Avoiding workplace discrimination

With the introduction of the Equality Act discrimination legislation is to have its biggest overhaul for many years. To make sure dental employers comply with the law, Sunil Abeyewickreme and Sarah Leyland discuss how the new developments apply.

The Equality Act will be this year’s significant piece of legislation to be introduced. It is due to receive Royal Assent in April, although the process is likely to come into force before October this year. Once Royal Assent has been received, even if there is a change in government following a general election, it will become law.

The main purpose of the Equality Act is to harmonise the existing equality legislation. This has required the legislators to review, simplify and modernise discrimination law, which was introduced over 40 years, often in a piecemeal fashion. Most of the Act simply restates the law in a more logical and accessible form. There are a number of significant reforms as well.

Currently, if someone is discriminated upon because of a combination of characteristics, for example an Asian woman, it is necessary to bring separate discrimination claims for each separate characteristic. This can cause difficulties and it often quite complicated. The Act introduces dual discrimination which allows a claim to be brought if a person is discriminated upon because of two combined characteristics where there may not be enough evidence to prove discrimination based on one characteristic alone.

Another important provision is the measure to make equal pay more transparent. This is aimed at prohibiting employers from using secrecy clauses to prevent employees from discussing their pay. At one point it was thought that compulsory equal pay audits would be introduced for all employers but this has been dropped. The Act currently stipulates that only employers with more than 250 employees will be required to publish information about pay and gender differences. It is believed that the Government may be looking to amend this to require employers of more than 500 employees to provide details.

As a consequence of its passage through the House of Lords, the Equality Bill has re-casted in a manner to prevent employers asking candidates questions about their health that are unrelated to the job role. There are further amendments expected, so it is important for employers to take legal advice on their employment practices as soon as the Bill is finalised and receives Royal Assent, (probably April 2010).

The Equality Act is expected to be in force by October 2010, so employers will have to ensure their employment contracts, recruitment and HR policies are updated.

Paternity leave

 Fathers will be able to take more time off while their baby’s mother returns to work, making childcare easier to share for babies due on or after 4 April 2011. Currently, the law allows for a father to take two weeks paternity leave following the birth of a child and during this period of leave they will receive Statutory Paternity Pay which is currently set at £123.00 per week.

From 4 April 2011, fathers will be able to take up to 26 weeks’ paternity leave while their child’s mother returns to work. A father will have a legal right to take the place of the mother at home during the second six months of the child’s life. Up to three months’ paternity leave will be paid at the same rate as statutory maternity pay if the leave is taken during the mother’s 50-week maternity pay period. The remainder will be unpaid. Employers will need to ensure that maternity and paternity leave policies are changed in due course.

If the Conservative party wins the next general election it has expressed a commitment to extending paternity provisions, and it is currently proposing to extend the provisions further to allow both parents to take paid time off simultaneously.

Sick note / fit note

As long-term sickness is often frustrating and costly for employers (estimated to be costing the economy £100 billion annually) the Government is introducing a new electronic ‘fit note’ in April. This will replace the current medical certificates, which states whether the employee is fit to work or is not. The new “fit note” will provide information about when the employee should return to work and what they are able to do when they return.

General Practitioners (GPs) will be required to indicate whether the individual “may be fit for some work now”. The GP will be required to describe the functional effects of the employee’s condition with the option of setting out suggested arrangements which could help them back to work. This could include a phased return, altered hours, amended duties or workplace adaptations.

Unfortunately one of the criticisms of the Government’s implementation of this ‘fit note’ is that GPs have not been sufficiently trained in occupational health to make an informed assessment of the employee’s work-related capabilities.

It remains essential for employers to have in place a sickness policy which clearly sets out what is expected of an employee in this situation and any action that may be required.

Time off for training

The Government introduced a new right to request time off for work in training legislation, which will come into force from 6 April 2010. It will apply to organisations with 250 or more employees, being extended to all employees on 6 April 2011. It is modelled on the right to request flexible working and is introduced for employees who have been continuously employed for a period of more than 26 weeks. Employers will be obliged to carefully consider requests that they receive, and will be able to refuse a request where there is a good business reason for doing so. Employers will not be obliged to pay the salary or training costs.

The regulations set out the procedure to be followed when a request for time off to study or train has been made. If employers fail to comply, the maximum amount of compensation that may be awarded at the Employment Tribunal is eight weeks’ pay.

Registration with ISA

The Vetting and Barring scheme will have a huge impact on dental practices. It will mean that anyone in regular contact with children or vulnerable adults in England, Wales and Northern Ireland will have to register with the Independent Safeguarding Authority (ISA).

From 1 November 2010 it will be an offence to employ or engage someone to perform services on a self-employed basis in a role, which involves contact with vulnerable adults or children, if that person is not registered. You are required to check all your employees even those who are not directly connected with vulnerable adults and children. It is a criminal offence not to check and carry a sentence of imprisonment of up to six months.

Anyone unregistered with the ISA (because they started their employment before 1 November 2010), will be able to apply for registration from April 2011. All employees who have regular contact with children or vulnerable adults must be registered with the ISA by 1st July 2013. This means that all employees of a dental practice will have to be registered.

Keep up with change

Dental employers should keep abreast of the changes and ensure that they are up to speed with recent developments that will affect the dental industry. Practices will need to ensure that they have the necessary policies and practices in place to address the changes.

The penalties for failing to adhere to the implementation of the changes can be severe, therefore dental employers should take legal advice at an early stage.

About the author

Sarah Leyland is an Employment Solicitor who works with Sunil Abeywicke- reme, a Barrister who heads the Employment Law Team at Cohen Cranmer. Sunil will be giving a presentation on the changes in Employment Law at The Dentistry Show on 20 March 2010 at the Birmingham NEC.
Telephone tactics

Julia Dawson discusses the importance of great telephone communication, and how getting it right can help your practice thrive.

I think it’s fair to say that the telephone is the unparalleled communication tool of time. In fact, 40 million people own a mobile phone in the UK, which is twice as many as read a newspaper every day. In business too, more and more service sectors are giving people the opportunity to conduct their business by phone. But, good telephone communication is not as easy as simply picking up a phone and talking...it’s a learned skill.

Remember, patients don’t have to do business with you, they choose to, and many things affect their choice. Good telephone tactics can not only give your practice the chance to be efficient and also to enhance the image of your business. Minor things and statements will confirm that you're prepared to listen; even if you're meeting someone you've only spoken to on the telephone properly – holding it under the chin will give a muffled sound to the caller and will hinder good communication.

A good first impression
How often have you met someone you've only spoken to on the phone and thought 'they're nothing like I expected'? By making sure that you always answer the phone and greet your patients in a bright, friendly manner you can ensure that that's what your patients will expect when they come into the practice. Also, smiling when on the phone is really important as it shows your patients the pitch of your voice and add a brighter, more welcoming tone.

Great service will also help you attract new patients, as existing patients will tell their friends and colleagues how good you are. A word of mouth recommendation is far more powerful than any advert and is a real indication of how effective your customer care is. Some companies offer tailor-made training days, specific to your practice’s needs and can incorporate a module focused on customer care and telephone tactics. Some of these courses can also count towards verifiable CPD when undertaken in accordance with GDC requirements.

Avoid time wasting
It may seem obvious but answering the phone promptly can really increase your customer service levels as it shows that caller how professional you are. It's good business practice to answer a telephone call within three to five rings. Answering too early can startle a caller while leaving a phone to ring incessantly gives the caller an image of inefficiency.

One of the things that often comes up when discussing poor call-centre experiences is being kept on hold for long periods of time. If you're unable to deal with a call straight away, let the caller know you'll deal with their query and call them back. This not only makes the patient feel valued, but also allows you to look into more complex queries at a quieter time of day.

For practices lucky enough to have lots of patients, there are often periods of the day that have particularly high call volumes. By monitoring the calls throughout the day you can identify these times and ensure you have sufficient cover to attend to them. Automated answering services are also great outside of working hours, but try not to use them during the working day. They may be more convenient for your team, but are often a waste of time for your patients, as they prefer to speak to a real person and explain their queries in their own words.

Talking on the phone
When a person loses one of their senses their remaining senses become heightened. The same goes for telephone communication as speech and hearing is all you can rely on. As a result, things that interfere with speech such as typing on a computer, shuffling files and eating become more audible to the caller and can make them feel ignored and less important than your other tasks. It’s vital that you really concentrate on your conversation, giving your caller your undivided attention. It’s also a good idea to hold the telephone properly – holding it under the chin will give a muffled sound to the caller and will hinder good communication.

Whenever you speak to a patient on the telephone you should always aim to be calm, clear and concise and avoid dental jargon. It's really important to listen to the whole conversation, even if you think you know what their query or point of view is. By selectively listening you may miss important points.

Acknowledging their points and statements will confirm that you're actively listening to them and taking notes will help you deal with the call later.

Dealing with complaints
In my experience, the majority of complaint cases are caused by some form of breakdown in communication. It might be that a patient has not fully understood the implications of a particular form of treatment, or has chosen to disregard, or not take responsibility for, some aspects of their oral health. However, it’s crucial that you listen carefully and show you’re prepared to listen, even if you feel you’ve heard it all before – people generally need to feel they can get things off their chests.

Once you fully understand what the complaint is about - genuinely sympathise with the caller and to show concern about the issues they are raising. All too often people can slip into the slow, monotone speech patterns which we associate with complaints departments, but this doesn’t instil the confidence that you care about the person’s problem. Instead, summarise the complaint back to them to show that you have really listened. If you need to check anything, give the caller your name and a firm commitment of when you will get back to them.

Taking Messages
We have all been guilty at some time or another of hastily writing a message on a scrap of paper and when questioned about it, being unsure of the detail. Even if a phone call is for somebody else the way you deal with that situation is a demonstration of your business’s efficiency. For example, if a message is from a ‘Mr Jones’, there may be handing the call off to someone with the surname Jones in the practice and we cannot assume that the message recipient will automatically know which one it is.

Time is wasted and business lost when messages are not correctly relayed. If you don’t answer promptly so it’s a good idea to create a specific message form to remind you of all the details you need to note down. Many stationery companies supply pre-printed pads for this purpose or you can easily create your own, but remember that if you’re using e-mail to send messages within your practice they should include the same information as the message forms.

It’s clear that customer service is vital both in the practice and on the telephone and it’s the constant desire to make each customer feel individual and welcome which will set you apart from your competition. By following this advice, you can only ensure that your existing patients stay loyal to you, but that you attract new patients through word of mouth and great customer care.

About the author
Julia Dawson joined Denplan in 1989, running the Administration department, and in 1992 moved to manage the Practice Standards and Customer Advisory teams. During 1992, Julia transferred to the Professional Services area, and in 1997 became Head of Operational Development before becoming Head of Denplan’s Customer Services division in 1999. Now as Director of Customer Services, Julia has overall responsibility for the Practice Support Advisors, Customer Advisors, Registration and Administration Services, Insurance and Helpline and Corporate Customer Services.

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By Dr Tatum (CEO)

Dr. Tatum FDSRCPS (UK) Msc (Cranfield) FDS RCS (Eng)

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