A study of the community dental service in the UK

A profile of the dentists working in the community dental service in the United Kingdom in 1999 by F. A. Blinkhorn, A. S. Blinkhorn and M. Tickle *Br Dent J* 2001; 190: 266-268

Aim

To profile the staff in the community dental service (CDS) in terms of qualifications, clinical service provisions and gender.

Method

Postal questionnaire to all clinical dental service managers in the United Kingdom.

Results

The response rate was in the order of 99%. A higher proportion (67.5%) of community dental staff are women, but they are more likely ($P < 0.001$) to work part time. There were a higher proportion of men (14.1%) in the most senior management grade when compared with women (6.1%). A postgraduate qualification is relatively common, but men are more likely ($P < 0.001$) to have a higher qualification. The CDS provides a wide range of services centering on clinical care for adults and children, special needs care, epidemiology and health promotion. Most managers tended to have a clinical role.

Conclusions

Women play an important part in the CDS. They are more likely to work part time, tend to occupy lower positions in the organisation and are less likely to have a postgraduate qualification than men.

In Brief

- The CDS offers a broad range of clinical services to priority groups in our society.
- Many in the workforce have postgraduate qualifications
- The workforce is predominantly female.
- Some women have a managerial function but are more likely to be in the CDO grade.

Comment

The community dental service (CDS) is an important adjunct to general dental services. Its key clinical tasks are the provision of care for adults and children with special needs and very nervous patients and to act as a safety net for people who are unable to register with a GDC. Its dental public health role involves school screening, epidemiology and health promotion. There is little published information on the personnel working in this service. Such information is relevant, especially if the CDS is asked to further expand its role and help improve access to dental services.

The aim of this study was to collect information to form a profile of the CDS workforce and in this regard it certainly achieved its aims. Unlike many studies that use questionnaires which produce low

return levels and deal with reported behaviour this study was able to achieve a high return level (99%) and can reliably report factual information on 1571 staff members. This high return rate is likely to be a result of a simple questionnaire which was well designed and easy to complete. Piloting of the tool among a small number of the appropriate personnel ensured that the questionnaire was user friendly.

The results showed that the majority of CDS staff were female (68%) but that 47% of dental service manager posts are held by women compared with 53% held by men. Male staff were more likely to work in higher grades, have postgraduate qualifications and work full time. A high proportion of staff had undergone postgraduate training and held higher qualifications.

A wide range of clinical services were

recorded and these included clinical care of adults and children, treatment of special needs groups including the elderly and the homeless, sedation and GA services, orthodontics, advanced restorative care and oral surgery. Epidemiology and health promotion were reported as further primary functions. Less than 1% of staff reported a solely managerial function and most staff had more than one task.

The authors found that the modern CDS fulfils a variety of roles and does this with a highly qualified and motivated staff. The part played by women in this service is not insignificant.

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