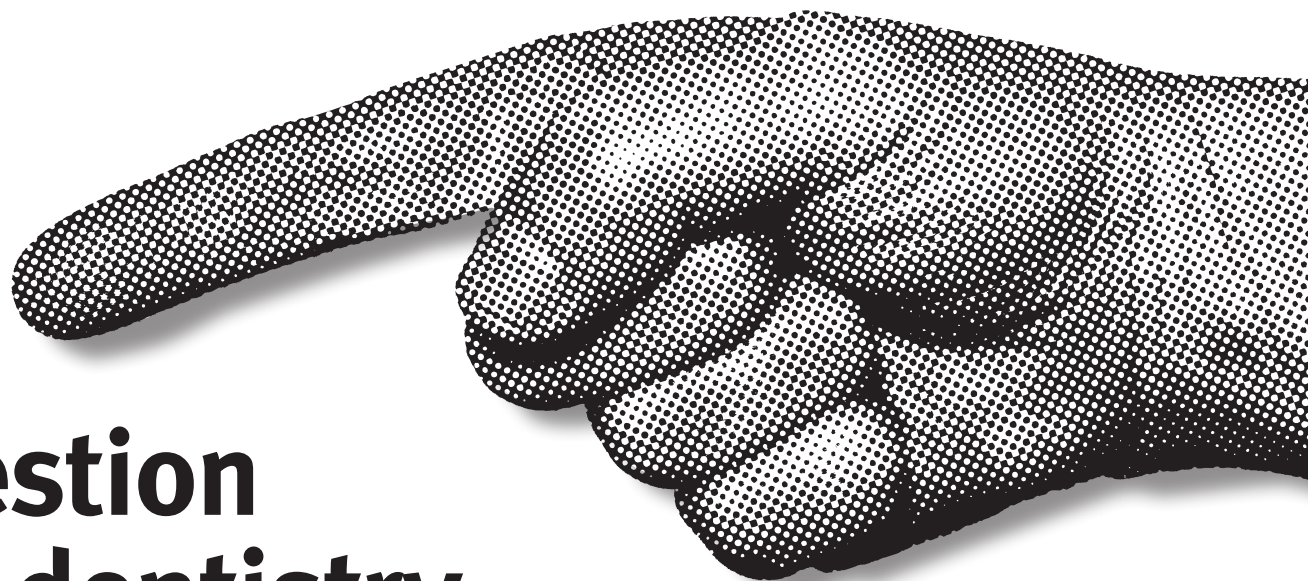


Dentistry Census

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WITH



Leaving no question unanswered in dentistry

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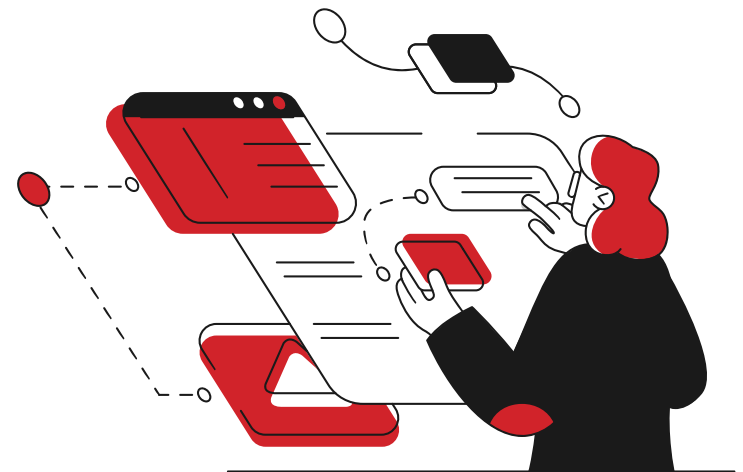
MEDIA PARTNER



Dentistry

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FOREWORD

We have seen change in every corner of society like never before, with the pandemic bringing multiple challenges and threats. One of the key takeaway messages from Covid-19 is that in order to prepare for future shocks – and successfully survive them – we all need to adapt.

The dental environment today is a very different place from what it was in March 2020. Primary dental care teams have faced a seismic shift in how they ‘do’ dentistry, battled through huge waves of challenges and seen the impact of this pandemic first-hand. Understandably, attitudes towards their profession, dentistry’s policymakers, colleagues and patients have been hugely influenced by Covid-19 as well.

So, how have these experiences altered the way dental professionals deliver care? How have patient attitudes changed in light of Covid-19? And what might this all mean for the future of dentistry?

At Dentistry, we pride ourselves on having the finger on the pulse of the profession. Our mission is to inform and share information, current trends and challenges so practitioners and their teams remain equipped with the knowledge necessary to successfully ride new waves to be part of any step change.

From August to September 2021, Dentistry, supported by DD, undertook to explore Covid-19’s impact on the profession and future implications for dentistry.

We surveyed 816 dental professionals from across the four nations.

Divided between 61% women and 38% men across all roles within primary dental care, the responses provide a fascinating perspective on the mood within dentistry and the team’s current experience of it.

We learned how they value their work and their wellbeing, their experience of stress and burnout and how many hours they dedicate to their chosen profession. We also gleaned from their responses how they believe Covid-19 has impacted the way they deliver care, what safety and infection control measures means for this, and of their long-term plans.

We invited their thoughts on the government’s handling of the crisis, on dentistry’s regulators, and asked about the challenges of meeting CPD requirements and of the costs involved with the GDC’s annual retention fee.

From the survey, we elicited information about key areas of clinical interest,

popular treatments offered in practice (and how Covid-19 has affected these) and the tools that make their everyday work life better.

Financial areas came under scrutiny, too. We probed about NHS funding, UDA values, pay structures for associates, the percentage of private versus NHS work that practices offer, their capital investment and average consumables spend.

We also looked at relationships in the workplace with employers, colleagues and patients – as well as at home – how Covid-19 has affected these and, ultimately, how practising dentistry makes them feel.

By listening to feedback from dental professionals, we have created a wealth of unique insights.

Here, we offer a first – a snapshot of UK dentistry in a Covid-19 world. We hope you’ll find some of these observations on the state of the profession helpful to the assimilation of your own experiences as we dig deeper into the results.

– the Dentistry editorial team

Our online survey* was conducted from August to September 2021 using SurveyMonkey to collect the data. Questions were designed to help understand the current climate within dentistry, including how Covid-19 has had an impact on the dental sector. Key areas covered:

- Job satisfaction
- How the delivery of care has altered
- How safe dental teams feel with the new measures and guidelines – in June 2020 and now
- Plans for the future
- Thoughts on the support and leadership of regulators at the time.

ACKNOWLEDGEMENTS

We would like to thank all the dental professionals who took part in this research at such a challenging time. We would also like to thank DD for its support.

*Due to rounding, percentages may not always appear to add up to 100%.

For questions that use checkboxes, the total number of answer choices selected for a question can be greater than the number of respondents that answered the question. This can cause the total response percentages to exceed 100%.

INTRODUCTION: A CHANGING LANDSCAPE

The landscape of dentistry has changed tremendously in the last decade due primarily to the move towards a more digital delivery, with innovation and technology driving this evolution.

Digital technology has numerous applications and its revolution has transformed the profession.

Additionally, what patients are now seeking from primary dental care is being driven by expectations of enhanced aesthetics, heightened by the plethora of smile makeovers they see online and on all social media platforms.

Digital dentistry therefore provides unique opportunities for treatment planning and smile design, speeds up procedure times while reducing the risk of error to ensure more predictable results.

Today's delivery of dental care is as much to do with a minimally invasive approach to enhancing smiles as it is oral health education and disease prevention.

The choice to offer new and exciting dental procedures, of course, can have a huge influence on the bottom line for many high street dental practices and the professional remit of dentists has expanded massively in the last

decade to reflect this demand.

Cosmetic treatments – such as tooth whitening, dental implants, veneers, gum contouring and orthodontics – play a key role in the everyday dentistry offered by general dental practitioner (GDP) practices.

However, at the same time as this digital evolution within dentistry, those teams delivering NHS dental care continue to face challenges.

Access to NHS dentistry has long been highlighted as a major concern, which have been compounded by the pandemic.

With government facing huge criticism from within the profession of an NHS dental contract based on activity (which it is now committed to reform), the enforced hiatus in care brought about by Covid-19 merely exacerbated the problems.

The number of delayed appointments mounted, adding to a backlog for practices offering NHS dentistry as they were tasked with prioritising those patients in pain before booking in regular attendees for check-ups.

‘Delays for appointments for both routine treatment and exams as a result of the pandemic were more common for NHS patients than private patients. The difference in additional waiting times between NHS and private patients for routine exams was particularly clear, with nearly 54% of locations treating private patients saying there was no change in waiting times as a result of the pandemic, while only 45% of locations treating NHS patients said the same’ (Covid-19 Insight 10: Dental access during the pandemic, CQC)

As a result, news stories of ‘DIY dentistry’ became popular in the media once more as access to NHS care in various pockets of the UK became ever more difficult.

Many across the profession have long argued that the NHS contract was not fit for purpose. When NHS England planned to impose steep financial penalties on any practices unable to hit 45% of their pre-pandemic UDA targets in the first quarter of 2021,

What is your primary role in the dental team?

ANSWER CHOICES	RESPONSES	
▼ Dentist	68.60%	533
▼ Nurse	9.40%	73
▼ Hygienist	9.14%	71
▼ Therapist	0.77%	6
▼ Hygienist/therapist (dual qualified)	3.47%	27
▼ Dental technician	1.42%	11
▼ Clinical dental technician	0.26%	2
▼ Orthodontic therapist	0.26%	2
▼ Orthodontic nurse	0.00%	0
▼ Practice manager	5.28%	41
▼ Treatment coordinator	0.51%	4
▼ Marketing manager	0.13%	1
▼ Other admin staff	0.77%	6
Total respondents: 777		

many dentists struggled, with 11% failing to hit their target.

Targets were subsequently increased at different intervals.

‘The ongoing neglect of NHS dentistry will have repercussions for the life-long health of current and future generations, particularly among the most disadvantaged communities’ (Healthwatch England Report, December 2021)

While there remains concern regarding the impact of this delivery of care, key figures within the profession continue to debate whether this is sustainable, as teams struggle to work in extra PPE while practising within the continued constraints created by the pandemic.

'We all know that, with the target-driven UDA system, those are the patients that take the most time and that makes hitting the target incredibly difficult' (Eddie Crouch, August 2021)

A recruitment crisis has also affected dentistry. The global pandemic and Brexit have created a perfect storm for the recruitment of dental professionals. Having previously

relied on dentists from abroad to fill the gap in the shortage of qualified dentists, Covid-19 restrictions on travel and the need to quarantine meant few could journey here and back to complete their registration.

Changes that came with Brexit also stymied freedom of movement. With a profession reliant on dentists from Europe, opting out of the EU meant closing the doors on hundreds of dentists who would have previously enjoyed an opportunity to work in the UK and

support the profession when it was a member state. EU citizens now have to meet the criteria of a points-based immigration system to work here, which means many more hurdles to jump.

Covid-19 inevitably had its impact on the training of dental students throughout 2020 as well, which created a gap in the workforce of newly-qualified dentists.

With face-to-face clinical training made impossible, many universities and dental schools turned to a more digital delivery of lectures, tutorials and assessments until restrictions were lifted.

Once places of learning could reopen, the Dental Schools Council,

the GDC and other key stakeholders worked together to problem-solve and ensure students were able to graduate and complete their programme in 2021.

DCP training programmes also suffered and various stakeholders continue to investigate how best to make up any lost clinical time.

In addition, there has been a shift in attitudes with regards work amid the pandemic, with many reassessing their own work-life balance, and a growing number of millennials entering the profession who simply view their careers differently.

Much of the new generation of dentists have different priorities

to their predecessors, with some newly-qualified practitioners turning to what's known as 'portfolio careers' – combining clinical work as a GDP with specialised care, teaching or further training.

The pandemic has accelerated a huge raft of changes within the profession with dentists facing challenges like never before.

An increasing number of dentists have had to adapt to – and invest in – a digitalised dental environment faster than perhaps anticipated, particularly with regards to communications.

As a result of high demands about what is required of dental professionals in order that they

Interesting facts include:

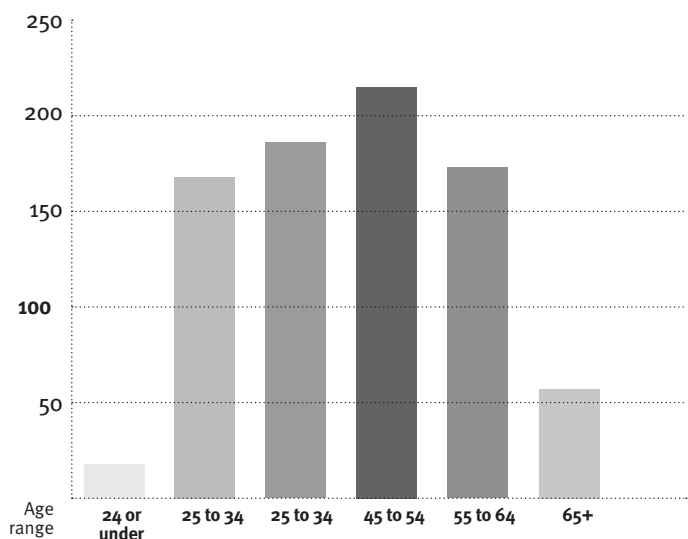
- 73% of dentists anticipate doing less NHS dentistry in the coming two years, while 84% anticipate undertaking more private dentistry work in the next 12 months
- 61% of all respondents feel their relationships (inside and outside work) have suffered as a result of work-related stress
- Restorative dentistry, minimally invasive dentistry and tooth whitening are the

- key areas of clinical interest for dentists
- For 56% of our respondents, time is the biggest hurdle to completing CPD
- Dentists reported that treatment uptake of orthodontics (aesthetic) went up by 55% due to Covid-19
- 76% of all respondents feel the GDC annual retention fee is too high
- 82% of respondents reported not having contracted Covid-19 (to their knowledge)
- 93% of all respondents offer tooth whitening in-house

- Intraoral scanners are a popular investment within the profession with 67% of respondents working in a practice that owns one
- 68% of all respondents anticipate keeping increased PPE once Covid-19 restrictions have ended
- The average profit margin for a dental practice is 25%
- 77% of dentists feel they are practising defensive dentistry.



The respondents (aged 24 or under to 65-plus)



practise dentistry safely, some plan to leave the profession altogether as regulations shift and infection control measures change to limit transmission risks of new variants.

With lifestyles disrupted, a heightened awareness of the physical and mental toll on patients and staff alike developed.

In some practices, the role of the dental team expanded

to embrace a far more holistic approach to the people they treated and to their own wellbeing. Staff now want a workplace where they feel good and have their work recognised and rewarded.

NHS dentistry is at a crossroads once again and we have yet to see the true effects on how its future might play out in view of people's responses to the past two years.

Within private practices, proactive and early investment

in new technologies and methodologies to meet the regulatory expectations in a Covid-19 world has set apart successful practices that reaped the benefits.

Ultimately, it is the well-informed dental professionals who collaboratively work together and rise to the challenges of delivering safe and effective dental care to patients who will ride this period of disruption to reap the benefits.

WHAT IS IN THIS PAPER?

In this Dentistry Census white paper, we look at:

- The profile of the dental team
- Treatment popularity and clinical interests
- The mood of the dental team
- How Covid-19 has influenced dentistry
- NHS dentistry
- Thought on leadership and support of regulators
- The effects of Covid-19 on mental health
- Future plans

WHO ARE WE HEARING FROM?

The following information provides a snapshot of the people who completed our census about their experiences of working within dentistry from July to September 2021.

The respondents (aged 24 or under to 65-plus) were drawn from across the dental team across all four nations – with 85% working in England. Within this group, they were evenly spread but mostly focused in the south east – working in Greater London (10%), City of London (7%), Essex (6%), Surrey (5%), Kent (4%).

- 61% were women and 38% men
- 52% told us they were white British
- 15% were Asian or British Asian (Indian)
- 13% were white (other)
- 69% of our respondents were dentists.

**We recognise the data may not be representative of the whole dental team across all four nations. We are committed to hearing from all dental professionals, so views and needs are better represented.*



PRACTICE FINDINGS

Primary dental care is a diverse entity that is best delivered by each member of a team working within their scope of practice in order to meet the needs of its patient base and ensure business profitability.

From our survey, we discovered that the average UK practice is a single business and consists of:

- Four dentists
- Five dental nurses
- One hygienist
- One therapist
- Three admin staff.

The majority (95%) of practices across the UK employ a practice manager and, while only 25% employ a treatment coordinator, 27% of our respondents say they are either 'very important' or 'essential' to the success of a practice.

Front of house (74%) and dental nurses (84%) were rated higher than any other roles as 'essential' to the success of a practice.

TREATMENTS

When it came to the clinical interests of responding dentists, dental hygienists, dental therapists, dually qualified dental hygienists and therapists and orthodontic therapists, restorative dentistry was by far the most popular at 64%, with

minimally invasive dentistry and tooth whitening both at 38%.

This fits with responses from our survey to the question about the most popular treatments offered in practice:

- Tooth whitening – 93%
- Orthodontics (aesthetic) – 69%
- Dental implants – 55%.

All three procedures are now widely considered key components of any smile makeover journey and widely sought by patients – thereby creating perfect profit-building opportunities for practices.

'One in five (20%) Brits have voiced their interest in undergoing teeth whitening by a dental professional' (Mintel, September 2021)

Capitalising on the popularity of cosmetic dentistry – and a public more accepting of undergoing anti-ageing treatments in general – many dental practices are now looking to widen their scope by adding facial aesthetics treatments to complement their dentistry. Arguably well placed to inject in the facial zone, an increasing number of dentists are undergoing training

so they are confident in offering Botox and dermal fillers – a trend reflected in our survey where 41% of our respondents said they work at practices now offering facial aesthetics.

Some practices are extending this reach, with 8% now offering skin treatments alongside their dentistry.

Despite recent new NICE guidelines that suggest dentists have a key role to play in the assessment and treatment of patients with obstructive sleep apnoea (OSA), only 11% of practices offer some form of sleep medicine.

'As primary care practitioners who see patients' upper airways every day, dentists are perfectly placed to screen people from their own patient base. It can start with a simple question like: do you snore or how well do you sleep?' (Aditi Desai, British Academy of Dental Sleep Medicine)

Treatments in-house

ANSWER CHOICES	RESPONSES	
▼ None of the above	2.03%	3
▼ Dental implants	54.73%	81
▼ Orthodontics (traditional)	28.38%	42
▼ Orthodontics (aesthetic)	68.92%	102
▼ Tooth whitening	93.24%	138
▼ Endodontics (specialist/referral level)	25.68%	38
▼ Periodontal therapy (specialist/referral level)	23.65%	35
▼ Sedation	18.62%	28
▼ CBCT	17.57%	26
▼ Facial aesthetic (toxins, fillers etc)	40.54%	60
▼ Other skin treatments (laser treatment, cryolipolysis, RF therapy etc)	8.11%	12
▼ Sleep medicine	11.49%	17
▼ Other (please specify)	6.08%	9
Total respondents: 148		

More surprisingly perhaps is the low number of practices offering sedation (19%) despite dental fear being commonplace; around 48% of adults are dentally anxious, according to the 2009 UK Adult Dental Health Survey.

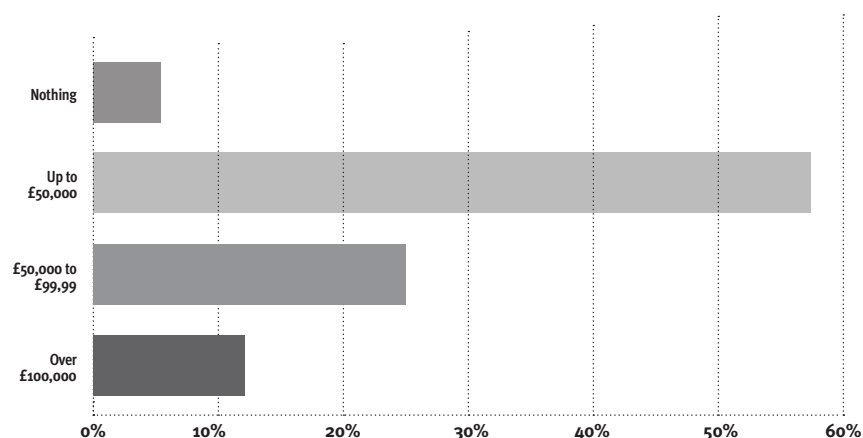
The role of a marketing manager is still at an embryonic stage. However, with social media emerging as a huge influence on the patient decision-making process, 11% of practices in our survey already have a marketing manager on their staff books.

TURNOVER

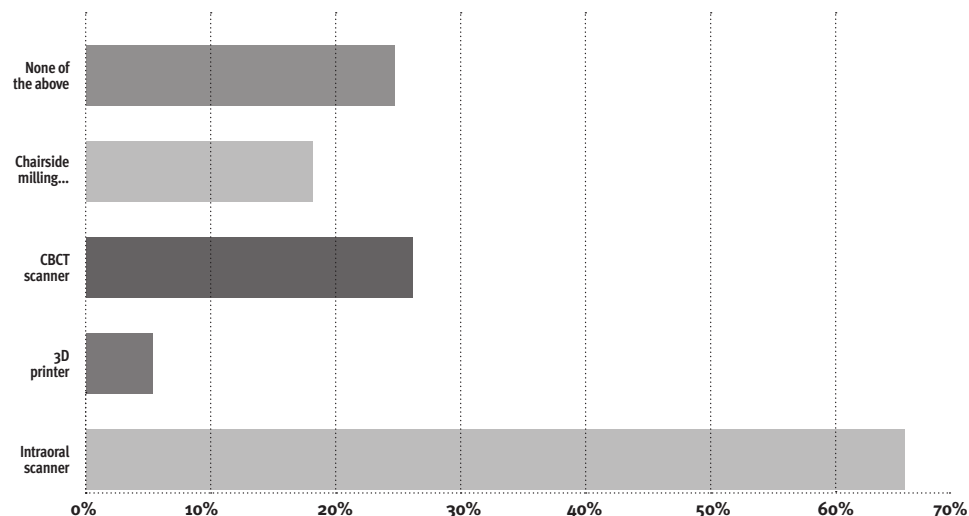
Under £250k	14%
£250k-£499k	23%
£500k-£749k	24%
£750k-£999k	19%
£1m to £2m	14%
Over £2m	6%



How much has your practice spent on capital equipment in the last three years?



Which of the following does your practice own?



PROFIT

Under £100k	31%
£100k-£199k	25%
£200k-£299k	22%
£300-£399k	12%
£400k-£499k	3%
Over £500k	7%

The average profit margin for a dental practice is 25%.

Just 9% of practices are part of a purchasing group.

INVESTMENTS

57% of practices have spent up to £50,000 on capital equipment in the last three years, with 25% from £50,000 to £99,999.

Despite the great strides made over the last decade towards a complete digital delivery of dentistry, 23% of practices are yet to invest in an intraoral scanner.

'Intraoral scanners seem to be "a promising new asset in the orthodontic office from the perspective of individuals' experiences and preferences"' (European Journal of Orthodontics, June 2021)

Almost one in 10 have a lab on site (9%) with the obvious benefits of speed of delivery and clarity in communication to create bespoke and optimum dental solutions.

When it came to patients, 69% were reported to be private, with 23% on payment plans



PEOPLE IN DENTISTRY

The majority of our respondents practised in England, with most working in Greater London, or the City of London.

Only the role of the dentist was evenly divided between genders, with the rest of the team far more populated by women.

PAY SCALES

Average pay for all our respondents came under the £25,000-£49,999 category, with almost three quarters

working within one practice four or five times a week.

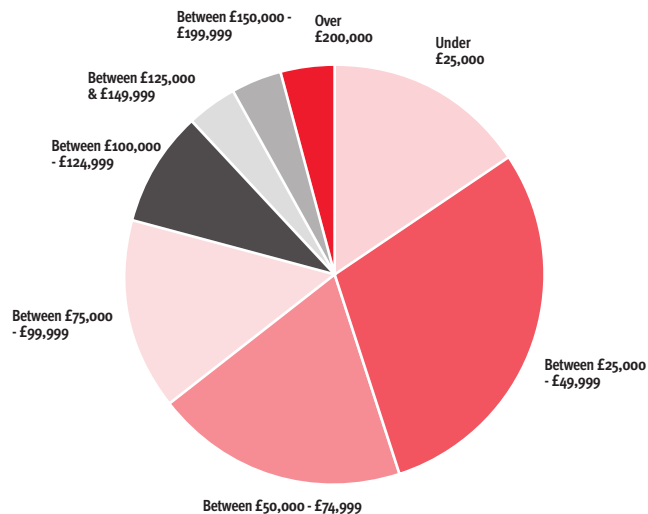
4% of respondents earn £200k+ per year while 30% of associates get paid £11 – £11.99 per UDA.

Associates are typically paid 50% of private treatment fees – just 4% of associates are paid more than this.

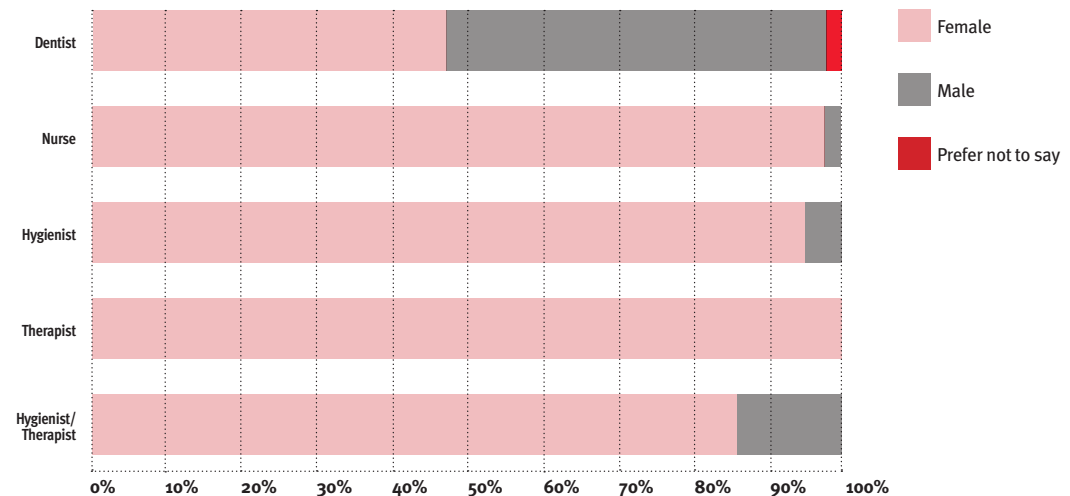
FOCUS ON: THE DENTIST

Of the respondents, 51% were male and 48% female. 44% of our

How much do you earn per year? (all roles)



What gender do you identify as?



dentist respondents were white (English, Welsh, Scottish, Northern Irish or British) and 21% were Asian or British Asian (Indian) with 85% working in England.

Average annual earnings for our dentist respondents were typically between £50,000 and £74,999

When comparing genders:

- Twice as many male dentists earn £100,000 to £124,999 compared to women (17% and 8%, respectively).
- Whereas 29% of female dentists earn between £25,000 and £49,999 compared to 10% of male dentists.

While 15% of dentists in the south earned £150,000 and over, only 9% of dentists in the north reached the same pay bracket.

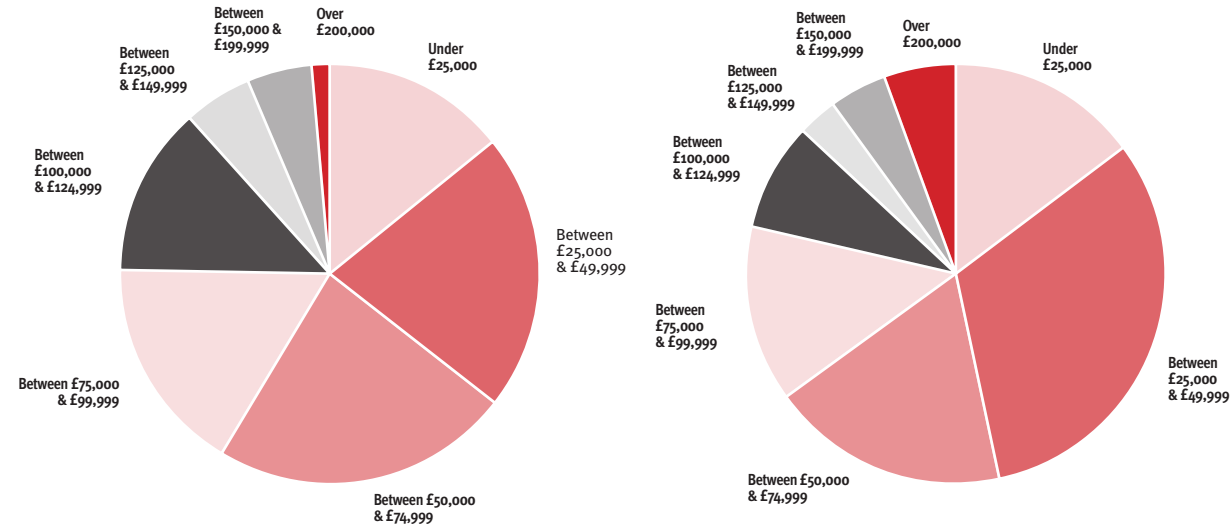
76% work in a single practice and 61% hold an NHS contract. For those dentists holding an NHS contract,

11% were among the top earners, bringing in more than £200,000 a year. This was 18% for those dentists without an NHS contract.

31% worked four days a week at their main practice.

Findings showed 42% belonged to the BDA although 39% of our dentist respondents were not members of any dental association. 72% included restorative dentistry as their key area of clinical interest, 41% minimally invasive dentistry and 40% tooth whitening.

Earnings in the north of England for the whole team



Earnings in the south of England for the whole team

As the ageing population is keeping teeth for longer, restorations become a significant part of everyday dentistry.

Preserving the natural teeth of patients, without the need for invasive or destructive procedures, is now the gold standard for the profession. It is therefore no surprise that restorative dentistry is the top clinical interest among our dentist respondents, followed by minimally invasive dentistry.

Tooth whitening also has huge appeal amongst patients and interest within the profession to deliver treatment to their patients is driven by public demand for the opportunity to refresh their smiles with minimal intervention.

Interestingly, facial aesthetics figured in the top 12, suggesting that dentists are growing more comfortable about offering complementary procedures alongside their dentistry.

DENTISTS' TOP CLINICAL INTERESTS

Restorative dentistry	72%
Minimally invasive dentistry	41%
Tooth whitening	39%
Endodontics	28%
Orthodontics	27%
Veneers	23%
Implant dentistry	22%
Dentures	22%
Treatment of nervous patients	19%
Full mouth rehabilitation	16%
Facial aesthetics	15%

How would you describe your ethnicity?

ANSWER CHOICES	RESPONSES	
▼ Arab	1.23%	10
▼ Asian or British Asian - Indian	15.20%	124
▼ Asian or British Asian - Pakistani	4.04%	33
▼ Asian or British Asian - Bangladeshi	0.98%	8
▼ Asian or British Asian - Chinese	0.86%	7
▼ Asian or British Asian - Other	2.70%	22
▼ Black or Black British - African	2.08%	17
▼ Black or Black British - Caribbean	0.37%	3
▼ Black or Black British - Other	0.49%	4
▼ White - English, Welsh, Scottish, Northern Irish or British	52.33%	427
▼ White - Irish	2.57%	21
▼ White - Other	12.62%	103
▼ White and Black Caribbean	0.12%	1
▼ White and Black African	0.37%	3
▼ White and Asian	0.86%	7
▼ Any Other Ethnic Group	3.19%	26
Total respondents: 816		

Even though 62% of dentists felt valued by their patients, more than a quarter of dentists felt 'passably' supported by their employer/principal/primary contractor throughout the pandemic and 32% felt they were supported 'extremely poorly' by the government.

Additionally, 53% of dentists felt they did not have a good work-life balance with 41% reported their mental health having worsened slightly during the pandemic.

When practices reopened in June after the first lockdown, 41% felt 'somewhat unsafe' as they returned to work.

FOCUS ON: THE DENTAL NURSE
In our survey, 99% of dental nurses are female and most fall into the lowest earning bracket – with 88% of our dental nurse respondents earning less than £25,000.

However, they are considered to be 'essential' to the success of a

What are your areas of clinical interest?

ANSWER CHOICES	RESPONSES	
▼ None of the above	9.52%	66
▼ Restorative dentistry	61.18%	424
▼ Endodontics	22.08%	153
▼ Orthodontics	22.66%	157
▼ Facial aesthetics	14.29%	99
▼ Implant dentistry	20.20%	140
▼ Dentures	17.32%	120
▼ Veneers	18.76%	130
▼ Minimally invasive dentistry	35.21%	244
▼ Tooth whitening	35.93%	249
▼ Full mouth rehabilitation	14.00%	97
▼ Digital dental workflows	12.12%	84
▼ Treatment of nervous patients	21.65%	150
▼ Paediatrics	11.69%	81
▼ Treatment of vulnerable patients	9.09%	63
▼ Other (please specify)	14.00%	97
Total respondents: 693		

practice by 84% of our respondents, which may be welcome news to this cohort of dental professionals who very often feel they are the forgotten frontline health workers.

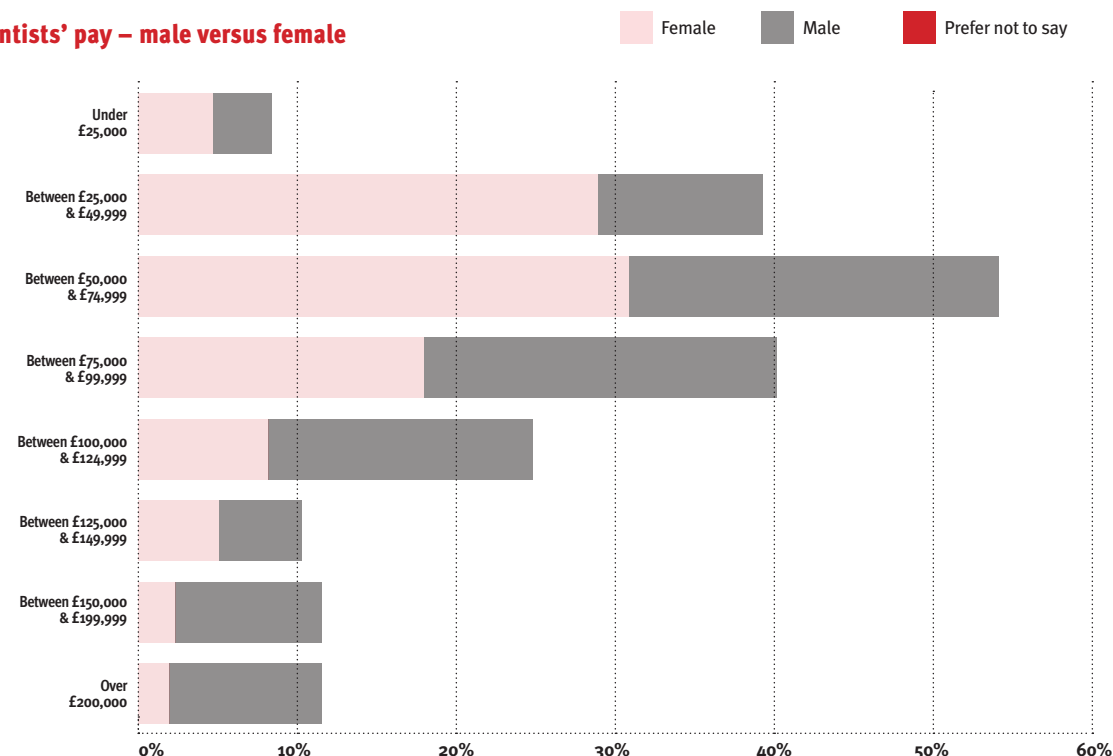
Just over half (52%) of dental nurses said Covid-19 had no impact on their relationship with their employer, with 63% saying their mental health worsened slightly during the pandemic.

Additionally, 44% felt 'somewhat unsafe' when practice doors

reopened after the initial lockdown in June 2020. Now, however, almost the same number of dental nurses (43%) feel as safe as they did before Covid-19.

When it came to support from their employer/principal/primary contractor during the pandemic, 29% felt they were supported 'passably', 25% 'extremely well' and 24% 'quite well'.

Dentists' pay – male versus female



63% of dental nurses felt they had a good work-life balance with 60% saying they had access to mental health support should they need it

FOCUS ON: THE DENTAL HYGIENIST, DENTAL THERAPIST AND DUALY QUALIFIED

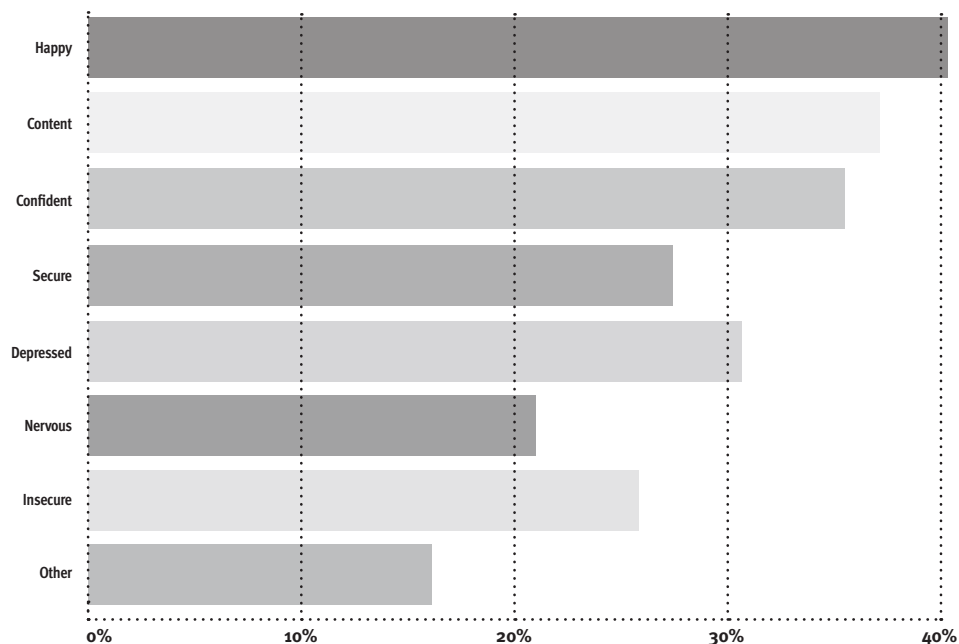
The Dentistry Census white paper found:

- 94% of this cohort of dental professionals were female
- 74% earn between £25,000 and £49,999, mostly working at one or two

practices (38% and 35%, respectively)

- 62% belong to the British Society of Dental Hygiene & Therapy (BSDHT) and 13% to the British Association of Dental Therapists (BADT)
- 48% said their mental health worsened slightly due to Covid-19 and 79% believe patients value what they do.

Do you (dental nurses) routinely feel any of the following as a result of your work? (tick all that apply)



While 63% reported achieving a good work-life balance, 52% felt they are now practising defensive dentistry.

Dental hygiene appointments were seriously impacted by Covid-19, as they were forced to abandon AGPs and had to adopt manual hand scaling to reduce the risk of transmission.

According to the GDC: 'Access to

dental services has been severely impacted by Covid-19 and the first national lockdown in the UK.

It is likely to take some time to deal with the backlog of patients in need of oral treatment and care due to reduced capacity in the system.'

FOCUS ON: THE PRACTICE MANAGER

From our results, 83% of practice managers were women, with 80% white – English, Welsh, Scottish, Northern Irish or British.

Around 66% earn between £25,000 and £49,999, 24% under £25,000 and 7% of our respondents earn between £75,000 and £99,999.

82% of practice managers felt

How much do dental hygienists, dental therapists and those dually qualified earn per year?

ANSWER CHOICES	RESPONSES	
▼ Under £25,000	16.35%	17
▼ Between £25,000 and £49,999	74.04%	77
▼ Between £50,000 and £74,999	5.77%	6
▼ Between £75,000 and £99,999	1.92%	2
▼ Between £100,000 and £124,999	0.96%	1
▼ Between £125,000 and £149,999	0.96%	1
▼ Between £150,000 and £199,999	0.00%	0
▼ Over £200,000	0.00%	0

their mental health had worsened slightly because of COVID-19.

64% felt as safe as they did before Covid-19 when they reopened in June 2020 and 55% now feel as safe as they did before the pandemic.

'Research around the use of dental therapists in dentistry shows that we have the skills to both diagnose common conditions and provide treatment or refer on to a dentist when more complex treatment might be required. We could also be providing prevention and oral hygiene advice to patients and take on a training role for both' (BADT)

FOCUS ON: THE DENTAL TECHNICIAN AND CLINICAL DENTAL TECHNICIAN

From our survey, this is a male-dominated role (69%), with 85% white – English, Welsh, Scottish, Northern Irish or British. All of our dental technicians worked in England with 31% earning between £25,000 and £49,999 and 31% earning between £75,000 and £99,999.

15% earned under £25,000 and 8% earned between £100,000 and £124,999.

These are committed members of their representative bodies – with 50% belonging to the Dental Technologists Association and 33% to the Dental Laboratories Association.

Unsurprisingly, their three main areas of clinical interest lie in orthodontics, implant dentistry and dentures.

THE EFFECTS OF COVID-19

In March 2020, dentistry – like many industries – was severely disrupted by the arrival of Covid-19 to the UK.

During the most restrictive period of that initial lockdown, dental practices were forced to close their doors from 23 March 2020, with only urgent and emergency care available. They reopened on 8 June 2020 in England and Northern Ireland and 22 June in Scotland.

Meanwhile, although practices in Wales did not close at any stage during the pandemic, they entered a Red Dental Alert Level from 23 March 2020 and were limited in the types of treatments they could carry out during the period from April 2020 to the end of June 2020.

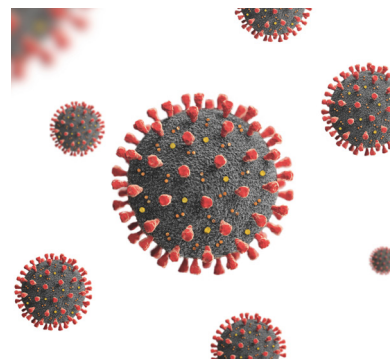
As teams steadily restored services and face-to-face dental care resumed, new regulations and measures were implemented and the pandemic saw many practice owners forced to reassess how they delivered dentistry.

Socially-distanced triaging and digital communications, enhanced PPE, improved hand hygiene and mask wearing, fallow time, runner nurses and respirators, improved ventilation measures and AGP-

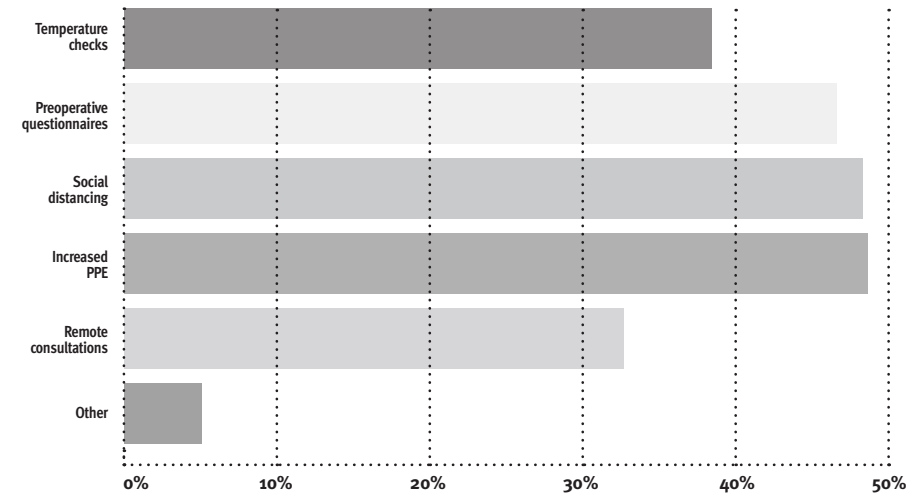
mitigating practices were driving dentistry into new territory, with constantly changing Standard Operating Procedures and policies, creating chaos and uncertainty.

Such changes, designed to mitigate the risk of transmission, inevitably impacted on appointment times, limiting numbers of patients that dentists and their teams were able to see as well as the way in which they could treat them.

The unfamiliar behaviours and procedures meant that, at times, dental appointments were stressful times for everyone involved and not just patients.



Other measures included the installation of air filtration systems, telephone pre-appointment checks, online medical history form completion and a system that required payment in advance. In one practice, extra staff were appointed to ensure social distancing and AGP protocols.



From the outset, there was a global shortage of PPE, which impacted heavily on supplies to the dental market. The slow roll-out of fit testing of FFP3 masks also affected the profession, with the mental and physical health of those who were required to wear – FFP3/stealth masks, gloves, aprons, visors, surgical masks and AGP-specific gowns and the like – often compromised

Patient appointments, too, were disrupted – of particular concern were complex courses of treatment, as dentists and their teams did their best to stay in communication with patients turning to virtual consultations for emergency triage and advice.

As the pandemic progressed, Standard Operating Procedures continued to be adapted in response to any new variants, with dental regulators and governing bodies cascading information to various associations and stakeholders

and they in turn to those at the dental coalface.

Meanwhile, while fallow time has been shortened since it was first implemented, PPE looks set to stay.

So, how has Covid-19 affected our respondents, the way they practise, the treatments they offer and their practices' bottom lines?

81% of respondents reported not having contracted Covid-19 (to their knowledge)

COVID-19 MEASURES

The patient journey now looks very different from how it did pre-March 2020. The plethora of AGP-mitigating measures, extra heavy-duty PPE, fallow time and high intensity infection control, forever changed the way dentistry is delivered.

When it came to which of the following respondents anticipated keeping once Covid-19 restrictions have ended:

- 66% of practices see increased PPE being a staple even after the Covid-19 crisis has passed
- 55% will keep preop questionnaires
- 40% felt social distancing will continue as the new norm.

'The financial impact on dental practices and professionals has been severe. The continuing need for infection control measures will continue to constrain capacity and limit the pace of recovery' (GDC, 17 December 2020)

Practice turnover compared to before Covid-19

- 5% at less than 50% turnover
- 11% back to pre-Covid-19 turnover
- 30% are at over 100%.

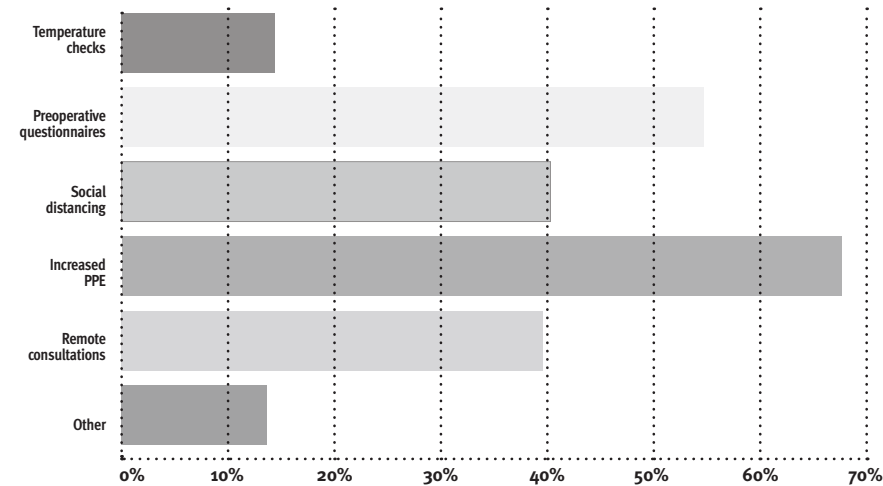
TREATMENT TAKE-UP

There has been an upside to the pandemic where practices are reporting increased treatment acceptance since the start of Covid-19, with a noticeable uptake in the number of queries concerning aesthetic dental treatments. One study predicts the global market for aesthetic dentistry to grow at a rate of 5% per year – hitting £21 billion by 2026.

Orthodontics (aesthetics) – 56%.

More than half of respondents reported an increase in adult patients seeking cosmetic teeth

Which of the following do you anticipate keeping once Covid-19 restrictions have ended?



straightening. This is perhaps due to heightened awareness among people of their smiles thanks to the 'Zoom boom' phenomenon with close-up video conferencing, creating opportunities to scrutinise their own smiles.

Tooth whitening – 42%. This is the most requested procedure in dentistry and popularity continues to grow. Again, video conferencing may have sparked interest. Alternatively,

people have simply delayed undergoing whitening treatment during the restrictions and are now open to investing money saved.

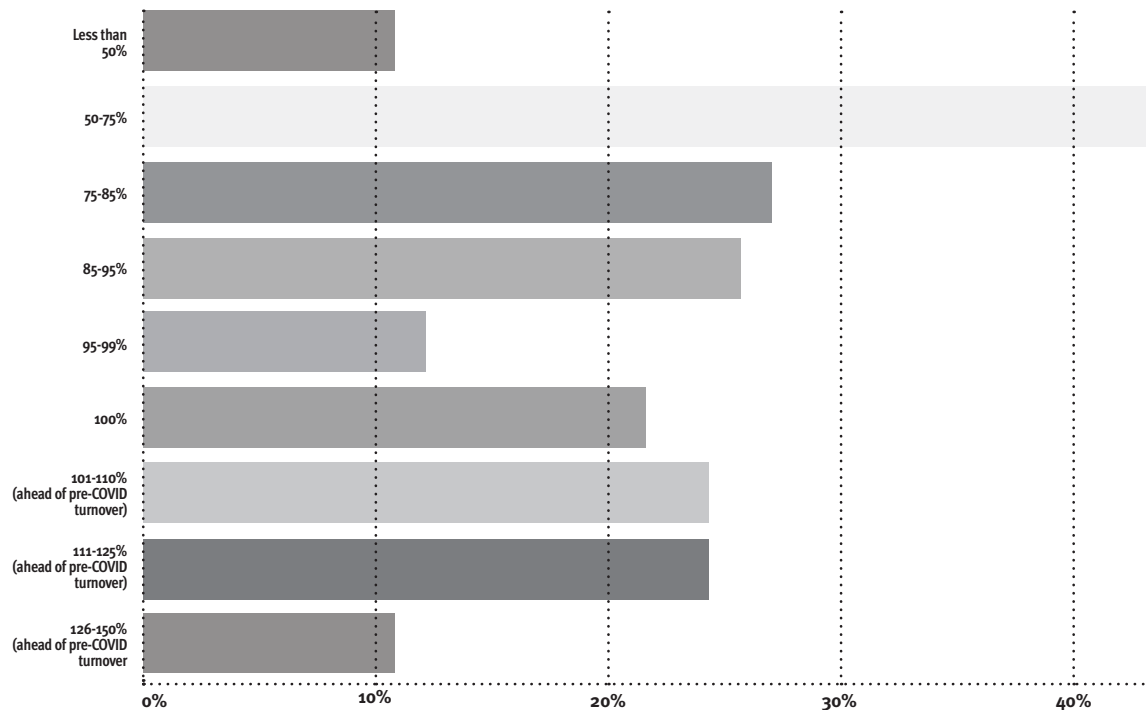
Dental implants – 28%. Europe's dental implant market size is expected to reach €1.4 billion by 2027. Respondents have seen a rise in popularity in their practices, which could also be attributed to increasing awareness of facial aesthetics and supporting dental procedures.

Orthodontics (traditional) – 25%.

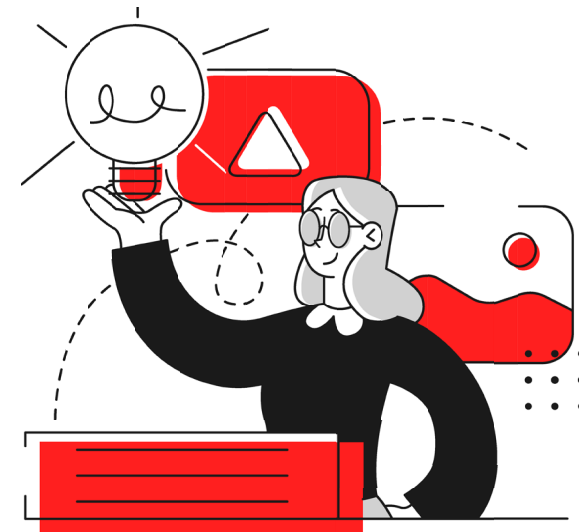
Reports suggest that the UK orthodontics market as a whole is projected to grow from \$113.5 million in 2020 to \$370.3 million by 2027.

Veneers – 23%. Much like other aesthetic dental treatments, veneers proved to grow in popularity among the UK public over the course of the last two years.

What percentage of pre-Covid turnover would you estimate your practice is currently at?



'It is interesting to see the rise in demand for orthodontic treatment over the last 12 months. I know from patients I see at my practice that many have become increasingly more aware of their teeth through the 'Zoom effect'... Tooth straightening can give people the confident smile they've always dreamed about'
(Anjali Patel, British Orthodontic Society, May 2021)



THOUGHTS ON...

CONTINUING PROFESSIONAL DEVELOPMENT

When the government introduced stay-at-home measures in a bid to curb the spread of coronavirus back in March 2020, the GDC made a promise to be sympathetic to any dental professional who was to finish the year with a shortfall in CPD hours.

As the chaos amidst the pandemic continued, the GDC encouraged registrants to undertake remote CPD.

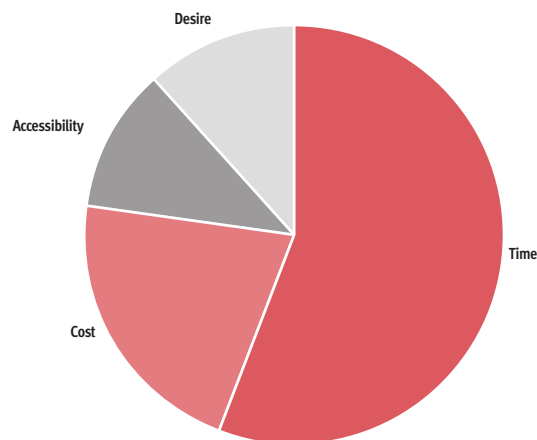
According to the Dentistry Census white paper, the top three ways of undertaking CPD were:

1. Online articles (82%)
2. Webinars (79%)
3. Face-to-face practical courses (74%).

When it came to the challenges involved with meeting CPD requirements, time was the biggest hurdle in completing CPD for 56% of respondents, with cost posing a key consideration for 21%.

91% of clinicians completed more than the GDC annual requirement. Of this, 40% complete 'a little more', while 51% complete 'significantly more'.

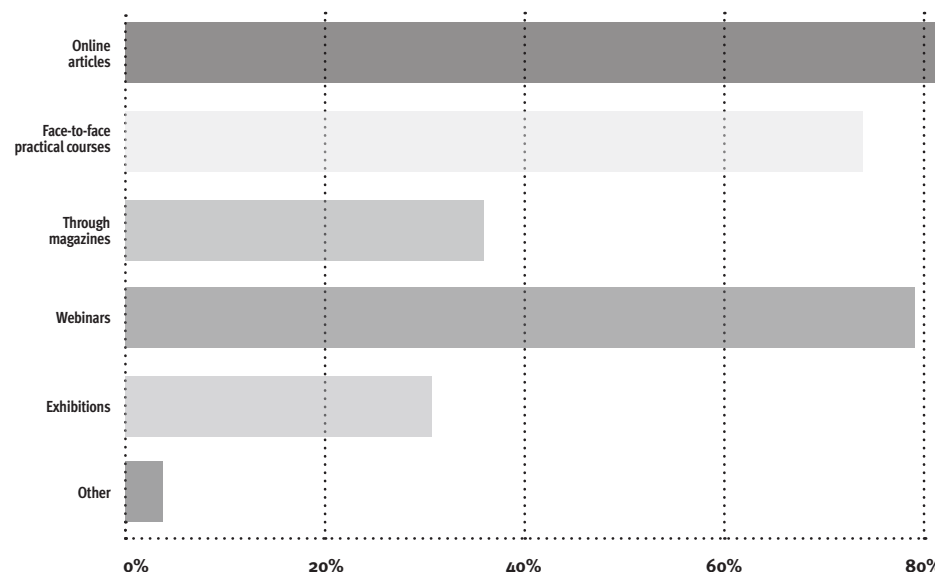
86% of clinicians cite the interest level of a subject as a key reason to



What's the biggest hurdle to completing CPD?

choose CPD, with 62% saying cost is the biggest turn-off when choosing CPD.

How do you undertake CPD? (tick all that apply)



REGISTRATION AND REGULATION

GENERAL DENTAL COUNCIL (GDC)

Much to chagrin of the profession, the annual retention fee (ARF) was neither delayed nor reduced for dentists or dental care professionals due to the pandemic, with the GDC coming under heavy criticism for its decision.

Only a year later did they introduce the option to pay by instalments for DCPs (March 2021) and for dentists

(September 2021), spreading the burden over time.

In our survey, 76% said the GDC retention fee was too high with nobody believing it to be too low.

Almost one in 10 of our respondents reported having been subject to a Fitness to Practise investigation.

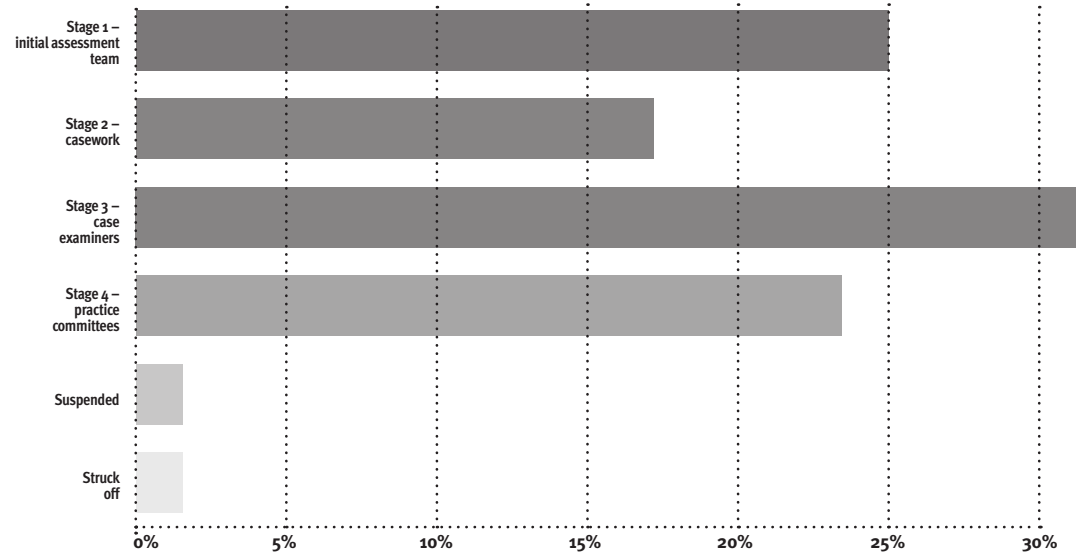
CARE QUALITY COMMISSION (CQC)

62% of our respondents feel the CQC registration fee is too high, with 78% of respondents believing the CQC is doing a passable job (or better) of ensuring dental practices meet the fundamental standards of quality and safety.

NHS DENTISTRY

According to figures from the BDA, nearly half (47%) of dentists

What stage did the GDC investigation get to?



indicated they are likely to change career or seek early retirement in the next 12 months should current Covid-19 restrictions remain in place. The same proportion state they are likely to reduce their NHS commitment.

Our feedback indicates a move towards more privatisation – with 72% anticipating they would be doing less NHS dentistry in the next two years.

This is despite the fact that 53% felt the NHS provides a valuable service to patients and 95% disagreed with.

'I enjoy working in the NHS'
87% disagree



If you're in England, Wales or NI, what do you pay your associates per UDA*?

ANSWER CHOICES	RESPONSES	
▼ Less than £9	12.64%	11
▼ £9-£9.99	4.60%	4
▼ £10-£10.99	16.09%	14
▼ £11-£11.99	29.89%	26
▼ £12-£12.99	10.34%	9
▼ £13-£13.99	9.20%	8
▼ £14-£14.99	6.90%	6
▼ £15-£15.99	4.60%	4
▼ £16-£16.99	2.30%	2
▼ £17-£17.99	1.15%	1
▼ £18-£18.99	0.00%	0
▼ £19-£19.99	0.00%	0
▼ £20 or more	2.30%	2

Total respondents: 87

*only answered by practice principals

'I feel the NHS provides a valuable service to patients'
52% agree



'I believe the NHS is adequately funded'
95% disagree

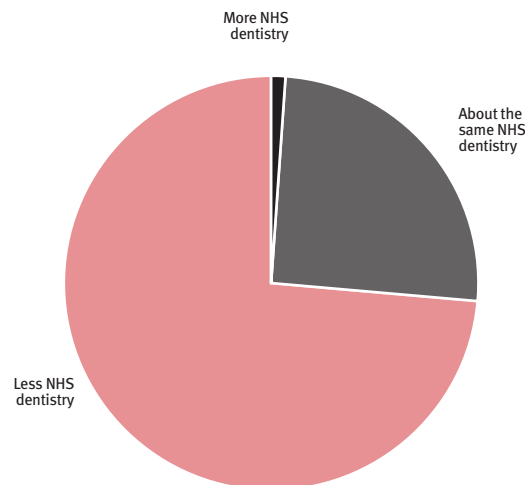


'System of remuneration to dentists needs to change. The 2006 contract gave patients who require slightly above average treatment very poor access to good quality dental/preventative care. The 2006 contract has however, in my opinion, due to the way we are remunerated, been better for providing good preventative care for children (under 19-year-olds). I have been able to continue to carry out a high standard of prevention on the children attending my practice'
(Survey respondent)

'Needs to be means tested so kept for those who find access to private care unaffordable'
(Survey respondent)

'It should become a basic service that properly remunerates dentists for quality care'
(Survey respondent)

'Fixing NHS dentistry will be impossible if dentists are left unwilling to work in it. We need a clear road map that lifts restrictions, provides needed support to all practices and makes a decisive break with a broken contract' (Shawn Charlwood, chair of the BDA's General Dental Practice Committee)



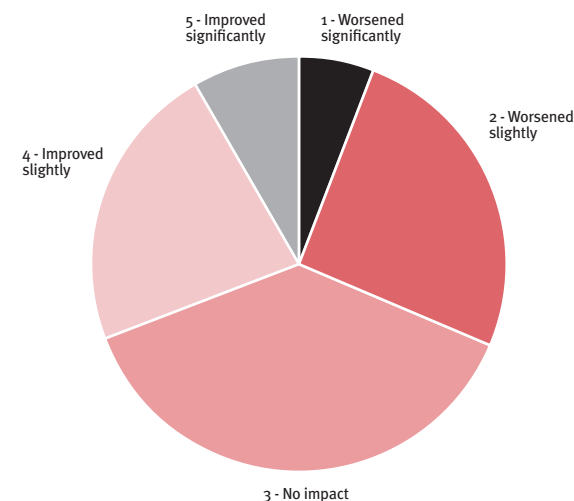
In the next two years, you anticipate doing...

MENTAL HEALTH

The profession has seen something of a culture change in these unsettling times and, perhaps due to the drastic changes in delivery, the profession has grown more aware of – and more resistant to – the effects of working in a highly stressful clinical environment or running a demanding dental business.

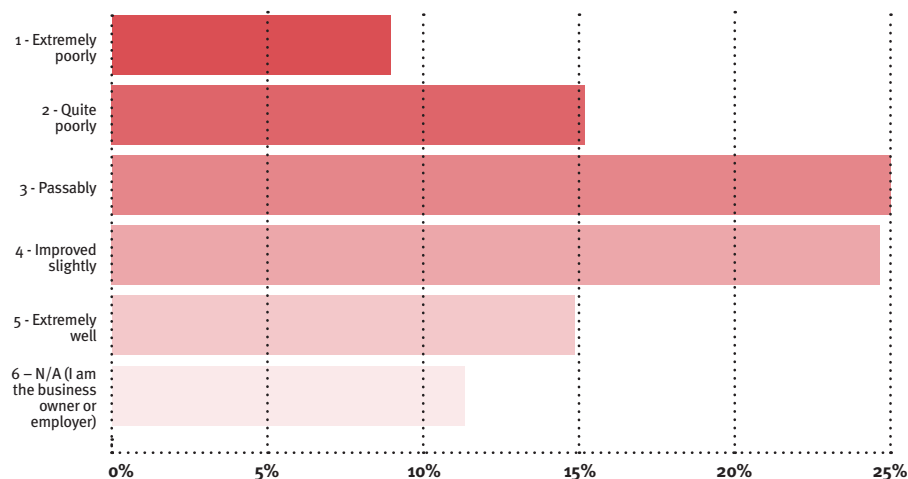
Statistics on NHS delivery across the four nations

- England: BDA analysis of Freedom of Information data indicates that nearly 70% of appointments – or 28 million courses of treatment – that would have been delivered in NHS services in England in the year from March 2020 were missed
- Scotland: Public Health Scotland said Covid-19 pandemic restrictions led to a drop of about 3.5 million dental treatments (76.4%)
- Wales: Data suggests that nearly two million treatments were lost in Wales during the Covid-19 period stretching across 2020-21
- Northern Ireland: Figures suggest 194,000 examinations were performed on adults, a drop of 78% on 2019/20.



How would you describe your relationship with the majority of your patients following Covid-19?

How well do you feel you were supported by your employer/principal/primary contractor through the pandemic?



In our survey, we asked whether dental professionals felt their patients value what they do and the responses were balanced with 53% saying yes and 47% saying no.

- 66% of clinical staff feel they are practising 'defensive dentistry'
- 58% find it hard to unwind after work
- 61% say their relationships have suffered as a result of work-related stress.

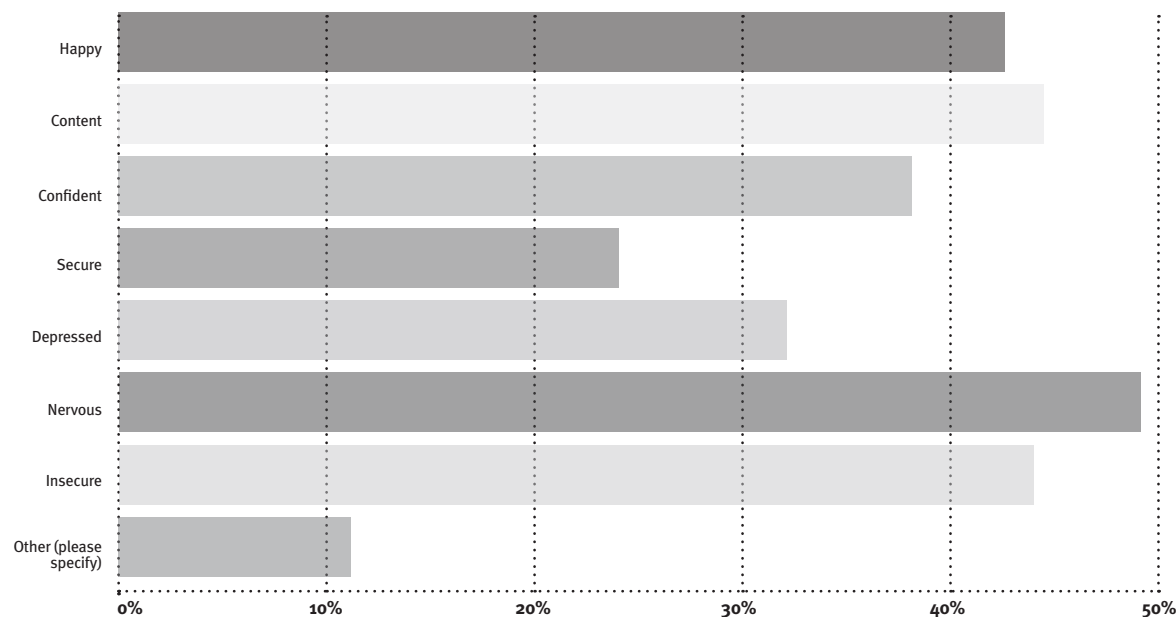
Covid-19 negatively impacted the mental health of 67% of people within dentistry.

46% of our respondents felt unsafe initially returning to practice following the first lockdown – a number that has now dropped to 26%.

52% of respondents felt the government did a poor job of supporting them through Covid-19, either quite poorly (24%) or extremely poorly (28%).

Reassuringly, just 26% of staff felt the same about their employer's support during Covid-19.

50% of dental professionals felt they had access to support for their mental health should they need it



Do you routinely feel any of the following as a result of your work (tick all that apply)

