HELPING HANDS TO HEADACHES THE DENTAL CLINIC STAFF

or many dental surgeons "; the number one cause of stress in their clinic " is not the clinical work problems,;; but rather staff related issues.. Little or no emphasisemphasis is placed on business and staff management in dental colleges and our dental graduates /post- graduates are not prepared for their roles as business-persons persons and employers... Each clinic is a business center with dentist as its leader and a staff-team to serve and patients as target consumers .So, it's a challenging task to create and maintain a dental team.. With a wider view of dental practice in mind, we observe three type of set-ups.

A Public sector job being run by central or state government where is proper advertisement of jobs in newspapers, the process of interview and selection and the joining and working.

The second category is private sector job in a hospital or nursing home or a polyclinic joint where either a managerial staff or one of the partners of the private sector institution takes the responsibility to look after the human resources department and remains involved with hiring, maintaining and firing department.

The third and of our prime interest group is of dental clinics with a solo dental practitioner responsible for establishing, maintaining and running the show.

WHO ARE OUR ASSOCIATES AND EMPLOYEES?

- DENTAL SPECIALISTS/GRADUATES
- 2. DENTALHYGIENISTS
- 3. DENTAL MECHANIC
- 4. RECEPTIONIST/RECORD-KEEPING CLERK
- DENTAL MATERIAL SUPPLIER
- 6. DENTAL EQUIPMENT REPAIRER
- SWEEPER/WASHERMAN
- 8. ACCOUNTS MANAGER/ INCOME TAX LAWYER/CHARTEREDACCOUNTANT
- 9. PUBLIC RELATION PERSON
- WASTE DISPOSALAGENCY/AGENT
- [1] **DENTAL SPECIALISTS-** They are masters degree holders who visit the clinic on call and/or on certain days and timings for the job of their speciality only. This relationship may benefit the patients for the long time if mutual, financial and professional interests are honored.
- [2] DENTAL GRADUATES-With the mushrooming of private dental institutions, graduate coworkers are available in abundance. One has to carefully assess the working capability of the person, before employing.
- [3] DENTAL HYGIENISTS- If dental hygienist diploma holders are affordable and dental surgeon needs an assistance for periodontal therapy. In the clinics where a

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help is called for completing the work of oral prophylaxis and oral hygiene maintenance therapy .. Also, in cases where organizing school dental health check-up camps, become a part of dental practice. The untrained workers who are gradually instructed during assistance in clinic, start working as proper dental hygienist and the majority of clinics have such persons. These personalities as Rakesh, Pappu or Ruhi are hardly class 10/ high school pass individuals who make firm foundations of our clinics.

[4] DENTAL MECHANICS- With increasing number of dental prosthetic / orthodontic work laboratories, with the ease of communication via mobile phones and with the promptness of courier services in every Indian city, the employment and the need of a dental mechanic in a private single setup is not a regular finding. In the early months/ years of practice set-up, the dental surgeon himself/ herself is sufficient tocarry-out jobs of prosthetic dentistry in patient's mouth and in the laboratory corner. Later on, with increased in-flow of patients, an assistant from the dental lab, is usually enough to carry-out jobs efficiently and in time, ofcourse, with the proper schedule of appointments.

[5] DENTAL MATERIAL SUPPLIER- This is a new breed to associate with, in district headquarter city and smaller towns.,but in big cities, suppliers keep an cyc on targetclinics and clintelle and keep telephoning or meeting personally to supply items-consumables and others.

[6] DENTAL EQUIPMENT REPAIRER- This person is not required everyday but a dental surgeon may land-up in trouble with non-functional parts of equipments and may start looking forsuitable repairing person...Everybody likes to give a call to the supplier who had sold the equipment but soon there is need of a local electrician or mechanic/ technical person to look into dental-chair or equipment for the minor defect.

[7] SWEEPER/WASHERMAN/ PERSON TO HANDLE DISPOSIBLE ITEMS- A neat and clean place is appreciated and desired by everyone but to achieve this level is very difficult. As a dental clinic is a source of a lot of waste materials sharp, non-sharp, chemicals, blood-soaked, every-kind,, so , efficient cleaning workers are back-bone of maintenance.

[8] RECEPTIONIST-The only ever smiling person in a clinic, who greets our patients, notes-down their name/ age/ sex/ addresses, charges fee of registration and passes-down the list to the dentist inside the clinic. A sympathetic talk on telephone may bring more patients or a sharp firm voice may keep people away.

19 ACCOUNTS-MANAGER/ C.A./ INCOME-

TAX-LAWYER- These calculation people guide dentalsurgeons to prepare accounts to be presented to income-tax department.

[10] PUBLIC-RELATION-OFFICER--In most of the cases, the dentist himself/ herself acts very well as public relation person but an expert may be hired for some initial short period to suggest suitable advertisement modes popular in that region.He/ she may help in making contacts with social-clubs,/ schools,/ cultural-organizations and increase new patients in-put in the clinic.

HIRING POLICY-Several steps can be taken to ensure that a professional image is projected by the dental team. It is recommended that the dentist should make team members accountable, make time for staff-training, share the practice plan, take the time to hire the right-people and understand when it is time to let the wrong person go...It is also vital to retain the effective productive team member. It is difficult to plan for, find and support the ideal team, but some guidelines are there-

- a) First, the dentist should plan before the interview and review the job description.
- b) The duties of new person should be clearly defined before the interview process is initiated, as should the task and responsibilities for which he/she will be held accountable.
- c) Identification of who will be responsible for training of the new team members and the hours, the team member will be expected to work.
- d) Dental surgeon should decide as to who will be involved in the interview and what questions will be asked to assess the capabilities, interest and future plans of the candidate. The daily reality of a dental practice is demanding and time is often in short supply but paying attention to team interaction will generate harmony and

MENTAL STATUS OF THE EMPLOYER

During the interview, the mentality of the dental surgeon as officer incharge, can be classified as:

- a. STATE OF DESPERATION- when he/she cagerly needs a new employ. Solution is to use a temporary person or pay overtimeto existing staff, but don't rush the interview.
- b. STATE OF FASCINATION-when the dentist is attracted to personality or fame or working ability of a future employ. Solution is to avoid one visit interview of one to one type and investigate also other candidates and strict checking of qualifying certificates.
- LAZINESS- when the dental surgeon is omitting important steps in hiring the person. Solution is to use type forms and to keep written records.

HOW TO GET THE BEST PERFORMANCE FROM THE STAFF

The performance of a dental clinic is a matter of vision,, clarity of goals, execution of efforts and a time limit for re-evaluation. In our settings of dental-practices,

we have financial burdens as loans for starting a setup. Equal important is the satisfaction of increasing number of patients and smooth working with an efficient team. Staff performance is best when employees a understand their job description and know how their employer feels about their working style. During the review time, may be on DIWALI OR NEWYEAR, employees should be complimented for their achievements and strengths. Weaknesses should be pointed out, along with a plan for continual improvement.. Identifying the staff- member; s limitations can guide the expectations of the dentist and deciding the role in futureplans. Communication and open talks between both parties is the first step towards improvement.

WHO IS THE REAL STORE-INCHARGE-

It happens with passage of time and over-dependence on the staff,,that the dental-surgeon becomes unaware of the stock position of dental-materials in the clinic. The senior staff becomes permanent clinic member and takes care of consumeable and non-consumable items of the clinic. They even assume the role of pay-masters of clinic and responsible for in-time payments of Electricity bill,, telephone bills., rent for the clinic etc. Some dentists have view, "Let me practice the dentistry and let someone else take care of store and billing", but this may prove harmful financially. The solution is proper writing down in register/ computer about the material stock and payments-made or received.

SHADOWS WHO PRACTICE DENTISTRY

With passing of years together and the dental surgeons over- dependence on the staff may create a scene that the employ of the clinic, who is semi-literate, untrained and only with the silent encouragement of the employer and by assisting/listening in the clinic over the years, is making R.P.D. impressions, adjusting R.P.D.s and complete dentures, adjusting removable orthodontic appliances and even doing restorations. This all slackness and physical dependence makes that non-clinical person, a clinician and gives confidence to start his/her own private practice independently in a small locality or in a village as a quack. Though in our Indian nation and U.P. state the governments have provisions of criminal offence against such quacks but the reality is that the public health systems from community health centres, district hospitals and even government dental colleges are insufficient in number. The cost of the dental treatment is high for the people living below the poverty line. Millions of illiterate poor people at village block- tehsil- town level seek the services of these quack dental practitioners. These persons are never trained to properly diagnose and plan oral health treatment needs.

BEHAVIOUR TOWARDS THE OPPOSITE

SEX Behavior of the clinical staff towards opposite sex becomes worth mentioning in a society where females usually do not visit dental clinics alone. Most of the time, male family members father, husband, brother or son come in the company to explain the symptoms, to support emotionally/ physically and to pay the bill. The staff member's body language speech and actions should generate a co-operative, safe and comforting atmosphere. With increase in a number of female dental surgeons, again it becomes very important for a clinical staff to behave with respect and use of proper, polite language.

CRIMINAL MINDS

With-out any knowledge about social background of the persons,, his / her illegal and immoral habits, without registration in the police - station ,the dental surgeons hire their assistants and blindly believe them. May and June 2008 were months of fear and pain for all of us ,because the only child of a dental surgeon couple was brutally murdered by the clinical assistant and his alcoholic friends. This criminal aspect of this category/ clinical associates is now much more bare before us.

CONCLUSION

A planned dental clinic needs a positive vision to serve the society, execution of principles of profession and business and re-evaluation of achievements time to time. Human resources are integral part of this profession . Though we, as dental surgeons , are not trained to run business houses, we have no option but to learn the trade and management of employees to become successful and peaceful without stress

BASIC INFORMATION FORM ABOUT THE CLINICAL STAFF

NAME

AGE/SEX

married/unmarried

ADDRESS OF CLINIC

EDUCATIONprimary/high school/intermediate

Hygienist/mechanic

B.D.S./M.D.S.

Computer knowledge

TIME PERIOD-working since

EMPLOYER'S COMMENT- satisfied/unsatisfied

EFFICIENCY LEVEL- satisfied/unsatisfied

PLUS POINT OF PERSONALITY

MINUS POINT OF PERSONALITY

FUTURE PLANS

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