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Vol. 6, No. 8

**Quality employees**

Are you merely looking to 'fill a vacancy' or do you want a quality employee? [▶ page 1B](#)

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Some used musical instruments harbor harmful bacteria, fungi

Research has shown that playing a musical instrument can help nourish, cultivate and increase intelligence in children, but playing a used instrument can also pose a potentially dangerous health risk, according to the Academy of General Dentistry.

Used woodwind and brass instruments were found to be heavily contaminated with a variety of bacteria and fungi.

Many of the contaminants found on the instruments are associated with minor to serious infectious and allergic diseases, according to a study published in the March/April 2011 issue of General Dentistry, the peer-reviewed clinical journal of the AGD.

"Many children participate in their school's band ensemble and often the instruments they play are on loan," said R. Thomas Glass, DDS, PhD, lead author of the study. "Most of these instruments have been played by other students, and without the proper sanitation, bacteria and fungi can thrive for weeks and even months after the last use."

A total of 117 different sites, including the mouthpieces, internal chambers and cases, were tested on 13 previously played instruments of a high school band. Six of the instruments had been played within a week of testing, while



Is it possible that your child's musical instrument can make him ill? Yes, says the Academy of General Dentistry. (Photo/Jozsef Csaszma, www.dreamstime.com)

seven hadn't been touched in about one month. The instruments produced 442 different bacteria, many of which were species of *Staphylococcus*, which can cause staph infections. Additionally, 58 molds and 19 yeasts were identified.

"Parents may not realize that the mold in their child's instrument could contribute to the development of asthma," said Glass.

Additionally, the yeasts on the instruments commonly cause skin infections around the mouth and lips ("red lips").

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'Texas style' dentistry



If you are heading down to San Antonio, we bet you'll have a rootin', tootin' good time in and out of the convention center. Dr. Roger Macias, chair of the 2011 Texas Meeting, explains the plethora of learning and social opportunities for clinicians, dental assistants and lab technicians.

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Leo E. Rouse installed as ADEA president

Leo E. Rouse, DDS, was installed as the first African-American president of the American Dental Education Association (ADEA) at the 2011 ADEA Annual Session & Exhibition in San Diego in March. Rouse's extensive background in leadership and dedication to service will guide the association over his yearlong presidential term.

"Leo's commitment to service in

the field of dentistry and dental education will be invaluable, not only to the association, but to all of academic dentistry. I look forward to seeing the direction he will give our community," said outgoing ADEA President Sandra C. Andrieu, MEd, PhD.

Rouse will host the 2012 ADEA Annual Session & Exhibition, which

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ADEA
President
Leo E.
Rouse
(Photo/
Provided
by ADEA)



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sets the tone for the association, around the theme “Engage: better individual, better profession, better community, better health, better future.”

Rouse is a veteran of the U.S. Army. He concluded his 24-year career as the commander and chief operating offi-

cer of the U.S. Army Dental Command, where he led the global operation of the Army Dental Corps.

After starting a second career in academic dentistry, he was appointed dean of Howard University College of Dentistry in 2004.

Rouse previously served as chair of the ADEA Council of Deans and as one of the four ADEA commissioners on the Commission of Dental Accreditation. In 2009, he was awarded an ADEA Presidential Citation for distinguished service to the association and dedication to the advancement of the dental education community. He is actively engaged in other dental organizations. Currently, he serves on the Board of Directors for the American Dental Association (ADA) Foundation and the Association of Minority Health Professions Schools (AMHPS).

Rouse holds a DDS degree from the Howard University College of Dentistry. In 1997, he received the Howard University College of Dentistry Alumni Achievement Award for distinguished service to the country and the profession of dentistry.

Glickman voted ADEA president-elect

Gerald Glickman, DDS, MS, MBA, JD, was installed as ADEA president-elect. He will spend a year as ADEA president-elect and become ADEA president at the conclusion of the 2012 ADEA Annual Session & Exhibition in Orlando, Fla., March 17–21.

“In his 25 years of service to ADEA, Dr. Glickman has been an actively engaged volunteer leader,” said Andrieu. “I was proud to serve with him and look forward to seeing the association grow under his leadership.”

Glickman will focus his term as ADEA president on fostering lifelong learning. He aspires to give ADEA members the tools for self-direction and self-reflection.

An educator committed to bettering the future of academic dentistry, Glickman is a founding member of the ADEA Commission on Change and Innovation in Dental Education (ADEA CCI), which promotes innovative curricula to educate efficient and effective health-care team practitioners. He has chaired and served as councilor for the ADEA Section on Endodontics and the ADEA Section on Graduate and Postgraduate Education. He was elected ADEA vice president for sections, a position he held from 2002 to 2005.

Glickman is currently professor and chair of the Department of Endodontics and director of graduate endodontics at Baylor College of Dentistry. He holds a MS in microbiology from the University of Kentucky and earned his DDS from Ohio State University. He was awarded a GPR certificate from the University of Florida and a certificate and MS in endodontics from Northwestern University. Glickman also holds a MBA from Southern Methodist University and a JD from Texas Wesleyan University.

About the ADEA

The American Dental Education Association (ADEA) is the voice of dental education. Its members include all U.S. and Canadian dental schools and many allied and postdoctoral dental education programs, corporations, faculty and students.

The mission of the ADEA is to lead individuals and institutions of the dental education community to address contemporary issues influencing education, research and the delivery of oral health care for the health of the public.

The ADEA’s activities encompass a wide range of research, advocacy, faculty development, meetings and communications such as the esteemed Journal of Dental Education, as well as the dental school admissions services AADSAS, PASS and CAAPID. DT

(Source: American Dental Education Association)

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Is 'quality employee' an oxymoron in your practice?

By Sally McKenzie, CEO

It's an interesting paradox of these economic times. Although the unemployment rate nationwide remains high and it would seem that the job market would be flooded with able candidates, according to a recent Manpower survey, talent shortages remain a problem. In some cases, employers have

become so rigid in what they will accept that some very good, albeit not perfect, candidates are never even considered.

The challenge is that the people available and the skills required by employers do not match up, particularly as businesses seek greater specificity in the skill set. In other words, there may be plenty of talent but it's not the right talent available

in the right place at the right time. For these employers, flexibility is an issue.

However, for dentists, the opposite is too often the case. Typically, dentists are so flexible in their hiring practices, they make JELL-O® look rigid. When a vacancy occurs in the practice, it is common for dentists to focus almost solely on filling the position and give lit-

tle consideration to the long-term quality of the hire or the specificity of the skills required — particularly if the hire is going to be a business employee.

They may zero in on one line on the resume that indicates a sliver of past dental office experience and consider this applicant to be "the one." Yet they will disregard a multitude of red flags, such as

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"Because these instruments come into contact with the mouth, it is no wonder they're a breeding ground for bacteria," said AGD spokesperson Cynthia Sherwood, DDS, FAGD. "As dentists, we see this same growth of bacteria in dentures, athletic mouthguards and toothbrushes."

Researchers found that many of the bacteria can cause illness in humans and are highly resistant to the antibiotics normally prescribed by general practitioners. This finding makes sterilization of instruments extremely important.

"Instruments should be cleaned after each use to reduce the number of organisms," said Sherwood. "And cleaning should not be confined to the mouthpiece, since the bacteria invade the entire instrument."

To avoid transmission of bacteria from instrument to player, parents and students should frequently wipe the surface of the instrument that comes into contact with the skin and mouth. The instrument should be taken apart for thorough cleanings on a regular basis.

Glass suggests using cleaning cloths and solutions made specifically for instruments. Most importantly, students are advised not to share their instruments with others. Students should consult with their band instructor for additional ways to disinfect their instruments.

More information about oral health is available on the AGD website for the public, located at www.knowyourteeth.com. The website is a source of consumer information on dental care and oral health. Its goal is to provide reliable information in a format that is easy to use and navigate, and to provide the tools that will help consumers of all ages to care for their teeth and other aspects of oral care. **DT**

(Source: Academy of General Dentistry)

gaps in the resume or frequent job changes. Dentists commonly ignore recommendations to check out references. Too often they are driven by one thought: "How quickly can I get someone, anyone, in here?"

Little or no consideration is given to assessing the likelihood that this person will succeed in the position or what impact the individual will have on the success of the practice over time, or in other words, the "quality of the hire." That being said, hiring failures can cost a fortune.

The figure commonly tossed about to fill a vacancy is 1.5 times the position's annual salary. Yet, if the new hire doesn't work out and you're filling the position again six or maybe nine months later, you're looking at doubling the cost, not to mention the frustration.

Thus, it is all the more reason why placing greater attention on the quality of the hire rather than merely filling the slot is tremendously important.

Take steps now to ensure that when the next employee turns in his or her two-weeks' notice, you're not spiraling into panic mode and scrambling to merely fill the position. Establish a well-defined hiring procedure.

'Mission minded'

Recruiting quality employees is a process that goes well beyond the two-line classified ad written in secret code. Look at your mission statement and remind yourself where you want to take your practice. Remember, you're building a team, a practice and a vision — not just filling a position.

Consider the strengths and weaknesses of your practice as well as your own and those of your employees. Are there voids in employee skills and/or duplication of strengths or weaknesses among the team?

One of the key components of this hiring procedure is a clearly defined job description for every position in your practice. Keep in mind that when an opening occurs, that is the opportunity to closely look at the position and update and/or refine the job description to better address the continually changing needs of the office. A staff opening isn't the time to be creating the job description from scratch.

In addition, please don't utter this tired line: "But I don't like job descriptions because they box people in." If that's your excuse for not having job descriptions, I can assure you that your practice also lacks accountability. There are likely significant system breakdowns, and you are losing money hand over fist.

What's more, if you're looking for quality applicants to fill the position, not just a warm body, they expect to see a job description. The applicants will want details of precisely what the job entails and the expectations. Vague generalizations about the position that appear in the

classified ads will not satisfy a quality applicant.

Next, consider your advertising strategy. What type of applicant do you want to attract, then target your ad to appeal to that particular audience. Place your ad in publications and on websites where prospective candidates are likely to see it. Look well beyond the local paper; consider online newsletters geared toward business employees, management staff as well as the usual dental publications targeting assistants and dental hygienists. Additionally, some dentists have had very good luck using online job advertising services as well.

Screen the applications first by

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Every member of your team has an effect on the success of your practice over time. If you want a quality team, make sure you're making "quality hires."
(Photo/www.sxc.hu)

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‘Gut instincts are no match for good data. A computerized assessment can help you weed through applicants within minutes to find the best candidates for the position.’

← DT page 5A

narrowing down the list of candidates to those you are most interested in. From there, conduct phone interviews. Be sure that in the phone interviews you ask all of the applicants the same basic questions. Pay attention to tone of voice, word usage and grammar. You should now be able to pare the

list down to only those you are most interested in interviewing face to face.

Skills, personality and more

While no applicant is perfect, it's important to understand each job and what particular attributes a prospective employee needs to have. If your goal is a 98 percent collection rate, you don't want a

candidate who has trouble asking for money — even if she does have a perfect smile and charming personality.

Most importantly: gut instincts are no match for good data. As the school of hard knocks has taught virtually every dentist I know, a seemingly rock-solid resume and practical skills offer no assurance that the person you hire will prove to be the excellent candidate you interview.

The candidates may appear to have the right skill set, but if one has trouble making decisions or the other is overly controlling, today's seemingly ideal hire can metamorphose into tomorrow's employment nightmare. Don't gamble and don't guess, instead, test the candidates.

Testing tools available in the dental marketplace provide a statistically valid and scientifically based hiring assessment tool for dentists. The computerized assessment measures job applicants against a profile of the "ideal" dental practice employee for each position. The procedure is simple.

Applicants answer a list of questions online. Just minutes later, the dentist receives a statistically reliable report enabling him or her to clearly determine if the candidate under consideration would be a good match for the position being filled. It's straightforward and accurate.

What's more, this carefully tested and thoroughly researched hiring tool is fully compliant with the legal requirements associated with employee testing.

Beyond "You're hired!"

Once the new hire is in the practice, help him or her succeed. Supply the necessary equipment, tools and training needed to perform the job well. Clearly explain what is expected of the employee and how his or her performance will be measured. Provide an office policy manual that explains policies and procedures, such as sick time, holidays, vacation, disciplinary procedures, etc.

In addition, provide routine, ongoing and direct feedback. This constructive direction helps the employee learn the ropes. Finally, schedule performance reviews to assess the new hire's performance at least twice, and preferably three times, during the first 90 days.

If you take specific steps before, during and after the hiring process, you are far more likely to ensure that quality hires make up your quality team. DT

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About the author



Sally McKenzie is CEO of McKenzie Management, which provides success-proven management solutions to dental practitioners nationwide. She is also editor of The Dentist's Network Newsletter at www.the-dentistsnetwork.net; the e-Management Newsletter from www.mckenziemgmt.com; and The New Dentist™ magazine, www.the-newdentist.net. She can be reached at (877) 777-6151 or sallymck@mckenziemgmt.com.



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Kick up your 'dental' heels in San Antonio

By Dr. Roger Macias
Chair of the 2011 Texas Meeting

The 2011 Texas Meeting is fast approaching, May 5–8. We are gearing up with our speakers, presentations and festivities. Let me give you an example of the new dawn.

We are very proud to be able to have some of the most dynamic speakers from the dental world be with us in May.

The speakers include the following:

- Dr. Lee Brady, Dr. Gary DeWood, Dr. Bob Winter and Dr. Steve Ratcliff from the Spear Institute.

- Dr. Jim Fondriest and Matt Roberts (one of the most well-known laboratory ceramists) presenting some of the latest techniques in crown and bridge.

- Dr. Michael Unthank, offering his office design course.

- The hilarious but informative Bruce Christopher.

- Kirk Behrendt, Debbie Castagna and Virginia Moore, Dr. Roger Levin and Rosemary Bray, all talking about practice management.

- Dr. Joseph Massad on prosthodontics.

- Jo Ann Majors on implant marketing.

A new dentist, Dr. Mark Kleive, joining Dr. Richard Hunt to present the latest in a workshop on exquisite provisionals.

It's a new day ...

This year we are proud to be able to present for the first time at the Texas Meeting a certification course for dental assistants on the application of pit and fissure sealants as well as a coronal polishing course. These two courses have been a long time in coming, and we are very excited to be able to offer them to our membership.

It's a new life ...

The Texas Council on Annual Sessions is aware of how important the dentist/lab technician relationship is in the dental team concept. Because of this, for the first time in a long time, we are offering courses from some of the most prestigious speakers in the world for both the dentist and lab technician.

The "Lab Track" on Saturday, May 7, from 8:30 a.m. to 1:30 p.m., offers five session options, culminating with lunch and an open forum, hosted by Dr. Mark Murphy, to discuss the "Role of the Dentist/Laboratory Technician in a Digital World." Some of the greatest dentists and lab technicians in the world will be here to participate in this.

The state-of-the-art exhibit hall is the place you need to be to find more than 500 exhibitor booths as well as the TDA Pavilion, TDA

Smiles Foundation, DENPAC Silent Auction and the TDA Perks Program partners.

In addition, there will be a digital caricature artist and happy hours on Thursday and Friday.

Our own Dr. Bud Luecke and his band, Morning, will generate the music for Thursday's Texas Party.

It's a new dawn. It's a new day. It's a new life. I'm feelin' good! **DT**

*The San Antonio Riverwalk.
(Photo/www.sxc.hu)*



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