chief

COVID-19's Impact on Dental Practice: Managing with Less Support

With the easing of COVID-19 travel restrictions, my wife and I decided to join our daughters on a Colorado spring ski vacation. But thanks

to the pandemic's workforce realities, merely getting started on our trip proved to be an adventure.

Our early morning cab ride failed to materialize. When we called to see if it was on the way, the dispatcher stated there weren't any drivers available for our scheduled pickup! We drove ourselves to the airport, parked in the long-term lot, and boarded the plane. Then, once in our seats, the pilot announced a delay in our departure because the airport only had personnel available to load bags onto one aircraft at a time, and our flight was fourth in line!

Rather than becoming frustrated, I found these events oddly reassuring. The gravity of worker shortages for something as essential as air travel confirmed that employers throughout our economy are struggling to fill job vacancies.

Like the airlines, dentistry is struggling to manage with less support. The exodus of workers during the "Great Resignation" is due, in part, to worker stress, opportunities for more significant compensation, and a desire for work-life balance. Additionally, the pressures of COVID-19 protocols and perceived risks from working in our environment caused some to reconsider a career in health care.

Even before COVID-19, dentistry was experiencing a shortage of licensed, expanded-function registered dental assistants. That reality has spread to registered dental hygienists and business staff over the past two years. With a diminished supply, those seeking employment find themselves in a bidding war for their services, creating inflationary pressures on practice management. Also, corporate dentistry, backed by venture capital, is increasing throughout Michigan. These large group practices are well-positioned to offer higher wages to attract workers, and thus the available employee pool is constricting further for stand-alone practices.

To address workforce shortages, members of the

Michigan Association of Orthodontists have expressed a desire to make RDA delegation rules less restrictive. However, delegating to someone who isn't educated or licensed to provide the service may risk patient safety. If appropriately educated team members are not available for delegation, the care should be delivered by the dentist.

The MDA is investigating the possibility of rules changes to facilitate the return to practice of retired assistants and hygienists whose licenses have expired. Cumbersome relicensure requirements are a barrier for otherwise qualified individuals re-entering the workforce. Currently, oral health care providers must retake the exam if their license has been expired for three or more years. Allowing these individuals to return to practice under direct supervision, with specified continuing education requirements, may provide a limited increase in the pool of available employees. However, such a rule change would not be an immediate fix and will likely take time to achieve through the regulatory process.

Refilling the pool of prospective employees will require individual and collective advocacy by each of us. We must support MDA grassroots legislative efforts for funding higher education. We must reach out to local allied dental education programs and urge them to expand their facilities and grow their class size, and we must recruit within our practices and social circles to encourage prospective students to seek education to join the dental team.

Without individual and collective action, COVID-19's acceleration of workforce trends will create lasting change in patient care and dental practice administration. A lack of team members to accept delegation is a long-term change from the pandemic that will increase the need for hands-on delivery by dentists of preventive and diagnostic services.

Shortages of essential support staff will be a lasting impact on health care in a post-COVID-19 world. Employers across society are struggling to fill job vacancies. Without a quick-fix, reducing barriers to employment and providing a competitive wage are long-term strategies to recruit and retain those who support us in the care of our patients. ●