

## THE DENTAL HYGIENIST - A PERSONAL VIEW

Let me start with my personal view on hygienists. I'm a big fan. I used to say that to ensure my practice had the continued services of an extremely talented and popular hygienist I married her. There were other reasons, obviously, but it was a great advantage to work with someone who knew and shared my professional and personal values.

I believe that the dental hygienist should be the hub of 21st century dental practice and yet I detect a reluctance amongst many dentists to employ the expertise of these colleagues.

Repeatedly I see hygienists whose skills are neither used fully nor appropriately and who end up feeling unappreciated by their dentists. It's sadly a truism that many are viewed as "Cavitrons with legs". These valuable people are trained communicators, they are great motivators yet unless they are scaling 100% of the time they are deemed to be failures.

In 2007 I did some consulting work for a small corporate where the clinical director was looking to get rid of the hygienist in a practice they had recently bought. In his words "all she seems to do is talk to people instead of getting in there and scraping, what are we paying her for?".

One hygienist I know left a practice after a disagreement with the principal. Her crime? She had been upsetting some of his patients, in his view it was unprofessional to tell patients that they had active gum disease and to show them ways to control said disease.

Another was told in her first job after qualification that the best way to remove lingual calculus was by using a rose-head bur!

In spite of guidelines some hygienists are expected to work without a nurse and some still have appointments as short as 15 minutes.

The result of repeated experiences like this leads to hygienists moving jobs frequently and eventually becoming disillusioned and leaving dentistry. It's a great shame when talented enthusiastic people are lost to dentistry especially when with thought and careful management they can be key workers in prevention and periodontal treatment.

On the other hand many hygienists (perhaps as a result of experiences such as the above) don't do themselves or their profession any favours. Often when they work between several practices they aren't willing to make the effort to fit into a number of teams. In those cases they sometimes give the impression that the grass is greener elsewhere.

As a result of their position as clinicians some struggle with their status and behave as if they occupy a half way point between nurses and dentists. This can manifest itself in the use of dentists' first names and sharing their break rooms rather than choosing the company of nurses who in their turn think that the hygienist is being "snooty".

Now we come to the one area that I do deal with when I am coaching dental teams. The hygienist that says, "I am not here to sell treatment it's not my job". Unfortunately sometimes this has come about by the dentist trying to offer an incentive to the hygienist for sales which is not the right way to go about things.

What I do in these cases is to quite firmly remove the word "sales" from any conversation I have. I get the hygienist to agree that it is most definitely their job to be a communicator and to try to motivate their patients towards better dental health. Next I will get them to agree that it is also part of their job to educate patients about the choices they have in dentistry - indeed not to keep patients informed of ways that dentistry can help them can be interpreted as failing in their

duty of care. From there to asking them to discuss treatment options with patients across the board is a very small step.

OK so here are Dental Business Partners' Perfect 10 for a smooth working relationship between dentist and hygienist.

1. Get it right from the start. In the same that all dentists and practices are different so are all hygienists. Decide why you want a hygienist then find the right one for you and your patients.

2. Try to ensure the hygienist spends as much time as possible in the one practice. Two dentists should equal one full time hygienist quite easily.

3. Have regular clinical conversations. Not only must the hygienist be able to understand the reasons for referral they have to be able to give feedback to the dentist about patients and have input into their management.

4. Include a part-time hygienist in all practice activities - particularly team meetings. If they're part-time move the meeting to one of their days - and yes if it's in clinical time they do get paid.

5. Rotate nurses so that all get a chance to work with the hygienist.

6. Allow them as much time as they need and let them recommend recall periods.

7. Explain to patients why you are referring them to another clinician.

8. Make sure that their surgery is comfortable and works, with decent equipment. If it looks like it's a converted broom cupboard then their importance in the eyes of the patient is reduced.

9. Determine what their status is with the HMRC and insist on written proof from the hygienist's accountant at the start of every financial year.

10. Accept that hygienists' skills are going to be greater than yours in some areas, just live with it - it's what they do.