

Where have all the dental nurses gone?

Author information

¹Rebecca Silver FdSc MSc RDN is a multi-award winning dental nurse. She has worked within the NHS and private dentistry as well as working with numerous dental specialists. She has obtained post-qualification certificates in Oral Health Education and Conscious Sedation and an MSc in Advanced and Specialist Healthcare (Applied Dental Professional Practice).



Rebecca Silver¹

shares her views on the UK's

dental nurse recruitment crisis.

Introduction

It appears that the registration report published by the General Dental Council (GDC) in August 2021¹ has created a discussion within dentistry. Why has the number of registered dental nurses (DNs) reduced? Especially compared to the registration report published in July 2021, just before the deadline of 31 July for dental care professionals (DCPs) to pay their annual registration fee (ARF).

There appears to be talk on social media and face to face that there is a recruitment crisis and that 5,000 DNs have left the profession. But have they?

This article will discuss whether this author believes this is the case, and whether the data held by the GDC is the best way of answering the question: 'Where have all the dental nurses gone?'

Background

In order to work as a DCP within the UK a DN has to be registered with the GDC after they have completed their training and sat and passed exams. However, being registered with the GDC does not necessarily correlate to working as a DN in a hospital, community or high street setting. The GDC registration reports do not take into account:

- 1. The number of part time registrants
- 2. Any registrants on maternity or paternity leave
- 3. Registrants currently overseas
- 4. Registrants having a break from dentistry
- Working in DN education but not in a clinical setting
- 6. Registrants who are on other registrant lists (they may have been a DN but have also obtained qualifications in another DCP group or as a dentist). They have a right to maintain themselves on the DN register if they wish
- 7. Registrants who have retired, but wish to maintain their professional registration
- 8. Any other reason that a DN may not be working currently as a DN.

Table 12021 - All figures takenfrom the monthly registration reportsreleased by the GDC1

Month	Number of Registrants	
January	59,152	
February	59,651	
March	59,942	
April	60,501	
May	61,116	
June	61,541	
July	61,879	
August	58,053	
September	58,291	

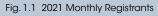
Table 2 2020 – All figures takenfrom the monthly registration reportsreleased by the GDC1

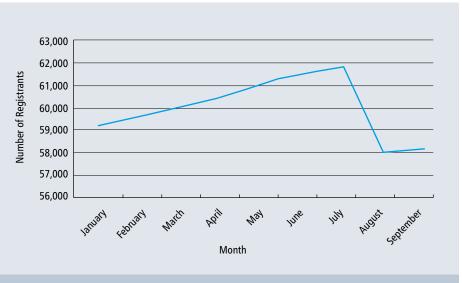
Month	Number of Registrants	
January	58,907	
February	59,236	
March	59,499	
April	59,831	
May	60,208	
June	60,557	
July	60,829	
August	57,239	
September	57,597	
October	57,922	
November	58,259	
December	58,728	

It appears that there are members of the profession who will accept that not every dentist or non-dental nurse DCP is working, yet it is assumed that if a DN is registered with the GDC then they are working in a clinical setting full-time. See Table 1 and Figure 1.

There is a difference of 3,826 registered DNs between July 2021 and August 2021. But the registration report offers no reasons as to why the number of DNs have reduced. There is no distinction between registrants who did not pay their ARF and left the register that







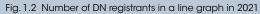


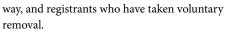


Table 3 2019 - All figures takenfrom the monthly registration reportsreleased by the GDC1

Month	Number of Registrants
January	58,047
February	58,240
March	58,523
April	59,014
May	59,450
June	62,262
July	62,222
August	56,730
September	57,196
October	57,751
November	58,706
December	58,652



Month	Number of Registrants	
January	57,346	
February	57,686	
March	58,067	
April	58,280	
Мау	58,927	
June	59,279	
July	59,520	
August	55,725	
September	56,345	
October	56,790	
November	57,313	
December	57,907	



Historically, there has always been a reduction between July and August, and the previous years of 2020, 2019 and 2018 show this as well (Tables 2-4 and Figs 2-4).¹

Table 5 shows the difference in registrant

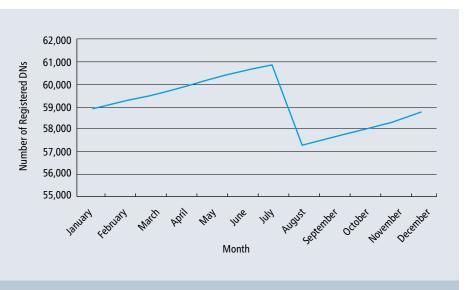
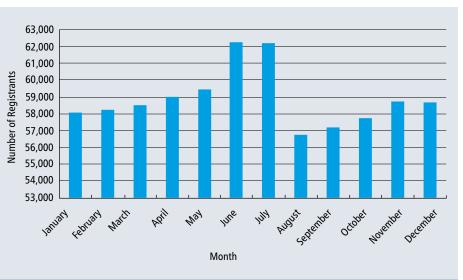
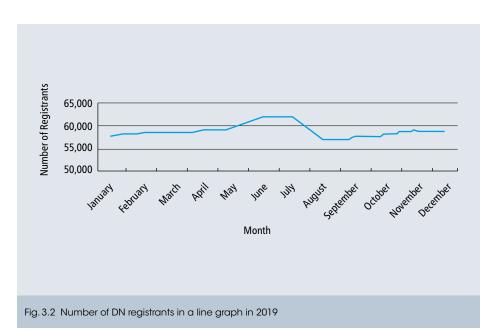


Fig. 2.2 Number of DN registrants in a line graph in 2020







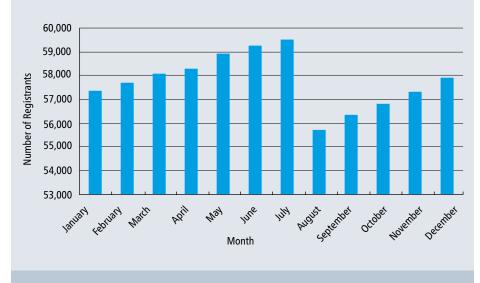


Fig. 4.1 2018 Monthly Registrants

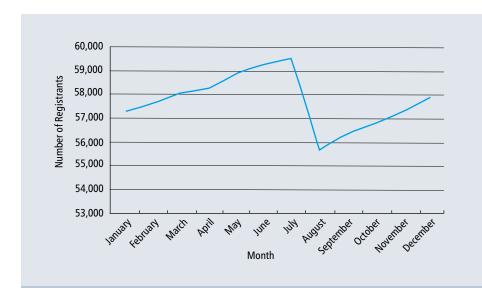


Fig. 4.2 Number of DN registrants in a line graph in 2018

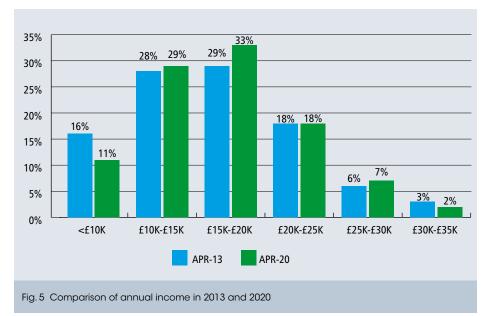


Table 5 Difference in registrants fromJuly to August

Year	July	August	Total Difference
2018	59,520	55,725	3,795
2019	62,222	56,730	5,492
2020	60,829	57,239	3,490
2021	61,879	58,053	3,826

numbers between July and August in years 2018-2021.

Comparing these years, 2019 actually had the largest difference in registrant numbers between July and August of that year: 5,492. Yet it is this year (2021) that there has been this discussion about large numbers of DNs having left the register and the profession. This may be due to some of the points that will be discussed in the following section.

'Comparing these years, 2019 had the largest difference in registrant numbers'

Possible reasons DNs have left the workforce

This section will discuss and look at the potential reasons why DNs have left the register in 2021.

Pay

DNs are professionals; the title of 'dental nurse' is a protected term and covered by law as a profession. DNs have been regulated by the GDC since the Professions Complementary to Dentistry Regulations Order of Council 2006² made registration compulsory in 2008.

The 2020 Annual Salary Survey by the British Association of Dental Nurses (BADN) was completed during October and December of 2020 and the results were published in March 2021.³ The full findings can be accessed on the BADN website; this is a selection of their findings:

 99% of respondents were female with less than 1% each male, identify as other, or prefer not to say

- 2. The majority of respondents were living with a partner and children, and nearly a third (31%) were the primary earner in the household (vs 23% in 2013)
- 3. Just under two-thirds of respondents worked more than 35 hours per week
- The majority of respondents earned between £10,000 and £20,000
- 5. More than half of respondents (55%) had to pay all (51%) or part (4%) of their GDC registration fee; nearly three-quarters (71%) all (50%) or part (21%) of their CPD costs; 87% were not allowed paid protected time off to complete their CPD requirements; and, of those who were BADN members, 91% had to pay their own BADN membership fee.
- 6. 16% of respondents have a second job. Of those, nearly half (48%) say it is necessary to meet their basic living costs, a third (35%) to provide a better standard of living and 10% to pass on their skills. Other reasons include additional experience, and to help out during lockdown.
- 7. Of those furloughed during 2020, 70% received 80% of their normal salary. Of those furloughed during 2020, 27% were paid less than the statutory 80% of their salary by their employer; and 14% of those furloughed were not paid at all.

status. Anecdotally, there has been discussion of DNs being poached from jobs and that they are now standing up for better pay. The pandemic highlighted how important DNs are to the dental team, with DNs being in charge of implementing fallow and many other infection control changes in their practice.

Many DN jobs pay less than some retail jobs, and with no other perks such as offering to pay GDC registration or indemnity. This is not expected, but a practice that offers more may see that they retain their staff for longer. Offering 28 days' annual leave, as the minimum set by the UK Government,⁴ which is 5.6 weeks if an employee is working five days a week, is not a perk. It is a lawful requirement. And the equivalent for pro-rota.

DNs often feel that the financial reward from their jobs is poor, and lower than that of their fellow DCPs and dentists. Ross and Ibbetson⁵ found that 'issues of poor remuneration are widespread' and Sembawa, Wanyonyi and Gallagher⁶ stated that 'they perceived they were underpaid'.

Retirement

The current UK retirement age for a state pension is 66,⁷ with this rising to 68 in future years. Maybe some DNs have reached their retirement age and do not wish to continue working anymore. Or maybe they wish to

'The pandemic highlighted how important DNs are, with DNs being in charge of implementing fallow and other infection control changes.'

Comparisons of annual dental nurse income between 2013 and 2020 can be seen in Figure 5.

The COVID-19 pandemic has made a lot of DNs take stock of their life and reassess what is important. The pandemic also highlighted the lack of support from the GDC and being unable to allow a reduction in ARF or setting up a payment plan to pay the ARF in 2020. This meant that there was some talk of DNs and other DCPs having to make financial sacrifices in order to stay on the register. For the GDC to then announce that payment of ARF can be completed over a direct debit payment plan made a lot of DNs question whether the pay they were earning was reflective of their job role and their professional continue to work but not in dentistry. Dentistry can be demanding on the body; we sit or stand for long periods of time, and anecdotally speaking to colleagues, there are numerous back problems, carpal tunnel problems, vision problems and high levels of stress.

Various studies in dentistry have noted:

- At least one musculoskeletal complaint⁸
- Severe back pain was noted in 25% of dentists⁹
- 56% dental hygienists suffer with carpal tunnel syndrome¹⁰
- Older people and women were more 'disturbed by neck pain'¹¹
- There are numerous other risks involved with dentistry that affect the eyes, ear, radiation hazards and infectious hazards.¹²

Although these studies do not mention DNs specifically, one could potentially apply them to dental nursing due to the intricate nature of the clinician and dental nurse. If a clinician is suffering, one may consider that the DN is also suffering from the same physical demands.

Retirement is a part of life where people can start to relax and enjoy life. Many DNs may wish to remove themselves from the register due to this and the physical demands.

Overseas

The ever-changing COVID-19 pandemic has meant government changes to travel rules and green/red lists, and there are some countries that have changed quarantine status quite quickly. It is possible that some DNs are unable to return to the UK or now cannot work anymore as life and COVID has made them reassess their priorities.

Registered as a different dental professional

You can be on the register with different professional titles. This means that some DNs who have obtained other qualifications and other professional titles may have stopped referring to themselves as dental nurses.

As a caveat to this, some DNs may still be working within dentistry but have moved onto roles that do not require registration with the GDC. Treatment Coordinator (TCO) and practice manager (PM) are usually these roles, although working on reception only is also an option.

Lack of enjoyment and fulfilment

Ibbetson and Ross⁵ acknowledged in their research that there was a frustration among DNs who felt that any further skills they obtained led to little or no recognition within the profession. They also acknowledged that perceived style of hierarchical dentistry also contributed to DNs feeling undervalued within their profession. Forbes *et al.*¹³ also acknowledged there was a link between the use of skills and DNs' feelings of satisfaction within dentistry. If the link is low, then the feelings of satisfaction are similarly low.

Forbes *et al.*¹³ found there was agreement that DNs felt undervalued at work. Sembawa, Wanyoni and Gallagher⁶ found there was a 'sense DNs were undervalued...' This feeling was also coupled with a desire for DNs to find a different role within dentistry or leave the profession entirely.

Data

The expression 'correlation does not equal/ imply causation' means that just because there is a correlation does not mean that there is only

'In my opinion, the COVID-19 pandemic has made DNs realise their worth and how hard they worked throughout 2020 and 2021...'

one cause.¹⁴ If a variable were to change then so would the correlation. Correlation occurs when there is not enough information and therefore correlations are made. Once more information is uncovered, the fewer correlations we make.¹⁵

Conclusion

Although registered dental nurse numbers have reduced, I do not think that there is one main reason for this. Over the past four years, numbers of registrants have reduced between July and August, and 2021 didn't have the biggest change within the last four years.

In my opinion, the COVID-19 pandemic has made DNs realise their worth and how hard they worked throughout 2020 and 2021 and they are not accepting jobs they perceive are beneath them, for a number of reasons.

However, every year numbers do drop and there are many other reasons that this could have occurred.

References

- General Dental Council. Registration reports. 2021. Available at https://www. gdc-uk.org/about-us/what-we-do/theregisters/registration-reports (accessed 18 September 2021).
- Council for Regulatory Excellence. Protecting the public from unregistered practitioners. Tackling misuse of protected title. February 2010. Available at: https:// www.professionalstandards.org.uk/docs/ default-source/publications/policy-advice/ tackling-misuse-of-protected-title-2010. pdf?sfvrsn=d8c77f20_10 (accessed 28 February 2021).
- 3. British Association of Dental Nurses. BADN salary survey 2020. March 2021. Available at: https://www.badn.org.uk/common/ Uploaded%20files/2020%20Salary%20 Survey%20-%20FULL%20REPORT.pdf (accessed 31 July 2021).
- 4. UK Government. Holiday entitlement. Available at: https://www.gov.uk/holidayentitlement-rights (accessed 18 September 2021).
- 5. Ross M K, Ibbetson R J. Educational needs and employment status of Scottish dental nurses. *Br Dent J* 2006; **201:** 661–666.

- Sembawa S, Wanyonyi K L, Gallagher J

 Career motivation, expectations and influences of trainee dental nurses. *BDJ Team* 2014; bdjteam.2014.99. Available at: https:// www.nature.com/articles/bdjteam201499 (accessed November 2021).
- UK Government. State Pension age timetables. Available at: https://assets. publishing.service.gov.uk/government/ uploads/system/uploads/attachment_data/ file/310231/spa-timetable.pdf (accessed 19 September 2021).
- Leggat P A, Smith D R. Musculoskeletal disorders self-reported by dentists in Queensland, Australia. *Aust Dent J* 2006; 51: 324–327.
- Alexopoulos E, Stathi I, Charizani F. Prevalence of musculoskeletal disorders in dentists. *BMC Musculoskeletal Disord* 2004; doi: 10.1186/1471-2474-5-16.
- Lalumandier J A, McPhee S D. Prevalence and risk factors of hand problems and carpal tunnel syndrome among dental hygienists. J Dent Hyg 2001; 75: 130-134.
- Gorter R C, Eijkman M A, Hoogstraten J. A career counseling program for dentists: effects on burnout. *Patient Educ Couns* 2001; 43: 23–30.
- 12. Ayatollahi J, Ayatollahi F, Ardekani A M *et al.* Occupational hazards to dental staff. *Dent Res J (Isfahan)* 2012; doi: 10.4103/1735-3327.92919.
- 13. Forbes G, Freeman R, McCombes W, Humphris G. Job leaving intentions and occupation-related beliefs amongst preregistered dental nurses in Scotland: the mediating role of work engagement and personal accomplishment. *Community Dent Oral Epidemiol* 2014; **42**: 11–19.
- 14. Tufte E. The cognitive style of PowerPoint: pitching out corrupts within. 2nd edition. Cheshire, Connecticut: Graphics Press, 2006.
- Singh S. Why correlation does not imply causation? 24 August 2018. Available at: https://towardsdatascience.com/whycorrelation-does-not-imply-causation-5b99790df07e (accessed 19 September 2021).

https://doi.org/10.1038/s41407-021-0765-y

Why didn't you tell me?



