

# Rising to the Challenges We Face

by VICKI WILBERS

I'm back again to talk about workforce—the topic of my column in the last issue.<sup>1</sup> This time, I'm bringing some of your dental colleagues along with me, including Dr. Guy Deyton, who also contributed last issue and Dr. Ron Wilkerson, who shares his perspectives from his involvement.

Alarming workforce shortages continue across the country and are impacting the dental profession. The ADA's HPI (Health Policy Institute)—which continuously provides key findings nationally and for states relating to workforce shortages—demonstrate this, as highlighted from a recent update.<sup>1</sup>

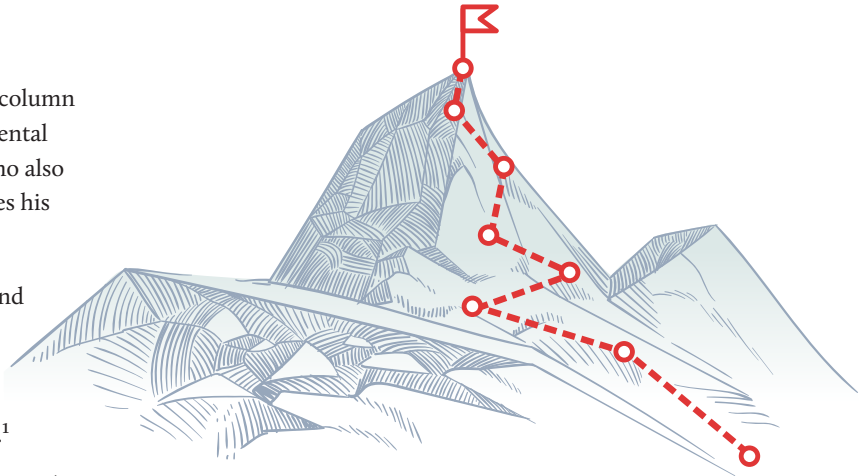
- **Recruitment Needs:** Dental team recruitment needs have not eased up. Roughly four in 10 dentists were recruiting dental assistants and dental hygienists in May. Recruiting dental hygienists continues to be the most challenging for dentists.
- **Position Vacancies:** On average, 22 percent of dental hygiene positions were unfilled in dental practices in May. Dentists in urban areas are feeling this shortage more acutely.

As well, multiple state entities—the MDA, Missouri Dental Hygienists' Association and State Office of Dental Health (ODH)—have conducted surveys validating the issue is real and being felt by practices across the state (read more about these stats in Dr. Deyton's article on the next page).

All of it feels a bit gloom and doom, but we're certainly not alone; there isn't an industry that's not been affected by staffing shortages. We've all seen at least one social media post about a business not being open on a particular day or time due to staffing. We see the signs and billboards expressing help wanted and offering bonuses and more to entice. We know from HPI data that many dental practices have increased wages and offered other incentives for staff retention.

But even with cloud over us, we can look at the silver lining and a bit of good news. It starts with outlining legislative successes in 2022: Dental Medicaid provider rates increased to 80 percent of the 50th percentile of the average rates in a particular area; loan repayment funds increased for those providing healthcare services in rural areas in Missouri; there now is allowance for the Missouri Dental Board (MDB) and the DHSS to collaborate through pilot projects to provide dental care for nursing home patients; and, funding was approved to bring the FIRST in the country fluoridation pellet system to rural parts of Missouri (read more about it on page 31 of this issue).

For dental professionals, it is obvious these new laws can assist with student loans and with increased fees for providing services, yet as important is what these can do for your patients—and is that not



what unites all dentists ... providing quality care to patients? If we can work to prevent cavities through increased fluoridated water systems, provide more care in nursing home settings, and hopefully provide more care throughout Missouri with additional Medicaid providers, patients are the winners. While we can and should celebrate these successes, what about the unrelenting workforce issues? If not addressed, these can cause patients to lose out on oral healthcare services integral to overall health.

ODH is asking for collaboration on findings to move forward in any way possible to assist with addressing severe workforce shortages. Seeing the writing on the wall so to speak, Dr. Guy Deyton, State Dental Director, formed a committee of the major dental stakeholders to envision what could be done in the short and long term to allow oral healthcare providers to better serve underserved areas and populations in Missouri, and then to provide their recommendations for alleviating these shortages. You can read his summary on the next page about what this committee has been discussing. Although there are no formal recommendations, the oral health stakeholders in this ad hoc have formed great relationships with key leaders, and all agree to continue a collaborative dialogue to consider decisions on proceeding with legislation and rule changes put forward jointly by the associations.

As Dr. Wilkerson admits in the “My View” column, perhaps as a dentist you're unsure what to think about workforce changes. Regardless, we must discuss it and cannot remain silent—we must, as a profession, show leadership and rise to the challenges we face.



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#### REFERENCES

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