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Loretto ON

August 2, 2022

Dr. Shalev Sabari  
Practice Owner  
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Richmond Hill ON

Dear Dr. Sabari:

Here is my report on the feasibility of a mental health program in dental practice. In preparing this report I learned a lot about the current mental health issues and programs and believe this will help those in the profession. Thank-you for taking the time to read the report.

Dentistry is a challenging and rewarding profession. It offers many opportunities for personal and professional growth, while helping communities achieve good oral health. The careers in the profession have higher levels of stress and mental health problems than others.

Healthcare workers, including those in dental, are unlikely to seek help and many lack appropriate coping skills. Implementing an organizational approach to mental health in dental practice will minimize psychological threats and provide resources to the dental team enhancing workplace relationships, increasing productivity, and improving patient care.

I have enjoyed working on this analysis and am happy to answer any questions. Please contact me at 123-456-7890 or [kvyfschaft@gmail.com](mailto:kvyfschaft@gmail.com)

Sincerely,

Kristy Vyfschaft, RDH

# Feasibility Analysis of a Mental Health and Wellness Program in Dental Practice

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# FEASIBILITY ANALYSIS

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### **Abstract**

The mental health and well-being of individuals is influenced by personal and workplace stress. Dental personnel have a multitude of stressors that are compounded daily. Dental professionals deal with stressful working environments, working with patients, difficult job requirements, and a global pandemic. Careers that are higher in stress are at a high risk for mental illness and can happen to anyone working in the field no matter the length of their career. Symptoms of mental illness vary in type and severity ranging from low mood to suicidal ideation.

Dental professionals with poor mental health negatively affect the dental team and practice. The dental team cannot work cohesively, and workplace conflicts are more frequent. Patient care quality and safety reduces, potentially causing lost revenue for the company.

Reducing the prevalence of mental illness in the dental practice requires a combination of personal and organizational efforts. Encouraging team members to engage in activities that reduce stress outside of the workplace helps to reduce stress within the dental practice. Organizational policies, activities, and resources that are supportive of the mental well-being of the team decrease mental illness and create a positive healthy working environment. Mental health programs provide multiple organizational benefits at a low cost therefore, those in leadership positions in dental practice should consider:

- Providing assessments to evaluate the stress levels of workers
- Creating a workplace mental health policy
- Providing resources or access to resources to all staff without negative consequences
- Creating a workplace social support system to enable communication

## **Introduction**

### **Definition**

Recently mental health has become a significant aspect of overall health and awareness of the importance of mental well-being is rising professionally and personally. According to the Canadian Centre for Occupational Health and Safety: “mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”

Whereas mental illness is defined by the Canadian Centre for Occupational Health and Safety as: “a medically diagnosable illness that results in the significant impairment of an individual’s cognitive, affective, or relational abilities(“Canadian”)”. Symptoms of mental illness vary in number and severity. The most common mental unwellness symptoms are changes in sleep or diet, headaches, gastrointestinal problems, worrying or fear, depression, anxiety, withdrawn, irritability, substance abuse, and suicidal ideation (Montoya; Dental; Nayee 32-33).

### **Background**

Dentistry is a stressful profession that results in dental personnel experiencing symptoms of mental illness. Evidence suggests many individuals in dentistry experience nervousness, trouble sleeping, anger, and irritability (Barnard et al. 25). Given the level of stress, many practitioners should seek mental health care, but due to fear of career repercussions or perceptions of inability to care for patients most dental professionals do not seek care (Bridgeman et al. 149). The stigma of seeking care along with stressors has created a profession with high amounts of mental illness.

### **Purpose and Scope**

The purpose of this report is to evaluate mental health in dental practice and the feasibility of a mental health program to reduce mental unwellness. To assess the feasibility the following questions, need to be answered.

- What contributes to mental health issues in practice?
- What effects does mental illness have on the dental practice?
- Will a mental health program and resources reduce mental unwellness?

### **Methods and Limitations**

To answer the questions 16 dental professionals actively working in dental practice responded to a short survey designed to analyze mental health awareness, stress reducing activities, and useful mental health resources in dental practice as a possible solution (see Appendix A). The sample size of the survey is small and may not be a complete representation of a larger population. In addition, this report analyzes data gathered from related literature to increase the depth of data regarding workplace mental health programs. Many of the studies were limited in scope, not relevant to the areas of study, or had high potential for bias. Studies focused on clinicians and did not include administrative workers; this report generalizes findings to include all dental professionals. An analysis of the potential costs of a mental health program with resources was completed to determine the feasibility of implementing a mental health program.

### **Conclusion**

After identifying common sources of mental health issues in dentistry the analysis examines the practice effects, methods to reduce stress, and mental health programs in the workplace. The report concludes by recommending steps to introduce a mental health and wellness program in the dental practice.

## Data Section

### Sources of Mental Health Issues in Practice

Professionals working in dentistry face many daily stresses. If stress is not managed, over time mental unwellness develops. Identifying factors causing high stress levels determines areas in practice that contribute to mental illness.

**Mental Health Awareness.** Individuals working in the dental field are aware of the symptoms of mental illness. Professionals are trained to identify symptoms in patients and act in the patient's best interest, supporting their overall well-being. When colleagues display symptoms fellow team members do not have the training or resources to offer support (Montoya). Team members avoid offering help to each other during times of mental unwellness due to limited awareness of mental illness in co-workers or the inability to approach colleagues without the perception of being judgemental.

**Environment.** Clinical practitioners work in small, sometimes windowless, operatories with poor ergonomics and most clinicians have limited time outside the confines of the operatory in the workday (Montoya; Barnard et al. 24; Ozarslan and Caliskan 3114; Lopresti 66). The poor ergonomics coupled with the repetitive nature of the job results in musculoskeletal problems and chronic pain (Peters; Lopresti 66). Administrative professionals remain seated for the workday, have workspaces with poor ergonomics, and high amounts of screen time leading to acute and chronic pain. Suffering from chronic pain reduces the professionals' abilities to cope with stresses.

Dentistry is somewhat isolating as most work alone in a closed operatory without social contact with colleagues. The little number of breaks in practice limits the ability to create healthy supports at work (Glick and Haji). Without social support, professionals manage stressful

workdays alone and those experiencing symptoms may be unaware or need a co-worker to help identify and address the issues. Without a support system most are unable to obtain resources to improve mental health or decrease stress in the workplace.

**Job Requirements.** Dental practices have long working hours to accommodate patients and dental personnel spend more time caring for patients than with personal relationships, creating a work-life imbalance (Lopresti 66; Montoya; Dental; Ozarslan and Caliskan 3114). When an imbalance occurs stress and pressures increase as the individual attempts to maintain their professional and personal life. Schedules are demanding with time pressures to complete patient care, infection control, and adequate documentation while staying on schedule with limited breaks to maintain healthy lifestyles; working for hours without breaks for nutrition, hydration, or use of a restroom (Lopresti 66; Ayatollahi et al.; Peters).

Dentistry requires constant mental focus. Clinicians perform procedures that are in a delicate area of the body with very little room for error (Dental). Administrators need to maintain the schedule while managing patients in person, virtually, and on the phone. Expectations of perfectionism create pressures and without breaks from mental concentration workers experience extreme stress, anxiety, and mental fatigue.

As regulated health professionals each clinical member must adhere to guidelines and requirements determined by their regulatory body. Dental professionals are constantly aware of any restrictions or potentially face litigations. The fear of litigations or loss of professional licensure is an additional source of high anxiety in practice (Glick and Haji).

**Patient Relations.** Patients in a dental practice often hate dental work or have high levels of anxiety and practitioners need to manage patients' stress to complete tasks (Dental; Ayatollahi



et al.; Ozarslan and Caliskan 3114). Patients often complain to dental personnel about dental and personal issues, so professionals spend their days in a negative atmosphere reducing overall morale. Patients have high expectations about dental care but, expectations that are unrealistic result in anger from the patients directed at the dental team. Clinical and administrative employees managing patients stress are unable to manage personal mental well-being during working hours.

**Global Health Crisis.** The global pandemic has been a period of increased anxiety and fear in dentistry and the most common is fear of contagion. (Nayee 32-33; Montoya; Glick and Haji). Given the mode of transmission of COVID-19 dental professionals are at higher risk for infection. Practitioners worry about lost income from extended sick days, if infected, and potential job insecurity upon return.

Regulatory bodies create confusion with guidelines that are not coherent for differing staff roles and are rapidly changing (Glick and Haji). Hygienists and dentists are left deciphering guidelines and resolving conflicts while upholding the highest levels of safety. Office conflicts and uncertainty related to regulations creates a high-tension working culture, increasing workplace stress.

The personal protective equipment (PPE) requirements have increased for all staff. Clinicians producing aerosols are required to wear N-95 masks and some require gowns. Learning to practice with enhanced PPE is demanding and stressful. PPE shortages cause difficulties to work and lead to increasing costs, reducing the profits of the company (Gohil et al. 12; Glick and Haji; Burger). Financial stress is increasing for leaders in practice, while workers are facing lowered income from reduced working hours if the PPE is unavailable.

**Practice Effects**

Professionals dealing with unmanaged mental illness negatively impact the practice. Overall abilities to support the dental team and care for patients reduce, resulting in potential loss of income for the company.

**Dental Team.** As mental unwellness progresses team members become indifferent about their job and daily tasks. Absences from work increase, resulting in staff shortages or a reduction in daily profits. (Barnard et al. 26; “Canadian”). Presenteeism, when a member shifts from doing their best work to doing the bare minimum, increases while productivity decreases (“Canadian”). Colleagues have increased workloads as unwell members do not complete their daily tasks in a timely manner. The dental team struggles to effectively work together as tensions among the team members rise if workloads are unbalanced and working relationships become conflictual or dysfunctional (Maslach and Leiter 161). Those in senior positions must manage conflicts or high staff turnover rates (“Canadian”).

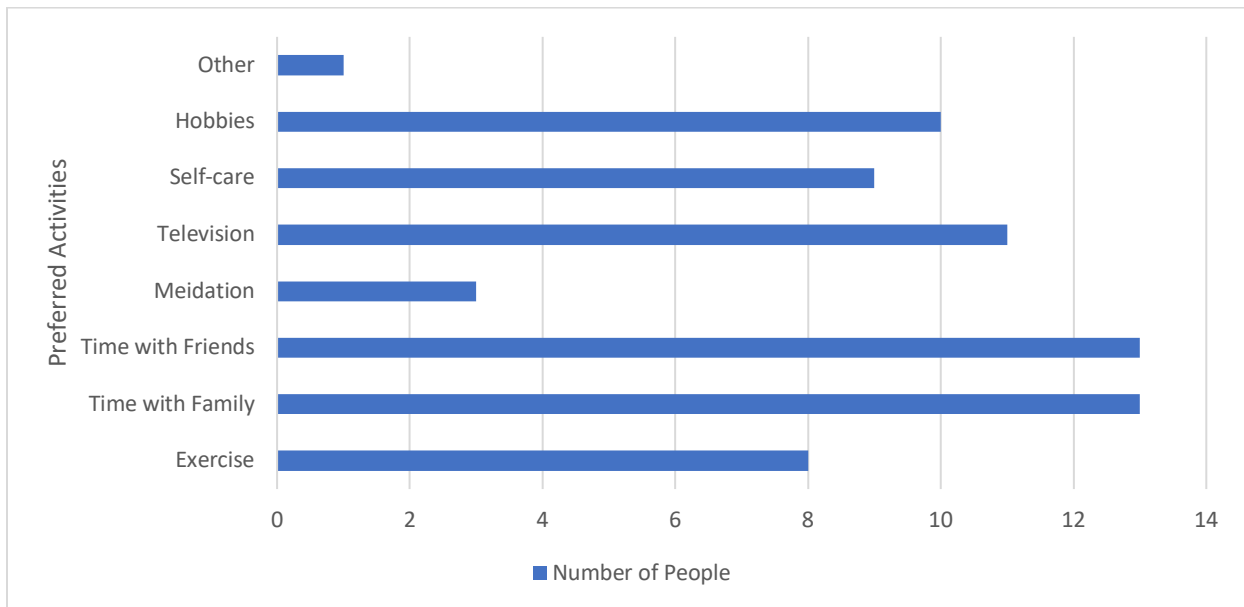
**Patient Care.** Those experiencing mental illness lack empathy towards patients (Pradhan et al. 34; Barnard et al. 148). Without empathy professionals lack the ability to provide compassionate care and clients will not feel valued or looked after during their treatment. As individuals become indifferent about their jobs, patient errors increase. Workers will no longer feel passionate or fulfilled with their job role or requirements causing aloof attitudes, decreasing patient and operator safety (Nayee 33; Glick and Haji; Bridgeman et al. 148). Professionals no longer adhere to strict safety guidelines or deviate from patient treatment plans. Patients that are not satisfied with the level of care or professionalism may not return to the practice resulting in lost revenue.

**Methods to Reduce Stress**

Decreasing stress levels reduces the risks of mental illness. The most effective means for the dental team to reduce stress are a combination of individual and organizational interventions.

(Pradhan et al. 36)

**Individual.** Social supports systems outside the workplace are a common, effective stress reduction method (Figure 1). Encouraging workers to spend time with family and friends during non-working hours will reduce stress levels. Active, healthy living promotes mental well-being and reduces stress personally and professionally (Maslach and Leiter 162). Exercising at a comfortable level can reduce musculoskeletal and chronic pains, increasing the ability to cope with stresses. Other activities such as meditation, watching television, self-care, and personal hobbies are known stress reduction methods (Maslach and Leiter 162; Lopresti 67; Peters; Dental).



**Figure 1.** Dental professionals' Preferred Individual Activities. Source: Vyfschaft, Kristy.

Appendix A: Survey Question 9

**Organizational.** Increasing support for team members in the workplace alleviates everyday stresses. Allowing workers to have open dialogue about concerns in a productive manner will decrease individual and team stress (Glick and Haji). Team building activities will promote cohesiveness among colleagues to reduce feelings of isolation. Employers and managers actively listening to worker concerns about stresses and working towards reducing issues in the practice environment without repercussions encourages a commitment from the team members and productive support (Dental; Glick and Haji; Lopresti 66).

### **Mental Health Programs in the Workplace**

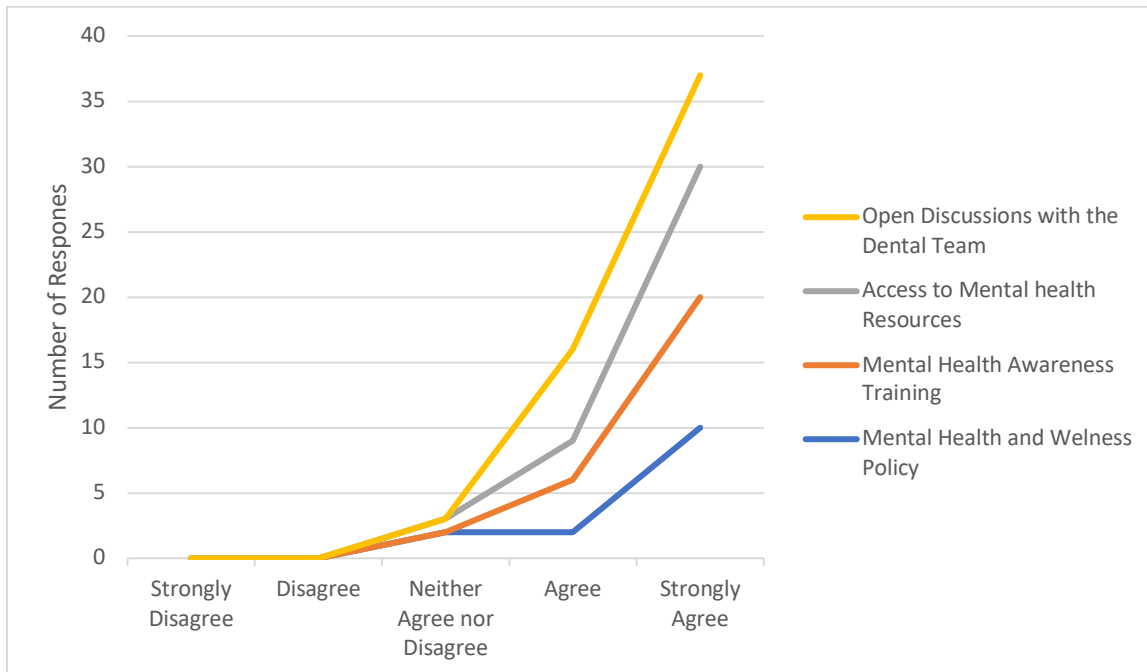
The health of a workplace includes the physical and psychological well-being of the workers. Treating mental health is as important as physical health. It is imperative that all members of the dental team are involved with a shared responsibility for overall mental wellness.

**Types of Programs.** Mental health programs in a dental office can include variations depending on the needs of the team. The initiation of a mental health program requires identifying the current mental health needs or stressors with an assessment (Lopresti 66). Online surveys or quizzes available through mental health websites, such as Guarding Minds at Work, provide instant, anonymous feedback (“Documents”).

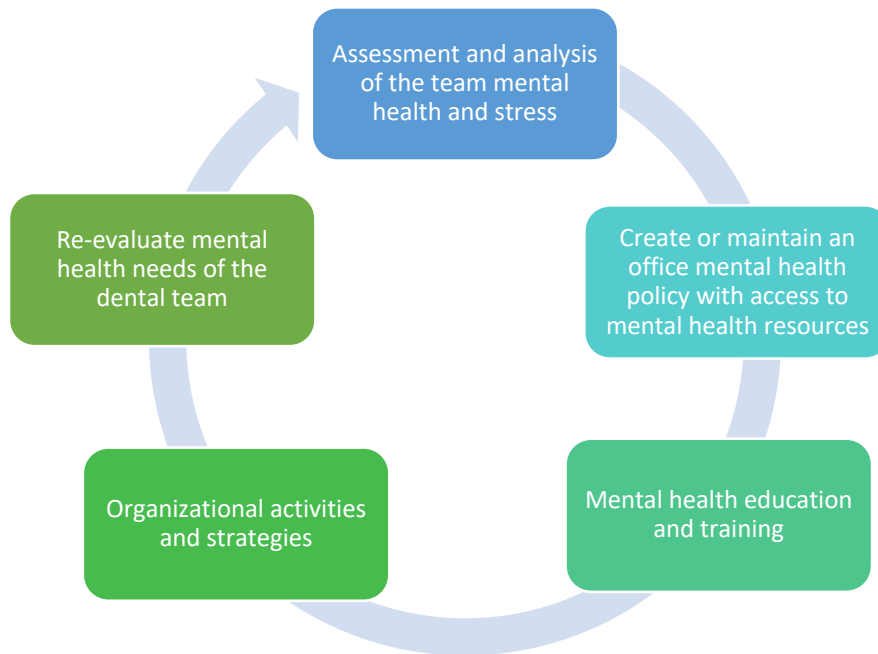
Planning after the assessment will determine the direction of the program. Figure 2 identifies the types of activities and resources that dental professionals believe would be beneficial in practice. A crucial step is the development of a mental health and wellness policy, demonstrating strong leadership and commitment. The policy statement reflects the company’s commitment to making mental health a priority (“Canadian”). Including education and training enables all staff and leaders to recognize mental illness symptoms, unhealthy working conditions, and methods to

address the issues in a professional manner (“Canadian”). Introducing activities in the workplace that improve mental health interactions, enhance team building, and create a safe space for communication improves the team’s commitment to each other and the psychological well-being of the office. Figure 3 represents the implementation process of mental health programs in practice.

Providing accessible information regarding available resources gives the team an outlet to seek help. Listing resources for dental professionals that are included with professional associations and regulatory bodies ensures that everyone is aware of the availability (Lopresti). Offering extended health benefits that include mental health services allows workers to privately seek mental health care without fears of negative perceptions (“Your”). Leaders can seek out local counsellors and provide their current information. By partnering with a mental health care provider, staff have an opportunity for care and the company gains additional educational resources (Burger).



**Figure 2.** Useful Resources in Dental Practice. Source: Vyfschaft, Kristy. Appendix A: Survey Question 10.



**Figure 3.** The Process of Implementing a Mental Health Program. Source: Vyfschaft, Kristy

**Benefits.** A workplace that implements a mental health program will gain many benefits. Workers who feel valued will be engaged at work increasing concentration and communication among colleagues and towards patient care (“Canadian”). The team will have increasing commitment to the office and patients, reducing absences and presenteeism (“Canadian”; “Documents”). Conflicts reduce in the team, limiting the need for management interventions. Staff turnover rates decrease as the loyalty to the office continues to increase. Clients have compassionate, safe care, and are less likely to leave the practice. Overall office productivity increases as the office morale improves.

**Cost.** The assessments are available online and are free and staff time to complete the assessment is minimal and should not reduce production. Using the health and safety committee to create the mental health policy is an inexpensive way to begin implementation. The health and

safety committee using free online resources to guide the policy process reduces staff time and production lost. Using online educational and training resources through mental health websites and providing training during lunch hour reduces training costs and lost production (“Documents”; “Workplace”). Extensive training costs more if the leaders feel it is required to improve the mental health of the office. Beginning with free resources and re-evaluating the needs after training will keep education costs low. Providing outside resource information is inexpensive but, seeking out resources will use staff time and may result in loss of productivity. Delivering mental health insurance benefits can be costly. Costs versus benefits to the office should be calculated. If it is not feasible to provide staff with insurance benefits, seeking out many different avenues will be most cost effective.

**Effectiveness.** The effectiveness of workplace programs varies. There is a positive trend for all types of programs. The most beneficial are those that include multiple organizational interventions (Hesketh et al.). For programs to be effective, commitment needs to begin with the leaders of the company. Leaders drive the direction of the workplace and those with understanding and commitment have higher levels of success than those that do not understand the importance of mental health (“Canadian”).

### **Limitations of Evidence**

The findings in this report are based on survey data and related literature reviews, each with limitations but data from the survey and literature reviews are consistent in findings.

**Survey Data.** The survey was distributed to 21 dental professionals. The response rate was 76% with 16 respondents. The survey evaluated the awareness of mental illness, methods to reduce stress, and resources in the dental practice. The small sample size limits the

generalizability of the findings and therefore may not be a complete representation of the target population.

**Literature.** Sources for the literature review provided rich data but many studies were limited in scope, were not relevant, or were sponsored with a potential for bias. Studies focused on dentists or dental hygienists and did not include administrative or managerial staff. Findings in this report are generalized to include all staff members.

### **Dental Industry Views**

Dentistry is a collaborative profession. Teams must effectively work together to provide patient care that leads to improved health outcomes. Physical health and safety are a large part of the field to reduce or prevent injuries and hazards, but psychological injury prevention is not prevalent in dental offices.

**Limited Awareness or Training.** Leaders at the dental practice set the tone for the staff. Many in senior positions are unaware of the mental health needs in practice because most do not receive mental health training during their formal education. A lack of awareness leads to a lack of resources for the team and without training most are unsure how to approach a team member with mental health symptoms or believe they are simply having a bad day. With proper education leaders gain awareness about mental health needs, available resources, and how to work with team members experiencing mental illness.

**Responsibility to Staff.** Mental health has been recognized as an integral part of overall health. Employers and leaders readily protect employees physically but do not have the same need to protect employees' mental well-being. Many leaders fear that a mental health program will be misused or abused by staff but by establishing the importance of the program and



demonstrating commitment, it is unlikely staff will abuse the program. Mental wellness is a personal and organizational responsibility and staff that is supported physically and psychologically will thrive in the practice.

## **Conclusion**

### **Summary**

Stress and mental illness are prevalent in dentistry. The high stress, fast-paced environment creates daily stressors above other professions, but professionals do not have adequate resources to seek help or provide help among colleagues. As a result, dental teams and patient care are negatively affected without mental health management. A mental health and wellness program can effectively be implemented at low costs to improve productivity, office morale, and staff loyalty.

### **Interpretations of Findings**

Those working in dental practice will benefit from a mental health and wellness program. The program needs to begin with strong leadership to guide employees. Programs that offer multiple interventions will yield the best results. Implementing a mental health program can positively impact the workers and the practice profitability.

### **Recommendations**

Based on the evidence leaders in practice should aim to reduce workplace stress and mental illness by:

- Providing assessments to evaluate the stress levels of workers.
- Creating a mental health and safety policy.
- Providing resources to staff without negative consequences to those who use them.
- Creating a workplace social support system to enable communication.

**Appendix A: Survey Questions**

1. Are you currently working in the dental field?
2. In which type of dental field are you currently working?
3. How many years of experience do you have in the dental field?
4. Working in the dental profession is...
5. Since the COVID-19 pandemic working in the dental field is...
6. Mental illness in the dental practice is...
7. Which of the following policies are available in the office?
8. What are the common symptoms of mental illness?
9. Which of the following activities do you enjoy?
10. If available, the following resources could be beneficial in the dental profession.
11. Is there any further comments you would like to add?

### Works Cited

Ayatollahi, Jamshid et al. "Occupational hazards to dental staff." *Dental research journal* vol. 9,1 (2012): 2-7. doi:10.4103/1735-3327.92919

Barnard, SaraJane A et al. "Mental Health and Self-Care Practices Among Dental Hygienists." *Journal of dental hygiene : JDH* vol. 94, no. 4, 2020, pp. 22-28.

Bridgeman, Patrick J et al. "Burnout syndrome among healthcare professionals." *American journal of health-system pharmacy : AJHP : official journal of the American Society of Health-System Pharmacists* vol. 75, no. 3, 2018, pp. 147-152. doi:10.2146/ajhp170460

Burger, David. "Association Tackles Mental Health With Sense Of Urgency". *Ada.Org*, 2022, <https://www.ada.org/publications/ada-news/2022/may/association-tackles-mental-health-with-sense-of-urgency>.

"Canadian Centre For Occupational Health And Safety". *Ccohs*, 2022, <https://www.ccohs.ca>.

Dental, Delta. "The Dental Office And Mental Health: What You Need To Know". *FYI*, 2022, <https://fyi-online.com/2022/05/dental-office-mental-health/>.

"Documents And Resources". *Guardingmindsatwork.Ca*, 2020, <https://www.guardingmindsatwork.ca/resources>.

Glick, Jordan, and Aly Haji. "COVID-19: An Opportunity To Discuss Dentists' Mental Health - Oral Health Group". *Oral Health Group*, 2021, <https://www.oralhealthgroup.com/features/covid-19-an-opportunity-to-discuss-dentists-mental-health/>.

Gohil, Dilan A et al. "Impact Of COVID– 19 On The Psychological Health Of Dental Professionals: A Systematic Review". *Global Journal Of Health Science*, vol 13, no. 7, 2021, pp. 1-17. *Canadian Center Of Science And Education*, <https://doi.org/10.5539/gjhs.v13n7p1>.

Hesketh, Rachel et al. "What Do We Know About The Effectiveness Of Workplace Mental Health Interventions?". *Kcl.Ac.Uk*, 2020, <https://www.kcl.ac.uk/policy-institute/assets/what-do-we-know-about-the-effectiveness-of-workplace-mental-health-interventions.pdf>.

Lopresti, Sabrina. "Stress And The Dental Hygiene Profession: Risk Factors, Symptoms, And Coping Strategies". *The Canadian Journal Of Dental Hygiene*, vol 48, no. 2, 2014, pp. 63-69., Accessed 23 July 2022.

Maslach, Christina, and Michael P Leiter. "New insights into burnout and health care: Strategies for improving civility and alleviating burnout." *Medical teacher* vol. 39, no. 2, 2017, pp. 160-163. doi:10.1080/0142159X.2016.1248918

Montoya, Bethany. "Mental Health For The Dental Professional". *Rdhmag.Com*, 2021, <https://www.rdhmag.com/career-profession/article/14207393/mental-health-for-the-dental-professional>.

Nayee, Shalini. "Reflecting On Mental Health And Wellbeing In Dentistry". *BJD*, 2021, pp. 32-33., <https://doi.org/10.1038/s41407-021-0551-x>. Accessed 22 June 2022.

Özarslan, Merve, and Secil Caliskan. "Attitudes and predictive factors of psychological distress and occupational burnout among dentists during COVID-19 pandemic in Turkey." *Current psychology (New Brunswick, N.J.)* vol. 40, no. 7, 2021, pp. 3113-3124., doi:10.1007/s12144-021-01764-x

Peters, Beau. "How Dentistry Professionals Can Manage Their Mental Health". *Oral Health Group*, 2021, <https://www.oralhealthgroup.com/blogs/how-dentistry-professionals-can-manage-their-mental-health/>.

Pradhan, Manjusha et al. "Burnout Syndrome In Dental Profession". *Journal Of Dental And Medical Sciences*, vol 19, no. 6, 2020, pp. 30-37.

"Workplace Strategies For Mental Health". *WSMH*, 2022, <https://www.workplacestrategiesformentalhealth.com/topic/Approaches-for-people-leaders/Leadership-skills>.

"Your Mental Health Matters - Oral Health Group". *Oral Health Group*, 2021, <https://www.oralhealthgroup.com/features/your-mental-health-matters/>.