2004 Dental Officer Retention Survey Results

There were 471 responses returned out of a possible 972 with a distribution of rank similar to the actual inventory of the Dental Corps.

Surveys were returned by email, fax, and first class mail. All emails were printed and delivered to a separate office for input into a database for analysis. The comments were read after being separated from the original email. No attempt was made to identify individual respondents.

In looking at the data some responses stood out:

- 48% of CPT’s and 32% of MAJ’s responding do not plan to stay to retirement.
- 51% of all respondents said $30-40K would change their mind about getting out.
- 18% said a lesser amount ($10-30K) would change their mind.
- Average school debt for CPT’s: $56,500 (range 0-250K).

Important factors that influenced officers to leave the Dental Corps did not vary much between junior and senior officers.

- For junior officers (<10 yrs. AD):
  - Pay
  - Deployment
  - Frequency of moves

- For senior officers:
  - Frequency of moves (PCS)
  - Deployment
  - Pay

Important factors that influenced officers to stay in the Dental Corps did not vary much either.

- For junior officers:
  - Specialty training
  - Patriotism
  - Professional development

- For senior officers:
  - Patriotism
  - Professional satisfaction
  - Professional development

The 63A/B one-year rotation policy for OIF/OEF deployment was a strong detractor for all ranks. This influenced junior officers to separate from the military as soon as possible after completing their current obligation. There is a perception by junior officers that the deployment burden is not being
fairly shared and that some officers were repeating deployments while others never deploy. Senior dental officers indicated that they would retire earlier than expected when considering the prospect of being deployed.

Many junior officers indicated that they did not feel appreciated or respected. A few examples given were: the need to obtain a quarters slip to take a sick day, tight pass policies, and the elimination of flex-time. Some senior officers indicated that being in the Dental Corps was as not as “fun” as it used to be. All officers desired more assignment stability with fewer, more predictable PCS moves. Time away from the chair while assigned to field units and being limited to “class 3” dentistry when in the clinic were detractors for many junior officers.

All officers enjoyed the camaraderie and collaborative group practice model the Dental Corps offers. Many commented that while money was important, intangibles are very important in recruiting and retaining the best officers. Patriotism was a strong driver for entering the military as well as for remaining on active duty. Travel opportunities and overseas living were also popular reasons to stay. Military training (airborne, air assault, special forces, etc.) did not influence whether officers remained in or left the military. Although not readily defined, military lifestyle was a positive aspect of a career that tended to retain people. Recognition for a job well done, positive mentorship, and the ability to receive more money for continuing education were mentioned as things that could be improved.

Although most officers felt the Army Dental Corps senior leadership is well aware of current issues, they acknowledged that many of the issues are beyond the control of the Dental Corps.

How is the Army Dental Corps Addressing These Issues?

Short term Goals:

Develop a transparent assignment process that equitably distributes the deployment load among all officers.

Mentor commanders and develop a “best practices” list from past commanders that have been successful (well regarded by those they commanded).

Improve information flow to include: quality, quantity, and timeliness of web sites.

Long term Goals:

Revise deployment tour lengths policy. Look to shorten deployment lengths and include additional AOCs. Requires HQDA approval.

Improve Dental Special Pays. Work through a Unified Legislation and Budgeting process to improve dental special pays, to include the development of dental Incentive Special Pay. Requires concurrences from Tri-Service Dental Corps, HQDA, DoD (Health Affairs), and Congress.

Develop Advanced Clinical Practice programs. Upon completion of one year of advanced clinical practice, officer would be eligible for 4 year DOMRB at level 3. If contract were executed prior to start of residency program, officer could receive this DOMRB during training and potentially during repayment of training ADSO.

Implement Tour Stabilization policy. As part of the Army Campaign Plan, the Army Dental Corps will develop and implement Tour Stabilization policy that could allow officers and families to remain on station for 3-5 years at a time. This includes changing command tour lengths to three years.
Survey Responses

Below in blue are the responses to the objective questions on the survey. The first number is the percent of respondents that answered the question. The percentage of respondents that gave a specific answer is given in blue. Some questions had a low response rate because they were not applicable to all officers.

Comments or questions can be directed to me at david.moss@us.army.mil or (703) 681-3031 (DSN 761-3031)

David Moss, LTC, DC
Office of The Surgeon General
1. Do you presently plan to complete 20 years of active duty service? (99% answered)
   1. Yes—36%
   2. No—20%
   3. Not sure—17%
   4. I have already completed 20 yrs. ---26%

2. If you are planning on leaving the Army before retirement will it be (estimate): (46% answered)
   1. Upon completion of my initial tour. ---8%
   2. If not on initial tour then after my current obligation. ---10%
   3. After specialty training and payback. ---12%
   4. Not sure. ---17%

3. If you have already completed 20 years of service, when are you planning to retire? ____ (21 yrs., 22, etc.) (31% answered) mean: 26 years.

4. Rate whether the following factors make you want to stay in the military or make you want to get out.

<table>
<thead>
<tr>
<th>Makes me want to stay (Circle your responses)</th>
<th>Stay</th>
<th>Go</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military lifestyle</td>
<td>100</td>
<td>35</td>
</tr>
<tr>
<td>Family acceptance</td>
<td>85</td>
<td>48</td>
</tr>
<tr>
<td>Pay</td>
<td>35</td>
<td>195</td>
</tr>
<tr>
<td>Professional development</td>
<td>185</td>
<td>8</td>
</tr>
<tr>
<td>Professional satisfaction (dentistry)</td>
<td>165</td>
<td>18</td>
</tr>
<tr>
<td>Residency/specialty training</td>
<td>213</td>
<td>10</td>
</tr>
<tr>
<td>Mentorship (quality of contemporaries and superiors)</td>
<td>157</td>
<td>5</td>
</tr>
<tr>
<td>Military duty assignments</td>
<td>73</td>
<td>63</td>
</tr>
<tr>
<td>Military training (airborne, air assault, special forces, etc.)</td>
<td>25</td>
<td>42</td>
</tr>
<tr>
<td>Sense of duty/patriotism</td>
<td>187</td>
<td>4</td>
</tr>
<tr>
<td>Esprit de Corps</td>
<td>112</td>
<td>20</td>
</tr>
<tr>
<td>Possibility of tactical deployment (war, peacekeeping, etc.)</td>
<td>20</td>
<td>151</td>
</tr>
<tr>
<td>Travel/living overseas</td>
<td>151</td>
<td>32</td>
</tr>
<tr>
<td>Frequency of moves (PCS)</td>
<td>12</td>
<td>142</td>
</tr>
<tr>
<td>Medical/Retirement benefits</td>
<td>160</td>
<td>15</td>
</tr>
</tbody>
</table>

5. If pay is a strong influential factor in your decision to leave the Army, how much would be needed to change your mind: (88% answered)
   1. $10-20,000 per year—3%
   2. $20-30,000 per year—17%
   3. $30-40,000 per year—54%
   4. Pay not influential—14%

6. Is (or was) obtaining specialty training a factor in your decision to stay on active duty? (100% answered)
   Yes—71%  No—18%  N/A—11%

7. Do you feel the availability of graduate education in the military is valuable to the Army in the recruitment of dental officers? (99% answered)
   Yes--5%  No—94%

8. Were you in private practice prior to entering the service? (98% answered)
   Yes—25%  No—73%

9. Estimate the amount of your dental school loan debt when you entered the Army.
   <10 yrs. on AD Mean debt: $57K
   >10 yrs. on AD Mean debt: $31K

10. Did you have any prior active duty, reserve, or national guard service prior to going to dental school? (99% answered)
    Yes—25%  No—74%

11. Did you apply to the Health Professions Scholarship Program (HPSP) while in dental school? (99% answered)
    Yes—34%  No—31%  not available—34%

12. Were you accepted to the HPSP?
    Yes, circle number of years: 1, 2, 3, 4  No

13. Is the HPSP a valuable tool for recruiting dental officers? (96% answered)
    Yes—94%  No—2%

14. Did you apply to the Health Professions Loan Repayment Program (HPLRP)? (98% answered)
    Yes—8%  No—42%  not available—48%
15. If you did not apply to the HPLRP was it because (circle one): (96% answered)
   1. I didn’t know about it —1%
   2. It was not available —51%
   3. Too great an active duty obligation —14%

16. Is the Health Professions Loan Repayment Program a valuable tool for recruiting dental officers? (92% answered)
   Yes —78% No —14%

17. Have you completed an “AEPGD-ONE YEAR”? (99% answered)
   Yes —46% No —53%

18. Is the “AEPGD-ONE YEAR” a valuable tool for recruiting dental officers? (95% answered)
   Yes —80% No —15%

19. Are you presently fulfilling an initial commitment in the Dental Corps? (99% answered)
   Yes —30% No —69%

20. Do you plan to stay in past your initial commitment?
   <=4 Yrs. AD —Yes —32% No —45% N/A —16%

21. If not, what are your reasons?

22. Have you ever “moonlighted” (practiced dentistry or hygiene in a civilian practice while on active duty)? (99% answered)
   Yes —16% No —83%

23. If yes, was this essential for income supplementation? (25% answered)
   Yes —13% No —12%

24. If married, is your spouse working (full or part-time)? (84% answered)
   Yes —42% No —42%

25. Is your spouse’s employment essential income supplementation? (70% answered)
   Yes —33% No —37%

26. Do you feel the senior leadership (Corps Chief, DENCOM, etc.) is aware of the issues raised here? (List issues in block 40.) (95% answered)
   Yes —75% No —20%

27. Do you feel the senior leadership is concerned about these issues? (Explain in block 40.) (94% answered)
   Yes —68% No —26%

28. Do you feel the senior leadership is taking action to address the issues raised in this survey? (Explain in block 40.) (88% answered)
   Yes —55% No —33%