

Contributing to your success

May 2012

e update



And the winners of the first ever ADAM Awards are...

The ADAM Conference and Awards took place in Harrogate at the weekend and we are delighted to congratulate our three winners. Turn to Jill's column on page 7 to find out more...

Inside this edition . . .



Read all about it

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





The why, when and how of patient testimonials. Read more on p.10



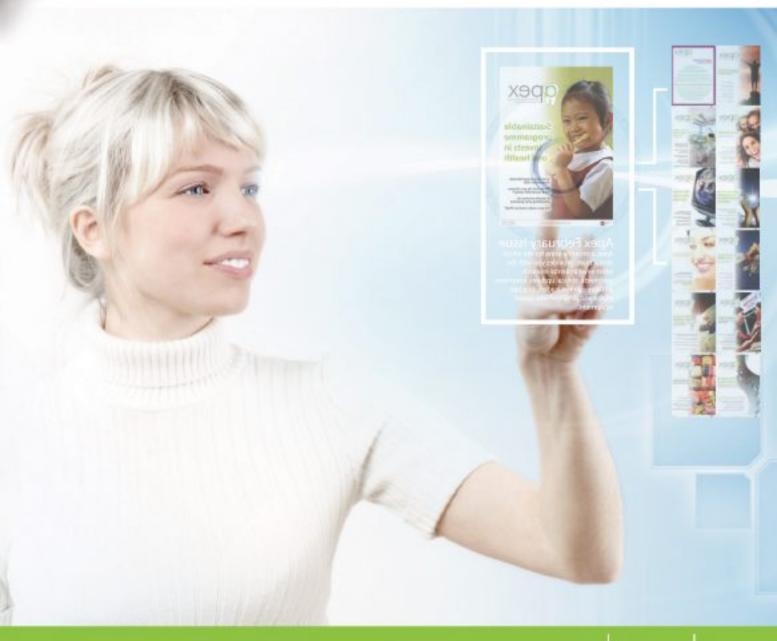


Did you miss Simon's talk at BDA for ADAM? Read more on p.12

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News

Winners announced for Dental Awards

The lead up to the 2012 Dental Awards reached its grand finale on Friday 20th April, with the winners being announced at a glittering black-tie ceremony, in London.

Teams and individuals from dental practices across the UK, came together to celebrate the outstanding level of clinical care and patient service they provide, at the 14th annual Dental Awards.

The ceremony, which took place at the exclusive Lancaster London Hotel, was attended by many key opinion leaders and representatives from leading oral health companies. Hosted by musical comedian, Mitch Benn, guests and finalists enjoyed a gala dinner, champagne reception; four-course meal; and the Awards ceremony.

The event, organised to showcase the best that the UK dental profession has to offer, saw winners receive a beautiful, specially designed glass trophy that can be displayed in the practice or laboratory for all to see. Shortlisted finalists also received a certificate.

Commenting on the event, Sophie-Marie Odum, chair of the judging panel and group editor at Purple Media Solutions, said, "As always, the event was a huge success. I would like to thank those who entered, and congratulate all the winners."

The Dental Awards 2012 was organised by Purple Media Solutions Ltd (publishers of The Probe, Smile, BDNJ and dentalrepublic.co.uk) and was sponsored by The Dental Web, Dentsply, Software of Excellence, Waterpik, Wrigley, Beverly Hills Formula and Practice Plan.



Practice Manager of the Year winner, Debbie Hutchinson (centre), with Mitch Benn and Sian Davies, branding and communications manager from Practice Plan.

The winners

Dental Laboratory of the Year - McDowell & Service Dental Laboratory, Belfast Best National Smile Month Event - NHS Ayrshire & Arran's Oral Health Promotion Team

Practice Design and Interior (North) - Martin Dental Care, Glasgow. (South & Overall) The Implant Centre, Hove, East Sussex.

Dentist of the Year (North) Dr Mike Gow: The Berkeley Clinic, Glasgow. (South & Overall) Dr Zaki Kanaan: K2 Dental, London.

Therapist of the Year - Debbie McGovern: Liverpool Implant & Aesthetic Dental Spa.

Hygienist of the Year - Hayley Lawrence: Chase Side Dental Practice, Enfield. Oral Health Promoter of the Year - Elaine Sharp: NHS Lanarkshire Oral Health Team, Hamilton.

Dental Nurse of the Year - Nickii Terry: The Crescent Specialist Dental Centre, Plymouth.

Dental Receptionist of the Year - Helen Daley: The Crescent Specialist Dental Centre, Plymouth.

Practice Manager of the Year - Debbie Hutchinson: The Crescent Specialist Dental Centre, Plymouth.

Team of the Year (North) NHS Lanarkshire Oral Health Team, Hamilton. (South & Overall) El-Nashar Dental care, Newton Abbott.

Outstanding achievement - Pamela Swain, chief executive of the British Dental Association of Dental Nurses (BADN)

More than 5,000 attend recent BDA conference

The five-thousand attendance barrier was broken in Manchester at this April's British Dental Conference and Exhibition, it has been confirmed.

The event at the Manchester Central Convention Complex saw 5,085 people pass through its doors; almost 500 more than attended the 2011 event at the same venue. More than 150 exhibitors were present to share their latest products and services with delegates and nearly 250 presenters addressed delegates.

Alongside the programme of speakers and the comprehensive exhibition was a series of new developments including a Demonstration theatre and an Innovation zone.

The event witnessed the passing of the BDA Presidency to Dr Frank Holloway and saw Dr Susie Sanderson give her final address to the event as Chair of the BDA's Executive Board. Dr Sanderson stressed the importance of professional unity and seeing the whole picture when assessing the challenges facing dentistry.

The 2013 event will take place at ExCel London between 25-27 April. Full details of the event will be published at www.bda.org/conference in due course. It will be the first time that the British Dental Conference and Exhibition has ever been hosted in London.

News

Unregistered dentist faces £2k fine

A Surrey-based dentist has been successfully prosecuted by the GDC and ordered to pay £2,000 in costs for the illegal practice of dentistry.

On Friday 11 May 2012 Mr Richard Spencer, who formerly worked Aberfoyle Dental Surgery, Epsom Road, Epsom, Surrey pleaded guilty at Redhill Magistrates' Court to unlawfully holding himself out as being prepared to practise dentistry while not registered, contrary to Section 38 (1) of the Dentists Act 1984.

He also pleaded guilty to unlawfully using the title of dental surgeon on registration forms at the above named premises, contrary to Section 39 of the Dentists Act 1984.

Mr Spencer has not been registered with the GDC since 2007.

All dentists, dental nurses, dental technicians, clinical dental technicians, dental hygienists, dental therapists and orthodontic therapists must be registered with the GDC to work in the UK.

Mr Spencer received a conditional discharge of 12 months on both offences and was ordered to pay £2,000

towards GDC costs.

Chief Executive of the GDC Evlynne Gilvarry said: "We are committed to taking action against people who practise dentistry illegally, whether they've been removed from our register or never gained the qualifications to register in the first place. I hope this prosecution sends a clear message to others who may be tempted to practise unlawfully. They are a risk to the people they treat and we will do everything we can to ensure public safety."

Selling dental equipment?

This is just a reminder to our members that there is a whole category on eBay for dental equipment and supplies.

It could be worth considering if you are looking to buy or sell equipment, chairs, loupes, instruments or hand pieces, etc.

Innovative speakers to feature at new conference

Hosted by Sheila Scott, BoD (Business of Dentistry) is delighted to present a new, dynamic, full day conference for practice managers on Thursday 14th June at Whittlebury Hall, Northamptonshire.

With relevant and hard-hitting topics plus an evening reception and dinner the night before, practice managers will have the chance to socialise and network with like-minded people.

The conference promises to allow delegates to discover how to increase profits, attract new patients, reduce waste, motivate your team and develop your practice, and features some of the dental industry's most forward-thinking and innovative speakers, including:

• Sheila Scott, host, will focus on the importance of "engaging people"

• Emma John from Absolute Dental Training reveals how to "distinguish





yourself from the competition"

• Laura Horton from Laura Horton Consulting introduces "treatment coordination in the 21st Century dental practice"

• Keith Hayes from Apolline UK Ltd explains the "changing times" with regards to the CQC.

The full day event will run from 9.00am - 5.00pm, which entitles delegates to 5.5 hours of verifiable CPD and it is priced at £120 per person for Practice Plan members. Lunch and refreshments are included. Normal rate is £160 per person and prices are inclusive of VAT. For an additional cost of £150 per person, delegates are invited to make a night of it on June 13th with a drinks reception, three course meal, wine, plus bed and breakfast.

For further information or to book a place, please call 01691 684171.



Training & development diary

Date & location	Name of event & provider	Cost & notes	Contact details
June	Exceptional leaders - outstanding teams. UMD	Call Penny Parry on 020	email penny@
London	Professional & Menagerie Theatre Company	8255 2070 for fees	umdprofessional.co.uk
8 June	Business planning and financial management.	£100 for practice	www.bda.org/training
London	BDA & Andy McDougall	managers	
8 June London	Radiation Safety (am) and Workplace Safety (pm). Dentabyte	£75 per module. Early bird offer	www.dentabyte.co.uk
16 June Edinburgh	Dental implant nursing. ADI	£95 ADI members, £140 non (membership is £37 p.a.)	www.adi.org.uk
30 June London	Dental implant nursing. ADI	£95 ADI members, £140 non (membership is £37 p.a.)	www.adi.org.uk
5 July London	Reception and telephone skills for the whole dental team. BDA with Heather Dallas	£100 for practice managers	www.bda.org/training
5 July	CQC Essentials – giving you the know-how & confidence to meet CQC requirements. Denplan	From £75 for Denplan members.	www.denplan.co.uk/event-
Portsmouth		£50 discount for non-members	sandtraining
6 July	Consent, Complaints & Communication (am)	£75 per module. Early bird	www.dentabyte.co.uk
London	and Suitability of Staffing (pm). Dentabyte	offer	
6 July London	Law, ethics and record keeping. Experts from BDA, GDC and Carestream Dental	£100 for practice managers	www.bda.org/training
6 July	Minimum intervention dentistry. Denplan	From £85 for Denplan members.	www.denplan.co.uk/event-
Crewe		£50 discount for non-members	sandtraining
7 July	Minimum intervention dentistry. Denplan	From £85 for Denplan members.	www.denplan.co.uk/event-
Stratford-upon-Avon		£50 discount for non-members	sandtraining
13 July	Achieving high standards in infection control.	£100 for practice	www.bda.org/training
London	BDA with Irene Black	managers	
20 July	Building a successful dental team: recruitment, interview skills and develop-	£100 for practice	www.bda.org/training
London	ment. BDA with James Goldman, Rizwanna Ishaq and Heather Sharpstone	managers	
20 July	Minimum intervention dentistry. Denplan	From £85 for Denplan members.	www.denplan.co.uk/event-
Newcastle		£50 discount for non-members	sandtraining
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	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



The winners!

We have had a good response to conference and we were delighted with the various speakers and topics that we had put together. The feedback was extremely positive.

Congratulations to our ADAM Award winners. The crown of Practice Manager of the Year goes to Nikki Rowland from Perfect 32 in Beverley, the Treatment Co-ordinator of the Year winner is Melissa White from Soar Valley Dental Care in Barrow-upon-Soar, and Administrator of the Year is Christine Ferguson, also from Perfect 32.

Well done to all shortlisted entrants. You gave the judges a hard time! Look out for full coverage of our Conference and the ADAM Awards, kindly sponsored by Denplan, in Practice Focus due out next month.

A huge thank you to Dr Simon Hocken from Breathe for our session at the BDA conference. We had a very well attended session for our "don't drop the cash baton" 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.

administrator / front of practice / patient journey session and Simon was an excellent speaker.

Column

We have had fantastic feedback from our webinar delegates who were able to participate in The Dental Business Academy webinar in early May hosted by one of our conference speakers, Andy Toy.

Andy provided delegates with plenty of information to ensure they are prepared for their CQC inspections.

As always it was great for Niki, Hannah and I to speak with prospective and current members at BDA and to hear what you love about your membership.

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The Dentistry Business delivers an excellent service, their training courses are relevant to the specific needs of practice managers and allow students to interact, whilst developing skills and knowledge which can be applied to their individual roles. I rate their training courses 10 out of 10!

> Kristy Cunningham, Apollonia Dental and Cosmetic Centre, Liverpool The Dental Awards 'Practice Manager of the Year 2010'



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Sunday, 10th of June 2012

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Feature

Why regulation isn't all bad

I attended a presentation at the recent BDA Conference by Rupert Hoppenbrouwers, head of the Dental Defence Union, which centred on the enormous amount of regulation faced by the dental profession.

As we know only too well, the dental profession is one of the most highly regulated in the UK, and arguably subject to more regulation and accountability than the dental professions in other Western societies. Rupert listed the many bodies that dental professionals were regulated by and accountable to and this list included the GDC, CQC, the civil and criminal law, the courts, NHS trusts, the Health and Safety Executive, Trading Standards, Advertising Standards Authority, the Equality and Human Rights Commission, and the Office of Fair Trading!

While he agreed that DCPs are overburdened by regulation, he said there were advantages to regulation, such as structure, guidance, rules and laws and discipline for those who didn't comply, and explained that in the past 'the line' was not clear enough, leaving dental professional unsure about what was acceptable and unacceptable behaviour

Small changes can reduce risk

But when discussing risk management, he explained that dental professionals could make a big difference to their risk by making some very simple changes and that clinical records were the best defence – as well as an ethical and legal obligation.

Although Rupert was keen to stress that practices shouldn't adopt a defensive position, he said that full records were first and foremost an aid to a high standard of care and also a very important part of any successful defence when dealing with complaints, claims and disciplinary actions.

Get your records in order

He said that records must be legible, contemporaneous and complete. They should reference medical, dental and social histories, complaints, treatment plans and any information given to the patient, and should be kept indefinitely because claims could surface at a much later date. In fact practices can find themselves in very hot water



with the GDC for not having adequate clinical records.

Issues with records and problems that practices have experienced include not being able to physically print out records due to software issues, the autotext being inserted into computer-held records not marrying up with the patient the record is referring to, records being altered at a later date – something that Rupert strongly advised against, forgery, which he described as a small but significant issue, and practitioners adding personal comments, especially derogatory personal comments, which he suggested should be restricted at all costs.

In the absence of records, a patient's account was likely to be preferred and the balance tipped in their favour. This is because a dental professional will see many thousands of patients over time and would therefore have a less accurate recollection of events, as opposed to the patient for whom this is their own personal experience.

Robust complaints procedures

Reassuringly, he argued that most complaints could be dealt with without ever going to other bodies and that most patients didn't complain because they wanted our head on a plate, but rather that they wanted assurance that it wouldn't happen again. Dealing with issues proactively and promptly are seemingly the best ways to keep complaints away from regulatory bodies, and therefore in your control.

He stressed that practices should have a robust in-house complaints procedures that they have tried and tested, and that everyone on the team was aware of and adhered to.



Get patients singing about you!

Gaining feedback from patients is a CQC requirement but requesting it to merely tick a box is a waste of a great opportunity. Encourage your patients to sing about your practice, then put your testimonials to good use - here's how...

There are different ways in which you can request testimonials from your patients - but more important is the time at which you ask for their feedback.

Just imagine that a patient has come to the end of their treatment and has seen their beautiful new smile in all its glory for the first time. It is incredibly moving – not to mention rewarding - to hear how pleased they are. So, strike while the iron is hot as this is the perfect time to encourage them to put down in words just how their treatment has made them feel.

How you do this is up to you. Some practices have testimonial forms in reception, others opt for a feedback book where people can jot down a couple of comments. Whatever you decide, ensure that all members of your front of house team understands the importance of encouraging patients to use it. Once patients have left the practice, they may not get round to writing a testimonial, even if they have the best of intentions.

Testimonial forms

A simple testimonial form should include a brief explanation of why receiving feedback from patients is important (because it shows us that you are doing a good job) and where the testimonial might be used (on your website, in your marketing e.g. advertising, or in your welcome pack). It should also give the patient the opportunity to give anonymous feedback, should they wish.

Patient quotes on your website

A well-written website that includes patient quotes (testimonials) about individual treatments, the service you provide, the care you offer for families, or your hygiene therapy, can send a strong, personal message to prospective new patients.



Real patients making real comments are priceless and give extra credibility to a website. Couple these with real photos and you're away! Regularly updating your website will also help improve your SEO (search engine optimisation basically, where you rank on Google).

Word of mouth

This is one of the best ways to promote your practice to new patients. If someone is happy to write a testimonial, they will also be an ideal person to spread the word about your practice, Personal recommendations are highly regarded because they reflect back on the person making them, meaning that people don't often sing the praises of something unless they are really impressed with it.

Referral cards

Another way to motivate patients to recommend your practice is by using referral cards. They should include your contact details, a description of the treatments you offer, and your ethos, and could offer of a token of appreciation to the patient when their friend joins. They could even be used in a prize draw.



Feature

Time is what YOU make of it

Regardless of your responsibilities and remit as a practice manager there are always time pressures that make you feel frazzled and stressed. Ever feel like you will never manage to get everything done? Acknowledging the fact that you will never cross everything off your infinite list means you must prioritise your efforts to focus on those activities that will generate the greatest result.

Identifying the things that matter

We have discussed the 80/20 rule before. You know, that universally accepted law that applies to everything: 80% of your hair will be found on 20% of your body; 20% of your carpet will get 80% of the wear; 20% of your stock will represent 80% of the overall value. If you can only manage to do 20% of the jobs that need your input, wouldn't you feel better if they effectively covered 80% of the work that needs your focus?

Successful managers plan to focus on the right things and spend their time ensuring those things are done right through the efforts of the team. This is not about abdication; it is delegation with a heavy emphasis on managing performance through the monitoring of simple key performance indicators or KPIs. So even if your role is limited in scope, what is the handful of activities that if performed in the most productive manner, would achieve the best result? Sit down and think of them right now, before you carry on reading this article. Which five things would you say would make all the difference?

Focus on what matters most

There aren't that many aspects of a dental practice that directly impact on financial success. Clinical governance, health and safety etc. aside, some of the key processes would include:

• An effective and successful recall strategy and process (a bread and butter process that will enhance diary fulfilment)

• An efficient process for following up and converting open treatment items (converting opportunity that will enhance diary fulfilment)

The successful generation of new patient enquiries



with a high rate of conversion (making the most of opportunity to enhance diary fulfilment)

• The management of stock to maximise cash (lean and mean, improving cash availability)

• Monthly 121s with team members to ensure everyone is focused on the right things and undertaking them well (vital for a cohesive, happy team)

The current economic climate has caused a change to the flow of patients and treatments in practices across the UK who are seeing patients leave plans to save on their monthly outgoings. Gaps are appearing in the diary as patients tighten their belts and decide to visit less frequently or put off non-essential treatments. Cash from the bank for loans to support new growth initiatives and the overdraft may be harder to come by.

A lot has changed in the last few years so you have to ask yourself – have you changed too? How have you adapted your approach to accommodate what is happening in the marketplace and is it having the right effect?

You know the saying; if you keep doing the same things you will get the same result. If you're looking to improve your results and feeling less stressed by your approach to work, then take some time out to think about what you could change to improve the situation. If you need any help, email the ADAM helpdesk via denise@adam-aspire.co.uk



Feature

Don't drop the cash baton

Pressure to fill the diary and increase revenue means managers are always looking for new solutions. Is social media the answer, or maybe the introduction of a treatment coordinator? Looking for new ideas is one side of the coin but as Breathe Business consultant; Simon Hocken suggested to delegates at the ADAM session at the recent BDA Conference in Manchester, it's also about getting back to basics and managing the fundamentals of practice management, well.

The presentation began by focusing on the reception team and how its success underpins winning new patients and keeping the existing ones happy. Simon spoke about the receptionist's role, which he said could include one or many of the following:

- The manager of the first impression
- The brand ambassador

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- The sentry
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- The debt collector
- The sales person
- The business prevention officer

Simon suggested that recruiting the right team members is vital and that the premise of recruitment should be attitude not skill. Expertise can be taught but attitudes are unlikely to change. Recruit someone who is energetic with a can-do attitude and suddenly everything is possible.

With the right support team, a manager's possibilities are endless. Simon's philosophy is to build teams that share qualities such as confidence, listening skills, can-do attitude, ownership, and reliability.

The presentation flew by as Simon highlighted some basic faux pas such as shutting down at lunch when most customers are likely to want to call and not following up treatment plans.

Simon's presentation offered nothing new because he recognises that practices still haven't got the fundamentals right and that inefficiency is costing them dearly. Many practices are guilty of exactly what Simon was suggesting; neglecting the fundamentals of a wellmanaged patient journey and dropping that cash baton.

Mystery shop your practice and see for yourself what experience your patients enjoy – or not as the case may be.



Feature

Implant nursing: how the ADI can help

Since compulsory registration with the GDC, dental nurses are finally recognised as dental professionals. This means that as dental professionals they need to be adequately trained in all areas of dentistry they intend to practise in. No longer are the majority of dental nurses satisfied with any tit-bits of information their dentist may throw their way, but rather they want and need to learn more.

Obviously core CPD needs to be completed, but what about the new and exciting areas of dentistry? Implant dentistry is not 'new' so to speak, but it is becoming more common in general practice and it is an exciting and rewarding area of dentistry.

According to the 2008 Training Standards for Implant Dentistry, it applies to 'all members of the dental team'. It states that 'it is recognised that training in implant dentistry can be obtained from a variety of sources including University, Royal Colleges or hospital-based training, as well as courses run by individuals and commercial groups. The purpose in setting standards for such training is to ensure that dental teams who practise implant dentistry are competent to do this work and that patients are protected.

A dental nurse looking to branch out in this field will need additional skills to general dental nursing. Whereas with the emergence of HTM01-05 dental nurses are well informed of sterlisation procedures, an adequate asepsis technique for implant dentistry requires a modified approach. Sterility in a practice environment is difficult to achieve and 'gowning-and-gloving' is rarely used for general dental procedures.

With this in mind, the ADI launched the 'One-Day Course on Dental Implants for Dental Nurses' on June 4, 2011. The course has generated a wealth of interest from dental nurses eager to progress their knowledge in implant dentistry.

The ADI course is very comprehensive and offers the dental nurse who attends a thorough understanding of implant treatment from beginning to end. A dental nurse is often the patient's first point of call and they can talk to a patient in a manner that is understood and informative, whereas the dentist may not have the time to do so. Hints and tips on how to improve efficiency are explored to boost productivity whilst complying with CQC guidelines in



order to achieve 'best practice'.

With the resounding success of the one-day course, the ADI has now created a new course to continue to progress a dental nurse's education in the more advanced dental implant surgical procedures. Entitled 'Advanced Dental Implant Procedures for Dental Nurses', this course will examine the dental nurse's role in assisting with procedures such as sinus lifts, bone grafting, socket preservation, soft tissue augmentation and much more.

The next dates for the original course are Saturday 16 June in Edinburgh and Saturday 30 June in London. The Advanced course will take place on Saturday 22 September in London and Saturday 10 November in Edinburgh. The courses cost £95 for an ADI member, £140 for a nonmember. (membership is £37 per year).

If you would like to discuss training pathways for dental nurses in the field of dental implantology, please call the ADI on 020 8487 5555, email info@adi.org.uk or visit the website at www.adi.org.uk

About the author: Kelly Emerson started dental nursing 13 years ago in NHS practice and decided to further her knowledge on the more surgical aspects of dentistry working at the Eastman Dental Hospital. During her time at there, she became involved in the multi-disciplinary treatment of head and neck cancer patients. Following six years of assisting in many implant procedures, Kelly decided to join the ADI UK as their Education Manager, where she is responsible for organising courses on dental implantology for all the dental team.

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Feature

Managing health & safety in practice

Denplan's Chief Dental Officer, Roger Matthews, offers advice on adopting a health and safety management system for your practice.

For most people, health and safety is a pretty uninspiring subject. However, the general principles of health and safety management apply to all dental practices regardless of size. A well thought-out management process helps to prevent accidents and ill-health and demonstrates a tangible commitment to employees that their health, safety, welfare and wellbeing is at the forefront of practice operations.

Develop a policy

The Health and Safety at Work Act 1974 and The Management of Health and Safety at Work Regulations 1999 place duties on employers to ensure the health,

safety and welfare of employees and anyone else who may be affected by the organisation's activities. Smaller dental practices are also bound by The Health and Safety (Consultation with Employees) Regulations 1996 and larger dental organisations by The Information and Consultation of Employees Regulations 2004. So it's important to set out a comprehensive practice health and safety policy.

Your h&s policy should be set out in three parts:

Part 1: General Statement of Intent – expressing the employers' commitment towards making the working environment safe and healthy for employees and anyone else who may be at risk.

Part 2: Organisation – clearly stating the roles and responsibilities of individuals and how accountabilities are set. The employer may be held liable if it is proven that they 'allowed' the actions of an employee who has caused an accident. The day-to-day management of health and safety will generally be delegated to the practice manager, who ensures practice policy is implemented and adhered to. However, all members of staff are responsible for carrying out their duties safely and reporting any discrepancies in arrangements.

Part 3: Arrangements – detailing the procedures in place to assist implementation of the policy e.g. fire safety and infection control. The CQC also requires practices to meet



Essential Standards of Quality and Safety and demonstrate a standardised, consistent approach to the way the service is delivered.

Organise the team

Delegation of h&s duties is essential in a busy dental practice. However, if a person is expected to accept increased responsibility it is essential they have the capability to carry out the role competently and safely. The delegation and acceptance of a role means a person also accepts accountability. You can address h&s at all levels of the organisation by adopting the key elements known as

the 'four Cs':

Control – a pro-active approach to controlling risks Competence – plan for structured training and CPD Co-operation – staff are involved in h&s management Communication – information about hazards, arrangements for risk controls and preventive measures are consulted on.

Plan and review

Effective planning should cover all activities and clearly reflect the needs of the practice. Plans should specify how safe working practices are to be undertaken across the business and what standards are to be achieved. Employers who demonstrate a commitment to the health, safety and welfare of employees will benefit by retaining a motivated workforce who recognise their responsibilities to health and safety and work as a team to achieve good standards.

Monitoring and measuring performance against an agreed standard is an ongoing process to find out if your policy is successful. A practice with integrated h&s management systems and procedures in place is in a far better position to be able to measure its performance against set goals. It's important for all practices to adopt a pro-active system that demonstrates systematic management of health and safety, just like any other business function.

Feature

Could you be entitled to rate relief?

A practice manager contacted us recently after discovering that she was due many thousands of pounds in backdated over-payments due to changes in Small Business Rate Relief. We thought it was something that our members should be aware of and investigate to see if they are eligible.

This article contains information from the Business Link website and applies to small businesses in England. For further information and details for small businesses elsewhere, please visit http://www.businesslink.gov.uk/ bdotg/action/detail?itemId=1086075891&type=RESOUR CES Please note that the temporary doubling of the relief has been extended and now applies until 31 March 2013.

Small business rate relief details

You will be eligible for a discount under the small business rate relief scheme in England if you only occupy one property and it has a rateable value below £12,000.

The Government has temporarily doubled the level of relief available. Between 1 October 2010 and 31 March 2013, eligible ratepayers will receive small business rate relief at 100 per cent on properties up to £6,000 (rather than 50 per cent), and a tapering relief from 100 per cent to 0 per cent for properties up to £12,000 in rateable value for that period.

The temporary Small Business Rate Relief increase will therefore apply throughout the whole of the 2012-13 billing year (until 31 March 2013). The relief was originally doubled by the government until September 2011, but this was extended by the Budget in March 2011, and then extended again in the 2011 Autumn Statement to take account of economic conditions.

If you have more than one business property, the discount is only available if the rateable value of each of the other properties is below £2,600. If this is the case, the rateable values of all the properties will be combined and the relief is applied to the main property based on the total rateable value.

However, if you occupy a property with a rateable value below $\pm 18,000$ ($\pm 25,500$ in London) and you are not receiving a different mandatory relief, you will be eligible



• It could be worth making that phone call - you never know!

to have your bill calculated using the small business multiplier, regardless of the number of properties you occupy.

The Government has also simplified the process for claiming the relief by removing the legal requirement for an application form in order to claim the relief. However, if you are not receiving the relief and you think that you are eligible, you should contact your local billing authority.

Further links from Business Link:

For more information on the current small business multiplier, see the page on the <u>current multipliers</u> in their guide on <u>business rates - an overview</u>. You should contact your local authority to find out more - find contact details for your local authority in their <u>Contacts Directory</u>.

Confused?

If this goes over your head, use the Contacts Directory link above to find out who can help, and just ask the question. You never know, you might get a nice surprise.



Practice management can be a lonely place

Advertising feature

Do you ever get the feeling that you're the only one in the team who really appreciates the importance of good management?

Do your colleagues leave 'all that paperwork stuff' up to you? It's understandable, of course, that clinicians want to do clinical stuff, dental nurses want to nursing stuff and receptionists ... well, you get the picture.

When you interrupt their world and ask them to complete a form, follow a procedure or participate in a meeting, they can sometimes make you feel like you're getting in the way.

There is lots of evidence to show that disasters in healthcare organisations are often due to inadequate clinical governance (our version of quality management). It's rarely one big mistake that leads to a crisis; it's usually a series of small issues that don't get addressed by the management system and combine to lead to a disaster. An effective PM is well-known to be crucial to the smooth and efficient operation of a dental business.

So, you're often stuck in the middle between practice owners and staff, clinicians and the admin team, not to mention the PCT, CQC and other outside organisations. You're incredibly busy, yet also very lonely! Sometimes, wouldn't it be nice to have a friend at your side?

The SUSAN solution

Well, unfortunately we can't arrange a companion for those particularly tough times in practice. However, we have always seen SUSAN as the dental practice manager's best friend. SUSAN is a whole support system for every practice manager who is left to 'get on with it' by the rest of the team.

Do you worry about keeping up to date with legislation? SUSAN's team of professional experts does that for you. Do you need to have HR support on the end of the line? SUSAN has a dedicated 24/7 phone line to HR experts and £5 million of insurance should you ever need to go



to an employment tribunal. Does your waiting area need a range of glossy magazines? SUSAN sends you half a dozen titles every month. Do you need to find the best price available for some dental materials? SUSAN has a price checking service to make sure you get the best deal for your practice and save you time. And what about online CPD? You guessed it! SUSAN has the solution.

SUSAN is about a lot more than 'all that paperwork stuff'!

About SUSAN

SUSAN is a brand new quality management software system designed to give you the ultimate in clinical governance, dental business support and much, much more. SUSAN has been extensively beta-tested by UK dental practice managers over the last four months with outstanding results and is now ready to launch. Go to www.asksusan.co.uk to find out more about how SUSAN could be your New Best Friend.

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