

#### Contributing to your success

July 2012

# <u>e</u>update



## Get ahead in the world of online marketing

It's a jungle out there in the world of online marketing but we've spoken to an expert in his field to bring you the low down on writing a successful 'pay per click' campaign. Many thanks to Marcus from Dental Design for his insight and experience. Turn to pages 12 and 13 to find out more...

#### www.adam-aspire.co.uk

Inside this edition . . .

🔵 Read all about it



For all the latest news in the world of dentistry turn to pp.4-5

#### 🔵 In the hot seat



Practice manager Harley Foxley is the first in our hot seat. See more on p.7



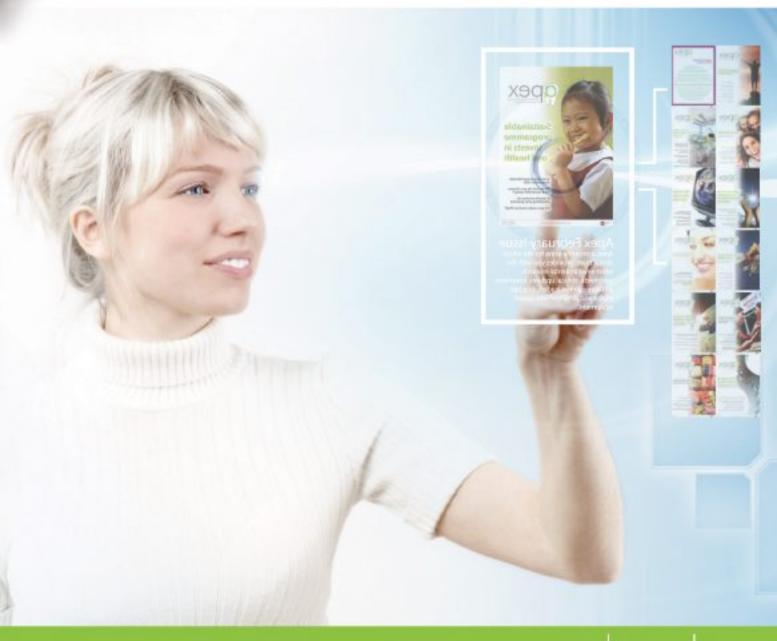


Create flexibility in your workplace. Read more on p.9



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## www.apexezine.com





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## **CPD activities' deadline is looming**

Your 1st

**CPD** cycle

start date

1-Aug-12

Your

cvcle

ends

31-Jul-17

31-Jul-16

31-Jul-15

31-Jul-14

31-Jul-13

DCPs registered with the GDC are being urged to declare their CPD activity by the 28 August 2012.

ews

form asking them to submit

the number of hours they have

completed. These have been sent

the register before 1 August 2011

to registered addresses. If you are a

dental care professional who joined

and you have not received this letter,

please log on to www.egdc-uk.org to

More than 41,500 DCPs are now

heading into their final year of a five

complete 150 hours by 31 July 2013

or risk losing their registration with

CPD, an activity must have: concise

year cycle. This means they must

Fifty of these hours must be

verifiable. To count as verifiable

the GDC.

complete your hours online and to

update your registered address.

Some 57,000 GDC registrants have been sent a declaration

educational aims and objectives, clear anticipated outcomes, quality controls, and documentary proof.

When did

On or after

1-Aug-2011

10 & 31-Jul-11

09 & 31-Jul-10

08 & 31-Jul-09

On or before

31-Jul-08

Between 1-Aug- 1-Aug-11

Between 1-Aug- 1-Aug-10

Between 1-Aug- 1-Aug-09

you register?

As a DCP your CPD cycle will start on 1 August after you register. You can work out your cycle dates using this table.

> At the end of a CPD cycle, the GDC may ask for documentary proof of the verifiable CPD completed and a log of general CPD hours, therefore please:

• Keep all documentary proof received for all verifiable CPD undertaken.

• Keep a written record of all CPD. A recording form can be downloaded from www.gdc-uk.org

• Keep CPD records for five years after the end of the cycle in which they were completed in case you are subject to audit.

Help can be found at www.gdc-uk. org or by calling 0845 222 4141.

## Book a space on our exclusive free webinars

1-Aug-08

We have teamed up with The Dentistry Business with the support of DPAS, to bring members exclusive accesd to three one and a half hour webinars to be broadcast in the autumn.

Aimed specifically at addressing our needs as practice managers, the series, entitled "Your role in running an effective and efficient practice", is designed to help all those with management responsibilities to implement practical strategies that will make practice life more rewarding.

The webinars, which will take place on the evenings of September 13th, October 11th and November 1st, will cover three specific topics in turn:

• Front desk and operational control will focus on the identification and measurement of key indicators and help managers understand why these metrics are now so important.

• *Effective team equals effective practice* offers practical tips on how to optimise staff meetings, how to make good recruitment decisions and how to use

appraisals effectively.

• Finally, *Attracting new patients and keeping those you have* will present ideas for new patient scripts, give tips on how to handle complaints and address the vital issue of how to retain patients through the current tough economic period.

The webinars will be presented by the partners of The Dentistry Business - Lester Ellman, Carl Parnell and Sim Goldblum. Lester and Carl are both highly respected practitioners with experience of both NHS and private practice and Sim is a business executive with extensive knowledge of business planning, marketing and finance. Between them, they have encountered every type of practice situation, making them uniquely qualified to help those with management responsibilities avoid the pitfalls encountered in running a modern dental practice.

• To reserve your free place at any or all of the webinars simply complete the online form available at www.thedentistrybusiness.com/adamwebinars or email sim@thedentistrybusiness.com

www.adam-aspire.co.uk





## Dentists 'must resist' PCT bullying

Dentists across England must resist the bullying tactics of Primary Care Trust dental commissioning staff, BDA General Dental Practice Committee (GDPC) Chair Dr John Milne has urged.

Speaking at the 2012 Conference of Local Dental Committees (LDCs), Dr Milne told delegates that he was appalled at suggestions that some PCTs were challenging perfectly acceptable treatment patterns in an attempt to claw back money, using a veiled threat that practitioners might be referred to the General Dental Council as a stick with which to beat them.

Dentists who find they face such threats, Dr Milne added, must report the situation to the BDA so that this unnecessarily aggressive stance can be resisted.

Dr Milne also, though, reiterated the responsibility that all dentists have to practise professionally and ethically, warning that the small numbers of practitioners who make inappropriate claims are creating problems for the vast majority of the profession that does the right thing.

Dr Milne said: "We have heard from practitioners working in a number of primary care trust areas that commissioning staff are adopting an unreasonable, bullying stance towards dentists with the motive of clawing back money. That is unfair, unhelpful and unacceptable.

"Dentists must not be cowed by such practices. The small number of inappropriate treatment claims that are submitted by practitioners absolutely must be tackled, but they must not be used as an excuse to persecute practitioners who are working professionally, ethically and appropriately.

"GDPC will not accept such actions by PCTs and I urge dentists to inform the BDA if this happens to them."

## Helping to bring communities together

Denplan offered its support to schools in both the UK and Uganda in June, by presenting the Ugandan High Commissioner with 15 laptop computers at Clanfield Junior School.

The Queen Elizabeth Country Park (QECP) has been 'twinned' with the Ugandan National Parks since 2008, a project which started as a way to exchange ideas and information on conservation as well as their local communities. Mark Saines, Volunteer Ranger at QECP, said: "The laptops donated by Denplan will be shipped to Uganda for distribution among its schools, and the children can use them to interact with schools here - so it's a really exciting project for people on both sides."

The laptop handover took place at Clanfield Junior School, where the Ugandan High Commissioner, Joan Rwabyomere, was delighted with songs and presentations from the children following their 'Africa Day'.

She said: "I hope all these children will one day visit the beautiful country that is Uganda and we appreciate all the support and friendship they have given us. I would also like to thank Denplan for donating these computers and encourage more schools and companies to get involved to share experiences and build friendships with the people of Uganda."

Headmaster at Clanfield, Mr Pickering, added: "The children here are really excited about being involved in the



(L-r) Stephen Marwick, Denplan IT Services Manager; Neil Warren, Denplan Head of Customer Services; Matthew Krebs, Denplan IT Associate Support Technician; Joan Rwabyomere, Ugandan High Commissioner and children from the Clanfield Junior School.

twinning project in Uganda and it's great for them to get first-hand knowledge of a completely different continent and culture, directly from the children living there. Children in the UK are really privileged, with easy access to technology and resources, so it's great for them to get a comparison and to realise that children from poorer parts of the world are just the same as them. We can't wait for the laptops to get to Uganda, so that we can start communicating and learning more about each other."



#### Training & development diary

- V	I i		
Date & location	Name of event & provider	Cost & notes	Contact details
September	ILM Level 5 Diploma in Leadership and	Call Penny Parry on 020	email penny@
London & Leeds	Management. UMD Professional Ltd	8255 2070 for fees	umdprofessional.co.uk
September	ILM Level 7 Diploma in Executive Management.	Call Penny Parry on 020	email penny@
London	UMD Professional Ltd	8255 2070 for fees	umdprofessional.co.uk
September	ILM Level 7 Award in Strategic Leadership	Call Penny Parry on 020	email penny@
London	UMD Professional Ltd	8255 2070 for fees	umdprofessional.co.uk
6 September	Maintaining motivation – practice staff training.	From £75 for Denplan members.	www.denplan.co.uk/event-
Newcastle	Denplan	£50 discount for non-members	sandtraining
7 September	Safeguarding Vulnerable Adults (am) and Safe-	£75 per module. Early bird	www.dentabyte.co.uk
London	guarding Children (pm). Dentabyte	offer	
7 September London	Medical emergencies for the whole dental team	£100 for practice managers	www.bda.org/training
13 September	Front desk and operational control. ADAM webinar from The Dentistry Business	FREE for ADAM members	www.thedentistrybusiness.com/
Your desk at 7.30pm		(sponsored by DPAS)	adamwebinars
13 September	CQC Essentials – giving you the know-how & confidence to meet CQC requirements. Denplan	From £75 for Denplan members.	www.denplan.co.uk/event-
Winchester		£50 discount for non-members	sandtraining
13 September	Maintaining motivation – practice staff training.	From £75 for Denplan members.	www.denplan.co.uk/event-
Cambridge	Denplan	£50 discount for non-members	sandtraining
20 September	The receptionist – day-to-day challenges.	From £75 for Denplan members.	www.denplan.co.uk/event-
Nottingham	Denplan	£50 discount for non-members	sandtraining
20 September	Managing team performance – business training.	From £75 for Denplan members.	www.denplan.co.uk/event-
High Wycombe	Denplan	£50 discount for non-members	sandtraining
21 September	Child protection: the dental team's responsibility.	£100 for practice	www.bda.org/training
London	BDA with Rosie Carter and Tim Newton	managers	
21 September Manchester	Reception and telephone skills for the whole dental team. BDA with Heather Dallas	£100 for practice managers	www.bda.org/training
22 September London	Advanced dental implant nursing. ADI	£95 ADI members, £140 non (membership is £37 p.a.)	www.adi.org.uk
27 September	Managing clinical success. Denplan	From £100 for Denplan mem-	www.denplan.co.uk/event-
Peterborough		bers. £50 disc for non-members	sandtraining
27 - 28 September London	The essentials of staff management: a two-day intensive course. BDA with Alison Miles-Jenkins	£200 for practice managers	www.bda.org/training
28 September	Working smarter - not harder. ADAM workshop with The Dental Business Academy	£75 for ADAM members,	Jan@
Manchester		£150 for non-members	thedentalbusinessacademy.co.uk
12 October	Effective team equals effective practice. ADAM webinar from The Dentistry Business	FREE for ADAM members	www.thedentistrybusiness.com/
Your desk at 7.30pm		(sponsored by DPAS)	adamwebinars
12 October Glasgow	Reception and telephone skills for the whole dental team. BDA	£100 for practice managers	www.bda.org/training
1 November	Attracting new patients & keeping those you have.	FREE for ADAM members	www.thedentistrybusiness.com/
Your desk at 7.30pm	ADAM webinar from The Dentistry Business	(sponsored by DPAS)	adamwebinars
9 November	Business planning and financial management.	£100 for practice	www.bda.org/training
York	BDA with Andy McDougall	managers	



## Free webinars!

July is here and for the time being at least it looks like we have some sunshine to enjoy! But whatever the weather, this edition of e update is certain to make you smile.

Plans are afoot for the ADAM conference in 2013, once details are finalised you will hear all about it but for now, please pencil in June 7 and 8, 2013. In the meantime, if you have any suggestions following on from our 2012 one, please let us know. At the 2013 conference Hannah will be stepping up as president. I'm sure you will want to join me in congratulating her on the birth of her son, Henry James who was born on July 19 weighing 8lb 5oz.

In this issue we have some great articles and exciting news. With our webinars fast approaching you still have time to book in for The Dentistry Business' webinars which we are able to bring to our members free of charge with help from our sponsors DPAS. The first webinar is *Front desk operational control* on Thursday 13th September at 7:30pm, Welcome to my regular column. Each month I hope to keep you informed about ADAM news and to talk about issues that affect, annoy and delight us as practice managers and administrators.

followed by *Effective team equals effective practice* on Thursday 11th October at 7:30pm, and finally *Attracting new patients and keeping those you have* on Thursday 1st November at 7:30pm. See the page opposite for booking details.

Column

More webinars to follow later this year with The Dental Business Academy. The topics for these will be based on feedback from previous ADAM webinars - info to come.

We are thoroughly delighted to have attracted 920 'likes' on our Facebook page. If you haven't liked our <u>Facebook page</u> yet - now is your chance to help us reach 1,000!

## Hot spot

Welcome to the first of a series of features focusing on YOU. Each month we will ask a practice manager, administrator or treatment co-ordinator various questions about themselves and their hobbies, as well as asking how they came to be doing their job. If you would like to feature in this section, please get in touch with Denise at the address at the top of this page. You can also nominate a colleague! We look forward to hearing from you.

*Name:* Harley Foxley *Age:* 45 *Town:* Southport *Hobbies:* Golf and Football *Job:* Practice manager

How I got my job: Recommendation by a mutual colleague How I ended up working in dentistry: Having been undecided about the career path I wanted to explore from finishing school, I saw an advert in the local paper for a dental surgery assistant and I decided my future lay in dentistry. That was 28 years ago!

What I enjoy most about my job: I enjoy all the various aspects of my job role, how two days are never the same. There are many skills I use on a daily basis that include being able to organise, motivate and multi task at different levels which I find a real challenge. I am fortunate to be part of a fantastic team who are a pleasure to work with every day, all striving to ensure the patient journey exceeds expectations. The most challenging part of my job is managing the changes required for compliance with latest government legislation, being up to date with prevailing dental care techniques/ standards and constantly striving to develop the practice. If I wasn't working in dentistry I would have been a police officer!



Practice Manager of the Year 2012

Pencil this date in your diary

Friday & Saturday 7 & 8 June 2013

Awards & Conference

Nicki Rowland

Proudly sponsored by



## Fancy this trophy on your desk in recognition of your hard work and commitment?

### Stay tuned for the launch of the 2013 ADAM Awards, proudly sponsored by Denplan

Association of Dental Administrators and Managers, 3 Kestrel Court, Waterwells Drive, Waterwells Business Park, Waterwells, Gloucester, GL2 2AT f. 01452 886 468 t. 01452 886 364 e. info@adam-aspire.co.uk w. www.adam-aspire.co.uk



<u>Feature</u>

## How flexible is your workplace?

How, when, and where work gets done is changing dramatically, and it's the organisations that are offering flexibility who are stealing a march on their competitors in the quest to attract and retain the best staff.

The idea of flexibility in the workplace conjures up a wide range of interpretations. Many managers and business owners see it as an end to the bad old days of people getting away with the minimum and the key to driving up profitability by getting people to do more for the same money. At the other end of the scale it can feel very threatening to give away control over when, and where, and especially, how, work is done.

Here's a quick checklist of the kind of things you might be asked to consider:

• Part-time working: work is generally considered part time when employers are contracted to work anything less than full-time hours.

- Term-time working: a worker remains on a permanent contract but can take paid/unpaid leave during school holidays.
- Job-sharing: a form of part-time working where two (or occasionally more) people share the responsibility for a job between them.
- Flexitime: allows employees to choose, within certain set limits, when to begin and end work.
- Compressed hours: compressed working weeks (or fortnights) don't necessarily involve a reduction in total hours or any extension in individual choice over which hours are worked. The central feature is reallocation of work into fewer and longer blocks during the week.
- Annual hours: the period within which full-time employees must work is defined over a whole year.
- Career breaks: or sabbaticals, are extended periods of leave normally unpaid of up to five years or more.

A wide range of factors is driving the demand for flexibility in the workplace, including its value as a recruitment and retention tool in a tight labour market, developments in technology that are extending the concept of workplace, and probably of most significance, employees looking for a better work-life balance. All of this backed up by new legislation that means that you can no longer dismiss reasonable requests out of hand.

#### Getting the balance right

Where implemented effectively, the approach is a fine balance



between the needs of the employer and the employee. The key is based on the principle that people are most effective and engaged when they have a high level of influence over how, when, and where their work gets done.

#### New measures

Lurking at the heart of the approach is 'trust' and an assumption that most people, left to their own devices, will do the right thing. This is probably true of course, but this idea is fundamentally flawed unless it is underpinned by an effective way of measuring performance and a shift to assessing people on their output (quality and quantity) rather than the time they spend at their workstation.

#### Creating a flexible workplace

So the sequence should probably be:

1. Trust. 2. Allow individuals scope for flexibility that fits in with business needs. 3. Measure output on a regular and consistent basis (performance management).

Sadly, all three are rarely found in abundance in today's workplaces, often replaced by:

1. Assume the worst. 2. Control and dictate how work should be done. 3. Measure how long people are at their desks.

How flexible is your approach and how does it work for you? Send your thoughts to denise@adam-aspire.co.uk

Richard Mander is a freelance HR consultant with over 20 years' experience in strategic and operational HR. He specialises in providing support to SMEs and aims to deliver cost effective, pragmatic and practical solutions. For more about this topic, or advice on other HR matters, contact Richard at www.manderhr.com 07715 326 568.



## **Converting to conversion**

Penny Duncan, practice manager at Regency Dental Practice in Swanage, discusses their conversion to private practice and overcoming the challenges it brought.

To say that our conversion to private practice was daunting is a huge understatement! We were the last of the NHS practices in our region, with around 5,000 NHS patients, so the news that we were moving into private dentistry was met with scepticism from the team.

The team was not keen about the idea and was concerned that patients would not be able to afford to pay privately, so although we understood that changes had to be made, we still weren't sure how our patients would cope.

However, our practice principal, Andrew Thomas, explained that we were no longer able to offer the best and most appropriate dental care for our patients under the current NHS contract. This, together with funding problems and ongoing issues with our PCT, made us all realise that something had to be done or we were at risk of having to close down altogether.

#### Initial training

Andrew was keen to offer dental payment plans with a recognisable and respected brand identity, so Denplan was the natural choice. Denplan organised a training day away from the practice. We got to ask all the questions we needed and the answers convinced us that offering private dentistry through a payment plan was the right approach.

Denplan helped us draft a patient letter explaining the changeover and, although we knew it wouldn't be seen as good news by all, the letter was so positive and explained the situation in such a way as to make the majority of our patients understand why the decision was made.

#### **Ongoing support**

We converted in the first few weeks after Christmas. It was a crazy time with many patients calling or dropping by. Not all of them were pleased about the news but our Denplan consultant, Sarah, was on hand every day for the



first few weeks to help us with queries and completing applications. Once patients knew more about the benefits of private dentistry and that it was far more affordable than they realised, the majority were actually very positive – 500 patients signed up in the first week!

We worked hard as a team to make the conversion a success. Sarah and the conversion team at Denplan were invaluable, and their positivity and drive made the whole process so much easier.

#### Next steps

We're a few months into our conversion and we've signed up over 1,500 patients to our plan, which is a phenomenal achievement. Our next step is to focus on diary management so we can offer longer appointments and ensure our patients receive the very best service and care.

I would say that converting to private practice is a difficult decision for any practice to make, but it's certainly worth talking to Denplan about the process before writing it off completely. The conversion process has been a huge upheaval and a lot of hard work but, ultimately, it has brought about a big change for the better.



#### Feature

## Please help us choose a new charity

As you know, for the last year we have been supporting the fantastic work of the Facial Surgery Research Foundation - Saving Faces.

Saving Faces is the only charity in the UK solely dedicated to the worldwide reduction of facial injuries and diseases. It is taking the lead in education and research to improve the physical and psychological treatment of all victims of oral cancer and other facial diseases.

The charity has also launched its fast-track diagnostic service that promises to dramatically improve the care of patients with suspected mouth cancer. For just £3 a week per dentist (or £9 per week for practices with three or more partners), the Saving Faces Diagnostic Advice Service (SFDADS) helps speed up the referral process and ensures referral to the most appropriate surgeons near to where the patient lives.

Participating dentists are given a password to upload patient details and electronic images of suspect lesions onto a secure system. Their patient is guaranteed to receive an urgent diagnostic service from a consultant oral and maxillofacial surgeon within three days, meaning the dentist can rapidly reassure those with benign disease within days of seeing them. Those with serious disease are immediately referred to surgeons with the appropriate expertise at their nearest hospital.

All money raised from subscriptions will fund research and, if given from a personal account, can be claimed back on tax. The dentist also transfers litigation risk to the OMF surgeon once the referral has been sent so there is never a risk of the dentist being sued by the patient. This is particularly important as a growing number of patients are taking legal action against dentists missing early cancers.

Each referral is evaluable for one hour's CPD and dentists and their staff can also attend an annual free conference, which also contributes to their CPD requirements. And those signing up receive a Charter Mark Certificate of membership for their waiting room, as well as a poster showing photographs of common lesions and a desktop calendar listing the symptoms of mouth cancer to remind receptionists to give patients with these symptoms an urgent appointment.



#### But who shall we support next?

We asked this very question through our Facebook page and had an interesting response. So far members have suggested:

- Bridge 2 Aid www.bridge2aid.org
- Heart Your Smile www.heartyoursmile.co.uk
- Mouth Cancer Foundation www. mouthcancerfoundation.org
- Dental Mavericks www.dentalmavericks.org
- Smile Train www.smiletrain.org.uk

If there are any other charities you would like to put forward or if you would like to add your support to one of the charities listed above, please do so by <u>CLICKING HERE</u>.

We really look forward to hearing from you.

#### Sign up to SFDADS

Anyone interested in signing up to the Saving Faces Diagnostic Advice Service can do so online at http://www. sfdads.co.uk, by emailing Saving Faces at dads@savingfaces. co.uk or by calling 0203 465 5755.



#### <u>Feature</u>

## How to make online marketing work -

Online marketing is a huge growth area and we know lots of practice managers are interested in finding out more. Marcus Amberton from Dental Design is a professional marketeer, has a CIM e-marketing award and Google Adwords professional qualification - so we thought he'd be the best person to give us the low down on 'pay per click' campaigns. Here's what he had to say.

Online marketing is one of the best ways to attract new patients, and whilst most practices outsource the design, hosting and SEO to specialist marketing firms – there are quite a few who decide to run pay per click (PPC) campaigns themselves.

Being slightly biased I would thoroughly recommend letting a company run your PPC campaigns because they are actually complicated to setup and run properly, and if your PPC settings are not set up correctly then it can become very expensive and the traffic your website is receiving could be highly un-targeted!

I am going to go through a few aspects of what makes a successful PPC which can increase 'click through rate' (CTR), quality score and conversions.

There are five important PPC ad copy elements that will affect your prospects' decision to take action and click through on your ad, and then once on your page to convert to a customer.

#### 1. Perceived Value

Your potential visitor is looking for a 'solution' to their dental issues. In fact, customers care about solving their problem, not necessarily using your dental service. You must convince them that you will solve those issues.

Saving money is a huge perceived value. Everyone wants to save money by finding a cheap way to solve their problem (or even better, solve the problem free of cost!).

Your ad copy should emphasise what problem you'll be solving for the user, for example 20% off teeth whitening. Many people have issues with their teeth, you need to highlight the problems and what your services can do to sort them.

#### 2. Risk

While your customers want to solve their problem, they also want to guard against the risk of wasting time and money. This is why 'risk reversal' is such an important element of your ad copy.

To help users guard against risk, you must convince them of the value of clicking on your ad and not wasting time by getting suckered in to something that doesn't work for them.

At every step of the way, you want to reduce the friction of taking the next step. Convince users of the value of clicking on your ad, and you will get more relevant visitors.

You also want to help users guard against wasting their money by emphasising free or low cost entry points. A good example is 'Free Consultation' which is one of the most established calls to action on dental PPC ads.

For the user, there's no risk to their money should they not want to go through with the treatment. Not only does this increase clicks, but it significantly increases conversions. You're saying that "all I want to do is tell you what it will take to solve your problem."

For further details contact Dental Design on 01202 677 277 or visit www.dental-design.co.uk



Feature

## write a successful 'pay per click' advert

#### 3. Credibility

Credibility is always at the top of your customers' minds. Your customers want to guard against risk by choosing someone they know and trust. This is why branding is such an important investment for your business's long term success. The best way to instil a sense of confidence and trust is by making users feel like they know you and like you.

> For example, you may want to mention a trusted brand associated with your business, such as mentioning a prestigious award or your experience. This sort of credibility builder is one of the most successful tactics in various scenarios. For example, saying someone is a dental implant expert or has 25 years' experience is a great way to gain instant credibility.

#### 4. Call to action

Your ad and landing page is your ultimate salesperson, so they need to have a compelling call to action that is quick to the point.

Your prospects don't have much time. They demand quick answers and will click from your page onto someone else's within a matter of seconds, so you need to get to the point quickly.

Often it's as simple as asking someone to take action right away. So don't be shy - shy salespeople don't close the deal - but of course, always remain professional and work within GDC guidelines. Don't be too pushy. (Don't use ALL CAPS LIKE THIS BECAUSE IT'S OBNOXIOUS AND SHOUTY!) Provide enough value to close the deal without being the used-car salesman. Often, this is something as simple as 'Call Now', or 'Visit our site today' in your ad copy.

On the landing page, many people make the mistake of putting as much information on the page as possible. Your goal is to make the value proposition clear and simple, and tell the customer what to do by making the 'Call now' button stand out, as well as a prominent phone number and contact form.

#### 5. Qualifiers

Often you will be bidding on keywords that are a bit broad. Some of the people searching are your target market, and others aren't.

Additionally, you might be positioned to take only a small portion of your market. For example, you may be focusing on providing lower prices (competing on cost), or on better service (competing on value), or on a specific subsegment of the market (e.g., children, college students or higher net worth individuals).

By using language that resonates with your target audience, you will simultaneously stop wasting money on clicks from people who won't convert, while increasing the ad's relevance in the eyes of your true target audience. By putting in a qualifier, you spend less and make more, so don't be afraid to get specific!

#### Summary

Once you optimise these five elements, you will be amazed at the clarity of your PPC ads. In turn, this will help you optimise the messaging on your landing page, as well as your other marketing channels.

Your ad copy will lay the foundation for a marketing strategy that helps you better connect with your audience and ultimately help your practice get more enquiries.



#### Feature

## Team tactics - coping in a crisis

#### **Advertising feature**

You may remember the scenario from last month's Ask SUSAN column. It's a few months on and your lead nurse's attitude has created a crisis.

Your new young recruit, Jessica, is in your office in tears describing the scene from the LDU this morning. The lead nurse, Mary, came into work in her usual mood, with furrowed brows and a thunder cloud with flashes of lightning over her head. Jessica, who has arrived early (she's keen!), is packaging the sterilised instruments for storage.

Quite innocently, Jessica asks Mary if the date stamp has been repaired yet – it's been broken for a week and it's Mary's job to get it fixed. Mary realises she's forgotten to pick up the new one and is embarrassed by her mistake but is unwilling to admit to her weakness in front of this junior. So instead, she diverts her negative feelings into a tirade of abuse at poor Jessica.

Jessica can't take any more. She has been the recipient of snide remarks from Mary for some time and has not wanted to tell anyone. However, now she is telling you, and you can see that this is a clear case of bullying by Mary.

So, here's your dilemma. Jessica has been a real find – keen to learn and with a great attitude. Mary, on the other hand, has been increasingly difficult of late, and she is not demonstrating the leadership qualities that go with her job title.

If you don't do the right thing here there could be real trouble.

1. You could get Mary into your office and sack her on the spot. However, you know Mary is very familiar with employment law and an accusation of unfair dismissal would soon be flying your way.

2. You could tell Jessica to 'toughen up' and just get on with it. This would risk losing her talent along with the trust of the rest of the team, who are equally fed up with



Mary. Your own management abilities would be called into question. So what do you do?

#### The SUSAN solution

Fortunately you have SUSAN in your practice. So your first step is to look up SUSAN's 'Dealing with Harassment' procedure – just one of the hundreds of legally sound, practical HR procedures within SUSAN that provide you with clear, simple instructions on how to proceed.

You could also take advantage of both the 24-hour HRspecialist helpline, and SUSAN's email HR-advice line to get further verbal or written advice.

With SUSAN's HR content and resources available to you around the clock, practical help and advice is at hand if even the most unfortunate or unseen staffing disasters befall you. There's even indemnity cover of up to £100,000 should a tribunal be necessary.

So you can look forward to a fair and reasonable resolution to this difficult situation, and to keeping Jessica and the rest of the team on-board with your integrity intact.

Go to www.susandental.com to find out more. Why not contact us on info@susandental.com and arrange your own personal tour of SUSAN?



#### Feature

## Get your summer house in order

The summer holidays are almost upon us and there's a lot to do before you can safely jet off and pursue the elusive sunshine. We don't just mean packing, getting in a pet sitter and arguing with the kids about what they can take away with them; we mean before you leave the practice without its captain, make certain that the crew can staff the boat with you!

#### Get the skeletons out of the closet

Typically the summer holiday rotas will have left you with a skeleton team and that's fine because most of your patients will be away too. But make certain that you have contingencies in place in case your skeletons let you down. If sickness or disaster strikes what emergency cover have you arranged and does the team have instructions about who to contact in your absence?

#### Plan for disaster - and avert it

Do you have a disaster contingency plan? Does your team know what to do in a disaster? A disaster is never disastrous when a plan exists to deal with it.

One manager told us recently that on the second day of her holiday she received a call from the practice saying that a pipe had burst and asking where the stopcock was. Do your team members know how to turn off power and water supplies should an emergency occur? Do they have up-to-date contact numbers for the tradesmen and support companies you use?

#### Managing cash flow

Being strapped for cash during or directly after the holiday period is a typical crisis faced by many practices but with a bit of planning, this stressful event can be averted. When clinicians are away and not generating income, when patient numbers are down because of the holiday period, it is your skill at planning for and managing cash flow that will avert disaster.

If you have a good number of patients on a dental plan then you are less likely to suffer any cash flow disruptions



because their monthly fees will continue to be deposited in your bank. If you don't have that luxury consider:

- Updating your cash flow statement for the next two months and identifying where issues might arise
- Discuss the potential issues with your principal
- Speak with your bank manager so he/she knows in advance where the issues might be and arrange an overdraft to see you through
- Identify any bills you can put off until business picks up again
- Consider incentives for any bigger treatments that might be booked during the holiday period to encourage patients to pay up front

#### Keep the team busy

There is no excuse for team members to be sitting around even if it is quiet. This is a great opportunity to get your HTM105 protocols updated and reviewed by your nursing team. Surgeries can be thoroughly cleaned, filing can be sorted, stock can be counted ...

Summer holidays are great; especially if you can head off into the sunset knowing that on your return, the practice will be ship shape. Make certain you take some time to plan your getaway with management precision.

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