



MISSOURI ORAL HEALTH CARE

Report of COVID-19 impact on workforce

Introduction

Establishing the need for a workforce survey

Awareness of Covid-19 in the United States began in December 2019. In 2021, it was evident the oral health care workforce was steadily decreasing. The Missouri Primary Care Association (MPCA) polled the 28 Federally Qualified Health Care Centers (FQHC) on staffing issues and current wait times.

The results of the survey were as follows:

- A total of 18 of the 28 FQHCs responded to the survey
- All but three had staffing issues
- Seven FQHCs had stopped accepting new patients because existing care demands exceeded their workforce capacity
- The remaining 11 FQHCs had an average new patient appointment wait time of 9.3 weeks, with a range from 5 weeks to 36 weeks
- The wait time for a remedial care appointment for existing patients ranged from two months to 6 months

In 2022, a more in-depth survey was sent by the Missouri Office of Dental Health (ODH) to 3,200 Missouri dentists and hygienists with an approximate response rate of 27%.

MAIN TAKEAWAYS

- **Pre-pandemic workforce was already strained.** The pandemic resulted in an estimated exit of 1-10% of our oral health care workforce, depending on the role.
- **Staff left dental clinics for many reasons.** Some left because of COVID-19 stress. Others left for reasons that developed prior to the pandemic, like staff burnout.
- **Some may return to the oral health care workforce, but many may not.**
- **The result is short-staffed oral health care facilities** that are not only struggling to see all patients in need of care, but also stressed and frustrated about where they can find the staff they need.



Pre-Pandemic Workforce: Dentists

Background

From 1960 through 1984, three dental schools in Missouri (Washington University, St. Louis University and UMKC School of Dentistry) produced an average of approximately 240 dentists per year. Between 1979 and 1989, Washington University and St. Louis University closed their undergraduate dental schools. In the mid-1980s UMKC cut its class size in half from 160 to 80. By 1990, more dentists in Missouri started retiring than were being replaced by graduating dentists. In the 12 years between 1990 and 2002, Missouri lost approximately 642 practicing dentists. In the 19 years since, only about half of the dentists have been recovered. In that same period, the population in Missouri increased by more than 1 million. The result was a 35% increase in the average workload on each Missouri Dentist. (Figure 1).

See Addendum for Figure 4-HRSA Dentist Shortage Areas in Missouri.

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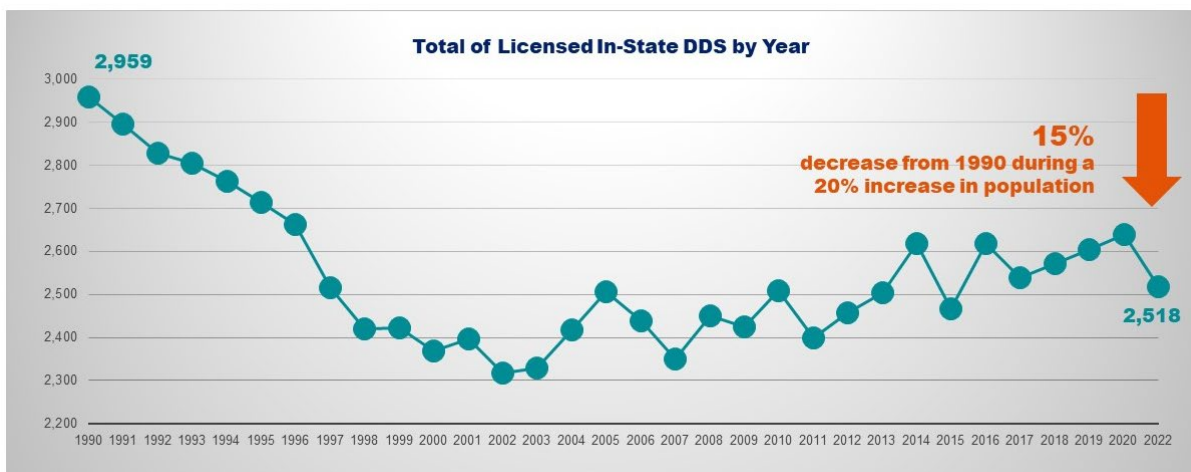


Figure 1: Missouri Licensed In-State Dentists 1990-2022



Pre-Pandemic Workforce: Assistants and Hygienists

Background

Between 1990 and 2020, the oral health care workforce experienced a growth of dental hygienists and Expanded Function Dental Assistants (EFDA). The number of hygienists grew by more than 2,000 in that same period of time (Figure 2). The Missouri Expanded Function Dental Assistant program started issuing permits in 2000 as a response to the dentist shortage. Between 2000 and 2020, there were approximately 6,766 EFDA permits issued to around 3,000 assistants and hygienists. The increase in the number of dental hygienists and EFDAs didn't keep pace with the population growth, but it did let the oral health care workforce cope with increasing demand.

See Addendum for Figure 5 - Dental Hygienist Shortage Areas in Missouri and Figure 6 - EFDA Shortage Areas in Missouri.

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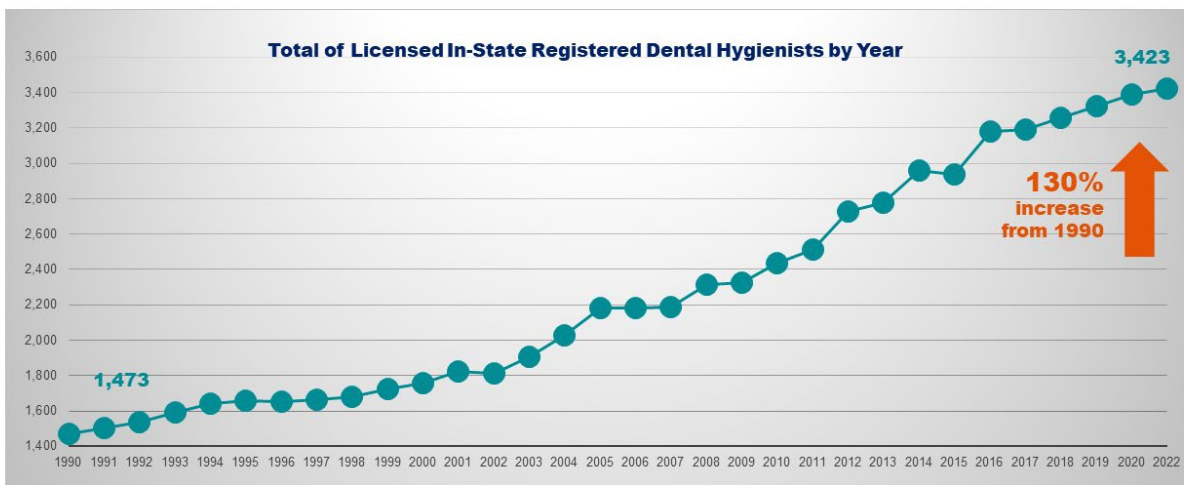


Figure 2: Missouri Licensed In-State Hygienists 1990-2022



COVID-19 pandemic impact

Oral health care workforce

While it is difficult to determine the exact attrition rate by role, especially for unlicensed personnel, combining the results of the ODH survey with other published surveys leads to the following estimates on the impact of the pandemic on the oral health care workforce.

Approximately 58% of respondents reported staff left due to COVID-19 related concerns.

Dentists:

- 1-3% of dentists left the Missouri workforce during the pandemic.
 - Predominantly, these were dentists near retirement age who chose to retire rather than dealing with the strains of practice during the pandemic.
- 18% stated filling an open position for a dentist took more than 90 days.
- 57% with an opening for a dentist stated they were unable to fill that open position.

Hygienists:

- 8% withdrew from active practice during the pandemic.
- 29% stated filling an open position for hygienists took more than 90 days.
- 44% with an opening for a hygienist stated they were unable to fill an open position.

Dental Assistants:

- Surveys indicated dental assistants who withdrew from dental practice during the pandemic may be the least likely to return.
- 5%-10% of dental assistants left the oral health care workforce during the pandemic.
- 45% stated filling an open position for assistants took more than 90 days or they were unable to fill the position.
- 60% with an opening for an EFDA stated they were unable to fill that position.



Action steps

Office of Dental Health

The Oral Health Care Workforce Survey has led to the following action steps, some of which have either taken place or have been scheduled:

Publish results broadly

Two articles completed and published

- Write and publish articles in the state dental journal educating dentists about the survey and outcomes.

Engage Missouri stakeholders

In progress

- Meet with the boards of Missouri's three major associations to educate them about the survey and outcomes.
- Meet with the Missouri Dental Board to educate them about the survey and outcomes
- Meet regularly with the Missouri Coalition for Oral Health's Board and Policy Committee.

Establish a task force

In progress

- Convene a task force to understand survey outcomes and brainstorm solutions. The task force has representatives from the Office of Dental Health, Missouri Dental Board, Missouri Dental Association, Missouri Dental Hygiene Association and the Missouri Primary Care Association.

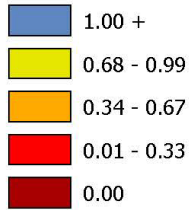
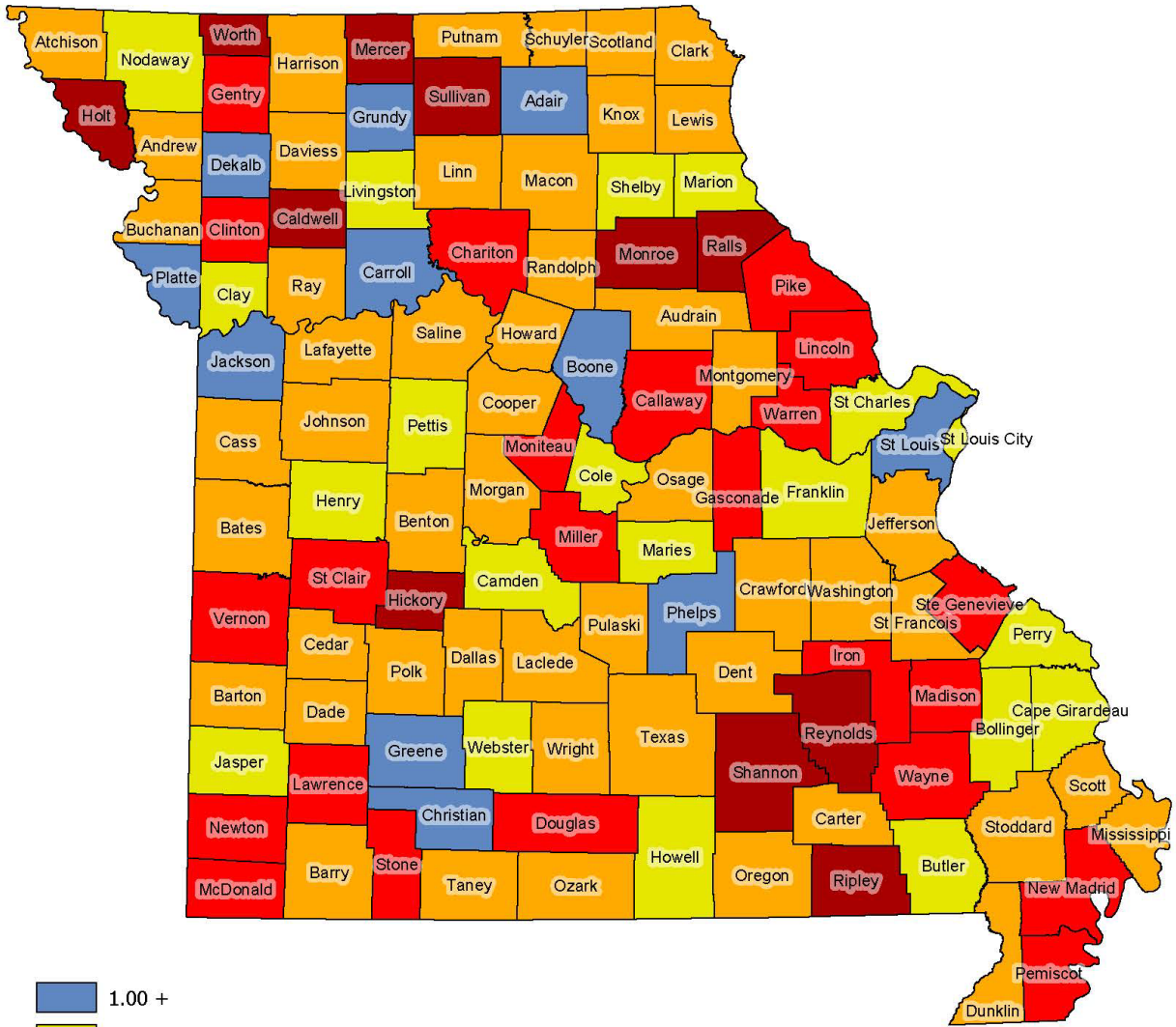
Present findings

In progress

- Accept speaking opportunities at local dental meetings to discuss the survey and outcomes.

Addendum – Figure 4: HRSA Dentists Shortage Area

All counties not colored in blue



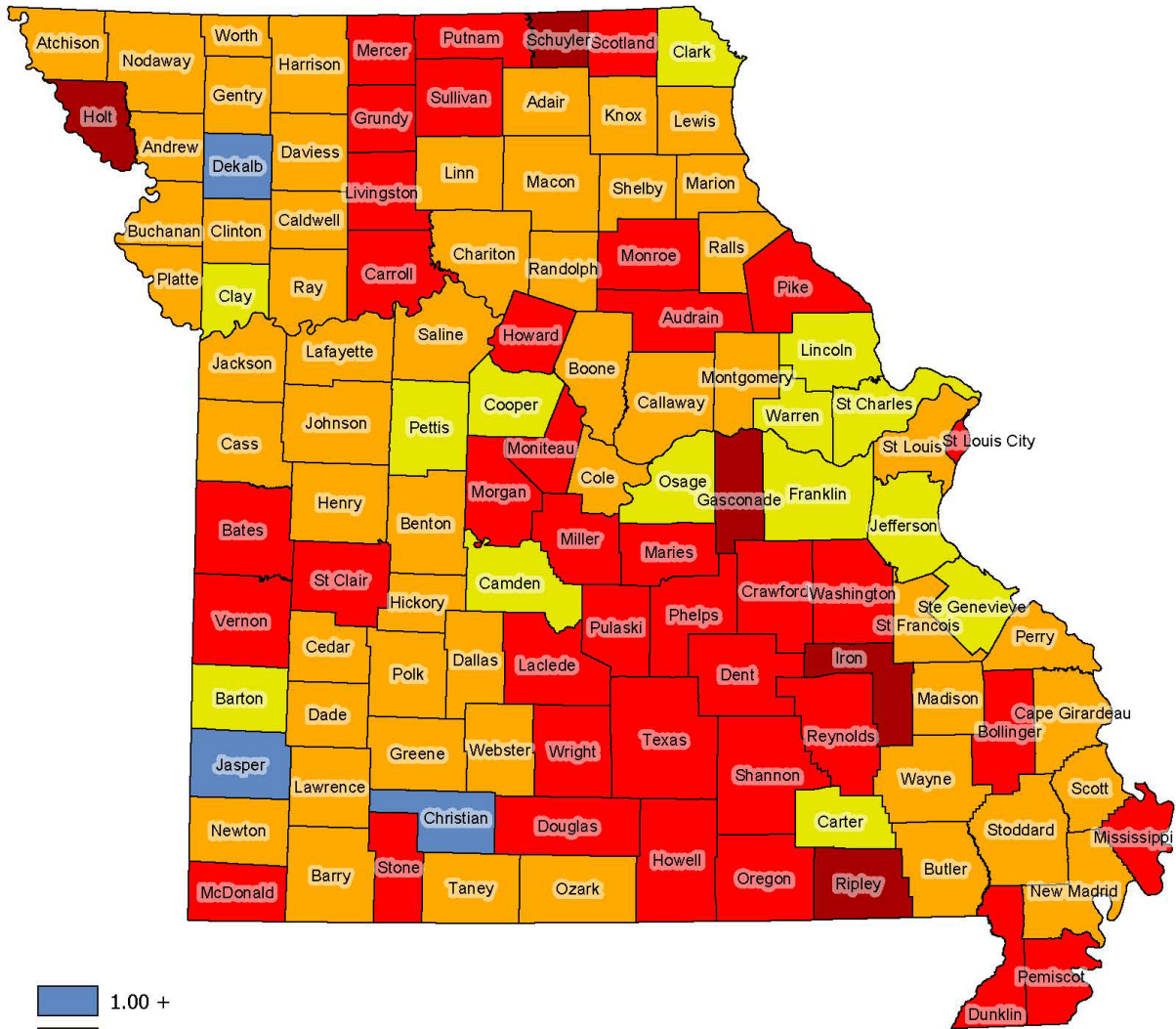
Ratio Dentist per 2100 Individuals by County
 Population data 2020 MICA
 Dentist <https://pr.mo.gov/listings-den.asp> (01/04/2023)
 Ratio based on: <https://pubmed.ncbi.nlm.nih.gov/28765446/>



Date: 1/19/2023

Addendum – Figure 5: Dental Hygienist Shortage Area

All counties not colored in blue



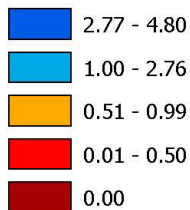
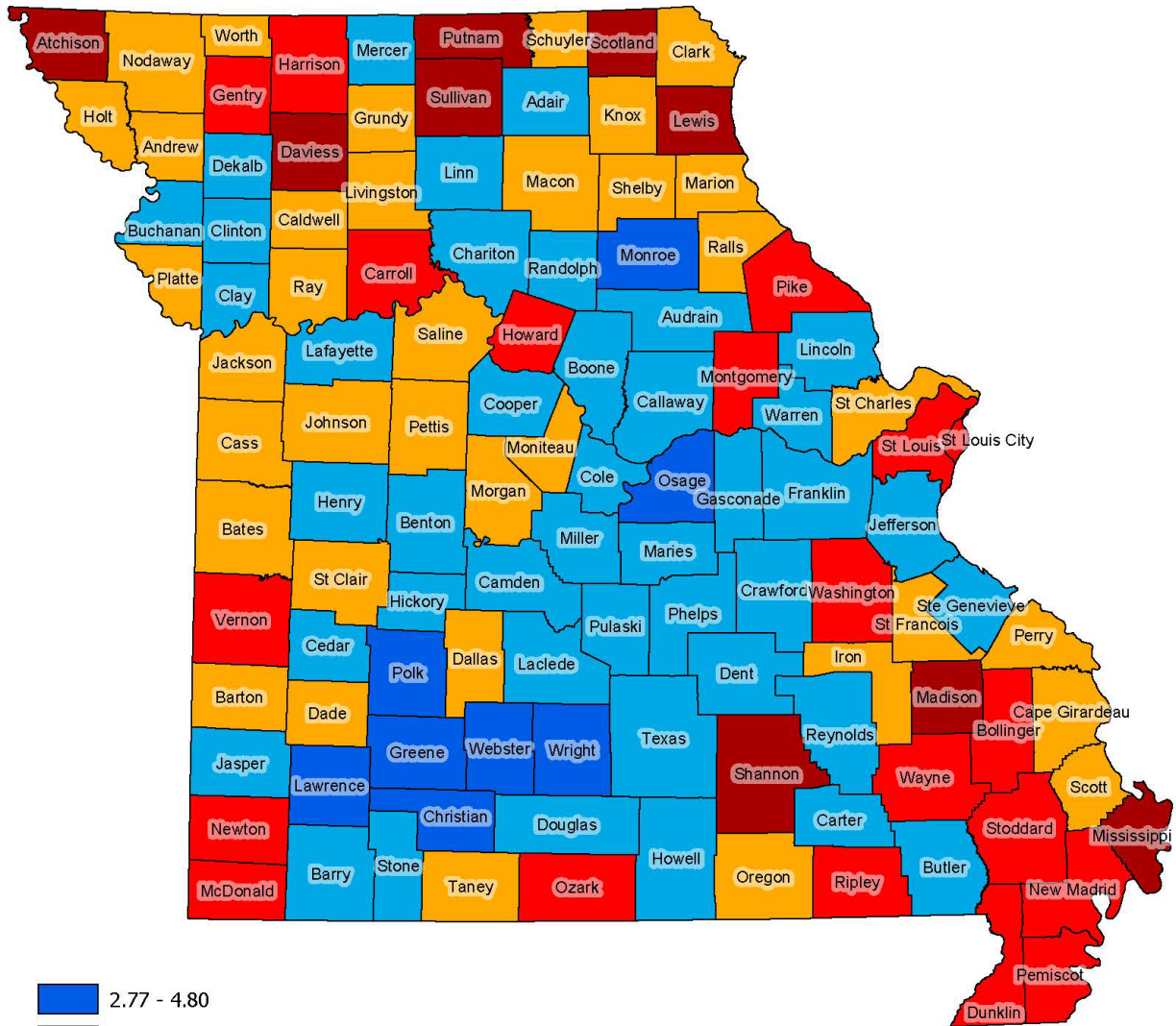
- 1.00 +
- 0.67 - 0.99
- 0.34 - 0.66
- 0.01 - 0.33
- 0.00

Ratio Dental Hygienist per 1000 Individuals by County
 Population data 2020 MICA
 Dental Hygienist <https://pr.mo.gov/listings-den.asp> (01/04/2023)



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Addendum – Figure 6: Expanded Functions Dental Assistant (EFDA) Shortage Areas
All counties not colored in blue



Ratio Expanded Functions Dental Assistant (EFDA)
per 1000 Individuals by County

Population data 2020 MICA
EFDA <https://pr.mo.gov/listings-den.asp> (01/04/2023)



Date: 1/19/2023