Oral Health Workforce Burnout in the Safety Net

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Oral Health Workforce Research Center (OHWRC)

- OHWRC is based at the Center for Health Workforce Studies (CHWS), School of Public Health, University at Albany, State University of New York (SUNY)
- OHWRC was formed as a partnership between CHWS and the Healthforce Center at the University of California, San Francisco
- OHWRC, established in 2014, is 1 of 9 health workforce research centers in the country funded by the Health Resources and Services Administration (HRSA) and the only one uniquely focused on the oral health workforce

oralhealthworkforce.org
Acknowledgements and Disclaimer

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Background

• Burnout is a situational, context-dependent phenomenon engendered by work-related stressors with consequences tied primarily to professional attitudes, behaviors, and performance, although it has also been associated with personal mental health diagnoses such as depression\(^1\)

• Burnout is prevalent among health care workers in the US,\(^2\) including oral health providers\(^3\)

• COVID-19 pandemic exacerbated pre-existing burnout issues across the health care workforce\(^3,4\)
Methods

• This study assessed environmental, organizational, and personal factors that contributed to burnout among oral health providers in the safety net.

• From May to September 2022, interviews were conducted at 11 safety-net dental organizations, including 9 FQHCS.

• 26 key informants (2 CEO/Executive Directors, 6 non-clinical directors, 9 clinical directors, 2 dentists, 4 dental hygienists, 1 dental assistant, 2 administrative staff).

• An interview protocol guided the interviews.
  - Interviews conducted on Zoom and transcripts were uploaded to Dedoose V.9.0 for coding and analysis.
Results: Stressors at the Environmental Level

• Most immediate stressors were directly related to the pandemic
  • Changing policies and requirements
  • Inconsistent uniformity of policies and regulations
  • Closure of services that impacted childcare
Stressors at Organizational Level

- Non-emergency dental services were interrupted
- Difficulties obtaining sufficient personal protective equipment (PPE)
- Changing clinical protocols
- Reassignments, furloughs, and shortages
- Increased resignations and turnover, especially among dental hygienists and dental assistants
- Higher demand when services resumed
- More complex and severe conditions from oral health neglect
Stressors at Individual Level

- Concerns about aerosol-generating procedures
- Transmitting COVID-19 to loved ones
- Furloughs
- Stressors related to childcare (closure of schools and day care centers)
Strategies to Address Burnout

• Organizational
  1. Work-Life Balance Support
     • More time-off
     • Leniency around taking time off
     • Flexible scheduling
  2. Employee Well-Being Assistance
     • Counselling support
  3. Recognition and Compensation
     • Extra pay and breaktime
  4. Communication and Engagement
     • Staff feedback

• Individual/Interpersonal
  1. Wellness and Relaxation Activities
     • Guided nature walks
  2. Mental Well-Being Practices
     • Gratitude exercises
Burnout in Oral Health Workforce—What Do the Data Say?

- Nearly 8-out-of-10 oral health clinicians reported experiencing symptoms of burnout during the COVID-19 pandemic (Mar 2020-Sep/Oct 2021) (OHWRC, 2023)

- Nearly 4-in-10 oral health clinicians reported similar experiences both at the time of the survey (Sep/Oct 2021) and prior to pandemic (OHWRC, 2023)

- March 2021 ADA Dentist Health and Well-Being Survey of dentists found 16% had experienced anxiety and 13% had experienced depression
Resources

https://www.hhs.gov/sites/default/files/workplace-mental-health-well-being.pdf


https://adanews.ada.org/new-dentist/2022/may/the-burden-of-burnout/


oralhealthworkforce.org


Questions?

• For more information, please email me at: tfernando@albany.edu

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