Dental therapists — a survey of job satisfaction and working practice

The working practices and job satisfaction of dental therapists: findings of a national survey by D. E. Gibbons, M. Corrigan, and J. T. Newton Br Dent J 2000; 189: 435-438

Objective

To describe the working practices and level of job satisfaction of dental therapists in the United Kingdom.

Postal questionnaire survey of 380 dental therapists registered with the General Dental Council.

Only 13% of dental therapists are also qualified as dental hygienists. Around 75% of those registered with the GDC are currently employed as dental therapists. Of those not currently working as dental therapists most were either working as hygienists or caring for their children at home. Over 90% of those working as therapists are employed within the Community Dental Service. About half work part-time. Part-time working is more common among respondents with childcare responsibilities. Most dental therapists are employed in clinical roles, and perform a limited range of treatments. A small proportion appear to have been asked to undertake duties which are not currently legal for them to perform. Three-quarters of those who were currently working as dental therapists had taken career breaks at some point, the most common reasons for such a break being a change in career and/or child rearing. The respondents expressed a high level of job satisfaction, particularly among older dental therapists.

Conclusions

Dental therapy offers a potentially rewarding career in terms of job satisfaction. Any planned increase in the numbers of training places for dental therapists should their role be expanded, for example to include working in general dental practice, would need to take cognisance of the high rate of part-time working and the proportion who could be expected to take career breaks at some point in their working lives, as is the case with female dental practitioners.

In Brief

- Dental therapists express high levels of job satisfaction.
- Just over 50% of dental therapists work part-time. Part-time employment is more common among those with childcare responsibilities.
- The vast majority of dental therapists in the United Kingdom are employed in the Community Dental Service, where for the most part their duties include clinical work and dental health education.
- A small proportion of dental therapists have undertaken duties which are not currently legal for them to perform.
- Around three-quarters of those currently working as dental therapists had taken a career break at some point in their working lives, most often for childrearing. The median duration of breaks was 11.5 months.

Comment

For many years there has been a debate, often less than well informed, about the working practices of dental therapists and this has intensified since the publication of the report of the Dental Auxiliary Review Group in 1998.

In this paper Professor David Gibbons and his colleagues make an important contribution to that debate. The postal questionnaire survey of 380 dental therapists registered with the General Dental Council achieved a notable response rate of 80% with the average age of the respondents being 44.6 years. Predictably the vast majority (over 90%) of therapists practise in the Community Dental Service and encouragingly they express a high level of job satisfaction with those above the median age of 44 years being the most satisfied. Worryingly, however, a small proportion of therapists have been, and are, asked to undertake tasks which are currently illegal for them to perform.

It is encouraging to read that the 75% of the sample who had taken a career break had decided to return to dental therapy, with child rearing being the most common reason for the break.

There are inevitably limitations in a study of this type and the most obvious is that it is only possible to survey those dental therapists who are currently on the General Dental Council register. This can introduce a significant bias in that the therapists on the register have decided to either stay enrolled from qualification or return after a career break ie they could be described as 'satisfied'. Those who felt 'dissatisfied' may well have gradually left the register over the intervening years.

Despite this unavoidable limitation the study gives a useful indication of the work patterns of future dental therapists and in particular the likelihood that the majority will return to practise after a career break. It could well be argued that the study has potential extrapolation to other members of the dental team when trying to estimate the impact of career breaks on the workforce but the essential limitation of the study outlined above must be borne in mind when making optimistic assumptions.

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