Workforce and Staffing: Utilizing Your Resources to Fulfill Your Mission

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Learning Objectives

• Understand statistics and issues around the current HC workforce to inform recruitment methods and strategies
• Develop an effective hiring process
• Foster a positive work environment to maximize retention
• Develop ideal staffing and equipment ratios for your program
• Understand how students, dental hygienists and new dental team members might be effectively utilized
Workforce: A Challenge for Health Center Oral Health Programs

• 44.4% of Health Centers have at least 1 dentist vacancy
  • An Analysis of the 2018 NNOHA Health Center Workforce Survey Results

• Nationwide there is a growing shortage of dentists, with more dentists retiring or leaving the profession than graduate each year.

• 5,793 Dental Health Professional Shortage Areas (HPSAs) as of December 2018.
  • https://data.hrsa.gov/topics/health-workforce/shortage-areas
Health Professional Shortage Areas (HPSA) - Dental Health
HPSA Facility Clinician Priority Scores

HPSA Scores are developed for use by the National Health Service Corps in determining priorities for assignment of clinicians. Scores range from 1 to 26. Higher scores equal greater priority.

Source: Health Resources and Services Administration (HRSA), Bureau of Health Professions (BHP), October, 2015.
Note: Alaska and Hawaii not shown to scale.
Analysis of the 2018 NNOHA Health Center Workforce Survey Results
2018 NNOHA Workforce Survey – Dentist Vacancies

- 2018: 44.4% reported having at least one dentist vacancy
- 2018: 19.8% reported having at least 1 dental hygienist vacancy
Top 3 Reasons for Choosing a Health Center Career

• Dentists:
  • **Felt a mission to serve the dentally underserved population (51.6%)**
  • Loan repayment was available in Community Health Center practice (12.1%)
  • Attracted by work schedule/leave policies/fringe benefits (9.3%)

• Dental Hygienists:
  • **Felt a mission to the dentally underserved population (53.3%)**
  • Attracted by work schedule/leave policies/fringe benefits of Community Health Center practice (18.3%)
  • Wished to practice dentistry/dental hygiene in a community-based setting (13.3%)
70.6% of dentists and 87.0% of dental hygienists indicated intent to remain in Health Center practices.
Putting It All Together...

- Characteristics of satisfied oral health providers
  - More experienced providers
  - Providers who had been employed by the Health Center longer
  - Providers who felt they had full autonomy
  - Sufficient clinical, administrative, clerical support and adequate facilities and equipment
  - Sense of mission
### Reasons for Choosing Health Centers

<table>
<thead>
<tr>
<th>Reason</th>
<th>Dentist (N=182)</th>
<th>Dental Hygienist (N=60)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felt a mission to the dentally underserved population</td>
<td>51.6%</td>
<td>53.3%</td>
</tr>
<tr>
<td>Wished to offer oral health care within an interdisciplinary environment</td>
<td>4.4%</td>
<td>0%</td>
</tr>
<tr>
<td>Wished to practice dentistry/dental hygiene in a community based setting</td>
<td>7.7%</td>
<td>13.3%</td>
</tr>
<tr>
<td>Did not want to invest capital in a private practice or borrow money for a private practice</td>
<td>3.8%</td>
<td>0%</td>
</tr>
<tr>
<td>Attracted by work schedule/leave policies/fringe benefits of Community Health Center practice</td>
<td>9.3%</td>
<td>18.3%</td>
</tr>
<tr>
<td>Loan repayment was available in Community Health Center practice</td>
<td>12.1%</td>
<td>5.0%</td>
</tr>
<tr>
<td>Sold private practice, or retired from government service</td>
<td>4.9%</td>
<td>0%</td>
</tr>
<tr>
<td>Unsatisfied with associate/employee dentist or dental hygienist arrangements currently available</td>
<td>5.5%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Was unsure about next career steps</td>
<td>0.5%</td>
<td>8.3%</td>
</tr>
</tbody>
</table>
Recruiting, Hiring and Retaining Providers
Factors to Consider When Beginning the Recruitment Process

• Mission alignment
• Scope of services and patient population
• Cultural competency and sensitivity
• Language considerations
• Productivity expectations
• Economic landscape

“If you’ve seen one health center…”
Recruitment Strategies

- National Health Service Corps
- NNOHA Job Bank
- 3RNet
- Academic Institutions
- Primary Care Associations
- State and Local Dental Associations
- LinkedIn
- Recruiters
- Word of mouth
Recruitment Strategies

- Match your need to your source
- Include the Team
- Be Creative
- Ongoing
Retaining Good Providers

- Work environment
- Salaries and Benefits
- Incentive Programs
- Continuing Education and Training
Work Environment

• Model the Way
• Inspire a Shared Vision
• Challenge the Process
• Enable Others to Act
• Encourage the Heart

- What is our Corporate Culture?
Work Environment

- Clarity of Mission
- Open Communication
- Build Value in All
- Creating a positive work environment
- Focus on the team
Work Environment

- Adequate number and quality of auxiliaries
- Adequate administrative support & time
- Up to date equipment, instruments and supplies
Salaries and Benefits

• Look at the Total compensation
  • Salary, Insurance, Retirement, PTO, LRP*, etc.

• Review Compensation reports
  • NACHC, Primary Care Associations

• Fixed, Variable or Both?
Salaries and Benefits

Incentive Programs

- Simple, easy to understand and manage
- Based on a target “goal” that directly influences the organization’s income
- Achievable and attractive
- Frequent (e.g. monthly or quarterly rather than annually)
2018 Dentist Compensation
2018 Dental Hygienist Salaries
Salaries and Benefits

• Average CE money
  • Dentists - $2163/yr
  • RDH - $1208/yr

• Median Vacation Days – 20 days

• >95% health centers offer a retirement plan

• >84% health centers offer a retirement match
“Take care of your employees, and they will take care of your business.”
- Richard Branson
Maximizing Efficiency: Staffing, Equipment and Productivity
The “HUMAN Resource”...

- Your team is your greatest asset
- There is always a demand for good team mates.
Staffing Recommendations

One size does NOT fit all. HRSA guidelines are just that – guidelines. They are good ones though.

• Consider:
  • Mission of the program
  • Scope of services
  • Patient demographics and patient mix
  • Expectations for growth
  • Efficient productivity and maximal use of facilities
  • State practice regulations and flexibility of dental workforce
Staffing Recommendations

• For Health Centers, NNOHA recommends **2.0 or more full-time dental assistants per 1 full-time dentist** for optimum service.
  • 1 DA per operatory

• Dedicated dental front desk staff
  • Cross train in integrated practices
Equipment Ratios

• 2 – 3 operatories per FTE Dentist EXCLUDING chairs used for hygienist

• Preferably, dental hygienists should have a separate and dedicated operatory
Encounter Rates & Productivity Standards

Factors to consider:

- Patient mix
- Procedure mix and scope of service
- Experience level of providers
- Emergency patient load
- Practice act allowances for auxiliaries
- Scheduling efficiency
Productivity

• 2017 UDS Data
  • 2,599 visit/FTE/Year/Dentist
  • 1,179 visit/FTE/Year/RDH
  • 901 visit/FTE/Year/Dental Therapist

• 2.4 pts per clinical hour (Dentist)
• $430K in gross charges/yr/1.0fte Dentist
• Relative value units (RVUs)
• More on productivity standards: [http://www.dentalclinicmanual.com/docs/Productivity_measures.pdf](http://www.dentalclinicmanual.com/docs/Productivity_measures.pdf)

• Avg cost per dental visit = $200.31
• 2.56 visits/yr/patient
Exploring Scope of Practice
Changing Roles of Dental Hygienists

- Direct reimbursement from Medicaid
  - https://www.adha.org/reimbursement
- Direct access to dental hygienists
  - https://www.adha.org/direct-access
- Facts about the Dental Hygiene Workforce:
  - http://www.adha.org/resourcesdocs/75118_Facts_About_the_Dental_Hygiene_Workforce.pdf
- Current UDS ratio of .5 RDH/1DDS/DMD
Other Emerging Dental Team Members

• Expanded Function Dental Assistant (EFDA)
• Advanced Dental Hygiene Practitioner
• Community Dental Health Coordinators (CDHC)
• Dental Therapists/Advanced Dental Therapists
• Patient Navigators/Community Health Workers
Other Providers: Students and Residents, Volunteers and Contractors
Students and Residents

• Potential recruitment
• Positive retention tool
• Clinical productivity
• NNOHA Academic Partnership Paper
Students and Residents

• Operatory space
• Auxiliary support
• Sufficient patient/procedure pool
• Engaged Providers/Educators
• Organizational commitment to hosting student/resident
• Good working relationship with School or Residency Program
What Should You Expect from the School or Residency Program?

• Effective and frequent communication before and during rotations through a specific program contact for all administrative and clinical issues
• Clear requests for site and provider information
• Send prepared, competent and educated students
• Professional liability coverage for the students
What Should You Expect from the School or Residency Program?

• Communicate specific clinical procedure requirements
• Adequate length of rotations
• Housing expectations
• Revenue sharing expectation
Other Benefits to the Site

- The dental staff has the opportunity to share their expertise and experience.
- The experience that the student receives at the site can be a very effective recruiting tool.
- In most cases, all revenue produced by the student is retained by the site.
- The organization has the opportunity to be a partner in educating future dental professionals about cultural, societal and health issues unique to the communities they serve.
Benefits to Students

• Real World Clinical Practice
• Exposure to Alternative practice models
• Mentorship
Non-Traditional Staffing

- Contract Dentists
- Internal Development
- Volunteers
Thank You!

• For additional support related to workforce:
  • Read Chapter 5 of the Operations Manual
  • Explore: [http://www.nnoha.org/resources/access-to-care/workforce/](http://www.nnoha.org/resources/access-to-care/workforce/)
Questions?

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