

The Journal of the Michigan Dental Association

Volume 105 | Number 12

Article 5

12-1-2023

MDA Workforce Survey Results Are In: Answers and Opportunities

Eric Knudsen DDS

Michigan Dental Association, eknudsen.mda@gmail.com

Follow this and additional works at: <https://commons.ada.org/journalmichigandentalassociation>



Part of the [Benefits and Compensation Commons](#), [Dental Public Health and Education Commons](#), [Entrepreneurial and Small Business Operations Commons](#), [Health and Medical Administration Commons](#), [Health Law and Policy Commons](#), [Labor Relations Commons](#), [Leadership Commons](#), and the [Marketing Commons](#)

Recommended Citation

Knudsen, Eric DDS (2023) "MDA Workforce Survey Results Are In: Answers and Opportunities," *The Journal of the Michigan Dental Association*: Vol. 105: No. 12, Article 5.

Available at: <https://commons.ada.org/journalmichigandentalassociation/vol105/iss12/5>

This Feature Article is brought to you for free and open access by the State & Local Dental Publications at ADACommons. It has been accepted for inclusion in The Journal of the Michigan Dental Association by an authorized editor of ADACommons. For more information, please contact commons@ada.org.



By Eric Knudsen, DDS
MDA President

MDA Workforce Survey Results Are In: Answers and Opportunities

Staffing and workforce issues have become the biggest problem that many dentists face on a day-to-day basis. The dental labor market has undergone a significant shift, with employee wage demands increasing substantially and the supply of employees dropping dramatically over the last few years. Compounding this issue is a wave of retirements and lifestyle changes.

Earlier this year, the MDA researched workforce data for Michigan and surrounding states to determine where we stand in regard to wages paid, employment levels among dental assistants and registered dental hygienists, and other important metrics. Some key findings from that research revealed the following:

- Approximately 30%, or 3,000, actively licensed RDHs are currently not working in the dental field. From 2012-20, only about 10% of licensed RDHs were not actively employed in the dental field.

- Michigan has had a steady number of

approximately 1,700 actively licensed RDAs for the past 10 years. That sounds like a lot, but another way to put this is that Michigan has not grown its supply of RDAs in the last 10 years.

- Currently, there are approximately 7,000 unregistered dental auxiliaries employed in Michigan.

- Since 2012, Michigan has consistently ranked as the lowest-paying state in the Great Lakes Region for RDHs and dental assistants, and among the lowest-paying nationally. Michigan has exhibited the lowest wage growth among Great Lakes states for these positions as well.

- RDHs and dental assistants, nationally, have identified toxic workplace culture, lack of growth opportunities, insufficient pay, inadequate benefits, and being overworked as the top reasons for leaving the dental workforce.

The Michigan Health Council also recently conducted in-depth research and comparisons of the 36 licensed health professions in Michigan. Professions were ranked based on

(Continued on Page 18)

Multiple surveys have shown that Michigan fares poorly compared to other states when it comes to RDH and RDA compensation and benefits. As a result, too many licensed auxiliaries have left the profession. Here's an explanation of the problem, and what we can do to fix it.

growth, shortage, wages, turnover, and an overall ranking. See the results below — a high ranking indicates that the profession is in a good position in that metric, with #1 being the highest and #36 being the lowest. (For example, dentists are ranked second in the “shortage” category, indicating that Michigan does not have a shortage of dentists, in comparison to other professions.)

General dentists:

- Growth — 28th
- Shortage — 2nd
- Wage — 11th
- Turnover — 1st
- Overall Rank — 3rd

Dental hygienists:

- Growth — 21st
- Shortage — 19th
- Wage — 33rd
- Turnover — 27th
- Overall Rank — 34th

Dental assistants:

- Growth — 20th
- Shortage — 33rd
- Wage — 30th
- Turnover — 31st
- Rank — 36th

Additionally, research by the ADA Health Policy Institute provided helpful insight into the workforce shortage from the perspective of dental assistants and dental hygienists. The survey pool included both individuals who work in dental settings and those who don't.

Frustrations from dental staff were primarily due to inadequate pay, inadequate benefits, poor workplace culture, being overworked, and a lack of opportunities for growth.

What we did

Based on this research, the MDA developed an initiative that is focused on bringing actively licensed RDAs and RDHs back into the workforce as a short-term solution to the workforce shortage. While it is important to support the educational programs in our state to produce more RDAs and RDHs, those efforts will take two or three years or more to provide a measurable impact. Our members do not have that time. We have to do something now.

Therefore, to better understand the perspectives of the registered dental assistants and registered dental hygienists in Michigan, the MDA conducted a survey of all licensed dental auxiliaries. The survey asked for feedback in the following areas: age and gender; employment status; current wages; expected wages; current benefits; desired benefits; factors that would entice them to return to work or work full-time; desire to relocate to

While it may be frustrating for practice owners, it's important to acknowledge that these individuals have the leverage: They can continue to not work in our offices and find other employment. In fact, they've demonstrated a willingness to do that already.

other regions of the state.

The survey was open from Aug. 20 through Sept. 20 of this year. The purpose of this survey was to evaluate the potential for a data-backed advertising campaign targeting actively licensed individuals, with the goal of bringing them back into the workforce. The MDA survey was modeled off of the ADA Health Policy Institute Workforce Survey. Separate surveys were created for RDAs and RDHs, so data could be gathered for each profession specifically.

What we found out

RDH survey results: In Michigan, more than 99% of RDHs are females, and 60% are more than 45 years old. Additionally, 35% are 55 years or older. This indicates that retirements are likely to continue and accelerate over the next several years. Overwhelmingly, RDHs indicated that \$36/hour is the minimum “fair” wage for their jobs, with 65% stating that \$40/hour or more was appropriate. This demand was consistent across age groups and employment status (full-time, part-time, or unemployed). Thirty percent of respondents indicated earning \$35/hour or less.

On the issue of benefits, most full-time RDHs highlighted health insurance as a desirable benefit, yet only one-third actually received health insurance from their employer. Notably, part-time RDHs highlighted paid vacation, paid sick time, paid holidays, and retirement savings as highly desirable benefits. Only 5% of part-time RDHs reported receiving health insurance from their employer, despite nearly 40% of part-time RDHs viewing it as highly desirable.

Specific questions were also designed for actively licensed RDHs who have left the dental workforce and not returned. When asked for the reasons that they left the profession, respondents listed insufficient pay and benefits, work-life balance, lack of growth opportunities and flexibility, feeling unsatisfied with their career, and workplace culture. There was no one clear reason driving their decisions. However, when asked what would entice them to return, the top responses were improved pay, improved benefits, and more flexibility with their schedules. Notably, the attractive benefits for this segment were consistent

(Continued on Page 20)

with the responses provided by full-time employed RDHs.

Finally, RDHs and RDAs were asked about their thoughts on relocating to different parts of the state. West Michigan, southeast Michigan, the northwest Lower Peninsula, and the Upper Peninsula were all considered attractive places to relocate. However, many respondents stated that they would not relocate because they were unwilling to move their families, or because of their spouse's or partner's jobs, or lack of personal connections to other parts of the state.

RDA survey results: Much like RDHs, more than 99% of RDAs in Michigan are female. However, RDAs are distributed much more evenly across ages. Approximately one-third of RDAs are 55 years or older, with the remaining two-thirds distributed relatively evenly between 18 to 54 years of age. While this shows a lack of growth, it also demonstrates that RDAs are not experiencing attrition to the levels seen among RDHs.

Regardless of employment status, RDAs overwhelmingly indicated that a fair wage is between \$25 and \$30/hour. RDAs strongly indicated that wages below \$25/hour are unfair, with only 1% of respondents stating that \$16 to 20/hour is a fair wage. Reported actual wages by full-time RDAs were not far off of the "fair" wage expectations, with only 10% of RDAs earning below \$25/hour. Part-time RDAs indicated earning less than \$20/hour at a much higher rate than full-time RDAs.

Notably, RDAs reported receiving benefits at a much higher rate than RDHs. Generally, the benefits offered to full-time RDAs are aligned with the benefits they find attractive. However, only 42% of full-time RDAs reported receiving health insurance from their employer, despite 64% highlighting it as desirable. Part-time RDAs showed a strong preference for paid vacation and holidays. Despite three-quarters of part-time RDAs receiving funding for CE and professional development from their employer, only 5% reported those funds as an attractive benefit.

Actively licensed RDAs who left the profession highlighted insufficient pay as the biggest reason for leaving the profession. Other popular responses were insufficient benefits, lack of opportunities for growth and advancement, being unsatisfied with their career, and workplace culture. When asked what would entice them to return, wages greater than \$26/hour and improved benefits were the most popular responses.

Conclusions

First, practice owners, overall, must continue to improve wages and benefits offerings to be attractive to RDHs and RDAs:

- Based on this survey, to be a competitive employer

It's imperative that dentists, as the employers and top of the oral health care model, continue to improve job offers to meet the demands of our workers.

for RDHs, a dentist should offer at least \$35/hour, along with health insurance, access to retirement savings, and paid sick time.

- For RDAs, offers should be at least \$26/hour, with health insurance, access to retirement savings, and paid sick time.

This is not to say these are the only benefits that should be offered; employees demand and expect more. To be competitive employers, we must be able to meet as much of that demand as possible. While average wage growth has improved in the last couple years, Michigan still lags behind most states.

Second, RDHs and RDAs indicated that full-time and part-time employment should not be used to offer lower wages or fewer benefits. While it may be frustrating for practice owners, it's important to acknowledge that these individuals have the leverage: They can continue to not work in our offices and find other employment. In fact, they've demonstrated a willingness to do that already. Again, it's imperative that dentists, as the employers and top of the oral health care model, continue to improve job offers to meet the demands of our workers.

What's coming next

Beginning next month, the MDA will be putting out targeted advertisements on digital media to encourage RDAs and RDHs to return to the workforce. And, to connect potential employees with our members, postings on the MDA Job Board for assistants and hygienists are now free to MDA members. The advertisements will direct potential recruits to the MDA Job Board to find a position. MDA staff will track utilization of the Job Board and provide ongoing reports to determine the success of this effort.

It's our hope that the information we've learned through these various surveys and this targeted effort to bring licensed individuals back to work will help turn the tide on the workforce shortage. And while this initiative is focused on the short-term impacts of the workforce shortage, finding ways to improve the talent pipeline into the oral health workforce is imperative, and must be an ongoing effort. Your ideas and input are welcome in this effort.

For more information on posting a free ad on the MDA Job Board, see related story on Page 8, or reach out to the MDA's Jackie Hammond at jhammond@michigandental.org. ●

Contact Dr. Knudsen at eknudsen.mda@gmail.com.