

## Full steam ahead...

... or out of your comfort zone? While fully backing direct access, Laura Horton understands why so many fear the journey ahead

I have been helping my clients to implement a strong direct access system for their hygiene departments since the announcement. While a few hit the ground running, others wanted to hold back for a couple of months – and rightly so.

Direct access (DA) helps to attract new patients to the practice, offering them the chance to build a relationship with you before they see a dentist (which is often reassuring for them). Hygienists can help those with phobias to gain confidence – not only in preparation for treatments, but in their own wellbeing, too. So many patients are embarrassed by their oral health and this can stop them from having dental treatment – or even an examination!

Communication is the name of the game so combine this with a strong system to ensure success for the business; protection for the hygienist, and an amazing experience for the patient.

### On the right track

DA, like all systems, needs to be created, implemented, the entire team then trained in detail, executed and reviewed regularly. Many hygienists are being left alone to do this and that's not fair.

The team on the front desk does not understand the system as there isn't one and hygienists are having cold sweats at night with the fear of something going wrong. I know why. While mystery calling many practices, there was one thing that stood out to me – patients could choose their appointment length! How can they?

Hygienists, seeing any patient for the first time, need a one-hour initial assessment with the patient. If you are not in a position to do this for all new patients at the moment then you need to ensure you are for those using DA.

There needs to be a protocol for this appointment, the team on the desk needs to understand what's involved and how this is delivered so they can educate the patient on the phone.

### Timetable it

Another key aspect of the system is the diary – what are you doing here? Do you have DA-only sessions? Do you have blocks for new patients anyway so they have the one-hour that's needed?

If you have a treatment coordinator (TCO), (s)he needs

to see the patient before they go into the hygienist – and afterwards. Many don't have that luxury; therefore you need to make sure you have a checklist of the items that you are covering. A consultation has to take place first of all.

### The start of the journey

The medical history and smile check form must be reviewed in detail. The hygienist needs to understand the patient's concerns and goals – what does the patient want? This is a process that is normally undertaken by the dentist and now the hygienist has to take this part over.

The hygienist needs to fully assess the gums and tissues, take photographs where possible and report back to the patient. Once they have understood what's wrong, the hygienist can then confirm what they are able to do today. What future treatment or referrals the patient may need?

### Get consent

Consent forms must be signed for treatment, not only for the assessment but for the initial work to be carried out. The patient needs to be provided with fact sheets and estimates for future work or the necessary referral, too.

### Brief encounters

These are needed on a regular basis between the principal dentist(s) and hygienist to review the systems and the patients. Audits need to be completed not just clinically, but on patient satisfaction too.

### Who is supporting you?

If you do not have a nurse, it's going to be tough. Every practice should have a hygiene coordinator – now more than ever. This under-used role is essential when offering DA. This person is there to help you coordinate the diary and lead the front desk team with any system issues or questions that patients have.

### Brakes on

If you have started DA for hygiene appointments, but aren't happy with the system, then put a stop to it. You should take advantage of DA only when the system is in place, the team has been trained and you are confident to communicate to patients in the areas listed! **DH&T**

### Communication signals

With DA, hygienists are now required to communicate in different ways:

1. With the team about the system
2. Controlling the appointment when the patient arrives
3. Co-diagnosing the patient's problems
4. Presenting the need for a referral
5. Presenting a recall period or further treatment
6. Presenting fees
7. Discussing membership

### Let it Schein!

Laura Horton will be speaking on enhancing your communication skills for direct access patients at a new course – Your Guide to Direct Access – being organised this month by Henry Schein.

They take place this month, from 2.00-8.00pm, at the following:

• Tuesday 8 October: The Victory Services Club 63-79 Seymour Street London W2 2HF

• Wednesday 9 October Hilton Manchester Airport Manchester Airport Outwood Lane, Manchester M90 4WP

• Thursday 10 October Marriott Cardiff Mill Lane Cardiff CF10 1EZ

Delegate prices are £50 for non-members or £25 for BADT or BSDHT members, quoting membership number when booking

For more information and to attend, call 02920442818 or email [suzanne.ourourke@henryschein.co.uk](mailto:suzanne.ourourke@henryschein.co.uk).

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Laura Horton has an outstanding passion for, and knowledge of, dentistry that lies with the training and implementation of the TCO role, and has been responsible for the breakthrough and education of this role in the UK dental profession.

Laura has been successfully working with dentists and their teams since 2005 and through her own company since 2008. She has a 'sleeves rolled up' attitude and thrives in her unique hands on style of delivery.

To find out more about Laura Horton Consulting

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