Re-emergence
A Report on Pediatric Dental Practice Re-entry into Practice During the COVID-19 Pandemic
INTRODUCTION AND BACKGROUND. Developing out of Wuhan, China, and setting an unprecedented course across the globe, the SARS-CoV-2 outbreak hit the United States with the unpredictability of a novel virus\textsuperscript{1,2}. Social and physical distancing/“stay-at-home” measures were determined to be the premier method of prevention in communities when the pandemic was largely uncontrolled in the early spring of 2020, necessitating the closures of schools, businesses, places of worship, parks and more\textsuperscript{2,3}. Dental practices were not spared of these effects; they were mandated to triage and remain closed to routine services until information about virus transmission in the dental practice was better understood\textsuperscript{4,5,6}.

On March 16, the American Dental Association (ADA) recommended that practices postpone all but urgent and emergency appointments for three weeks\textsuperscript{5}. By April 1, the recommendations were extended through the entire month\textsuperscript{5}. Depending upon location and state/local regulations, practices re-opened in late April – early May 2020\textsuperscript{7}. During re-opening, the pediatric dental community was compelled to act creatively, compassionately and wisely. Practices featured universal precautions with enhanced infection control based on the emerging evidence and recommendations\textsuperscript{8} and new approaches to seeing patients such as teledentistry\textsuperscript{9,10,11}. The American Academy of Pediatric Dentistry (AAPD) recognized the need for guidance to members returning to practice. On April 28, 2020, the AAPD issued “Re-emergence Pediatric Dentistry Practice Checklist: A guide for re-entry into practice for pediatric dentists during the COVID-19 pandemic”\textsuperscript{12} to serve as a roadmap to providing a safe environment for patients, dental staff and dentists during a time when knowledge of the virus was evolving, and the risk of transmission in the dental setting was still uncertain.

AAPD SURVEY. In keeping with the AAPD philosophy of research and assessment, and to augment existing re-emergence data with the pediatric dentist experience, the AAPD Policy Center developed a survey on key issues affecting pediatric dental practices as they began opening their doors. Between June 2 and July 1, the AAPD State Public Policy Advocate (PPA) Network was recruited to participate. The AAPD received 45 responses, representing 90 percent of U.S. states. The results yielded valuable tips on the effective strategies in resuming care during the pandemic. Other results revealed that the mental well-being of dentists was considerably impacted by the pandemic at the time the survey was administered.
KEY HIGHLIGHTS. As of April 1, 83 percent of pediatric practices were seeing patients for emergencies only, 16 percent were closed to all patients, and one percent were open for routine care. According to the AAPD survey to state PPAs, as of July 1, 80 percent of respondents reported practices allowed full operation.

**State Access to Dental Services During the COVID-19 Pandemic (04/01/2020)**
- Open for routine services: 1%
- Closed to all patients: 16%
- Open to patients needing emergency care only: 83%

**State Access to Dental Services During the COVID-19 Pandemic (07/01/2020)**
- State does not allow full range of dental services: 20%
- State allows full range of dental services: 80%

**Source:** ADA HPI COVID-19 Economic Impact on Dental Practices Weekly Report  
**Source:** AAPD Re-entry to Practice Survey

**BENEFICIAL APPROACHES TO PRACTICE DURING THE COVID-19 PANDEMIC.** Two approaches were reported as most beneficial to reopening dental practice:

- Making recommended procedure and physical modifications was most beneficial to 51 percent of respondents.
- Motivating and caring for staff was most beneficial to 38 percent of respondents.

**Reporting the top one or two most valuable practices during re-entry into practice during COVID-19 Pandemic**

**Source:** AAPD Re-entry to Practice Survey
Which steps have been most effective getting practices going again?

- Use of 6” buttons with image of staff member so kids could see who was behind the PPE and reopening videos for kids.
- Being up front with families about the physical changes and PPE has helped to grasp the gravity of COVID-19.
- Communication of safety efforts.
- Ensuring supply chain PPE/supplies; working with government relations lobby firm, state health officer, dental board.
- Posting in social media.
- Reading CDC guidelines, state health department guidelines, and the referenced source material.
- Return to work guidelines, team meetings.
- Teledentistry has been helpful. Patient needs are addressed via a telephone consultation rather than in person.
- Use of Facebook by practices.
- Videos and examples of what to expect; what we look like in the PPE; the AAPD checklist and ADA toolkit.

**MONITORING TRANSMISSION OF COVID-19 IN DENTAL OFFICES.** As of July 1, nine percent of state PPAs reported that they had heard of a transmission of COVID-19 within a dental practice. Monitoring of transmission in dental practices varied across states.

**Is there any monitoring of patient or dental personnel in your state being conducted?**

- Only personnel are being monitored 2%
- Only patients are being monitored 7%
- Both patients and personnel are being monitored 22%
- No monitoring 40%
- Don’t know if there is monitoring 29%

*Source: AAPD Re-entry to Practice Survey*
PERSONAL PROTECTIVE EQUIPMENT (PPE). PPE emerged as a major issue for the majority of practices. 96 percent of states reported PPE shortage issues, specifically that they did not have enough N95/respirator masks to wear one per patient.

RECOGNIZING THE SIGNIFICANT NEED FOR PPE, THE AAPD IN PARTNERSHIP WITH THE AAPD FOUNDATION COMMITTED TO PROCURING PPE ON BEHALF OF MEMBERS.

Do you have enough N95/respirator masks to wear one per patient?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>9%</td>
<td>91%</td>
</tr>
</tbody>
</table>

Source: AAPD Re-entry to Practice Survey

“The AAPD Foundation allocated up to $1.6 million to offer all AAPD members one 50 count box supply of KN95 masks at no charge, in a joint collaboration between the American Academy of Pediatric Dentistry and the AAPD Foundation. More than 5,200 orders were received between August and September.”

PATIENT VOLUME BEFORE AND AFTER OFFICE CLOSURES

Comparison of latest total patient volume compared to pre-COVID volume

<table>
<thead>
<tr>
<th>Date</th>
<th>25-50% of pre-pandemic volume</th>
<th>51-75% of pre-pandemic volume</th>
<th>76% or more of pre-pandemic volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/21</td>
<td>4%</td>
<td>17%</td>
<td>77%</td>
</tr>
<tr>
<td>7/1</td>
<td>27%</td>
<td>29%</td>
<td>33%</td>
</tr>
</tbody>
</table>

Source: AAPD Re-entry to Practice Survey, ADA HPI COVID-19 Economic Impact on Dental Practices Weekly Report

FINDINGS OF MENTAL WELLBEING. THE AAPD FOUND THAT 78 PERCENT OF PPAS WERE AWARE OF COLLEAGUES IN PEDIATRIC DENTISTRY WHO EXPERIENCED SIGNIFICANT STRESS DUE TO THE PANDEMIC AND 36 PERCENT REPORTED THEY HAD GONE THROUGH SIGNIFICANT WORRY AND STRESS BECAUSE OF THE EFFECT ON THEMSELVES AND THEIR PRACTICE.

- On Aug. 26, the AAPD convened a town hall to address mental health in the member community featuring Pedo Teeth Talk host, Dr. Joel Berg; AAPD President, Dr. Jessica Lee; and guest, Dr. Sheela Raja, Licensed Clinical Psychologist, Author and Associate Professor and Director of Clinical Behavioral Sciences at the University of Illinois at Chicago College of Dentistry.
- Based on the positive feedback, the AAPD has committed to continued mental health support of its members through future programming and work within the Safety Committee.
MOVING FORWARD FOR PEDIATRIC DENTISTRY. An evaluation of how the COVID-19 crisis has affected the pediatric dental community has shown it was critical to be open to care for their patients in need. Oral health care is a medical necessity and has been found to be safe for patients during the COVID-19 pandemic14,15.

PREPARING FOR THE NEXT DISASTER. Hurricanes, floods and forest fires converged in the U.S. during the Pandemic of 202016, making clear that future events will require a process-oriented disaster plan to help guide members in mitigating a range of emergency situations as they come up. Members can expect to hear more about dental preparedness planning in the months to come.

ONGOING MEMBER OUTREACH. A second member survey will be distributed once a vaccine is available, or if there is another major status change during the COVID-19 pandemic.

INTERIM RECOMMENDATIONS. To stay up-to-date on the latest COVID-19 information for dentistry, members can follow the regularly updated Re-emergence Pediatric Dentistry Practice Checklist. The AAPD also recommends the following:

1. Acting in accordance with the advice of state and U.S. professional organizations, and
2. Tracking general dental practices through the ADA HPI weekly survey on the COVID-19 economic impact on dental practice.

The AAPD is encouraged by the return to routine care by many of our members, the collaboration of members during the pandemic, and the progress that has been made by state Public Policy Advocates as we faced a very difficult situation. Everyone, keep safe and well, until next time!
REFERENCES


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AAPD Pediatric Oral Health Research & Policy Center Publications

July 2020
Treating Tooth Decay: How to Make the Best Restorative Choices for Children’s Health

September 2019
The Importance of the Age One Visit

March 2019
The State of Little Teeth, Second Edition

September 2017
Are Your Kids Covered? Medicaid Coverage for Essential Oral Health Benefits

May 2017
Pediatric Dentist Toolkit for Seeing Patients with Medicaid

May 2016
Competition or Collaboration: Exploring the Relationship between Corporate Dentistry and Dental Training Programs

February 2015
Unique Considerations for Medicaid Audits of Pediatric Dental Practices

https://www.aapd.org/research/policy-center/technical-briefs/