Twelve Strategies for Improving Communication and Patient Care in the Dental Practice

1. **Provide each new patient with a written introduction to the practice.**

   *Rationale:* The information in a practice brochure helps set the tone for each patient's relationship with the practice. This information also can serve as a reference for patients, which may facilitate patient cooperation and prevent misunderstanding.

   A practice brochure should contain information about services available; hours of operation; access to emergency and after-hours care; phone numbers, fax numbers, and email addresses (if used); referral processes; reporting of diagnostic results; processes for returning calls and emails; billing and insurance procedures; and prescription refills.

2. **Implement a written confidentiality policy.**

   *Rationale:* Confidentiality is a prime concern in dental offices. Be very careful to avoid discussing patients or releasing confidential information without proper authorization.

   Further, all office staff and contractors who have access to patient information should acknowledge, via signed agreement, their willingness to comply with federal and state privacy standards. Acknowledgment of the practice’s confidentiality policy should occur upon hire and annually thereafter.

   The practice’s confidentiality policy also should take into account the security of electronic protected health information (ePHI). The Office of the National Coordinator for Health Information Technology’s [Guide to Privacy and Security of Electronic Health Information](#) offers may useful tips for securing ePHI.

3. **Implement dentist-approved telephone triage, patient advice, and urgent care guidelines. Ensure routine review and updating of these procedures.**

   *Rationale:* Many professional liability claims result from over-the-phone advice. When telephone advice follows an approved protocol, risk to the patient and dental practice is reduced.

   Additionally, dentist-approved protocols and scripts help clinicians ensure that office staff and assistants are not providing incorrect information or offering advice beyond the scope of their expertise.
4. **Establish appropriate timeframes for returning patient calls.**

   *Rationale:* Dentists should always return patient calls within a reasonable timeframe. Additionally, patients should be told approximately what time to expect the doctor's return call. Clarification about the approximate time of a return call can assure patients that their care and concerns are a priority.

5. **Establish a policy for electronic communication with patients.**

   *Rationale:* Although electronic communication with patients — via email or a patient portal, for example — has many benefits, it also has risks. Dental practices should develop a written policy/consent form related to the use of electronic communication.

   Key considerations of the policy might include types of communication permitted, privacy/security of electronic communication, limitations of electronic communication, ethical responsibilities (e.g., criteria for establishing a provider–patient relationship), and standard timeframes for response to electronic messages.

6. **Document all patient calls and emails in patient records.**

   *Rationale:* Documenting phone calls and emails from patients (including the information given to them to address their issue) will improve continuity of care and may increase defensibility of potential claims.

   Documentation can be accomplished by placing an on-call slip in the chart, including a separate note in the chart, or printing/attaching the email to the dental record. Periodic audits for compliance with office telephone and email policies are advisable.

7. **Implement a policy and procedure to ensure that patients are notified of diagnostic results, such as exams, X-rays, biopsies, etc.**

   *Rationale:* All results — both normal and abnormal — should be shared with patients in a timely manner. Whenever possible, abnormal results should be communicated to the patient verbally and in writing, with a copy to the patient’s dental record.

8. **Establish a procedure to address continuity of care when patients are referred to specialists.**

   *Rationale:* Lack of communication or follow-up between providers as part of the referral process is a source of professional liability exposure. A procedure can help build accountability into the referral process and may prevent patients from slipping through the cracks, either because of noncompliance or poor communication.
9. **Develop and implement a policy and procedure for terminating the provider–patient relationship.**

*Rationale:* A termination policy and procedure will help ensure consistency in the way that all dentists within the practice manage the often difficult task of terminating a relationship with a patient.

The policy should provide a framework for the decision to end the doctor–patient relationship, including considerations such as documentation, legal and contractual obligations, timing, and payment issues.

A well-defined termination policy and procedure may help dentists avoid allegations of patient abandonment, civil rights violations, or other discriminatory behavior.

10. **Ensure that appropriate informed consent discussions take place and the patient/caregiver gives consent prior to dental procedures.**

*Rationale:* Informed consent is a key component to protecting patients’ fundamental right to make decisions about their dental care. The thoroughness and complexity of the informed consent process will depend on the type of procedure or treatment involved. Dentists should always include documentation of the informed consent process in the patient record.

Additionally, clinical assessments should include identification of patients who may require assistance from family or legal representatives to give informed consent or to comply with proposed treatment (e.g., a patient who has a developmental disability or cognitive impairment).

11. **Conduct routine entrance-level health screenings for all new patients, regardless of patient age. Have current patients routinely complete comprehensive health history updates (e.g., every 6 months).**

*Rationale:* Routine entrance-level screenings reduce the likelihood of clinical errors during the time when patients are still new to the practice. Screenings can identify patients who may require additional clinical assessment and treatment planning input from other providers.

For current patients, routine health history updates might reveal recent diagnoses, changes in medication, or previously unidentified treatments. The dentist can use the health history to determine whether additional input is needed from the patient's other healthcare providers.
12. **Implement a written emergency plan.**

*Rationale:* The practice should have a written plan that addresses medical, environmental, and violence emergencies. The plan will help ensure clinicians and staff members are appropriately prepared to respond to emergencies. Periodic review of the plan with practice staff and emergency drills can help increase staff members’ comfort level with emergency protocols, medications, equipment, and monitoring.

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