Overview

The American Dental Association has a long-standing commitment to supporting the health and well-being of dental professionals.

The Council on Dental Practice (CDP) supports advocacy and policy efforts that improve mental and physical health and wellness for dental professionals. In 2022, CDP determined the need to elevate the conversation around these efforts through convening a strategic meeting (Summit) that fostered dialogue between stakeholders in dentistry and established a coalition of partners. CDP's Dental Team Wellness Advisory Committee (DWAC) planned the first ADA Health and Well-Being Summit with the following goals in mind:

- Provide a national platform for state and local dental professionals and their respective organizations to convene, connect and share;
- Highlight existing ADA and external resources that support provider health and wellness;
- Collaborate with the physician model which continues to raise awareness that stigmatizing language on initial and renewal licensing applications, and credentialing applications may negatively impact whether a provider asks for help for a mental, physical or behavioral health challenge;

Summit attendees included representatives from the inaugural group of ADA Wellness Ambassadors, as well as a second group that were onboarded into the program in 2023. The Council created the ADA Wellness Ambassador Program in 2022 to assist the ADA in:

1. Expanding the awareness of physical and mental health wellness and well-being challenges faced in the dental profession.
2. Prioritizing the need to provide resources at state and local levels to those who may wish to seek help.
3. Connecting those who need support to available resources.

The first group of ambassadors completed over 40 projects during their onboarding year (2022-2023). An introductory video about the ADA Wellness Ambassador Program can be viewed at https://www.youtube.com/watch?v=hSQ5daYK0wo.

Summit attendees represented 34 states and 17 ADA Trustee Districts, and included CDP and DWAC volunteers, state and local dental societies and organizations, physician health programs, dental specialty societies such as the American Association of Oral and Maxillofacial Surgeons (AAOMS), the American Student Dental Association (ASDA) and the American Dental Education Association (ADEA).

This summary provides information shared by the panelists. The agenda with its respective information on the panelists can be found in Appendix 1 and the handout shared with ADA wellness related resources in Appendix 2.

First Panel Presentation Highlights

PROMOTING A HEALTHY WORKFORCE

Dr. Kessler:

The ADA is at the table to support a national plan for health workforce well-being, alongside other organizations all under the prioritized engagement of U.S. Surgeon General Dr. Vivek Murthy. The work of the National Academy of Medicine (NAM) Action Collaborative can be found on their website at https://nam.edu/initiatives/clinician-resilience-and-well-being/national-plan-for-health-workforce-well-being/, including the publication of the recent (October 2022) National Plan for Health Workforce Well-Being. The ADA aligned its provider health and wellness efforts, such as the Summit, use of the Mayo Clinic's Well-being Index, the Wellness Ambassador Program, collaboration with Federation of State Physician Health Programs (FSPHP), and the ADA Dentist Well-Being Program Directory to the seven key priority areas NAM outlined in the National Plan, which are:

- Create and sustain positive work and learning environments and culture
- Invest in measurement, assessment, strategies and research
- Support mental health and reduce stigma
- Address compliance, regulatory and policy barriers for daily work
- Engage effective technology tools
- Institutionalize well-being as a long-term value and
- Recruit and retain a diverse and inclusive health workforce

Dr. Kessler believes that stigma is the biggest barrier to a provider seeking help for a mental, physical or behavioral health condition. He was featured in a recent NAM video: Health Leader Operationalizes NAM National Plan for Health Worker Well-Being.

STAKEHOLDERS WORKING TOGETHER

Dr. McNeill:

As an example of a case that can be seen at the state board level, a story was shared involving a struggling dentist: the dentist was a male in his late 40's and suffered from relationship and financial pressures of running a practice. He had a history of alcohol use in the past. He became more anxious, depressed, and isolated. A complaint was filed with the state dental board as he was observed taking medication from the office. Subsequently, he ended up taking his life.

A practitioner safety issue is a direct patient safety issue, and all stakeholders can work together to help with challenges of mental health issues. State Dental Board Examiners can learn from the Federation of State Medical Boards (FSMB), American Medical Association (AMA), ADA, and the Dr. Lorna Breen Heroes' Foundation (Dr. Lorna Breen Heroes' Foundation).

Each stakeholder has a unique role in the solving the problem. Traditional approaches like webinars help with knowledge transfer, but effectiveness might be increased with unique partnerships such as working with influencers and wellness ambassadors.

What are the barriers: Individually and collectively not seeing it as a problem, insurability issues, state board stigmatization, working together, messaging.

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Can We Think Differently?

- How can we forge a new relationship on wellness between the cylinders of excellence in dentistry?
- 'You' are here to protect the dentists
- 'We' are here to protect the public
- Provider safety helps patient safety

Recommendations For State Medical Boards

- Consider whether it is necessary to include probing questions about mental health, addiction, or substance use
- Focus only on current impairment
- Approach from a non-punitive perspective and offering "safe haven" non-reporting options
- Make meaningful contributions to the ongoing national dialogue

OPTIONS TO HELP DENTAL PROFESSIONALS EXPERIENCING A SUBSTANCE USE, MENTAL HEALTH OR BEHAVIORAL HEALTH CONDITION

Dr. Budd:

Guiding principles of healthcare professional assistance programs, such as dentist health programs (DHP), physician health programs (PHP), and other professional assistance programs (PAP):

- Dual Mission: public protection and professional assistance
- Health care professionals with substance use or mental health issues deserve help with dignity (as with any other condition)
- Early intervention; otherwise, illness progresses to impairment
- Confidentiality provides incentive to get help and prevents possible legal and HIPAA issues

What support looks like:

- Connect: let them know they aren't unique, they aren't alone, and help is available. Provide compassion and understanding
- Case management: help navigate recovery from entry to maintenance through referrals to peer support and vetted assessment and treatment experts in health care professional recovery
- Accountability: monitoring with documentation
- Advocacy with boards, insurers, other regulatory agencies when appropriate
- Practice coverage
- Financial aid

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What prevents a dental professional from signing up for these programs:

- Not aware of a problem
- Not aware of a solution (2021 ADA Dentist Well-Being Survey Report) (figure below)
- Health care professional's personality: "*I've got this*."
- Shame
- Fear loss of reputation and/or license
- Distrust of program's competency and/or confidentiality
- The health care professional chooses an alternative pathway to recovery

Stigma

Types of Stigma

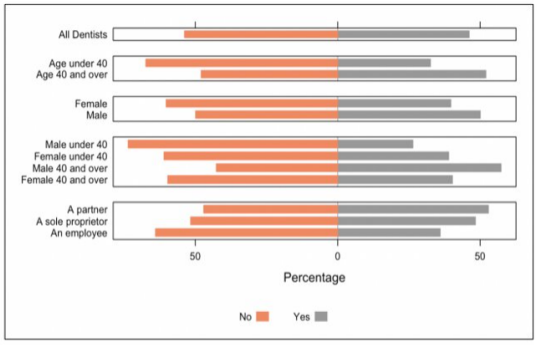
	Public	Self	Institutional
Stereotypes & Prejudices	People with mental illness are dangerous, incompetent, to blame for their disorder, unpredictable	I am dangerous, incompetent, to blame	Stereotypes are embodied in laws and other institutions

Source: https://www.psychiatry.org/patients-families/stigma-and-discrimination

Unawares

Knowledge of a State Dentist Well-Being Program by Demographic, 2021

>54%
NO



<46%
YES

Source: 2021 ADA Dentist Well-being Survey Report

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Opportunities to raising awareness, reducing stigma, decreasing barriers:

- Put forward the best programs possible
  - Adopt well-being best practices in collaboration with FSPHP
  - Make funding and resources available for staff training
- Preventive education
  - Expand Wellness Ambassadors Program
  - Continue to integrate well-being in dental school curricula
  - Require well-being continuing education for initial and renewal licensure
- Collaborate with regulatory agencies
  - Eliminate license application questions that may violate HIPAA
    Promote alternative-to-discipline through use of Memorandum of Understanding (MOUs) that assure boards of assistance program accountability and transparency

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- The National Council of Dentist Health Programs is an organization that helps to raise awareness, share resources and reduce stigma and barriers.

Second Panel Presentation Highlights

FEDERATION OF STATE PHYSICIAN HEALTH PROGRAMS (FSPHP) AND OPPORTUNITY FOR DENTAL PROFESSIONALS, A CLOSER LOOK AT WASHINGTON STATE

Dr. Bundy:

MISSION: To support physician health programs in improving the health of medical professionals, thereby contributing to quality patient care.

VISION: A society of highly effective PHPs advancing the health of the medical community and the patients they serve.

GUIDING VALUES OF FSPHP: Mission, Vision And Values (fsphp.org)

- **Empowering Membership**
- **Advocacy**
- **Collaboration**
- **Equity**
- **Education and Research**
- **Leadership**

- Direct Service: 28 state PHPs provide direct assistance to dentists (listed in graphic below); are there more states that would like dentists included in the state PHP/PAP?
- Collaboration
- State Dental Associations with their state PHP/PAP
- Non-PHP dental assistance programs with state PHP/PAP
- Policies and procedures, best practices; FSPHP 2019 Guidelines
- PHP/PAP educational outreach on topics such as addiction, mental illness, burnout, etc., among health professionals (state and local dental associations, journal clubs, dental schools)
- Dental assistance program staff membership in Federation of State Programs: Annual Meetings, Regional Meetings, e-list, and more
- Advocacy/policymaking: A unified voice in support of confidentiality protections, licensing/credentialing question reform and more

Washington Highlights

- Successfully reformed licensure questions for physicians and physician assistants, strengthened confidentiality protections for PHP participants, updated destigmatizing outdated statutory language, and extended immunity protections in working with students and trainees.

- Teleservice and virtual office support all PHP operations. A home-based toxicology collection system resulted in improved participant satisfaction and decreased monitoring burden.

- A focus on financial impact by addressing participant financial aid program, deferred payment plans, and legislation related to surcharge increases. Future advocacy to focus on funding

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strategies to reduce or eliminate all fees associated with PHP services, eliminate out-of-pocket expense for specialized evaluation and treatment for PHP-involved health professionals, and mitigate the adverse impact of time out of practice.

Model Physician Health Program

- Voluntary
- Confidential
- Therapeutic
- Accountable
- Trusted
- Peer-based
- Expert
- Objective
- Comprehensive (not just SUD)*

*May be aspirational for some programs…

Physician Health Programs Serving Dentists

1. Arizona (2)
2. Arkansas
3. Connecticut
4. California
5. Delaware
6. Florida
7. Hawaii
8. Idaho
9. Illinois
10. Louisiana
11. Michigan
12. Minnesota
13. Missouri
14. Montana
15. Nevada
16. New Hampshire
17. New Jersey
18. New Mexico
19. Ohio
20. Oklahoma
21. Oregon
22. Pennsylvania
23. Rhode Island
24. South Carolina
25. Utah
26. Virginia
27. Washington
28. Wyoming

Federation of State Physician Health Programs

- 316 Members
- 50 State Physician (Professional) Health Program Voting Members
  - In development:
  - - Nebraska, Wisconsin
  - Non-Member PHP: Maine
- 168 Associate PHP Members
- 17 Canadian Members
- 81 Members of various member types

FSPHP Mission

To support physician health programs in improving the health of medical professionals, thereby contributing to quality patient care.

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Building the Connective Tissue:
FSPHP Strategic Partnerships

- Strengthening confidential participation in PHPs; special confidentiality protections for program records (legislative action)
- Licensure and credentialing question reform
- Ensuring and maintaining PHP as an exception to mandated reporting
- Support sufficiently funded, model state PHP in every US/territory regulatory jurisdiction
- Remove cost/practice barriers
  - Weinhouse S, Merlo LJ, Bundy CC, et al. Barriers to recovery for medical professionals: Assessing financial support through a survey of Physician Health Programs. *Am J Addict. Mar 8*

Our Partners:

AMA
AOA
FSMB
ABMS
MPLA
ACGME
AAMC
APA
ASAM
ACP
Lorna Breen Foundation

ADA

And more!

ALIGNMENT OF EFFORTS WITH THE NAM NATIONAL PLAN FOR HEALTH WORKFORCE WELL-BEING AND LESSONS LEARNED

Dr. Hengerer:

1. Encourage leadership to foster a culture of well-being that is integrated into program operations, HR management, services and curricula.

- Instill approaches to decrease stress and burnout in the above listed areas.
- Build programs for coping and resilience skills.
- Set reasonable productivity expectations and provide resources to support those expectations.
- Transparency and honest communication are essential.
- Establish wellness as a priority and lead culture change.

2. Measure the stress levels in the environment.

- Carry out surveys and repeat as institute culture change.
- Listen to the stakeholders and communicate intentions.
- Support mental health services and reduce stigma.
- Confidential mental health services with insured coverage.
- Dental professionals need to recognize their own stress, burnout and mental health issues and feel safe to seek care without stigma or risk to their livelihood. This requires assessing and altering barriers by regulators and leadership organizations.

3. Recruit and retain diverse and inclusive workforce.

- Develop pathways and pipeline programs and partnerships.
- Provide debt relief opportunities.
- Create job sharing and flexibility and childcare options.
- Create incentives and continuing education opportunities for advancement and improved patient care.

AMERICAN MEDICAL ASSOCIATION'S KEY LESSONS LEARNED TO REDUCE STIGMA AND PHYSICIANS' BARRIERS TO RECEIVING CARE

Mr. Blaney-Koen:

- Words do matter; having a hard target such as auditing the language on licensure (initial and renewal) applications, credentialing forms and peer review reference forms is important.

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  - Collaboration between organized medicine and medical boards is vital.
  - Information collection is a first step for organized dentistry to know what questions dentists are asked on their initial and renewal licensure applications, credentialing forms, and peer review reference forms.
  - Physicians should be able to confide in each other if they need mental, physical or behavioral health help.

- Through their work with the FSMB and the Dr. Lorna Breen Heroes' Foundation, the AMA has helped normalize conversations around provider health and well-being, focusing only on current impairment versus a past diagnosis or treatment. The AMA has been relentless in their advocacy and communications so that clear messages are delivered frequently and consistently and that any myths about what is required on a licensing or credentialing application is addressed. Asking a provider if they have ever had a mental health issue or substance use disorder is inappropriate.

THE JOINT COMMISSION'S RELATIONSHIP WITH DENTAL PROFESSIONALS

Ms. Spates:

- The Joint Commission was jointly founded in 1951 by the American College of Surgeons, American College of Physicians, American Medical Association, American Dental Association, and the American Hospital Association.

- In 2020 and 2021, The Joint Commission released statements debunking myths related to credentialing requirements and asking health care professionals about any past history of mental illness or substance use disorder. The 2021 statement can be found at 03312021-removing-barriers-to-mental-health-treatment-statement.pdf (jointcommission.org).

- The Joint Commission also has important programs that support clinician well-being. Resources related to clinician well-being can be found at https://www.jointcommission.org/resources/patient-safety-topics/healthcare-workforce-safety-and-well-being/. Resources on workplace violence prevention can be found at https://www.jointcommission.org/resources/patient-safety-topics/workplace-violence-prevention/.

THE HISTORY AND PROGRESS OF THE FEDERATION OF STATE MEDICAL BOARDS' (FSMB) WORKGROUP ON PHYSICIAN WELLNESS AND BURNOUT, A TIERED APPROACH TO LICENSURE QUESTIONS, AND THE IMPORTANCE OF EFFECTIVE COMMUNICATIONS

Mr. Staz:

- FSMB has been inclusive from the beginning of their work that led to a policy adopted in 2018. They developed a new model of committee deliberation to achieve the goal of inclusivity by inviting different stakeholders, experts and partner organizations that have a nexus to the issue of physician well-being or burnout and asked them two questions: 1) what are you doing in this space that we could learn from? and 2) what would you recommend that FSMB do?

- FSMB's journey since 2018 has been a long one and progress has been slow at times. They consistently provide information to state medical boards about the value of physician well-being and how it relates to their missions to protect the public. They created educational sessions online and at their Annual Meetings and have sent reminders of their policy recommendations to state medical boards. Many state medical boards approached FSMB requesting information, presentations at board meetings about how to achieve meaningful licensing application reform.

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- When FSMB had Mr. Corey Feist, the Dr. Lorna Breen Heroes' Foundation's Board President and Co-Founder as a speaker at their 2022 Annual Meeting, the pace of change began to accelerate rapidly because of the Corey's perspective and the Foundation named in memory of his sister in-law.

- FSMB learned that a one-size-fits-all solution would not be possible for all 70 of their member state medical boards. Boards have varying degrees of autonomy and different legislative structures and may also have members who are reluctant to adopt one approach at the expense of another that they feel holds promise.

- FSMB suggests a tiered approach which includes three different approaches, each with its own benefits in terms of removal of barriers to treatment seeking:

  - The first tier is to use the FSMB's model language: *"Are you currently suffering from any condition for which you are not being appropriately treated that impairs your judgment or that would otherwise adversely affect your ability to practice medicine in a competent, ethical and professional manner? (Yes/No)"*

  - The second tier would be to remove the questions altogether.

  - The third tier would be to use an "attestation" model, such as the one implemented by the North Carolina Medical Board (see below).

Attestation - North Carolina Medical Board

"Important: The Board recognizes that licensees encounter health conditions, including those involving mental health and substance use disorders, just as their patients and other health care providers do. The Board expects its licensees to address their health concerns and ensure patient safety. Options include seeking medical care, self-limiting the licensee's medical practice, and anonymously self-referring to the NC Physicians Health Program (www.ncphp.org), a physician advocacy organization dedicated to improving the health and wellness of medical professionals in a confidential manner. ***The failure to adequately address a health condition, where the licensee is unable to practice medicine within reasonable skill and safety to patients, can result in the Board taking action against the license to practice medicine."***

- FSMB shares language from licensing applications that they find holds promise for encouraging treatment and reducing stigma. FSMB feels the attestation model is a great example of this in that it does not require licensees to divulge any information about health conditions or previous treatment, but still raises the issue of safeguarding one's health as a professional expectation, thereby initiating (or continuing) the conversation and reducing stigma.

Third Panel Presentation Highlights

STATE DENTAL ORGANIZATION SUCCESS STORIES: MINNESOTA, NORTH CAROLINA AND SOUTH DAKOTA

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Ms. Anderson:

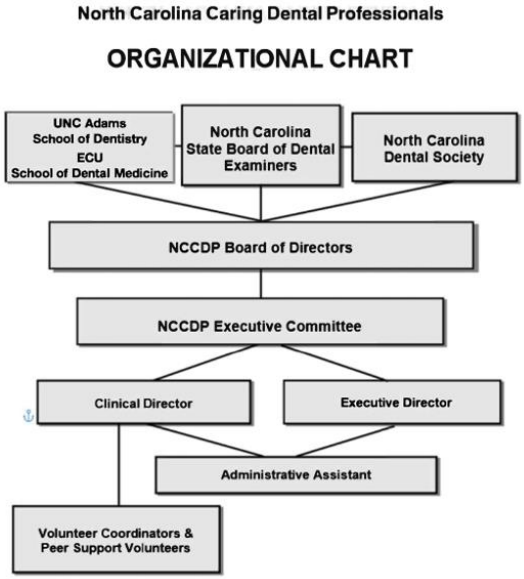
- The Minnesota Board of Dentistry has changed disclosure language related to substance use and mental health on dentist licensure applications and renewals. The questions reflect mandatory reporting requirements in statute. Diversion reporting and referral can come through the Board of Dentistry and are also accepted as confidential self-referrals, but not accepted as anonymous ones.

- The Board of Dentistry works collaboratively with other Minnesota dental and health care organizations including the state dental association and the Minnesota Health Professional Services Program (which provides confidential services to dentists) to address stigma, identify illness earlier, promote health and wellness, offer a non-punitive form of accountability that is confidential, and protects the health and safety of the public.

- Between July 2018 and June 2023, HPSP program participants from the Minnesota Board of Dentistry had a 65% success rate compared to 54% for other health care professionals during that same time frame.

Dr. Claytor:

This organization chart summarizes the North Carolina Caring Dental Professionals (NCCDP):



- Funding is supported by state statute which authorizes licensure fee collection. The State Auditor can conduct a performance audit to ensure that “due process rights are protected” under the law and are followed by the NCCDP. The anonymity of those who self-refer is protected, and those who are referred by the state board preserve their relationship with the board.

- The tripartite format maintains an important separation of powers, with biannual NCCDP Board of Directors Meetings. NCCDP Executive Committee manages daily operations.

- Ability to provide no-interest loans to NCCDP participants stems from state and dental community fundraising, such as the notable Jake Thorpe Fund and the NC Community Foundation.

- The most crucial relationships are with volunteers, in particular the peer support volunteers (PSVs). Both the quarterly regional meeting and the Annual Fall NCCDP Jake Thorpe Conference bring a sense of community as participants (including vendors, PSVs, spouses) build

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relationships and maintain contact. NCCDP starts educating future colleagues and team members by connecting at dental schools and dental hygiene schools. Education is offered from area health education centers and study clubs to the annual NC Dental Society meetings.

Ms. Wolf:

- After the suicide of a South Dakota dentist, the South Dakota Dental Association (SDDA) realized the need for mental health support for dentists and invested in the Be Well Program. This led to a three-way partnership to sponsor the program, organized through SDDA and sponsored by the SDDA, The South Dakota Board of Dentistry, and the South Dakota Dental Foundation.

Components of the SDDA Be Well Program:

- 3 Free Counseling/Coaching Sessions
- ALL Dentists and their Team Members
- Utilized for personal or professional issues
- On-site Well-being Workshops, Webinars
    - Survey data to create topics/programs
- Be Well Program Committee
- Awareness Campaign: Newsletters, Facebook
- Be Well Track at Annual Conference

Wellness Ambassador Presentations

The following ADA Wellness Ambassadors presented the projects they accomplished during their onboarding year (2022-2023):

Dr. Karen Foster (CO) served as a panelist on an ADHA/ADA webinar in 2022 titled “Mental Health in Dental Professionals: The Pandemic & Beyond”. She introduced the ADA and her fellow ambassadors to the American Foundation for Suicide Prevention (AFSP) and their “Talk Saves Lives” presentation, and led the ADA and AFSP in a collaborative effort to develop a new resource titled *After a Suicide Postvention Toolkit,* which is available to all dental professionals at https://www.ada.org/resources/practice/wellness/mental-health. Additionally, Doctor Foster published an article in the *Journal of the American Dental Association* titled “The Ethics of the unexpected loss of a practitioner”, available at https://jada.ada.org/article/S0002-8177(23)00106-X/fulltext.

Dr. Julie Spaniel (OR) developed and successfully appealed for funding for the Oregon Wellness Program, including the origination of peer-to-peer Wellness Ambassadors. She assisted neighboring states by modeling the Oregon program for them. She has worked to remove intrusive mental health and substance use related questions from licensure and credentialing applications in her state and is dedicated to creating awareness by normalizing the conversation around mental health.

Dr. Joel Collins (GA) spoke about the importance of small groups and discussed his projects helping dental students become more aware of their health and wellness.

Dr. David Lesansky (NC) shared a video with Summit attendees highlighting why he agreed to serve as an ADA Wellness Ambassador and how important it is for dental professionals to support and help each other with honest conversations about health and well-being, including mental health.

Anne Morrison (NE), president of the Alliance of the ADA, focused on mental health and wellness related education for Alliance members, and on connecting and sharing resources with dentist members from the states in ADA Trustee District 10 and their state Executive Directors.

Dr. Cathy Hung (NJ) encouraged the second group of ambassadors to focus on their “why” when determining their projects and to identify efforts that align with their strengths. Her projects allowed her to

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interview dental leaders and publish those articles in ADA channels, including the New Dentist Now blog, as well as in the New Jersey Dental Association (NJDA) e-newsletter, the AAOMS Today publication with a two-part article on burnout and stress, the ADA Sound Bites podcast, and her local component society (Mercer Dental Society) newsletter. NJDA's wellness resources are available at https://www.njda.org/member-resources/wellness-resources.

Dr. William Hammel's III (IL) whose work centered on delivering presentations to the three dental schools in Illinois about substance use disorder awareness and prevention. He shared his story of recovery and also wrote articles that were published in the Illinois State Dental Society magazine. Additionally, Dr. Hammel is the co-chair of the ISDS Dentists Support Program and a leader on the National Council of Dentist Health Programs.

Doctor Amisha Singh (CO) used a video to highlight her projects which centered on her "why" to serve as an ambassador to support dental students as a full-time faculty member. Her projects included a presentation to the Virginia Dental Association on Health and Wellness on the fourth leg of the Quadruple Aim, as well as two articles in the Metro Denver Dental Society magazine, one of which has also been published in other channels. Doctor Singh incorporated wellness into the 2023 orientation University of Colorado Anschutz School of Dental Medicine for D1s. Doctor Singh and colleagues just published a manuscript in the *Journal of Dental Education* titled "Are we well? A post-pandemic snapshot of dental educator wellness, well-being, and fulfillment" which can be found at https://onlinelibrary.wiley.com/doi/10.1002/jdd.13346.

Summit attendees were also able to watch two mental health videos developed by the Michigan Dental Association in 2023 for Mental Health Awareness Month (May), which can be found at:

https://youtu.be/81GxTXZ3jRc?si=EnytJ9TTVLgaOfPF and
https://youtu.be/_EtHDor0YWA?si=GYxZ1wJ3tg51gra9.

Participant Table Discussion Results

Of the 108 Summit attendees, 97 provided the following responses to a survey developed by DWAC.

100% of attendees believe that there are dentists who are currently struggling with physical and/or mental health challenges who are not getting help.

79% of attendees believe that the majority of these dentists **do not** know how or where to seek help, or that they are hesitant or afraid to ask for help.

100% believe that dentists should be looking to their associations for assistance in finding help.

97% believe that all levels of the tripartite (ADA, State, Local) have a role to play in helping dentists address physical and mental health challenges and in maintaining wellness.

49% feel that State and Local association leaders and staff are receptive to developing new wellness programs or enhancing existing programs to address the concerns of dentists at various ages and stages of their career.

90% know of someone who has struggled or is currently struggling with a physical and/or mental health challenge.

63% know of a dental professional who has died by suicide.

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Appendix 1 – ADA Health and Well-Being Summit Agenda

ADA HEALTH AND WELL-BEING SUMMIT

FRIDAY, SEPTEMBER 8, 2023 • CHICAGO, IL

ADA

AGENDA

8 a.m.	**Breakfast**	
8:30 – 8:45 a.m.	**Welcome and Introductory Remarks and Recognition**	*Dr. Linda Edgar, president-elect, ADA* *Dr. Manny Chopra, chair, Council on Dental Practice (CDP)*
8:45 – 8:50 a.m.	**Wellness Ambassador Video**	*Wellness Ambassadors Group 1*
8:50 – 8:55 a.m.	**Overview of Summit Attendees**	*Dr. Kami Dornfeld, chair, Dental Team Wellness Advisory Committee (DWAC)*
9 – 9:55 a.m.	**First Panel Presentation**	*Dr. Brett Kessler, Trustee 14th District, ADA Representative on the National Academy of Medicine (NAM) Action Collaborative on Clinician Well-Being and Resilience* *Dr. Robert McNeill, Wellness Key Opinion Leader* *Dr. Alan Budd, Director, Dentists Concerned for Dentists of MA and National Council of Dentist Health Programs*
10 – 11 a.m.	**Second Panel Presentation – Highlights from the Physician Model**	*Dr. Chris Bundy, Executive Medical Director of the Washington Physicians Health Program (WPHP) and Past President of the Federation of State Physician Health Programs (FSPHP)* *Dr. Art Hengerer, Former Chair of the Board, Federation of State Medical Boards (FSMB), FSMB Representative on the NAM Action Collaborative on Clinician Well-Being and Resilience, Board Member, FSPHP* *Daniel Blaney-Koen, JD, Senior Attorney, American Medical Association* *Kathryn E. Spates, JD, ACNP-BC, Executive Vice President, Public Policy and Government Relations, The Joint Commission* *Mark Staz, MA, Vice President, Education, Federation of State Medical Boards*
11 – 11:15 a.m.	**Break**	
11:15 – 11:45 a.m.	**Wellness Ambassador Presentations**	*Four ADA Wellness Ambassadors (Group 1) share 5-minute overviews of their projects* *Michigan Dental Association mental health videos (7 minutes)*
11:45 a.m. – 12:15 p.m.	**ADA Wellness Strategy & Coalition Building – Facilitated Discussion with All Attendees**	*Dr. Kami Dornfeld, chair, DWAC*
12:15 – 12:45 p.m.	**Lunch/Networking**	
12:45 – 1:15 p.m.	**Wellness Ambassador Presentations**	*Four ADA Wellness Ambassadors (Group 1) share 5-minute overviews of their projects*
1:15 – 2 p.m.	**Third Panel Presentation – Spotlight on State Well-Being Priorities/Success Stories**	*Bridgett Anderson, LDA, MBA, Executive Director, Minnesota Board of Dentistry* *Dr. Bill Claytor, Executive Director, North Carolina Caring Dental Professionals* *Mary Wolf, MS, LPC-MH, BCC, President, Veritee Partners, LLC, on behalf of the South Dakota Dental Association's Be Well Program*
2 – 2:30 p.m.	**Facilitated Discussion with All Attendees**	*Goal: Protecting Health – Saving Lives*
2:30 – 3 p.m.	**Closing Remarks and Recognition**	*Dr. Kami Dornfeld, chair, DWAC*

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Appendix 2 – Wellness Resources Flyer (September 2023)

ADA®

WELLNESS RESOURCES FROM THE COUNCIL ON DENTAL PRACTICE

Explore **ADA.org/Wellness** for articles, courses, videos and other resources across these health and well-being areas: mental health, physical health, opioid prescribing, and pregnancy.

Managing the Big Three: Burnout, Anxiety, Depression

ADA.org/WellnessPanel

Friday, October 6, 2023 • SmileCon Orlando, Dental Central, Wellness Hub

In this session, moderated by Dr. Jarod Johnson, the New Dentist Committee District 10 representative and mental health advocate, a panel of dentists will share experiences with depression, anxiety and other mental health challenges as well as ways to support one another during tough times.

ADA Dentist Well-Being Program Directory *(updated in 2023)*

ADA.org/WellnessDirectory

This Well-Being Program Directory provides a list of healthcare professionals in each state who will serve as a point of contact and offer support during a time of need. This is part of the ADA mission to enhance the personal and professional lives of our members for the betterment of the dental team and the patients they serve.

After a Suicide Postvention Toolkit

ADA.org/Postvention

September is national suicide prevention awareness month. *After a Suicide: A Guide for Dental Workplaces* was developed in 2023 by the American Foundation for Suicide Prevention (AFSP) and the American Dental Association (ADA). This resource reflects learnings in responding to a suicide death for professional dental settings.

ADA Ergonomic Stretches

ADA.org/Stretch

Better ergonomics can improve your practice — daily stretching and exercise, can help dental practitioners and their team enjoy long, healthy careers. Download the ADA Ergonomics Stretches infographic today, including 25 quick stretches, to keep you and your dental team healthy.

ADA Wellness Videos

ADA.org/WellnessVideos

Visit ADA's Wellness Playlist on our YouTube channel to watch new, short promotional videos on:

- ADA Dentist Well-Being Program Directory
- 2-part Resilience Webinar courses in ADA CE Online
- ADA Opioid Prescribing Resources

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