

May 2011

e update

Inside this
edition . . .

Read all about it



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

Attract 200 NPs



Learn how one PM got 200 new patients through the door. More on p.13

Paternity leave



How will new paternity leave rights affect your practice? More on p.17



Boring afterthought or golden egg?

On the face of it sundry sales might not strike you as all that important. But what if we told you your practice could make up to £10,000 a year extra in profit by getting it right?

That is a significant amount of money that's surely worthy of some additional care and attention!

Inside this edition, you will

find out how to transform your success at selling the right dental care products to your patients. By getting the whole team working together and selling products that the supermarkets don't stock, your practice can boost its sales considerably.

Turn to page 11 to read more.

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BDA disappointed at dental health plans

Government plans for dental public health are targeted in the right direction, but do not go far enough, the British Dental Association (BDA) has warned.

While supporting both the broad approach of the plans and some of the specific proposals in the Government's Healthy Lives, Healthy People white papers, the BDA would like to see a more ambitious approach to dental public health.

It is also concerned that a shortage of Consultants in Dental Public Health may affect the availability of appropriate expertise.

The creation of a target for improving the oral health of five-year-olds, which reflects the Government's stated intention to reduce the level of dental decay in children, is a very positive step, the BDA believes.

The BDA's own work on oral health inequalities has highlighted the chasm that exists between those children with the best and worst oral health and called for action to tackle this problem.

With a generation of British adults with heavily restored dentitions and complex needs now entering later life, the BDA believes that a target for improving the oral health of older patients should also be set.

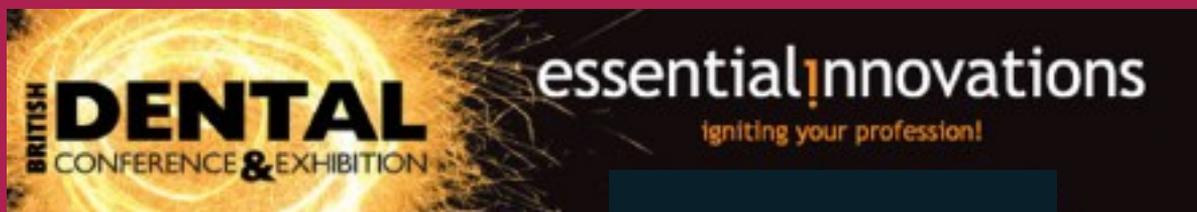
The targeting of a reduction in the consumption of

specific food products is also supported by the BDA, although it is disappointed that the white papers do not focus on a reduction in sugar consumption in the same way they approach salt intake. A stronger approach to reducing sugar intake would be appropriate, both specifically for oral health and in tackling the wider public health issue of obesity, the BDA believes.

Dr Susie Sanderson, chair of the BDA's Executive Board, said: "We are pleased to see the emphasis on tackling inequalities in the Government's public health white papers. Despite improvements over the last 30 or 40 years, we are still contending with an unacceptable and persistent oral health gap. We are pleased to see the prominence being given to preventing oral health inequalities by targeting an improvement in children's dental health. We would like to see a similar target for adult patients that recognises the challenges they present.

"But there are also gaps in the proposals where we think the Government should be going further. We'd like to see a more ambitious vision for dental public health that places this important function at the heart of wider public health and that seeks to guarantee the availability of the staff and financial resources that are needed to improve oral health."

GDC focuses spotlight on key issues



The General Dental Council focused the spotlight on three key issues at this year's recent British Dental Conference and Exhibition in Manchester.

A workshop allowed delegates the chance to find out more about the GDC's Standards Review, currently underway. This important work is set to shape the future of dental regulation by creating a new set of standards for professionals to meet.

Registrants were encouraged to make their voices

heard but for those unable to make it to the conference session, an online questionnaire is now live at www.gdc-uk.org.

It's a year on from changes in European law which gave patients the right to know where their dental appliances are made. A hand out for patients aimed at helping to explain what it means to them is available to download in the events section of the GDC website.



Non-dental care professional faces high fines for performing tooth whitening

In the first case of its kind the UK's dental regulator, the General Dental Council (GDC), has successfully prosecuted a non-registrant for performing tooth whitening, which the GDC regards as the practice of dentistry.

In March at City of Westminster Magistrates Court in London, 48-year-old Paul William Hill of Warrington, director of PW Healthcare Consulting Limited, pleaded guilty to four offences including practising dentistry while not registered as a dentist or dental care professional between 2 October 2010 and 11 March 2011. Under the Dentists Act 1984 it is an offence for non-registrants to practise or be prepared to practise dentistry.

Mr Hill has been ordered to pay a total of £6,265 in fines and costs and PW Healthcare Consulting Limited, which traded nationally as Style Smile Clinics, has been ordered to pay a total of £6,765. The amounts include costs of £5,500 for the GDC.

The GDC launched the case last year after it received hundreds of complaints from members of the public and dental professionals about tooth whitening treatment being provided by individuals who are not registered dental professionals.

The GDC, which regulates all dental professionals in the UK, began criminal proceedings under the Dentists Act 1984 on the grounds that tooth whitening may only lawfully be provided by those who are registered dental professionals.

Charges relating to two other people and one other company have been adjourned until 18 May.

Chief Executive and Registrar of the GDC, Evlynn Gilvarry said: "This case has significant implications for the dental profession and for public protection.

"The General Dental Council will now consider its position carefully with regards to the hundreds of other complaints about the illegal practice of dentistry that it has received.

"We are concerned about the risk to the public posed by such potentially hazardous treatment being provided by people without the training and qualifications necessary for registration as a dental professional."

Joining forces at Showcase



The BDTA is delighted to announce that the following professional dental associations will be sharing the pavilion at Showcase 2011:

- BDPMA
- BACDT
- DPA
- DLA
- BACD
- BADT
- BSDHT
- BADN
- DTA
- BDTA

The pavilion, spanning 60 square metres, and containing a hospitality and lounge area will be located just inside the entrance of the hall giving you and your team convenient access to the personnel and services offered by each association, encouraging interaction and providing a practical example of working together for the benefit of the industry.

Tony Reed, executive director of the BDTA, said: "The pavilion was a great success last year with representatives from the associations commenting that being located together on one stand communicated a positive message of working in partnership. Visitors who attended the event in groups, also commented that they were pleased that they could visit their respective associations in one location of the hall. We are delighted to be able to offer this facility to our fellow associations again this year."

Showcase 2011 takes place between 20-22 October 2011 at the NEC, Birmingham. To secure your free of charge entry to the show, register by clicking [here](#), call +44 (0) 1494 729959 or text your name, address, occupation and GDC number to 07786 206 276.



Hosting a training course? Email denise@bdpma.org.uk

Training & development diary

Date & location	Name of event & provider	Cost & notes	Contact details
26 May Leeds	Considering the change from NHS to private practice? BDA with Chris Barrow	Free	www.practiceplan.co.uk/optionsoutofthenhs
3 June London	Handling complaints and improving communication skills. BDA	£100 for practice managers	www.bda.org/training
10 June (second of eight) London	Tomorrow's Practice Management Masterclasses - Marketing & Patient care. Dentabyte Ltd	£75 per module.	www.dentabyte.co.uk
14 June Newcastle	Considering the change from NHS to private practice? BDA with Chris Barrow	Free	www.practiceplan.co.uk/optionsoutofthenhs
15 June London	Managing difficult people (and good ones too) Sheila Scott	£350. 10% discount for BDPMA members	www.sheilascott.co.uk
17 June London	Treatment planning; the dental team's role on patient care. BDA	£100 for practice managers	www.bda.org/training
17 - 18 June London	World Aesthetic Congress	see website for details	www.independentseminars.com/wac/
18 June London	'What patients really want' & 'Influencing skills' Sheila Scott at World Aesthetic Congress	see website for details	www.independentseminars.com/wac/
24 June Newbury & Bournemouth	NLP Taster Seminar. Miriam McCallum Associates	£70 +VAT. Lunch included	www.Intro2nlp.co.uk
30 June London	Reception and telephone skills for the whole dental team. BDA	£100 for practice managers	www.bda.org/training
July At your practice	Team working, ethical selling, customer care, complaints handling & more. UMD Professional	50% discount for BDPMA members £550 +VAT & travel	email penny@ umdprofessional.co.uk
1 July London	Operational management (am) and Financial management (pm). Dentabyte Ltd	£75 per module. Early bird offer	www.dentabyte.co.uk
8 July London	How to handle those difficult conversations and complaints. Training To Achieve UK	£350. 20% discount for BDPMA members	www.t2achieve.com/bdpma-complaints
August At your practice	Team working, ethical selling, customer care, complaints handling & more. UMD Professional	50% discount for BDPMA members £550 +VAT & travel	email penny@ umdprofessional.co.uk
September London	ILM Level 7 Diploma in Executive Management. UMD Professional	£4,800 paid in instalments. 5% off for BDPMA before 30.9.11	email penny@ umdprofessional.co.uk
9 September London	Management of medical emergencies for the whole dental team. BDA	£100 for practice managers	www.bda.org/training
14 September Bromsgrove	The health focused practice for patient care and profit. Sheila Scott with Practice Plan	£150. £50 for practices connected to PP or free for PP clients.	www.practiceplan.co.uk/events
16 September London	Health, safety & risk (am) and Quality assurance (pm). Dentabyte Ltd	£75 per module. Early bird offer	www.dentabyte.co.uk
22 September London	Assertiveness at work. BDA	£100 for practice managers	www.bda.org/training
22 September Nottingham	The health focused practice for patient care and profit. Sheila Scott with Practice Plan	£150. £50 for practices connected to PP or free for PP clients.	www.practiceplan.co.uk/events
23 September London	Child protection; the dental team's responsibility. BDA	£100 for practice managers	www.bda.org/training
29 September Newcastle	The health focused practice for patient care and profit. Sheila Scott with Practice Plan	£150. £50 for practices connected to PP or free for PP clients.	www.practiceplan.co.uk/events



From tooth fairy to fire walker! Last year for Mouth Cancer Action Month, Harbour Dental Care raised more than £600 for the Mouth Cancer Foundation and the British Dental Health Foundation by running a treasure hunt and offering free mouth cancer checks.

Best of luck in your fire walk challenge!

We would like to wish the team at Harbour Dental Care in Ipswich the very best of luck in their fire walking challenge on May 21.

Dressed as tooth fairies, the team has decided to do something daring and will be walking along a 20 foot path of red hot coals to support National Smile Month.

We will let you know how they got on, how successful their fund raising campaign was and how much publicity was generated by being such daredevils.

Remember, you don't have to be doing anything as unusual as this to feature in our coverage of National Smile Month!

Please let us know what you are doing to support this national event. We look forward to hearing from you and sharing your hints and tips for running a successful campaign with members.

Welcome to my regular column. In my role as BDPMA president I hope to keep you informed about our news and talk about issues that affect, annoy and delight us as practice managers and administrators.

Jill



Exciting changes are on the cards...

The past few weeks have been extremely busy in our practice. Our whole team headed to Manchester on April 14 for the ADI Congress 2011, which was packed with information and fun and was attended by more than 650 dental professionals. And I returned to Manchester on May 18 for the BDA Conference, with my BDPMA hat on.

A great time was had by all at the well-attended conference and those who attended our AGM will have learned about some exciting changes coming soon. Don't worry if you didn't make it because all will be revealed in next month's e-update and Practice Focus.

Back at the practice we are currently recruiting both a receptionist and dental nurse this week due to expansion within our team.

Recruitment is always a major issue for every practice at some point or another. I'm sure we can help each other out, member to member, by starting informative chats on Facebook and Twitter. Between us we have a wealth of knowledge and can offer much-needed support to each other.

I'm delighted at our partnership with the experts at Ellis Whittam who will continue to provide members with scenario-based features to help us all avoid recruitment pitfalls.

Later this week I am meeting up with a lab technician who uses psychometric testing when recruiting staff, I'll update you via Twitter with how I get on.

I would love to hear from fellow members either by [email](#), [Twitter](#), [Facebook](#), so please get in touch with your news and views.



Are you still using the same old practice letters?



Practices send out hundreds of letters every year to patients but when was the last time you had a really good look at yours?

Chances are you've been using the same old tired letters for years. Letters are often the most frequent contact you have with your patients and for this reason alone it is vital that you get them right.

Sending letters to patients is often done on autopilot, without much consideration. But letters are an influential marketing tool that can make or break relationships with patients. Carefully read through every letter you send out and ask yourself, 'what would I think to this if I was a patient?', 'do I feel valued?', 'am I being given the hard sell?'

Each and every letter that is sent by your practice should be written in a polite, informative and positive way that upholds your brand and philosophy. Yes, the service you provide is serious but there's no reason your letters should be.

Influential marketing tool

A carefully worded letter that's friendly and upbeat has more chance of being read and is the ideal medium for promoting dental plans, revealing special offers, informing patients of special events like open days – or even telling them of a dreaded price increase.

There is never a good time to inform your patients about an increase in their outgoings but there are ways to soften the blow. Generic dental plan letters are often very formal and concentrate on the price increase rather than the health benefits of paying for dental care on a monthly basis.

Although some information will have to remain written in their words, for example direct debit details, it is your health message that will convince patients that it is worth absorbing this extra outlay – but this needs explaining in detail.

Make sure that you explain to your patients that teeth that are well cared for cost less to maintain in the long run and that neglecting their teeth could end up costing them more to put right. You will need your plan provider to approve any new wording, before you send the letters to your patients.

This focus on health should be applied to virtually every

Add a bit of your personality

letter you issue, from recalling patients, reminding them their six monthly dental health examination is due, to welcoming new patients and in a failed to attend letter.

Don't be afraid of putting some personality into your letters – patients will be so much more receptive if they feel they are being talked to by a likeable human rather than an aloof professional. Whether your practice is NHS, private or mixed, you are dealing with human beings who appreciate being dealt with courteously.

Useful ideas

Use headings

- It's time to come and see us – 12 month reminder
- We missed seeing you – for a missed appointment
- It was great to meet you – initial consultation follow up
- Thanks for your call – new patient enquiry
- Regular visits keep your mouth healthy – recall letter

Vary who the letters are from

- If a new patient had an initial consultation, sign the follow-up letter with the dentist's name. It makes the dentist appear more friendly and approachable.
- If the letter is about a hygiene appointment, use the hygienist's name, for the same reasons

Add personal touches

- It was great to meet you
- We look forward to seeing you again soon
- We are delighted you have chosen us to keep your mouth, teeth and gums healthy



“Would we take part in our local street fair again? Definitely!”

New CQC guidelines suggest practices should be more involved in the community. But is it worth the effort? Practice manager Teresa Witchell from Bank Cottage Dental in Thornbury shares her experiences of joining local events.

When you mention carnivals and street fairs, community celebrations spring to mind yet mention a visit to the dentist and it doesn't quite have the same pleasant or exciting ring to it does it? But we were pleasantly surprised when we opened the doors of the practice during one of the quarterly street fairs which take part on a Saturday morning in the same street as our place.

During these events the town attracts many visitors so having recently spent a considerable amount of time and expenditure on a website and new practice brochures, when a flyer landed on our doorstep inviting us to get involved in a street fair, we thought we'd give it a go.

My team was so keen

On mentioning the idea to the staff, I feared that opening the doors and offering refreshments on a Saturday may not be well received, but how wrong could I be? Suddenly my team had tombola prizes stacking up, activities for children organised, one member of staff even appeared with a fully-iced Christmas cake to raffle. They all became so keen!

During their planning session, our local dental sundries rep arrived who also offered to turn up on the day and

stand outside with a free raffle for a Braun electric toothbrush and encourage people to walk in.

The result was well worth the effort. We had visits from existing patients and visitors who called in for practice information, some who later became patients.

We even welcomed three elderly ladies who visit the town every Saturday from neighbouring villages to scour the charity shops and have a coffee, but on this occasion favoured our waiting room. We obviously made them too welcome as they settled down on the sofas and unwrapped their own sandwiches!

We asked for donations for the refreshments and were able to send to our chosen charity The Smile Train a donation. We also send a donation of £10 every time a patient is recommended to us.

Patients have asked us to it again

Would we do it again? – definitely! One thing it did prove, by the number of existing patients who attended and have asked if we are going to do it again, is that they value keeping in regular contact.

Other ways of keeping in touch with the community are taking advantage of advertising opportunities in local publications such as carnival programmes and local events programmes.

We took advantage of advertising in the local carnival programme and offered an incentive of a free electric toothbrush to the first 25 new patients.

These programmes reach thousands of people and whilst you may not attract a large volume of new patients you are seen to be community friendly which hopefully counts for a lot in an long established practice.



Hundreds of visitors line the street for one of Thornbury's popular street fairs.



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A change of approach is all it takes to boost sales

Sundry – it means miscellaneous, assorted, various, motley. Not a very inspiring phrase to apply to products that we stock for the benefit of our customers. No wonder many practices have problems trying to sell the stuff – if we refer to them as sundries what hope is there to convince patients that they should buy them?

For the sake of this article, let's refer to sundries as dental care products; items that are recommended by your chosen dental professional to assist in the care and maintenance of your teeth and gums between visits. That puts a whole different spin on things doesn't it! And if you and your team thought of them in this way, it would make a good start to transforming your success at selling them.

Selling dental care products to patients fulfils several important practice objectives:

- 1.** It promotes your expertise by advising patients of products that are uniquely suited to them and are therefore more likely to make a positive contribution to their dental health and/or cosmetic satisfaction.
- 2.** It encourages teamwork because successes only come from everyone working together to achieve a common goal. Unless good communication channels exist, the goal to boost sundry sales is likely to fail so it also promotes positive communication.
- 3.** It can boost practice profitability.

In fact, if approached in the right way, dental care products can generate additional monthly income of up to £2,500 for the average practice. That's an extra £30,000 revenue a year. At an average margin of 33 per cent, that's nearly £10,000 additional annual profit – a significant amount of money that is worthy of some additional care and attention.

Tips to help you refocus your efforts - and sell more products!

- Don't try and compete with local supermarkets whose buying power will be better than yours. Stock items that are more 'specialist' in nature and while they may well be stocked locally, patients will be less aware of them. Consider products such as Peroxyl,



Corsodyl and FluriGard mouthwashes, the soon to be launched Oral B Pro Expert toothpaste, ranges of Tepes, several levels of electric toothbrush etc., and price check them regularly to ensure you remain competitively priced.

- Where clinicians currently recommend different product for the same purpose, ask them to meet, review any duplicates and agree on specifics. Your goal is to present products that your practice recommends and as such, clinicians should agree a definitive list or they undermine one another and you lose credibility as an authority in your patients' eyes.

- Once you have agreed the products you plan to sell and you have set your pricing, it's all about encouragement, targets, sales training, good visibility of products, identifying and overcoming barriers and thinking about innovative solutions. One practice we work with had an issue whereby patients were not valuing hygiene treatment and hygienists were not recommending products so we designed a card that hygienists handed to every patient highlighting the benefits of hygiene treatments and listing the products recommended by the hygienist. The result was fewer cancellations and more dental product sales.

While not the most important process in the practice, the sale of dental products can be lucrative, adds value in the patients' eyes and provides the ideal opportunity for improving communication among the team.

On this basis, we think it represents the ideal topic to get the team working on.

For further details about Spot On Business Planning [click here.](#)

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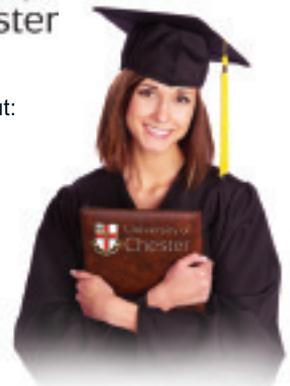
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Michelle McLoughlin
Kirkby Family Dental Centre
Liverpool

Our Dental Patient Experience Survey Pack makes it easy to gather patient feedback

The pack contains professionally designed questionnaires and a tailored report that is almost a mini-consultancy for your practice. The report tells you where you are doing well and where there is room for improvement. And it helps you to meet CQC requirements too.

To find out more about the Dental Patient Experience Survey Pack visit www.snapsurveys.com/dental-surveys

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Web deal attracts 200 new patients

When we heard about the staggering response to a recent online marketing offer, we just had to share it with you. Marie Hobden (pictured right), practice manager at Surrenden Dental Practice in Brighton explains all.



We recently began using the new revolutionary internet tool, Groupon, as part of our on-line marketing strategy at Surrenden Dental Practice.

For those of you who are not technically minded, Groupon is a simple to use, national 'deal-of-the-day' website that is focused on the local area. Each day, Groupon emails its members one unbeatable offer in their local area.

Groupon offers consumers great value by guaranteeing businesses a minimum number of customers. Therefore, a certain number of people must sign up, then everyone qualifies for the daily Groupon offer. For example 10 people must participate in a promotion to obtain the discount offered. If that minimum isn't reached, then no-one qualifies for the special offer.

Given the appeal of Groupon offers, users frequently pass the information along to others, which translates into the potential for even more customers for your business. This generates huge business exposure and we have found that Groupon generates a large number of sales in a short

period of time!

Groupon collects all the money from participants upfront and within a few days they send a cheque based on campaign participation. The sale only happens if enough people join to make it worthwhile.

Groupon works with you to structure an offer that will maximise the value to your business in a variety of categories such as restaurants, health, beauty, events, recreation, services, products, and more.

We got 200+ through our door!

At Surrenden Dental Practice we were able to track the amount of deals every step of the way during our one-day deal. Our most recent deal of the day was a full dental consultation and a scale and polish with a dentist for just £26, a huge saving of £107. We had an unbelievable response and managed to get over 200 new patients through the door!

It just goes to show how many people in the Brighton area are in need of a dentist and our challenge now is to get these patients hooked up and stay with the practice for many years to come!

The downsides

Like any other advertising strategies there are downsides. Groupon's downsides are that you have to be prepared to take a dive in your hourly rate when seeing patients, you will always get people taking up the deal of the day who already have a dentist but come to you for the scale and polish because it is cheaper than their own dentist, if you don't get the patients Groupon's security code at the time of booking the appointment and the patient fails to attend, then you lose out and you cannot claim for that person's deal.

We are a forward-thinking practice and always have a number of online marketing campaigns active. Our internet campaigns are undoubtedly the most powerful advertising tools we use at the practice and Groupon is the latest campaign we have tried.

Why did we choose to try it?

Motivation - Groupon delivers exactly what any business needs - a large number of new patients/customers who are looking to self pay for treatment.

Getting noticed - offers are exclusively delivered to thousands of opt-in email subscribers, who have signed up to receive Groupon's daily email.

Online 'word of mouth' - Groupon's offers spreads virally across the web as customers share it with friends using tools like Facebook and Twitter, further increasing brand's exposure.

Only invest in committed customers - You're only investing in the most valuable asset — committed buyers. The sole purpose of marketing is getting people through your doors.

Risk-free promotion - Unlike most other promotions, you pay nothing up front to appear on Groupon. Groupon are only successful if you are successful.

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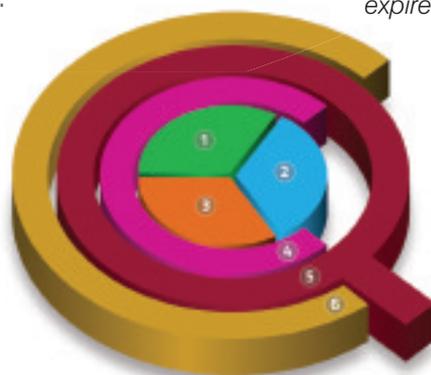


Example above of RAG report showing soon to expire certificates

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Facebook needs careful handling

New Facebook users often fall foul of the same marketing mistakes. Here we offer our members some great tips for avoiding the more common pitfalls, to make the most of their marketing opportunities.

Social marketing is often referred to as a fantastic new marketing opportunity. However it is a marketing tool that needs to be handled carefully. Below are several common mistakes new Facebook users make and how to avoid them.

Utilising a personal Facebook Profile for your practice

Facebook Terms of Service require that you use a Facebook Business Page for your practice. If you are using a Facebook personal Profile, your account is at risk of being closed down at any time.

Sometimes team members don't know if they have a personal Facebook Profile or Business Page. If that's your situation, pay attention to the language: Personal Profiles acquire "friends", while Business Pages accumulate "likes".

You can read about merging your personal Profile into a Business Page by [clicking here](#).

Running competitions on Facebook

Many practices are running some type of competition on Facebook.

Unfortunately, many of them are also violating Facebook's Terms of Service. If you are running a competition on Facebook, you must be aware of Facebook's guidelines. See www.facebook.com/promotions_guidelines.php for details.

In short, you must not collect contest or drawing entries or announce winners directly on your Facebook Page.

Often team members say, "Yeah, but I've seen other practices holding contests directly on their page." The reason for this is many people are either unaware of these guidelines or they are willing to risk losing their Page.

Note that you may run a competition using a third party application, such as WildFire Promotion Builder www.wildfireapp.com.



Mistaking Facebook as a technology tool, rather than a relationship tool

Don't expect to set up your Facebook Page, walk away, and receive turn-key results. With that said, be careful of over automating.

You will only get out of Facebook what you put into it. Rather set your intentions to make human connections with your patients and potential new patients, focus on growing relationships, and treat your efforts as you would a living garden.

"You must plant your seeds (set up your Facebook Page properly), and then nurture it—over and over again," says Rita Zamora, social media marketing expert.

"Just like a garden, if you put time, effort and energy into it (and you genuinely enjoy it), you will find your Facebook community will flourish and result in an abundance of positive word of mouth and referrals."

● **Rita Zamora is honorary vice president of the BDPMA and leader in social media marketing for dental professionals. She offers a free 30 minute consultation to all BDPMA members. To find out more you can [email her](#), [contact her via Twitter](#) or [Facebook](#) or visit her [website](#).**





New rights for paternity leave

The rules surrounding paternity leave have changed - so be prepared. The experts from Ellis Whittam have outlined a number of questions and answers below to help members understand the new rights and how they may affect their team.

Query: A new employee has just finished his probationary period and told me his girlfriend is pregnant. Do I still need to give him paternity leave even if they are not married and don't live together?

Answer: If the employee has 26 weeks' continuous service and is the biological father of the child and gives notice to take paternity leave, yes, you must give him 'ordinary' paternity leave. He can take one or two weeks.

He is entitled to statutory paternity pay if he earns more than the Lower Earnings Level for NICs.

If the child was due on or after 3 April 2011, the employee is also entitled to up to 26 weeks' 'additional' paternity leave if the child's mother returns to work without using her full maternity leave entitlements.

Query: What if the same employee has just finished his notice period when he tells me his girlfriend is pregnant?

Answer: The employee is only entitled to take 'ordinary' paternity leave if he has 26 weeks' continuous service up to and including the 15th week before the expected week of the baby's birth (and he has given notice to take the leave).

If he then resigns or is dismissed, he is still entitled to the leave and to be paid statutory paternity pay.

He is only entitled to 'additional' paternity leave (APL) if he is still employed the week before the APL starts. As the earliest a man can take APL is 20 weeks after the birth date, and in this scenario the child had not been born, the employee will not be entitled to take APL.

Query: When should the employee tell me he wants to take additional paternity leave?

Answer: The employee should give you at least 8 weeks' notice in writing before the start of the leave.



The notice should state the date the baby was due, the actual date of birth, the date he wants paternity leave to start, his relationship to the mother and that leave is to take care of the child.

Query: Is the employee entitled to take paternity leave if his partner is not working?

Answer: He can take the ordinary paternity leave if he is otherwise eligible but cannot take the additional paternity leave because this is dependent on the mother returning to work.

Query: How much is the current statutory paternity pay?

Answer: From April 2011 it is £128.73 a week.

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