#### Mental Resilience Within Dentistry



#### OFFICE OF CHIEF DENTAL OFFICER ENGLAND

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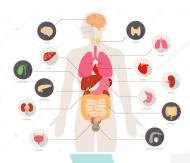


Addressing oral health inequalities

#### HELP BUILD a health service fit for the future

Developing the 10 Year Health

Developing the 10 Year Health Plan



Integration of oral health into general health



## CURRENT STATE

ORAL HEALTH AND DENTAL SERVICES 2025



Promoting skill mix and numbers of a collaborative and inclusive dental workforce



System transformation: ICSs and PCNs



Enabling patient safety and quality



Providing high quality, safe, clinically-effective, innovative care



Enabling digital healthcare technology



Managing clinical, population and misinformation trends



Dental System Reform



Climate sustainability

- Mental resilience is the ability to adapt well when faced with significant stressors or difficult events
- It's about maintaining mental wellbeing despite adversity and bouncing back from difficult experiences.



## How to build mental resilience

Building resilience involves developing the ability to bounce back from difficulties and adapt to change.

- Developing coping mechanisms
- Foster positive relationships
- Practice self care
- Cultivating a growth mindset
- Seek support when needed



## What's the problem?

%

Collin. V, Toom. M, O'Selmo. E et al. A survey of stress, burnout and wellbeing in UK dentists. Br Dent J **226**, 40-49 (2019)

Across the profession, dentists are experiencing significant levels of burnout, stress and dissatisfaction.

#### 100 90 80 70 60 50 40 30 20 10 0 General dental Community dental University dental Hospital practice Another field of practice services teaching or practice research

Level of burnout by dental field of practice



## What's the problem?

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Governance	Relating to organisational and regulatory aspects	
Perceived persecution	Worries about persecution from the regulatory and government as well as by the media and patients	
Lack of support	Feeling unsupported, both from national regulatory bodies and the government as well as practice management locally	
Professional constraints	Perceived lack of control, working arrangements and isolation	
Shifting cultures	Concerns over a corporate mentality – placing profits above patients	
Staff Issues	Managing staff, interpersonal conflict, inexperienced staff	OFFICE OF CHIEF

## **OCDO Workstream priorities**



Provide cross-government advice for both the private and public sector

Support NHS dental contract reform, working with NHSE and DHSC

Advocacy for patients

Advocacy for the profession

Oral and general health interface - 'Putting the mouth back into the body' – there is a bidirectional relationship between oral health and most general health conditions. Dentistry should be considered within general health. Addressing health inequalities in line with <u>Core20PLUS5</u> and advocating for improved access to oral health as part of these pathways.

Promoting patient safety and care quality

Advocating for digital integration

Supporting skill mix – making the workforce plan a reality

Supporting development and wellbeing of the whole dental workforce

Promoting right touch regulation and a fair clinical negligence system





## **OCDO** objectives

3 out of 8 of OCDO's objectives relate to wellbeing and patient safety

- Project Sphere
- Primary Care Patient Safety Strategy
- Association's and Societies Roundtable
- OHRSLF
- Dentistry and Oral Health bulletins
- Public statements

# OCDO 1Patient safety and qualityOCDO 3Right touch regulation and fair<br/>clinical negligence systemOCDO 4Development and wellbeing of<br/>the whole dental workforceYour NHS dentistry and oral

## Your NHS dentistry and oral health update

25 April 2025

A focus on mental wellbeing

Dear Ross,

With Mental Health Awareness Week approaching on 12 May, this bulletin shines a spotlight on key resources available to support the mental health of dental teams, and highlights the excellent work being undertaken by organisations and qualified professionals across the sector in promoting and embedding wellbeing in the workplace.



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## **Project Sphere – Aims**

Our aim is to change from blame culture to a learning from experience culture



Promoting patient safety in primary dental care

Regulators, indemnifiers, practitioners and patient voice **in the same room** 

Improve **infrastructure for recording** patient safety events

Implement **templates** to share and enhance **learning** from safety events

**Support practitioners**, reduce fear and encourage recording



## **Project Sphere - Achievements**



Huddle sheets and supporting guidance



Microsoft Word 77 KB 14 page

ndards and toolkits, facilitating systematic evaluation of the impact of patient sa

#### Primary care patient safety strategy

Implementation of the NHS patient safety strategy in primary care



NHS

England

ation and governance plan

Input into NHSE Learn from Patient Safety Events (LFPSE) service for incident reporting

Input into NHSE primary care patient safety strategy

Continued development of NHS **Patient Safety Syllabus** Training on E-Learning for Health (E-lfh)

Creation and publication of **huddle sheets** – encouraging reflection on and reporting of incidents

#### Indemnity consensus statement



## **Project Sphere – Human Factors**

- Tackle misconceptions within the profession by promoting communication/interfacing between regulators and indemnity advisors
- Ensure **psychological safety** of the dental team
  - Acknowledge the impact of litigation fears on staff wellbeing
  - Move away from blame culture change attitudes within the profession
  - Encourage incident reporting and reflective learning identify barriers
  - Promote duty of candour
  - Ensure practitioner support
- Promote diversity / inclusion / civility between staff and with patients
- Promote communication
  - Interface between primary care and other areas e.g. secondary care
  - Regular meetings between stakeholders

## Safe culture



## Project Sphere – Guidance and Education

- Encourage incident reporting and reflective learning
  - To improve current recording mechanisms to create an appropriately supported infrastructure for recording patient safety events in dentistry
  - Promote safety mechanisms within dentistry such as Freedom to Speak Up
- Embed patient safety into undergraduate training
- Advocate for safe digital processes
  - Access to summary care records
  - Electronic prescribing practices
- Proportionate regulation and a fair clinical negligence system
- **Promoting guidance** for dental patient safety
  - WT&E Patient Safety Syllabus and training
  - <u>GDC Safe Practitioner framework</u>

## Safe systems



# **Regulatory Board**

## Oral Health Regulatory Strategic Leadership Forum



Oral Health Regulatory Strategic Leadership Forum (OHRSLF)



- Regulators of dental services across England work in partnership and collaboration
- Focus on a **strategic shared view** of safety and quality for patients and professionals
- To connect over and debate topical issues, share learning and understanding
- To influence quality improvement, safety improvement, service integration, and system-level change across England
- To **reduce** bureaucracy and double jeopardy
- To support proportionate regulatory response



Promote a national support scheme

## Have you seen this?

 This climate of fear can have a significant impact on the effectiveness of regulation. The threat of fitness to practise can impact a dental professional's confidence, reduce the dental procedures that they are willing to undertake and might also result in their leaving the profession – all of which can have a serious impact on patient access and patient care.



## Have you seen this?

- Over the years, a climate of fear has grown within dentistry. We understand that this has, at least in part, been driven by mistrust and fear of regulation, and in particular of the fitness to practise process.
- Our research suggests that this starts early in a dental professional's career, as their perceptions of the GDC decline quite sharply postqualification – with terms such as 'fear' frequently associated with regulation.



## Fitness to practise is adversarial and can impact dental professionals' mental health and wellbeing

We know that that the fitness to practise process can negatively impact the mental health, wellbeing and confidence of dental professionals. Our research demonstrates that very clearly, and shows in particular that the threat of fitness to practise proceedings, and prolonged case resolution times are key causes of stress in dental professionals.<sup>1</sup> Not only does this impact the trust that the profession and our partners have in the GDC, but it can have a direct impact on patient care, and is likely, over the long term, to affect career choices and retention.

# A climate of fear exists within dentistry, driven by mistrust of regulation

Over the years, a climate of fear has grown within dentistry. We understand that this has, at least in part, been driven by mistrust and fear of regulation, and in particular of the fitness to practise process.

Our research suggests that this starts early in a dental professional's career, as their perceptions of the GDC decline quite sharply post-qualification – with terms such as 'fear' frequently associated with regulation.

This climate of fear can have a significant impact of the effectiveness of regulation. The threat of fitness to practise can impact a dental professional's confidence, reduce the dental procedures that they are willing to undertake and might also result in their leaving the profession – all of which can have a serious impact on patient access and patient care.

#### General Dental Council





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#### Developing a learning culture in our approach to regulation by:

- Using our own research and insight, and working with partners, continuously identify sources of learning, including analysing fitness to practise data to provide insight into areas of practice risk.
- Feeding this learning into development of professional guidance and maintaining the lifelong learning scheme.

Addressing the climate of fear within dentistry and increasing trust in regulation through enhanced communications and engagement with the profession and our partners by:

- Strengthening our engagement with student and trainee dental professionals, the professions and our partners.
- Maintaining a transparent and constructive dialogue about what we are doing and why.

Working with dental professionals and our partners to better understand the elements of the current process that have the most negative impact on mental health and wellbeing of those involved, and work collaboratively to address them. This will include:

- Using research, evidence and data, as well as ongoing engagement with dental professionals to ensure that we understand the impact of the various elements of the process on everyone involved in fitness to practise.
- Working with professionals, partners and stakeholders to develop, test and evaluate ways of reducing that impact, both by seeking to make changes to the process and by enhancing the available support.

## Well-being: a multi-dimensional concept

## Emotional

cultivating positive emotions and feelings.

#### Societal

contributing to a thriving community and making a positive impact.

#### Workplace

finding purpose, fulfilment, and balance in one's professional life.

## Physical

maintaining a healthy body through proper nutrition, exercise, and self-care.

## Social

building meaningful connections and a sense of belonging in a community.



## Workplace challenges threatening wellbeing





## Key areas affected by poor wellbeing





# Impact of poor wellbeing

Arora et al. 2010, Gorter et al 2000

•Impaired clinical performance

•Poor outcomes

•Compromised patient care

Clinical performance

• Decreased empathy

- Emotional exhaustion
- Depersonalisation cynical attitude towards patients
- Reduced personal accomplishment

Burnout

•Absenteeism

- •Sick leave
- High staff turn over

#### Engagement



## Economics of wellbeing: NHS Staff sickness

sickness absence -10.3 million working days/ year. Direct cost of absence - £1.7 billion / year. 80% staff report damaging impact of the quality of patient care.



## **Benefits**

Potential benefits of reducing sickness absence by 1/3 = £555 million savings / year

- Gain of 3.4 million working days /year
- Reduction in
  - indirect costs for temporary staff (£1.45 billion/yr)
  - staff turnover (recruitment costs £4500 per person)
  - ill health retirement cost (£150 million /yr)







## Healthy employees

Less likely to take sick leave More likely to perform at their best -higher overall output

Better quality of work

Wellbeing =20% productivity increase



## Promoting wellbeing in the workplace

It is the Right thing to do

- Enhanced Productivity
- Reduced health care costs
- Improved satisfaction
- Improved retention
- Enhanced reputation
- Ethical considerations

# Smart thing to do



## Stress, in itself, is not harmful

The difference between a **stressful** situation and a **challenging** one is our perception of:

#### Our ability to manage it

# The level of control we feel we have

The meaning, significance and consequence it has for you



## Breaking the stigma

#### Therapy is only for those who are struggling

# Common myths about therapy

I should be able to handle it on my own

#### It will make me look weak



## Reality

# Seeking help is a sign of strength, not weakness

Therapy is just like a physical or dental health exam – it's about maintenance and prevention



## **Breathe**

## **Introducing BREATHE:**

## A Single Point of Contact

In collaboration, OCDO have produced a **wellbeing platform**.

The platform is **completely free** and is designed for **all members** of the dental team.

The site was **launched in March 2025** at the BDIA Showcase.



**Completely Free** 

**Proactive and Preventive** 

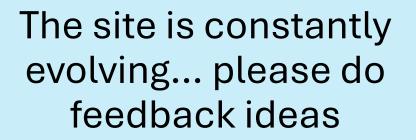
Flexible and Accessible

**Multi-Format Learning** 

**Designed for Dentistry Specifically** 

**Science-Backed Strategies** 

## Going ahead





#### www.breathedentalwellness.org







With thanks to Rana Al-Falaki, Jackie Cooper and Shannu Bhatia





#### **CDO** webinar

Wednesday 2 July 2025

Dentistry & oral health bulletin

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