Striking the Balance

With April’s contract looming large and facing the challenge of an adverse financial environment, who should a mixed practice turn to for help?

As a dentist dedicated to the values of the NHS, Jim Lafferty tries to reconcile practising NHS dentistry with the financial realities of running his practice in South Yorkshire. With the help of Henry Schein Minerva he has been able to introduce more efficient working practices that are helping him establish a private element to his practice whilst still being able to fulfil his NHS commitments.

Getting the balance right between NHS and private provision, particularly during current financial constraints is a delicate operation, but Jim Lafferty and his wife Nicholea are helping him establish a private element to his practice whilst still being able to deliver quality NHS provision to the community.

With a practice that is almost 90% NHS, Jim’s natural comfort zone is not to “hard sell” private treatments to his patients, never-the-less he recognised the need to meet the increasing demands from some patients and encouraged by his Henry Schein Minerva Field Sales Consultant, Steve Coustol, admits he was pleasantly surprised by the experience.

Steve offered his skills in business development as an “added value” service from Henry Schein Minerva – this concept took Jim a little time to get used to as it’s a long way from the traditional role of a rep just interested in taking orders. Steve helped Jim to understand how to communicate differently with different people and helped him with the presentation of treatment plans. Although Jim found this a bit of a novelty at first he quickly came to realise that talking with patients about their individual concerns is just a natural part of his professional life.

“One of the first things that Steve did was to review Jim’s prices,” Orgreave Dental Surgery is located in a traditional “working-class” area, but few patients are actually exempt from charges and Jim was conscious of the potential problems of introducing wholesale radical price rises. However, with all the marketing knowledge available to Henry Schein Minerva, Steve was able to pinpoint those prices which were a little low and advise that other practices had found little resistance to a modest price increase.

Jim admits this was a difficult but never-the-less very worthwhile project. “I was a little nervous about the price increase, however together we worked out the realistic level for certain services and reviewed them in terms of fixed and material costs, then re-set them accordingly. I think we handled the situation very sensitively and actually had no adverse comments whatsoever from our patients.”

“Steve explained how he wanted to help the practice and convinced me that between us we could build a dynamic synergy with the aim of increasing the level of private turnover.”

This simple task not only had a dramatic financial impact on net profit but also allowed Jim to clinically expand his treatment offering and provide more in terms of value and service. This in turn has given him increased job satisfaction, enabled him to offer different treatments and freed him from some of the restrictions of the NHS.

“I have always been interested in discovering more about the latest treatment protocols. Being able to use different materials and the latest techniques has really expanded my horizons.”

Despite the fact that Jim is running an NHS practice on a tight budget his belief in Steve and Henry Schein Minerva is unwavering. He is more comfortable with the help he has received which is now Routinely helping him to prepare treatment plans for high value restorative cases. Jim has been delighted at the positive reaction of his patients which he describes as a “snowball effect”, the more you offer patients, the more motivated they are to take up other treatments. He recognises that under current economic conditions, maintaining uptake of complex treatment plans may be more difficult as patients consider every aspect of their spending patterns and look to save money where they can.

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He recognises that in this scenario his role is to explain the long-term benefits of treatment and ensure his patients maintain their overall oral health through consistent regular care.

So what of the future? Jim’s reservations about what April 2009 will bring mirror the thoughts of many of those with NHS contracts. He has been through tortuous negotiations with his local PCT but is still set to face a significant shortfall in April. Ultimately Jim does not want to leave the NHS but fears that the continued PCT squeeze will force him and many like him to rethink their NHS position. However, the thought of “going private” during the current economic downturn does not fill Jim with as much fear as it might once have done. Having worked with Steve for 5 years and experienced the difficult but necessary processes of raising prices and explaining complex, high value treatments, Jim feels more prepared than ever for the challenges his practice is set to face during the coming year.