

SADA
THE SOUTH AFRICAN DENTAL ASSOCIATION

The Golden Compass

A Guide to Community Service for the newly qualified Practitioner

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YOUNGDENTISTS COUNCIL SADA

11th Edition 2026-2027

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Welcome to the Profession

Mr KC Makhubele
SADA Chief Executive Officer

Dentistry is a lifelong commitment to health, science and humanity. You have entered a profession that has the power to change lives—not only by relieving pain and restoring smiles, but by improving confidence, wellbeing and quality of life. It is also a profession that continues to evolve, shaped by advances in technology, new knowledge and changing healthcare needs.

Completing your dental training is a significant achievement, but it is only the beginning. The choices you make, the opportunities you embrace and the contribution you make to your patients and communities will help shape the professional journey ahead.

The environment in which you are beginning your career is both exciting and complex. South Africa continues to face significant inequalities in access to oral healthcare, with rural and underserved communities carrying a substantial burden of unmet need. At the same time, those entering private practice face rising costs, evolving regulation and increasingly informed and discerning patients.

Navigating these realities will require more than clinical expertise. It will require adaptability, sound judgement, strong business and communication skills, ethical leadership and a commitment to lifelong learning. Whether your future lies in public service, private practice, academia, research or entrepreneurship, the ability to combine professional excellence with an understanding of the broader healthcare environment will be essential.

At SADA, we understand that the transition from student to professional can bring both opportunity and uncertainty. That is why our commitment to you extends well beyond your first year in practice.

Dentistry offers a unique combination of skill, creativity and human connection

Throughout your career, SADA is here to support your professional development through continuing professional development, legal and ethical guidance, practice management resources, knowledge sharing and meaningful connections with colleagues across the profession.

You are also entering dentistry at a time when the world is becoming increasingly connected. Technology, innovation, research and knowledge are crossing borders at unprecedented speed. Artificial intelligence, digital dentistry and other emerging technologies are already influencing how we diagnose, plan and deliver care.

These developments create exciting opportunities for South African dentists. Our profession has a strong foundation of knowledge, skill and adaptability, and our future lies not only in responding to change, but in helping to shape it. Through research, collaboration, innovation and the sharing of expertise, South African dentists can contribute meaningfully to the advancement of oral healthcare across our continent and internationally.

As the South African Dental Association, our role is to ensure that you do not have to navigate this journey alone. We are your advocate with government, regulators and industry; your partner in professional development; and a community where knowledge, ideas, challenges and achievements can be shared.

Most importantly, we are committed to strengthening the profession for the generations of dentists who will follow.

Dentistry gives you the privilege of making a tangible difference in people's lives, while offering opportunities to learn, innovate, lead and build a career that is uniquely your own.

The journey ahead will bring challenges, but it will also bring moments of extraordinary fulfilment. Embrace both. Continue to learn. Remain curious. Build meaningful professional relationships. And never lose sight of the people at the heart of everything we do—our patients and the communities we serve.

Welcome to the world of dentistry, and welcome to the SADA family.

We are proud to stand alongside you as you begin this next chapter, and we look forward to seeing you grow, contribute and lead—not only within South Africa, but as part of a connected global dental profession.

Congratulations Dental Graduands

Dr FC Meyer
SADA Board Chairperson

On behalf of the SADA Board, I extend my warmest congratulations to you on reaching this significant milestone. Completing your dental degree is a remarkable achievement—one that reflects years of dedication, discipline, resilience and a commitment to excellence.

As you begin your professional journey, whether in public service or private practice, you will soon discover that being responsible for patient care brings both great privilege and responsibility. Your role will extend beyond the clinical environment, as you build relationships with patients, practice teams, medical schemes, laboratories, the HPCSA, financial institutions and regulatory bodies. Learning to navigate these relationships will be an important part of your growth as a dental professional.

You are entering dentistry at an exciting and challenging time. Across South Africa, many people continue to experience unmet oral health needs and unequal access to care. At the same time, digital dentistry, artificial intelligence and emerging technologies are transforming the way dental care is delivered. The next generation of dentists will play an important role in responding to these challenges while embracing new opportunities and maintaining the highest standards of patient care.

Amid the demands of the profession, never lose sight of what makes dentistry so rewarding. You will have the opportunity to relieve pain, restore oral health, rebuild confidence and improve the quality of people's lives. Your knowledge, skills and expertise have real value, and it is important

to recognise the investment required to provide safe, ethical and professional care.

Throughout your journey, SADA is here to support you. Through our Congress, CPD programmes, journal and local branches, we provide opportunities to learn, connect, share knowledge and continue developing professionally. We also advocate for dentistry and represent the interests of the profession with government, industry stakeholders and the broader healthcare sector.

The SADA Board is committed to building a strong, relevant and united dental profession in South Africa, and your voice has an important role to play in that future. I encourage you to become actively involved in your local SADA branch, where connecting with colleagues, sharing experiences and building professional relationships can provide invaluable support as you transition from student to practitioner.

As you begin this exciting new chapter, know that your achievement is celebrated by the SADA Board and the wider dental profession.

We look forward to seeing you grow, contribute and, in time, become one of the leaders shaping the future of dentistry in South Africa.

Congratulations and Welcome to the Profession!



A Warm Welcome to the SADA Family

Dr P Mathai
SADA National President

It is with great pleasure that I welcome you to the SADA family. Congratulations on achieving your dental degrees! This is a remarkable accomplishment, and I am sure your families, friends and loved ones are celebrating this achievement with immense pride. So are we.

You are now about to embark on one of the most important years of your professional journey: a year of service to South Africa and its people.

I know you must be eager to begin—to put your knowledge and skills into practice and to make a meaningful difference in communities that are often in desperate need of oral healthcare. On behalf of SADA, and indeed the people you will serve, I thank you in advance for your commitment and willingness to step outside your comfort zone.

Your community service year will take you to places and communities you may not otherwise have encountered. It will require courage, compassion, adaptability and a willingness to learn. It is a significant responsibility, but I have every confidence that you will rise to the occasion. As you do, always strive to be the very best dentist you can be for your patients.



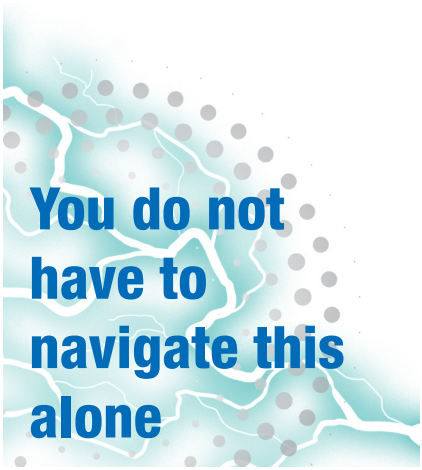
Dentistry is a profession with remarkably ancient roots. The history of oral healthcare stretches back more than 8,000 years, and dentistry is regarded as one of the earliest specialised areas of medicine.

The desire to relieve pain and address the consequences of oral disease has driven innovation throughout human history. Archaeological evidence has revealed early attempts at dental restorations using materials such as bitumen and beeswax, early forms of dentures, the splinting of fractures and even the drainage of dental abscesses. Hesy-Ra, who lived in Ancient Egypt around 2660 BC, is recognised as the earliest recorded dentist in history.

Of course, much of what was practised then would be almost unrecognisable to us today. That transformation is largely the result of the professionalisation of dentistry over the past two centuries.

Not so long ago, dentistry was regarded as a trade rather than a profession. The transition to a recognised profession brought with it structured qualifications, standards of care, professional accountability and, importantly, an increasing reliance on evidence-based practice.

It also created a need for representative organisations—bodies that could bring dental professionals together, advocate for their interests and provide a collective voice for the profession.



The American Dental Association, founded in 1859, is one of the earliest examples of such an organisation. In South Africa, the foundations of what would ultimately become the South African Dental Association were laid through various dental associations established during the early 20th century. Following the advent of democracy, these representative organisations were brought together, ultimately giving rise to the SADA we know today.

Every profession has its challenges, and dentistry is no exception. As you begin your career, you will encounter issues ranging from practice management and legal compliance to coding, medical schemes and the many administrative responsibilities that accompany professional practice.

Trying to navigate all of these challenges on your own can be daunting. One of the strengths of belonging to a professional association such as SADA is having access to collective knowledge, experience and resources to help you navigate these issues with greater confidence.

As newly qualified dentists, you will also face another set of challenges—those that come with finding your feet as a fully fledged professional and adult.

There is, after all, a great deal about "adulting" that no university curriculum can fully prepare you for!

You are suddenly expected to understand registration, financial responsibilities, professional obligations, medical schemes, tax, compliance and many other aspects of working life. Knowing where to start can sometimes feel overwhelming.

This is precisely why SADA's Young Dentists Council identified the need for a resource to help newly qualified colleagues navigate this transition. I am particularly proud to have been part of the council that helped establish the first edition of what has become the Golden Compass.

Over the years, and through several iterations, the Golden Compass has evolved into a valuable resource for newly graduated dentists.



It provides practical guidance on many of the decisions you will encounter as you begin your professional journey—from registering with the HPCSA and understanding your professional obligations to navigating medical schemes and other aspects of working life.

No publication can answer every question or anticipate every situation you may encounter. But the Golden Compass provides an important foundation—a starting point from which you can find your way and access further information when you need it.

I believe that resources such as this say something important about SADA and what we value.
We want you to understand your worth, develop your potential, build

sustainable careers and ensure that you are equipped to make informed professional decisions. Most importantly, we want you to know that you do not have to face the challenges of dentistry alone.

Find Your Place in SADA - there is tremendous value in being part of a professional community. Knowing that there is somewhere to turn, someone to ask and colleagues who understand what you are experiencing can make all the difference.

I remember appreciating that sense of support when I graduated, and it is one of the reasons I believe you, too, will find a place within SADA.

Your membership is more than access to resources. It is an opportunity to connect with colleagues, learn from those who have walked the path before you, contribute to the future of dentistry and become part of a profession that is greater than any one individual.

SADA has so much to offer you, but its value is greatest when you engage with it. Reach out. Participate. Ask questions. Attend events. Connect with your colleagues. Get involved in your local structures and discover the many ways in which you can contribute to our profession.

Most importantly, remember that this is the beginning of an exciting journey.

Once again, congratulations on this tremendous achievement. We are delighted to welcome you into the profession and into the SADA family.



Serve with compassion
Practise with integrity
Keep learning - and do not forget to have a little fun along the way!

A Note from the Young Dentists Council

Dr N Vermaak
SADA YDC President

You've Made It -
Now the Real Adventure Begins
To our newest dental graduates—take a moment to pause, breathe and appreciate what you have achieved.

You did it. Your degree is earned, your white coat is on, and you are about to enter one of the most rewarding, challenging and fascinating professions there is.

The transition from dental student to practising dentist can feel enormous. At university, you had lecturers, supervisors and structured clinical environments around you. Now, you are stepping into the role of the doctor who must make decisions, manage patients and navigate clinical situations in real time.

It can feel daunting—and that is completely normal.

Your first year, and particularly your Community Service placement, is not simply a requirement to complete. It is an opportunity to build the foundations of your professional career. It is where the knowledge and skills you developed at dental school begin to take shape in the realities of everyday clinical practice.

Your Community Service year will challenge you in ways that a textbook cannot.



You may encounter high patient volumes, limited resources and cases that require you to think creatively and work efficiently. You may also find yourself managing situations you have never encountered before.

These challenges can be demanding, but they can also become some of your greatest learning opportunities.
Become resourceful.

Working with limited resources will encourage you to think differently, solve problems and make thoughtful clinical decisions. Learning to work efficiently and adapt to different circumstances is an invaluable skill that will serve you throughout your career.
Build genuine confidence.

Confidence does not come from knowing everything. It comes from experience—making decisions, learning from them, asking questions and gradually realising that you are capable of handling more than you initially thought. Every patient you help, every challenging situation you navigate and every new skill you develop adds to that confidence.

Your Community Service year is an intensive learning experience. Embrace it. Ask questions. Learn from your colleagues. Reflect on your experiences. The lessons you gain during this time can become part of the professional foundation you will build for decades to come.

The Professional Essentials
There is another side to becoming a dentist that you may not have spent as much time thinking about at university: the legal, ethical and administrative responsibilities that come with being a healthcare professional.
It can sometimes feel overwhelming, but these responsibilities are an essential part of protecting both your patients and your professional future.

Professional indemnity
Your indemnity cover is an important part of protecting your professional career. Understand what your policy covers, what your responsibilities are and what steps you need to take should an incident arise. Don't simply file the paperwork away—know what you are covered for and keep your information up to date.

HPCSA and professional ethics
Your HPCSA registration is fundamental to practising as a dentist, but professional responsibility extends well beyond registration. Ethical decision-making, patient-centred care, appropriate record-keeping and maintaining professional standards should guide every aspect of your practice.

When you are uncertain, seek guidance. Ask questions, consult the relevant professional standards and always put the patient's wellbeing at the centre of your decision-making.

POPIA and patient confidentiality
As healthcare professionals, we have a responsibility to protect the personal information entrusted to us. Whether patient information is stored digitally or in physical records, confidentiality and appropriate information management are essential. Take the time to understand your responsibilities under the Protection of Personal Information Act and make information security part of your everyday practice.

You don't need to know everything on day one. You do, however, need to know where to find the right information and who to ask when you need guidance.

dentists. Share your experiences. Celebrate your successes. Talk about the things that don't go according to plan. Ask questions—even the ones you think you should already know the answers to.

There is enormous value in having a professional community that understands where you are coming from.

Your first year will probably pass faster than you expect. There will be demanding days, unexpected challenges, moments of doubt and, hopefully, many moments that remind you why you chose dentistry in the first place.

The YDC is Your Professional Community

The YDC exists to support dentists in the early stages of their careers. We understand the transition you are making because many of us have recently been exactly where you are now.

We are not here to lecture you. We are here as colleagues—to share experiences, open conversations, provide support and help you navigate some of the challenges that come with starting your professional journey.

Dentistry does not have to be a solo journey. Connect with other young

Be kind to your patients. Be willing to learn. Keep your ethics at the centre of every decision. And remember to be kind to yourself, too.

You are not expected to have all the answers immediately. You are expected to keep learning, to ask for help when you need it and to grow with every experience.

The future of dentistry is in your hands—and you are not entering it alone. Connect with the YDC. Build your professional network. Find your community. Find your tribe.

Mastering Patient Communication and Relationship Management

Mr KC Makhubele
SADA Chief Executive Officer

A successful dental practice is built on more than just technical expertise. As a newly qualified dental practitioner, mastering patient communication and relationship management is essential to building trust, fostering long-term relationships, and ensuring patient satisfaction.

In a multicultural society like South Africa, where diverse cultural backgrounds shape individual expectations, effective communication becomes even more crucial.

This article will guide you through key techniques for building patient trust, handling difficult conversations, understanding diverse backgrounds, and educating patients on the importance of preventive care.

Active Listening
One of the most important aspects of communication is active listening. Patients want to feel heard and understood, especially when they are discussing their health concerns. Instead of merely hearing what patients say, focus on fully engaging with their words, tone, and body language.

- Avoid Interrupting:
  Let the patient finish their thought before responding. This not only ensures you understand their concerns but also shows respect.

- Clarify and Paraphrase:
  After listening, clarify any ambiguous points by paraphrasing what the patient has said. For example, "If I understand you correctly, you're saying that you've been experiencing discomfort when eating?"

- Non-Verbal Cues:
  Eye contact, nodding, and an

open posture signal that you are present and engaged. These cues help build rapport and make the patient feel comfortable.

Empathy and Compassion

Patients are often anxious about dental visits, and showing empathy can go a long way in building trust. Acknowledge their feelings and express understanding in a compassionate way. For example, say, "I understand this procedure may seem intimidating, but I'll make sure you're comfortable throughout the process."

- Personalized Care:
  Show that you care about each patient as an individual. Asking about their day or remembering small details from previous visits can create a more personalized experience that fosters trust.

- Tone of Voice:
  The tone you use can have a significant impact. A calm, reassuring tone helps to soothe anxious patients, while an upbeat tone can make the patient feel more at ease and optimistic about their treatment.

Clear and Simple Explanations

Patients often feel overwhelmed by medical jargon. When explaining treatment options or procedures, use clear, simple language. Avoid technical terms unless absolutely necessary, and if you do use them, ensure you explain them in an easily digestible way.

- Visual Aids:
  Use diagrams, models, or even videos to explain complex procedures. This helps patients visualize what you're describing and makes the information easier to grasp.

- Summarize Key Points:
  After discussing a treatment plan or diagnosis, summarize the key takeaways to ensure the patient understands. Ask if they have any questions to further clarify the situation.

Building Long-Term Relationships

Dentistry is not just about one-off treatments; it is about long-term care. Building relationships with patients means they are more likely to return for regular check-ups, follow through with treatment plans, and recommend your services to others.

- Follow-Up Calls:
  For major procedures, following up with patients to see how they're doing can go a long way

in building rapport. This shows you care about their well-being beyond the clinic.

- Personal Touches:
  Small gestures, such as sending birthday greetings or reminders for routine check-ups, can make patients feel valued and appreciated.

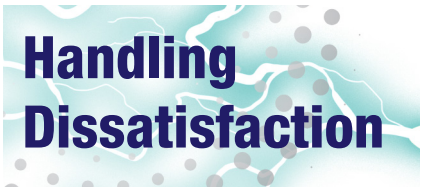
Handling Difficult Conversations: Managing Patient Anxiety, Dissatisfaction, and Complex Cases

Managing Patient Anxiety

Dental anxiety is a common issue and can be a significant barrier to treatment. Addressing this requires a delicate balance of empathy, reassurance, and clear communication.

- Acknowledge Anxiety:
  If a patient expresses fear or anxiety, acknowledge it directly. Saying something like, "I understand that dental visits can be stressful," helps validate their feelings and opens the door to further discussion.

- Offer Comfort Options:
  Explain any options that can help alleviate anxiety, such as sedation dentistry, shorter appointments, or pain management techniques. Being proactive in offering solutions shows that you're committed to making the experience as comfortable as possible.



Occasionally, patients may be dissatisfied with their treatment or outcomes. In these situations, it's crucial to remain calm, professional, and empathetic.

- Listen Actively:
  Allow the patient to fully express their concerns without interrupting. They need to feel heard before a resolution can be reached.

- Apologize if Necessary:
  If there has been a genuine oversight or error, offer a sincere apology. Admitting mistakes and taking responsibility builds trust, even in difficult situations.

- Offer Solutions:
  Once you understand the patient's dissatisfaction, offer a solution. Whether it is redoing a treatment, providing a refund, or offering additional services, presenting a clear plan for resolution shows you are committed to patient satisfaction.

- Adopt a complaints resolution policy in the practice that clearly outlines the process to be followed when handling complaints and managing patient expectations.

Managing Complex Cases

In complex cases, communication becomes even more critical as the treatment plan may involve multiple stages and extensive procedures.

- Transparency in Expectations:
  Be transparent about what the patient can realistically expect from treatment, the timeline, and the associated costs. For example, in orthodontics or implant dentistry, explaining that results take time can help set proper expectations.

- Collaborative Decision-Making:
  Involve the patient in the decision-making process. Explain the pros and cons of different treatment options, and respect their preferences while guiding them toward the best clinical outcomes.

Culturally Sensitive Care: Understanding Diverse Patient Backgrounds in South Africa
South Africa's rich cultural diversity requires dental practitioners to be aware of the different beliefs, customs, and health-related perceptions that patients may bring to the table. Culturally sensitive care builds trust and enhances patient satisfaction.

Awareness of Cultural Differences
South Africa is home to various cultural and ethnic groups, , each with unique traditions and beliefs about health and well-being. Being aware of these differences is essential for effective communication and care.

- Respect Religious and Cultural Beliefs:
  Some patients may have religious or cultural practices that influence their health care decisions, such as dietary restrictions, fasting, or traditional healing practices. Be open and respectful when discussing these factors.

- Language Barriers:
  In South Africa, there are 11 official languages, and some patients may not be comfortable communicating in English. Offering translation services or learning key phrases in commonly spoken local languages can enhance communication.

Avoiding Assumptions
Never make assumptions about a patient's health beliefs based on their background. Instead, ask open-ended questions about their preferences, beliefs, and expectations. For example, you might ask, "Are there any health traditions or practices you follow that I should be aware of?"

- Building Trust Across Cultures:
  Establishing trust may take more time with patients from differ-

ent cultural backgrounds. Show respect for their traditions, ask for clarification when needed, and make an effort to understand their perspective.

Patient education is critical in helping patients take responsibility for their oral health. Your ability to communicate the importance of preventive care can significantly impact long-term outcomes for patients.

Many patients only visit the dentist when they have a problem, but your goal should be to emphasize the importance of routine check-ups and daily preventive measures.

- Break Down the Basics:
  Educate patients on the importance of brushing, flossing, and regular cleanings in simple, non-technical terms. Demonstrate proper techniques where necessary.

- Visualizing Consequences:
  Use visual aids, such as pictures of healthy vs. diseased gums, to help patients understand the consequences of neglecting preventive care. This makes the benefits of preventive care more tangible and easier to grasp.



Encourage Engagement
Encourage patients to ask questions and express concerns about their oral health. Active participation helps reinforce the value of preventive care and fosters a collaborative approach to health management.

- Customizing Advice:
  Tailor preventive care recommendations based on the patient's specific needs, such as advice on diet, lifestyle changes, or oral hygiene products. This individualized approach makes the information more relevant and actionable.

Conclusion
Mastering patient communication and relationship management is a fundamental skill that newly qualified dental practitioners must develop to succeed in their practice. Effective communication builds trust, handles difficult conversations with care, and accommodates South Africa's rich cultural diversity.

Through patient education, you can empower individuals to take charge of their oral health, enhancing both their well-being and the success of your practice. Remember, communication is more than just words—it's about listening, understanding, and showing empathy every step of the way.

Your Voice, Your Profession
Why Organised Dentistry Matters

A message from the SADA National Councillors

As you begin your Community Service year, you are not simply starting your first job as a dentist — **you are becoming part of a profession with a collective voice, responsibilities and a future that you can help shape.**

Dentistry does not operate in isolation. Decisions around regulation, healthcare policy, funding, scope of practice and the delivery of oral healthcare can directly affect how you work and the care you provide to your patients.

That is where **organised dentistry matters.**

What does SADA do?
The South African Dental Association (SADA) represents the interests of the dental profession and advocates on matters affecting dentists and oral healthcare in South Africa.

For you, this means:
A collective voice
Individual dentists can raise concerns, but an organised profession can engage collectively with regulators, policymakers and other stakeholders on issues affecting dentistry.

Protecting the profession
SADA advocates on the regulatory environment and engages with bodies such as the HPCSA on matters relevant to dental practice.

Influencing policy and funding
SADA contributes to discussions and submissions relating to dental policy, healthcare funding and the broader delivery of oral healthcare.

Supporting young dentists
Through the Young Dentists Council (YDC), SADA provides mentorship, professional support, networking and

opportunities for young dentists to contribute to conversations affecting their profession.

Keeping you connected and informed
Professional development, clinical resources, industry information, CPD opportunities and access to the South African Dental Journal help dentists continue learning beyond university.

Building a stronger profession
Organised dentistry brings dentists together — across generations, practice environments and areas of interest — to share knowledge, experience and perspectives.

Your Community Service year is likely to expose you to situations that were difficult to fully prepare for at university.

You may encounter:

- New clinical and ethical challenges
- Resource and access constraints
- Questions around regulation and professional responsibility
- Different approaches to patient management
- The realities of working within the public healthcare system
- Decisions that require professional judgement and confidence

Being connected to the profession gives you access to people, information, resources and support beyond your immediate workplace.

Your voice matters
Organised dentistry is not only about established practitioners speaking on behalf of the profession.

The future of dentistry belongs to you too. As a newly qualified dentist, you bring a fresh perspective on education, technology, patient expectations, the transition from university to practice and the challenges facing the next generation of dentists.

Get involved. Ask questions. Attend professional events. Connect with other young dentists. Share your experiences. Listen to those who have walked the path before you — and contribute your own perspective.

Your Community Service year is the beginning of your professional journey, not the end of your education.

SADA is here to support, represent and connect dentists throughout that journey. **Community Service dentists are currently eligible for free SADA membership,** providing an opportunity to become connected to organised dentistry from the very beginning of your career.



Understanding the role of the HPCSA: How SADA supports Dental Practitioners

Mr KC Makhubele
SADA Chief Executive Officer

Navigating the regulatory landscape in South Africa as a newly qualified dental practitioner can seem complex, but organizations like the South African Dental Association (SADA) exist to support practitioners at every stage of their professional journey.

One of SADA's key roles is to help dental practitioners understand and meet the requirements set by the Health Professions Council of South Africa (HPCSA).

SADA acts as a vehicle that makes it easier for practitioners to comply with the HPCSA's regulations, stay updated with Continuing Professional Development (CPD) requirements, and maintain the highest ethical and professional standards.

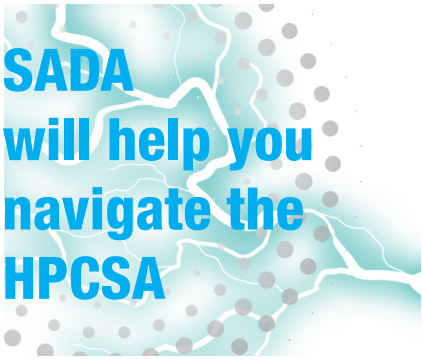
The HPCSA is the statutory body responsible for regulating healthcare professionals in South Africa, including dentists. Its primary purpose is to protect the public by ensuring that healthcare professionals meet stringent professional and ethical standards.

Key Functions

- **Public Protection:** The HPCSA ensures that only qualified and ethical professionals are licensed to practice, safeguarding public health.

- **Regulation and Compliance:** The HPCSA sets professional guidelines and a code of ethics, outlining the standards of care that all registered practitioners must adhere to.

- Accreditation of Training: The council also oversees the accreditation of educational programs and institutions to ensure the highest standards of dental training.



As a dental practitioner, understanding and complying with the HPCSA's guidelines and maintaining professional registration can be challenging. This is where SADA becomes an invaluable resource.

SADA as Your Guide

- **Professional Guidance:** SADA provides detailed resources, updates, and support to help practitioners understand their HPCSA obligations. This includes assistance with registration, annual renewal processes, and navigating ethical standards.

- **Ethical Support:** SADA offers guidance on ethical concerns that may arise in practice, ensuring that practitioners meet the HPCSA's requirements for patient-centered, professional, and confidential care.

- **Disciplinary Advice:** In the event of a complaint or disciplinary process initiated by the HPCSA, SADA provides expert advice and support to help practitioners navigate the proceedings and uphold their rights.

By working closely with SADA, dental professionals can confidently meet HPCSA standards while focusing on providing quality patient care.

Dental Practitioner HPCSA Boards

The HPCSA operates various professional boards to oversee different healthcare professions. For dental practitioners, the Professional Board for Medicine and Dentistry (MDB) is the most relevant. It oversees all aspects of dental practice, from professional conduct to ethical guidelines.

Other Relevant Boards

- Professional Board for Dental Therapy, Oral Hygiene and Dental Assisting: This board manages the registration, conduct, and practice standards of dental therapists, oral hygienists and dental assistants alike.

Each board plays a crucial role in ensuring that dental professionals remain competent and ethical in their

practice, and SADA helps members navigate these regulatory bodies and their requirements.



Continuing Professional Development (CPD) and SADA's Role
Continuing Professional Development (CPD) is a fundamental requirement for maintaining registration with the HPCSA. CPD ensures that dental professionals remain updated on advancements in their field, continually improving their knowledge and skills.

The HPCSA mandates that all practitioners accumulate a certain number of CPD points each year (or every 24 months) as part of their ongoing professional development.

CPD Requirements

- Practitioners are required to earn 30 CPD points per 12-month cycle, with at least 5 points in ethics.
- Clinical and practical CPD activities can make up the rest, including attending conferences, workshops, or training sessions.

SADA plays an essential role in helping practitioners meet these CPD requirements:

- Accreditation of CPD Programs:
  As one of the main agents accredited by the HPCSA, SADA is responsible for accrediting CPD activities and ensuring their quality. This means that many of the CPD programs you'll engage in through SADA are pre-approved, allowing you to seamlessly accumulate your required points.

- CPD Events and Resources:
  SADA regularly organizes workshops, webinars, conferences, and online courses that are accredited for CPD. These events cover a wide range of topics, from clinical advances to ethical considerations, ensuring that practitioners have access to comprehensive learning opportunities.

- Ethics Training:
  Given the HPCSA's requirement for CPD points in ethics, SADA offers specific training and courses that focus on the ethical responsibilities of dental professionals, ensuring that you meet your obligations.

- Tracking CPD Points:
  As an accreditor, SADA submits CPD points earned to the HPCSA on your behalf.



SADA's Role in Dental Practice Success

While the HPCSA sets the standards for professional practice, SADA goes a step further by providing the support, resources, and training needed to excel in the field of dentistry. By fostering a culture of continuous learning and professional development, SADA not only helps practitioners comply with the HPCSA but also enhances the quality of dental care provided to the South African public.

SADA's Comprehensive Support

- Advocacy and Representation: SADA advocates on behalf of oral health professionals, ensuring that their concerns and needs are represented at policy levels.

- Legal and Ethical Guidance: SADA offers guidance on legal and ethical issues that arise in practice, ensuring that practitioners remain compliant with the HPCSA's standards.

- Professional Community: By being a member of SADA, practitioners gain access to a network of peers, experts, and mentors who offer support and share knowledge, further enhancing professional growth.

Conclusion

The HPCSA plays a crucial role in ensuring that dental practitioners deliver high-quality, ethical care.

However, navigating the regulatory environment can be daunting for new and experienced practitioners alike. SADA serves as the key organization that makes this journey easier. From ensuring you meet your registration and CPD requirements to providing resources for ethical practice and professional development, SADA is your partner in building a successful, compliant, and patient-centred dental practice. By leveraging the support of SADA, you can confidently focus on delivering the best care while staying aligned with the HPCSA's regulations and standards.

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Why Compliance is the Foundation of a Sound Dental Practice

Mrs Carla Güldenpfennig
SADA Legal & Corporate Governance Advisor

Why Compliance Is the Foundation of a Sound Dental Practice

You did not become a dentist to read statutes. You trained to diagnose, treat and relieve pain, and the paperwork can feel like a distraction from that work. As a community service dentist, you are also new to the system, stepping into a busy facility where the rules are rarely explained to you in full.

Yet the legislation that governs dental practice is not separate from good care. It is the framework that protects your patients, your colleagues and your registration. Much of it exists because someone was once harmed without it. Infection control rules, radiation safety standards, consent requirements and privacy laws all trace back to real risks. Following them is part of practising dentistry well, and the habits you build this year will stay with you for your whole career.

The legislation that touches your practice

Not every law below carries the same weight for you right now. Some apply to you personally as a registered dentist, such as the HPCSA rules, consent, confidentiality and the safe handling of medicines. Others are mainly the responsibility of your employer or the facility, but you still need to know they exist, because they protect you as an employee and shape how the facility must operate. A few become relevant only if you later own or run a practice.

Professional and patient-care legislation

Health Professions Act 56 of 1974 and HPCSA rules	This governs your registration, scope of practice, fees, advertising, record keeping and conduct. The HPCSA's ethical rules and guidelines (including those on social media and perverse incentives) form the standard against which complaints are judged.
National Health Act 61 of 2003	It sets out patient rights, informed consent and the confidentiality of health records, and it sets norms and standards for health establishments. In practice, it means documented consent and secure, confidential patient files.
Medicines and Related Substances Act 101 of 1965	It controls scheduled medicines. It affects what you may prescribe, how scheduled substances must be stored and recorded, and the rules around dispensing. Always follow the facility's procedures and prescribe within your scope.
Medical Schemes Act 131 of 1998	It matters if you are involved in billing or claims. Incorrect or inflated claims can amount to fraud, so record only the treatment you actually provided.
Pharmacy Act 53 of 1974	It matters wherever medicine handling overlaps with pharmacy practice, such as dispensing from the practice.
Foodstuffs, Cosmetics and Disinfectants Act 54 of 1972	It governs the disinfectants and sterilant used in your infection control.
Children's Act 38 of 2005 and the Sexual Offences Act 32 of 2007	These affect consent when treating minors and the duty to report suspected abuse. A child patient may show signs a dentist is well placed to notice.
Dental Technicians Act 19 of 1979 and the Mental Health Care Act 17 of 2002	The first applies if you work with registered dental technicians, and the second is relevant to consent and capacity.

Hazardous Substances Act 15 of 1973	This covers hazardous substances and radiation. X-ray equipment must be licensed and used within radiation safety requirements. The facility holds the licence, but you must follow its safety rules, wear protective equipment, and never operate equipment you have not been trained on.
National Environmental Management: Waste Act 59 of 2008	It governs health care risk waste, sharps, and amalgam and mercury waste. Sort waste correctly at the point of use and follow the facility's disposal procedures, because mistakes made in the surgery can create legal problems further down the line.
National Environmental Management Act 107 of 1998 and the National Water Act 36 of 1998	These impose a general duty of care and prevent harmful discharge into drains and water systems, which is relevant to amalgam separators and chemical disposal.
Municipal by-laws	These cover waste collection, sewer discharge, zoning, signage and fire safety, and they vary by municipality.
Occupational Health and Safety Act 85 of 1993	It requires a safe working environment. Your employer must provide it, and you have duties too: to take reasonable care of your own safety and that of others, to follow safety procedures, and to report hazards and incidents. Its regulations cover hazardous chemicals, biological hazards, equipment such as autoclaves and compressors, and electrical safety
Compensation for Occupational Injuries and Diseases Act 130 of 1993 (COIDA)	Your employer is responsible for registering and paying for cover, which protects you if you are injured or become ill through your work. If you suffer a needlestick injury, report it immediately and follow the facility's procedure, as prompt reporting protects both your health and your claim.

Basic Conditions of Employment Act 75 of 1997	It sets minimum standards for working hours, leave, overtime and written terms of employment.
Labour Relations Act 66 of 1995	It governs fair dismissal, disciplinary and grievance procedures, and disputes. Dismissing a staff member without a fair process is a common and costly mistake.
Employment Equity Act 55 of 1998	It prohibits unfair discrimination in employment and, for designated employers, imposes equity planning and reporting duties.
National Minimum Wage Act 9 of 2018	It sets the minimum pay you must meet for each employee.
Unemployment Insurance Act 63 of 2001 and Unemployment Insurance Contributions Act 4 of 2002	These require you to register staff and pay contributions to the UIF.
Skills Development Act 97 of 1998 and Skills Development Levies Act 9 of 1999	They affect training obligations and levies, depending on your payroll.
Protected Disclosures Act 26 of 2000	It protects employees who report wrongdoing in good faith, so you cannot victimise a staff member who raises a concern.
Promotion of Equality and Prevention of Unfair Discrimination Act 4 of 2000	It prohibits unfair discrimination, which also applies to how you treat patients.
Protection of Personal Information Act 4 of 2013 (POPIA)	Patient records are special personal information. You must have a lawful basis to collect them, secure them, limit access, retain them appropriately, register your Information Officer and report breaches.
Promotion of Access to Information Act 2 of 2000 (PAIA)	It gives people a right to request access to records and requires a PAIA manual.
Consumer Protection Act 68 of 2008	It covers how you quote, advertise, contract and resolve disputes. Fair, clear pricing and honest marketing are required.

National Credit Act 34 of 2005	It applies if you offer payment plans or credit to patients.
Electronic Communications and Transactions Act 25 of 2002 and the Cybercrimes Act 19 of 2020	These apply to online bookings, electronic records, email and digital marketing, and they set rules around cyber offences.
Income Tax Act 58 of 1962, Value-Added Tax Act 89 of 1991 and Tax Administration Act 28 of 2011	They cover tax registration, PAYE, VAT where applicable, returns and record-keeping.
Companies Act 71 of 2008	It applies if the practice is incorporated and covers directors' duties and records.
Competition Act 89 of 1998	It prohibits collective fee-setting or collusion among practitioners, which is a risk when colleagues discuss prices.

What happens if you don't comply?
Failing to comply with the law can have serious consequences, and it is important to know about them from the very start of your career. A patient complaint can lead to an HPCSA inquiry, and the outcome could be a caution, a fine, suspension or even removal from the register. Many of the Acts that apply to a practice also create criminal offences, which means a serious or deliberate breach can result in fines or, in some cases, imprisonment. You could also face civil claims and the cost of defending yourself, and it is worth asking your indemnity provider how non-compliance could affect your cover. A single breach can also damage your reputation before your career has properly begun, and going through an investigation is stressful, both personally and professionally.

Compliance also protects you
The good news is that following the rules is also your best protection. Whether it is the safe handling of medicines, the correct disposal of waste, the protection of patient information or the fair treatment of staff, complying means you can show that you did the right thing and acted responsibly. It reduces the chance that something goes wrong in the first place, keeps your patients and colleagues safe, and puts you in a much stronger position if your conduct is ever questioned. Compliance is not only about avoiding punishment. It is about building good habits now that will protect you throughout your career.

Don't let this list scare you
If reading through all of this feels overwhelming, you are not alone, and you are not expected to carry it by yourself. Compliance is a process, not a test you must pass perfectly on day one, and no practitioner is expected to be an expert in every Act. The South African Dental Association (SADA) is here to help. As your professional association, SADA keeps its members informed about changes in legislation and regulation, offers guidance when you are unsure where you stand, and gives you a community of colleagues facing the same challenges. Start with the basics, take it one step at a time, and reach out to SADA whenever you need support.

Making compliance part of the routine
Compliance is easier when it becomes a habit rather than a scramble. As a community service dentist, you can start with these:

Know your scope. Work within what you are registered and trained to do, and ask a senior colleague when you are unsure.

Document everything. Record consent, findings and treatment clearly and at the time. Good notes are a habit worth forming from your first patient.

Protect patient information. Keep records secure, and never share patient details on personal messaging apps or social media.

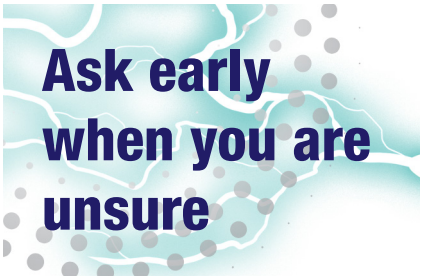
Follow the facility's protocols. Infection control, sterilisation, waste, radiation and medicines procedures exist for a reason. Ask for training if you have not received it.

Report incidents promptly. This includes needlestick injuries, equipment faults and near misses.

Keep learning. Legislation and HPCSA guidance change. Follow updates from the HPCSA and SADA.

Ask early. When you are unsure, speak to a senior colleague, your indemnity provider or SADA. A question costs far less than a mistake.

In conclusion
Complying with legislation is not red tape standing between you and your patients. It is part of the professional duty you accepted when you registered. You are at the very start of your career, and the habits you form during community service, from documenting properly to protecting patient information and following safety protocols, will protect your patients, your colleagues and your registration for years to come.



Starting a Dental career: Public vs. Private Practice

Mr KC Makhubele
SADA Chief Executive Officer

In South Africa, newly qualified dentists have two main career paths to choose from: working in public service or joining the private sector. Both options come with distinct opportunities and challenges.

Public Practice
Public service in dentistry is usually undertaken during the compulsory one-year community service program required of all South African dental graduates.

Working in the public sector offers new dentists the chance to gain valuable experience in high-demand areas. Public health facilities often serve large populations with diverse and complex dental needs, providing new graduates with exposure to a wide variety of cases.

Advantages of Public Practice

- Exposure to a wide range of dental conditions, often more complex than in private practice.
- Hands-on experience with limited resources, which helps new dentists become resourceful and adaptive.
- A structured environment that offers mentoring from experienced professionals.
- Contribution to community health by serving underserved populations.

Challenges

- Limited resources and infrastructure can make day-to-day work challenging.
- Lower remuneration compared to private practice.
- High patient volumes can lead to

longer working hours and a heavy workload.
- Less autonomy over treatment choices and work environment.

Private Practice
Private practice offers a different set of experiences. New graduates entering private practice, whether by joining an established practice or setting up their own, must focus on patient relationships, practice management, and maintaining a high standard of care to build their reputation.

Advantages of Private Practice
- Greater control over work schedule and autonomy in decision-making.
- Higher earning potential.
- Ability to offer advanced procedures and treatments due to better resources.
- Opportunity to develop strong, long-term relationships with patients.

Challenges
- Running a practice involves managing business aspects such as finances, staff, and marketing.
- Competition with other dental practitioners.
- The responsibility to maintain a steady flow of patients, which can add pressure early in one's career.

In summary, both paths offer unique learning opportunities. The public sector builds foundational experience and resilience, while private practice may be more rewarding financially and personally but comes with greater responsibility from the outset.

Understanding Your Role in a Dental Team
Dentistry is a collaborative field, and a well-functioning dental team is essential for high-quality patient care. New graduates must understand the roles of different team members to foster collaboration and streamline patient management.

Dental Assistants
Dental assistants play a crucial role in ensuring that the dentist's work runs smoothly. They prepare treatment rooms, assist during procedures, and manage patient flow. A new dentist should cultivate a good relationship with dental assistants, ensuring clear communication and mutual respect.

Oral Hygienists
Hygienists focus on preventive care and patient education. They perform scaling and polishing, amongst other procedures, and provide oral hygiene advice. They are integral to promoting long-term patient health. A new dentist should work closely with oral hygienists to ensure continuity in patient care, understanding that their role is vital in maintaining patient satisfaction and oral health.

Lab Technicians
Lab technicians are responsible for creating dental prostheses such as crowns, bridges, and dentures. Clear

and precise communication with lab technicians is critical to ensuring that restorations fit well and function optimally. A new dentist must learn how to effectively communicate patient needs, expectations and case details to these technicians.

Practice Managers and Front Office Staff

These individuals handle the administrative side of a dental practice, including appointments, patient billing, and insurance claims. Understanding their role and building strong communication will help streamline the operational side of your practice and improve patient experience.

In sum, every team member plays a pivotal role in the overall functioning of the practice. As a dentist, learning to communicate clearly and respect the expertise of each team member will improve patient care and create a more harmonious work environment.

Professionalism, Communication with Patients, and Ethical Practices

The foundation of a successful dental career lies in professionalism, effective communication with patients, and adhering to ethical practices. As a healthcare provider, a dentist must prioritize these elements to maintain trust, build a strong reputation, and ensure the well-being of patients.

Professionalism

Professionalism involves more than just clinical competence. It includes how a dentist presents themselves, interacts with patients and staff, and adheres to the ethical standards of the profession. Key aspects of professionalism include:

- Appearance: Maintaining a neat and professional appearance is important for making a positive impression on patients.
- Punctuality: Being on time for appointments shows respect for patients' time.
- Confidentiality: Upholding patient confidentiality is a legal and ethical obligation.
- Ongoing Learning: Dentistry is constantly evolving, and staying updated on the latest techniques and technologies is a mark of a professional.

Communication with Patients

- Clear, empathetic communication is essential in managing patient expectations, explaining treatment plans, and fostering trust. New dentists should develop skills to:
- Listen Actively: Understand patients' concerns and needs before offering treatment options.
- Explain Procedures: Use simple language to explain complex dental procedures so that patients can make informed decisions.
- Manage Expectations: Set realistic expectations about outcomes and recovery to avoid misunderstandings.

Ethical Practices
Ethics is at the heart of dental practice. Dentists must adhere to a strict code of ethics, which includes principles such as patient autonomy, non-maleficence (do no harm), beneficence (act in the patient's best interest), and justice (fair treatment of patients). In South Africa, dentists are guided by the Health Professions Council of South Africa (HPCSA) ethical guidelines.

Understanding and applying these principles is critical, as unethical behaviour can result in loss of professional standing and legal consequences.

Building Confidence as a Practitioner and Handling Patient Expectations
Confidence is built with experience, but new dentists can take steps to accelerate this process. One of the key challenges for new dentists is managing their confidence in the face of complex cases and high patient expectations.

- Start with simpler cases: In the beginning, it's advisable to take on cases within your skill set and build up to more complex procedures.
- Seek Mentorship: Learning from experienced colleagues or joining mentorship programs can help you gain insights and refine your techniques.
- Continuing Education: Enrolling in courses or workshops to upgrade skills will help boost confidence in delivering advanced treatments.

Patient expectations can sometimes be high or unrealistic. New dentists must learn how to navigate these situations effectively:

- Set Clear Expectations: Always be upfront about the likely outcomes of treatments and any potential risks involved.
- Manage Post-Treatment Communication: Provide clear after-care instructions and set realistic timelines for recovery or follow-up treatments.
- Learn from Mistakes: Every dentist makes mistakes, especially early on. The key is to learn from these experiences and seek advice when unsure.

Conclusion
The transition from student to professional dentist in South Africa is a time of significant growth, learning, and adjustment.

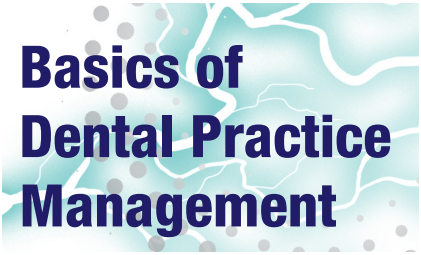
By understanding the career paths available, working effectively within dental teams, maintaining professionalism, and building clinical confidence, newly qualified dentists can navigate this period successfully.

The early years of practice lay the foundation for a long and rewarding career, where learning never stops, and patient care remains the core focus.

Financial Management: Bulding a Sustainable Dental Practice

Mr KC Makhubele
SADA Chief Executive Officer

As a newly qualified dental practitioner, you may have mastered clinical skills, but running a successful dental practice involves far more than just providing patient care. One of the critical areas you will need to focus on is financial management. This article will walk you through the basics of dental practice management, covering key elements such as bookkeeping, billing, and understanding the dental insurance system. Implementing sound financial management strategies will ensure your practice grows sustainably and remains profitable.



Bookkeeping: The Backbone of Financial Management

At the heart of any successful dental practice is effective bookkeeping. Keeping accurate records of your practice's income and expenses is not only important for legal and tax purposes but also for ensuring the financial health of your practice.

- Tracking Income: Your income will primarily come from patient treatments, insurance reimbursements, and possibly third-party financing systems. Make sure to track every source of income meticulously.
- Tracking Expenses: Record every outgoing payment, including costs for supplies, staff wages, rent, utilities, insurance premiums, and taxes. Categorizing expenses can help you identify areas where you might be overspending.

- Accounting Software: Investing in reputable accounting software (such as QuickBooks or Xero) is essential. This software will help automate processes, generate financial reports, and ensure accurate record-keeping, saving you time and minimizing errors.

- Cash Flow Monitoring: A sustainable dental practice requires healthy cash flow. Keep a close eye on the money flowing into and out of your practice on a regular basis. Cash flow management is critical for paying bills on time, making payroll, and planning for future investments.

Billing: Ensuring Timely Payments
Efficient billing processes are essential for keeping your practice profitable. Your practice's billing system will impact patient satisfaction and the regularity of your revenue stream. Delays in billing or errors in charges can lead to significant financial setbacks.



- In-House or Outsourced Billing? Some practices opt to handle billing in-house, while others choose to outsource this function to third-party companies. If you are just starting out and have a small patient base, managing billing in-house can save costs, but as your practice grows, outsourcing may free up time to focus on patient care.

- Establish Clear Payment Policies: From the outset, have a clear financial policy that explains your payment terms to patients. Ensure your patients understand payment is expected at the time of service unless other arrangements have been made. Also, make sure to offer multiple payment options (credit cards, digital payments, etc.) to make it easier for patients to settle their bills.

- Follow Up on Payments: Implement a system for following up on late payments. Late or unpaid invoices can negatively impact cash flow, and consistent reminders (email, phone calls) can help ensure timely payment. Understanding Medical schemes and Health Insurance. Dental insurance can be a double-edged sword. On the one hand, it helps patients afford necessary treatments, but on the other hand, it can complicate billing and reimbursement processes for the practice. Understanding how these systems work will help

you streamline financial operations and avoid reimbursement delays.

- Types of Dental Insurance Plans: There are several types of dental insurance plans, including Preferred Provider Organizations (PPOs), Health Maintenance Organizations (HMOs), and indemnity plans. In SA this is managed care organisations, designated service provider contracts or non-contracted individuals. Each type of plan has its own rules regarding covered services, payment schedules, and out-of-pocket costs. Familiarize yourself with these so that you can guide patients through their insurance policies effectively.

- Fee Schedules and Reimbursement: Dental insurance companies use a fee schedule to determine how much they will pay for each service. Often, this reimbursement is lower than what you might charge as a private practice, so it's crucial to understand the gap between the insurance payout and your fees. You may need to negotiate with insurance companies or decide whether to participate in certain networks.

- Preauthorization and Claims: Some insurance plans require preauthorization for specific procedures. Ensuring that preauthorization is in place before treatment is important to avoid rejected claims later. Additionally, you must file claims accurately and promptly to receive reimbursement without delays. Claims should be cross-checked to avoid rejection due to coding errors or missing information.

- Patient Education: Many patients are not fully aware of what their insurance covers. It's important to have a system that helps patients understand their out-of-pocket costs before undergoing any procedure. This not only enhances patient satisfaction but also reduces surprises for both parties when it comes to billing.

Importance of Financial Literacy

As a dental practitioner, you may not have received formal education in financial management. However, developing a baseline understanding of financial literacy is critical for the long-term success of your practice.

- Budgeting and Forecasting: One of the most fundamental financial skills is budgeting. Create a monthly and annual budget that accounts for anticipated revenues and expenses. Budgeting helps you plan for future investments, such as upgrading equipment or expanding your practice. Likewise, financial forecasting—predicting future cash flows based on current trends—helps you make strategic decisions about

hiring, marketing, and other operational factors.

- Tax Planning: Taxes can be a significant expense for any dental practice. Consult with a professional accountant or tax advisor to ensure you're taking full advantage of tax deductions and credits available to medical professionals. This might include deductions for business expenses, equipment depreciation, and even certain insurance premiums.

- Debt Management: If you've taken out loans to start or grow your practice, managing that debt efficiently is crucial. Prioritize paying off high-interest loans, but also maintain a balance between debt repayment and reinvesting in your practice.

Building a Financially Sustainable Practice
Once you've mastered the basics of dental practice management, focus on long-term strategies to ensure sustainability.

Diversifying Revenue Streams
While your core revenue will come from dental treatments, diversifying revenue can provide additional financial stability. Consider offering elective procedures such as cosmetic dentistry, orthodontics, or dental implants.

Regular Financial Audits
Performing regular financial audits will help you spot inefficiencies or areas for improvement. Whether done in-house or with the help of an external accountant, an audit will ensure that your finances are in order, your billing is accurate, and your cash flow is healthy.

Staff Training in Financial Processes
Your staff, particularly those involved in billing and patient interaction, should be trained in financial processes. They need to understand how to present treatment plans to patients, explain payment policies, and manage insurance claims effectively.

Conclusion
Financial management is one of the pillars of a successful and sustainable dental practice. By understanding and applying key principles of bookkeeping, billing, and insurance management, you'll not only keep your practice profitable but also improve patient satisfaction. In addition, financial literacy will empower you to make informed decisions about your practice's growth and sustainability, laying the groundwork for long-term success.

As you embark on your journey as a dental professional, remember that mastering these financial skills is just as important as honing your clinical expertise.

The Importance of the Right Indemnity

Dr George Wright, Dental Director
Dr Yash Naidoo, Dentolegal Consultant
Dental Protection Limited

As certain as your professional career will have a start and an endpoint, it is our prediction that at some point in that professional career, either a patient or a colleague will make a complaint about your treatment, your competency, or your behaviour as a registered healthcare professional.

Dentistry is unpredictable. There are no absolute guarantees regarding our treatments, yet the evidence suggests our patients are more demanding and expectant of success and perfection. As undergraduates, there just isn't enough time to develop all the skills you need to practise safely and to also learn how to communicate effectively with patients as partners in their care or occasionally in conflict and conflict resolution.

So what happens when your patient is unhappy with some aspect of their care? A few patients will just move on to another practice in the hope that their leaving is punishment enough. Unfortunately, the majority are likely to be less forgiving, particularly where they have paid what may be to them substantial sums of money for a professional service and will look to hold you accountable when they believe they have not received the outcome they expected.

If there is a complaints procedure where you work that captures patient disappointment, then you have a chance of containing the problem and fixing it yourself before it escalates. If there is no complaints process, often the first sign of an unhappy patient is a letter from the HPCSA or a negative review online.

Complaints made over social media
Sometimes complaints are made over social media, and trial by social media can often feel like a public humiliation.

Whilst it can be a fantastic marketing tool, social media can also be manipulated by an unhappy patient to potentially attract the attention of a much wider audience, to a poor experience or poor clinical outcome. You can't defend yourself publicly without breaching confidentiality, that's where the value of having an experienced defence organisation on your side comes into play. The organisation can help you resolve the complaint and avoid ethical transgressions as you work your way through the problem.



Dealing with your own emotional reaction to a complaint is also not straightforward. It can be challenging to remain objective about what the patient says went wrong, and without the impartial and unbiased assistance of a defence organisation it is easy to lose focus on the facts and the evidence. Once this happens, there is a real risk that a simple complaint that could have been dealt with speedily and to the satisfaction of both patient and dentist, may escalate into an environment where a more invasive investigation of the facts can take place – we are thinking here of the HPCSA.

Many complaints to the HPCSA end with no action against the dentist; however, there are occasionally some issues raised in complaints that are harder to defend, and the best strategy is to prevent this happening in the first place, with effective local complaints handling. For over 65 years, Dental Protection has been helping dentists just like you respond professionally, ethically, and effectively to complaints. It's what we do, and just one of the many benefits of membership.

In the majority of complaints, patients will look for some sort of acknowledgment that their concerns have a justification and that you, as the dentist, will do the right thing by recognising and resolving their concerns. Sometimes all that's needed is an apology.

Complaints involving unsatisfactory or failed treatment generally include a request to refund fees or pay for the treatment they now need – called remedial treatment – at a new dentist (and sometimes, a specialist). How are you going to know whether the patient's demands are fair or not, and who is going to fund this treatment? Believing that a complaint is justified, the patient then must decide to whom they should complain.

Although health establishments are expected to have complaints procedures in place, these are not always consistently implemented or enforced, particularly in private practice. As a result, it's often difficult for patients to know where to start, and the path of least resistance nowadays is to use the HPCSA online complaints portal or the mediator service run by SADA.

If a complaint is made to the HPCSA, it triggers a statutory process set out in the Health Professions Act (56 of 1974) whereby the HPCSA registrar is required to investigate the concerns raised and decide whether:

- The matters reported are minor and can be resolved through mediation by the HPCSA Ombudsman, or
- For more serious allegations, direct the Committee of Preliminary Inquiry to consider the allegations and the registrant's response. They will then determine whether the complaint should be upheld, and the registrant sanctioned if found guilty of unprofessional conduct or deficient professional performance.

The HPCSA can also act against a registrant whose fitness to practise may be impaired by reasons of their health.

How Dental Protection Can Help?
You cannot ignore complaints. You have an ethical duty to respond to them. This is where assistance from Dental Protection is invaluable. Once you report the complaint to us, we gather all the information we need to take an objective view of the incident.

Being on the receiving end of a complaint can cause fear and resentment. Most dentists will find it difficult to look objectively at the key issues and, left to their own devices, will tend to respond subjectively.

Often the matter can be resolved with an apology and an explanation. Sometimes we will advise that a refund should be made, or the dentist contributes towards the cost of the remedial treatment their patient now needs.

Depending on the facts of each complaint, Dental Protection can assist with the costs of remedial treatment where the need for that treatment flows from an act or omission on the part of our member. Most patients would choose to avoid litigation and there is no point in forcing a patient to involve their own attorney when a simple apology and some form of financial support is all that is required.

Where a complaint has been made to the HPCSA, and it may be by a patient, a fellow colleague, or an employer then the risk of an adverse outcome is higher if you choose to respond yourself. When a member is being assisted by Dental Protection, we instruct attorneys to gather all the

facts, advise you on your position, and assist by submitting an explanation to the HPCSA on your behalf. Legal assistance is provided at all stages of the HPCSA investigation until the matter is concluded.

When a complaint escalates into a claim

A completely different problem arises when a patient suffers an avoidable treatment injury and seeks compensation. The patient must prove on the balance of probability that the injury arose from a negligent act or omission by their dentist. A simple example might be when a patient is given an antibiotic when it is already known they are allergic to it. They end up being hospitalised and are faced with private hospital bills, doctors' fees, loss of income for days off work, and recovery. For all these expenses they seek to be recompensed by the practitioner who prescribed the antibiotic. They will often do this by means of a letter of demand drafted by attorneys, followed by a summons issued by the court – in other words, they sue the practitioner.

This is where indemnity comes in. Professional indemnity, put simply, involves protection against a loss or other financial burden (such as legal fees defending a court case) stemming from one's profession.

Membership of Dental Protection includes the right to request legal and financial assistance with clinical negligence claims arising from your private professional practice.

Indemnity is important for any professional, particularly for dentists who invest substantial time and money studying, training, and building a successful practice. It is not inconceivable that in your career, you may receive a summons from lawyers claiming millions of Rand due to alleged improper placement of implants in a full-mouth rehabilitation. It is often at this stage when practitioners regret not having some form of professional indemnity.

Indemnity or insurance?

If you work in the state sector as an employee of the state, then any treatment injuries caused by your own acts or omissions will be compensated by the state. The Treasury Regulations already create a mechanism for patients to obtain compensation where they have been injured in a state dental facility and Dental Protection does not defend or pay compensation to state patients. Those members of Dental Protection who work in the state sector do not require indemnity for claims, therefore they pay much lower annual subscription fees than those who work in the private sector. However, the state rarely assists its employee dentists with informal complaints by patients, or complaints to the HPCSA. In many instances, the state employer itself is the entity that lodges the complaint against the dentist at the HPCSA. In



such instances, membership of an organisation like Dental Protection is crucial – HPCSA proceedings can be long and very costly.

Indemnity in the traditional sense is often seen as a grudge purchase. Its importance is, sadly, often only appreciated once it is too late. But it is important to remember that this is your career, your livelihood, and for many of us, our labour of love. That is surely something worth protecting and having decided that you cannot sensibly work without indemnity, it's important that you understand all the facts about indemnity and the key differences between an occurrence-based indemnity product provided by Dental Protection and claims-made insurance favoured by commercial insurers.

The relative merits of discretionary indemnity and insurance are important. However, with professional overheads increasing and patient income falling, some dental professionals have been looking at cheaper alternatives to save money. In most cases, cost comparisons are misleading because no two products are the same. If the cost of your protection is your only consideration, then there is no need to read on; but, if you want to understand why the products differ in cost and the benefits they deliver then the following information may make the difference between a lifetime of professional protection and a lifetime of regret.

Traditionally most dentists in Southern Africa have been protected by a mutual indemnity organisation providing occurrence-based indemnity. What this means is that, provided membership was in place at the time of the incident leading to the claim or complaint, with the dentist paying the correct subscription for their scope of practice, then assistance can be requested no matter how long after the event the claim or complaint arises. This is important because it can take many years for a patient to discover issues with their complex restorative reconstruction or smile makeover or that their periodontal disease was not diagnosed and properly managed.

In the time between the treatment taking place and the claim or complaint arising, you may have had a career change, moved out of private practice into the state sector, switched indemnifiers, moved abroad or even retired. Provided you had occurrence-based indemnity in place at the time the treatment was provided – even if you left Dental Protection membership for any of the reasons above – you are still able to request assistance. There are no financial

caps, excesses to pay or additional costs after your membership ends. Occurrence-based indemnity gives you unlimited, lifetime protection.

A claims-made insurance product is fundamentally different. If you cancel your policy between the time of an incident and when it becomes necessary to report it as a claim, it will be important that you have obtained and paid for separate run-off or 'tail' cover so that you can continue to report claims that arise years after the alleged negligent clinical care was provided. Therefore, the cost of providing ongoing protection for claims reported in the future may not be fully reflected in the annual premium and may require separate run-off cover, which is why claims-made products may appear more affordable in the short term. However, you should factor in this future cost when comparing products and pricing.

Another consideration is the availability of run-off cover. If you are not offered or are unable to purchase the necessary run-off cover when you retire or end your policy, then you will likely have no protection in place if a claim later arises.

There may also be additional reporting requirements for claims-made products. In this scenario, a dentist would only be covered if he or she was insured when the claim arose and was reported in accordance with the policy terms at the time (or where they have separately purchased another insurance policy with retroactive cover dating back to when the clinical treatment was carried out and which is the subject of the claim). This can be complicated, and an individual really needs to fully understand the type and nature of the protection that they have in place and be confident that it is sufficient for their needs.

Insurance providers may offer a ranger of policies at different prices, with varying levels of indemnity cover (limits to what they will pay), excesses, exclusions and terms. Again, it is important to consider these when comparing products.

Carefully read all policy wording

Dental Protection differs from other defence organisations or insurers. The benefits of membership are flexible and provide us with discretion to consider unusual requests for help and to respond to unforeseen changes in the dentolegal environment. We recognise that risk can be contained with effective complaint handling and we support our members with assistance from professional colleagues who know and understand dentistry.



If you can nip a complaint in the bud, that may well prevent a claim from arising in the future and help maintain a good relationship with a patient. After all, isn't that what dentistry is all about?

Dental Protection, as part of MPS, has remained a steady and trusted partner for dentists in Southern Africa for many years, with the assistance and protection provided for members being based upon mutual discretionary indemnity.

Members of Dental Protection are part of a mutual organisation that they collectively own. Members pay subscriptions that go into a pool. If they face a complaint, claim, regulatory investigation, or any other matter, members have a right to request assistance paid from this pool.

Since the organisation is owned by members, the default position is to see how the member seeking assistance can be helped.



Once a request for assistance is granted, an experienced team of dentolegal consultants, case managers and panel attorneys will then help by offering the right level of assistance without being restricted by small print, financial caps, or exclusion clauses. The level of assistance provided is tailored to the individual needs of the case. We also have the discretion to assist our members in matters where the provision and funding of remedial care can often be sufficient to conclude a complaint or potential claim.

Often, it is using the flexibility of discretionary indemnity proactively to assist members of Dental Protection that becomes one of the key differentiators between the protection we provide and alternative contract-based insurance products. We know that most patients would prefer to avoid litigation, however if there is no such clause or flexibility in your contract of insurance, a complaint or potential claim that may otherwise have been resolved at an early stage with the provision and funding of remedial care, may have to escalate to formal litigation proceedings before your insurer can step in. If your insurance contract lacks such a clause and you prefer to avoid the stress that can come with litigation early on, you will have to use your own money or resources for the patient's remedial care.

This very clearly provides an advantage for the dentist who has dis-

cretionary indemnity over the dentist who has a contract of insurance which specifies what protection and services the insurance company will and will not provide, along with details of any exclusions and financial caps. In such a scenario, it is important to have carefully read the policy wording and any policy schedules to ensure that there is full understanding of what is covered and what is not.

The devil is in the detail.
Joining Dental Protection is very easy.

All of the information you need can be found on our website by clicking the link below: https://www.dentalprotection.org/south-africa/join



Understading the Patient-Practitioner Mediation Service

Dr J Barnard
Dental Mediator

In 2014, SADA introduced a complaint resolution service/mediation service to members of the public who wish to complain about their dental care. The service is a valuable alternative and has many advantages over complaining to the HPCSA, the only other option at no cost. The service is also available to dentists who need assistance after receiving a complaint from a patient.

The service contributes to building the SADA brand, increasing the public confidence in the dental profession and containing the rising costs of professional indemnity. Since 2014 the CRS has resolved over 5000 disputes between dentists and patients.

Conflicts and disputes are very likely to arise when there is a disparity between the reality of a clinical procedure and the patients understanding of the treatment. When a dispute occurs, the question is not always how to prevent or supress conflict, but rather to create conditions that encourage constructive discussion between the differences. Effective complaints management and conflict resolution is rarely taught, despite it being a basic requirement for anyone providing professional services. Most clinicians have limited experience of managing difficult interactions that can confront them in practice. There is an obvious need for a mediator to fill this gap by helping the two parties to manage their conflict productively.

Mediation, as an alternative to legal processes, has a rich history in the Japanese and Chinese legal systems and in parts of Africa.

Mediation is particularly successful in "divorce settlements" as an alterna-

tive legal system. It has been used in the UK, USA and Canada to resolve medical disputes for years.

Mediation differs from the process of arbitration, counselling or negotiation. It is a process by which participants, together with the assistance of a neutral person, systematically isolate issues in order to develop options, consider alternatives and reach consensual settlement that will accommodate their needs. It is a self-empowering process that emphasises the participants own responsibility for making decisions that affect their lives.

The principles of the service are:

1. Free service – There are no costs involved for the patient or the dentist.
2. Voluntary – The dentist or the patient can choose not to participate in a mediation process, and abort the mediation process at any time.
3. Confidential – No information will be disclosed to third parties or to the other party in dispute without consent.
4. Non–binding until an agreement is reached and mediation agreement signed
5. Impartial – The mediator does not choose sides and stays impartial at all times
6. Without prejudice – Information disclosed during the mediation process cannot be used against the dentist in court.
7. Encourages self-determination – ensures that both parties recognise their differences.
8. Gives ownership- Participants are encouraged to take ownership to identify issues and engage creatively to resolve conflict.
9. Use integrative approach – Aims to understand the interest of both parties, and help them to reach a win-win resolution that they would both find acceptable.
10. Keep the goal in mind – The aim is not to achieve absolute justice, but to develop options and find the most workable satisfactory solution.

There are many benefits of resolving a dispute through the SADA mediation service compared to regulatory or legal processes:

- The majority of complaints arise because of miscommunication or a misunderstanding between the dentist and the patient. The literature suggests that up to 70% of complaints against health care practitioners can be traced back to miscommunication. The mediation office assists to resolve any misunderstanding through good communication.
- The mediation office can help to restore the professional relationship between the dentist and the patient. During a regulatory or legal process, the dentist-patient relationship is usually compromised.
- The mediation office can help to

generate options and solutions not available through litigation or the HPCSA. The mediation is handled by experienced dentists that are still in clinical practice and understand the challenges and difficult interactions faced by dentists on a daily basis. The dentists also have training and experience in medical negligence mediation and communication, and understand the regulatory and legal processes.

- The mediation office can resolve disputes promptly, sometimes the same day compared to a dragged out legal or regulatory process.

Patients usually contact SADA telephonically, by e-mail, or through the link available on the SADA website if they are not happy with their dental treatment, or how much they paid for their dental treatment.

After acknowledging the complaint, the office initially helps the patient to understand the different options available to lodge a complaint against a dentist, and how each option works.





Self-resolution is always encouraged, and patients are asked to formalize their complaint and expectations in writing to the dentist. This ensures that the dentist is aware of the complaint, and provides the dentist with a valuable opportunity to resolve the complaint with the assistance of the SADA mediation office before the complaint escalates to the HPCSA or lawyers.

Most practitioners or their staff are aware of the patient's disappointment. However, they fail to address the patient's concerns at the practice, which generally results in a relationship breakdown and loss of trust resulting in the patient approaching SADA or the HPCSA.

Patients usually contact SADA or the HPCSA after:

- The patient experiences treatment failure or post-operative symptoms, and the practice is unwilling or unable to offer a timeous solution.

- The patient loses trust in the dentists' abilities and conduct.
- There is a dispute about the outstanding account, or who would be responsible for the account when third party funders are involved.
- The dentist failed to meet the patient's pre-operative expectations.

The majority of complaints could be prevented by implementing a practice complaint procedure, which is imperative in every dental practice. Patients should always know how to lodge a complaint, and who to contact. It is only because their concerns are not listened to and addressed at the practice itself that they choose to involve third parties.

Mediation generally involves negotiating an agreed outcome or solution acceptable to both parties, often involving an independent expert if required. The service receives between 30 and 40 complaints per month from patients and has a high success rate because of good cooperation from dentists and patients.

Your degree gave you the foundation.

Your community service year gives you the opportunity to start building upon it.

From graduate to professional.

From practitioner to leader.

Clinical and Diagnostic Coding

Dr T Parbhoo
SADA Head Support Services

Clinical (procedure) coding i.e., codes that tell us what treatment was carried out to remedy the problem.

SADA is regarded as the custodian of dental procedure codes in South Africa, and has repeatedly produced the SADA Dental Procedure Codes and Guidelines in good faith in order to promote ethical billing and to ensure the highest standards of practice are maintained. These guidelines serve to ensure the correct interpretation of procedure codes and to avoid either misunderstanding or misinterpretation by practitioners or other parties.

The SADA Dental Procedure Codes and Guidelines 2025 is a living document that is continuously updated to reflect and maintain new procedures and technology. The document is therefore a valuable resource for practitioners in the public and private sectors that are joining the world of dentistry due to its continuous evaluation of procedures in keeping with the latest advances in evidence-based dentistry as well as assisting newly qualified practitioners in maintaining accurate dental records, reporting procedures on patients, and processing dental insurance claims.

The procedures listed in the Code Book are those performed by general dental practitioners as well as the various specialist fields including oral pathologists, prosthodontists, periodontists, orthodontists, and maxillofacial and oral surgeons. These codes are also used by Oral Hygienists and Dental Therapists.

For ease of reference, the procedure codes, which are based on clinical dental practice, have been grouped into the categories of service with which the procedures are most frequently identified. The oral healthcare providers who are permitted to perform such procedures are indicated in the Standard Provider scope column (SP) while the scope of practice for either a GP dentist or a specialist under unforeseen circumstances is indicated in the Suggested Qualified Practitioner column (SQP).A list of direct material codes is present as Appendix A subsequent to the last chapter.

Individual codes consist of a procedure code, procedure nomenclature, relative value unit/s and where necessary, guidelines to clarify the intended use of the procedure code by means of a descriptor. Each code further indicates where a direct material code and/or a lab code may accompany the procedure code as well as the mouth part involved in the procedure. In compiling this clinical procedure coding structure, the South African Dental Association (SADA) has established an anatomical system in which relative value units (RVU) have been allocated to each procedure, operation, consultation, dental service etc rendered by a dental practitioner.

SADA is prevented from stipulating or recommending any fees in respect of dental procedures listed in the SADA Dental Codes as per the regulations set out by the Competition Commission. Dentists are therefore entitled to levy fees according to what they regard as suitable and reasonable for services rendered whilst taking into account the personal circumstances of individual patients, provided they have not signed a contract with a medical scheme or managed care organization that prohibits this practice.

Diagnostic (ICD-10) Coding i.e., codes that tell us what the diagnosis of the patient was.

ICD-10 coding refers to the 10th revision of the international classification of diseases and related health problems. ICD-10 coding serves a distinct purpose in that it allows for the recording, analysis, interpretation and comparison of the data related to conditions, diseases, injuries, etc. In short, it is an alphanumeric code explaining why a procedure was done. Each ICD-10 code is between three and seven characters in length and at present, there are in excess of 72000 codes.

The codes were issued to the National Department of Health (NDoH) by the WHO in 1996. They have been implemented in the medical scheme environment as of July 2005 and are enacted by the Council for Medical Schemes via the Medical Schemes Act.

The Master Industry Table (MIT) is the table where one may find all the ICD-10 codes to be used in South Africa and this is considered the healthcare industry standard for ICD-10 coding. The current version of the MIT for use in SA is available on the National Department of Health website and is updated regularly.

The uses of ICD-10 codes are numerous: They allow for data collection globally for comparison and evaluation of the outcome of the population. They also allow for the improvement in quality health care and clinical management by documenting health services for earlier detection and better tracking. The documenting of Covid-19 cases would be a classic example of this point. ICD-10 codes also allow for the identification and trends as well as the burden of disease.

Since ICD-10 codes are diagnostic in nature, it is the duty of the treating practitioner to determine the appropriate diagnosis and thus ICD-10 code per procedure code claimed. From a medical scheme perspective, ICD-10 codes inform the scheme about what conditions their members are being treated for by healthcare practitioners. This enables the accurate reimbursement of accounts by medical schemes and better understanding of the value of new procedures. Furthermore, according to regulation 5f of the Medical Schemes Act, all claims must contain the relevant diagnostic code that relates to the health service and therefore failure to apply the correct ICD-10 codes may result in third-party funders rejecting claims since it is a statutory requirement to have them. The WHO has made available an ICD-10 interactive self-learning tool, together with full ICD-10 training, which may be accessed at: https://apps.who.int/classifications/apps/icd/icd10training/

South Africa is increasingly exploring the future adoption of ICD-11, recognizing it as a significant leap forward from ICD-10's dated framework. The WHO's digital-first codification, with enhanced API support, advanced searchability, and richer diagnostic granularity, promises major benefits in improving national health data quality and interoperability.

The local WHO-FIC Collaborating Centre has been actively preparing for this transition, with webinars held in early 2025 and ongoing focus on regional readiness. Practical considerations include upgrading IT infrastructure, training clinicians and coders, conducting dual-coding pilots, and integrating ICD-11 within South Africa's National Health Insurance framework - all processes expected to unfold over several years. As data-driven healthcare and Universal Health Coverage become priorities, adopting ICD-11 could significantly enhance disease surveillance, clinical documentation, and resource allocation, aligning South Africa with global health standards.

Technology and Innovation in Dentistry: Staying ahead of the Curve

Mr KC Makhubele
SADA Chief Executive Officer

The field of dentistry is evolving at an unprecedented pace, with technology playing a critical role in improving patient care, enhancing diagnostic accuracy, and streamlining clinical procedures. As a newly qualified dental practitioner, staying informed about the latest technological advancements will not only help you provide the best possible care but also keep your practice competitive in an increasingly tech-driven market. This chapter will explore key innovations such as CAD/CAM systems, digital imaging, 3D printing, and artificial intelligence (AI), while also offering practical advice on how to incorporate these technologies in a cost-effective manner.

Introduction to Cutting-Edge Technologies

CAD/CAM Systems: Revolutionizing Restorative Dentistry

Computer-Aided Design (CAD) and Computer-Aided Manufacturing (CAM) systems have transformed how dental restorations, such as crowns, bridges, and veneers, are designed and fabricated.

- Benefits: CAD/CAM technology allows for same-day restorations, significantly reducing the number of appointments needed. This not only enhances patient satisfaction but also increases practice efficiency by reducing lab costs and wait times.

- How It Works: A digital impression of the patient's teeth is taken using an intraoral scanner. The restoration is then designed on a computer and fabricated on-site using a milling machine, eliminating the need for traditional moulds and sending impressions to external labs.

Digital Imaging:
Enhancing Diagnostics
Digital radiography and other imaging technologies have improved diagnostic accuracy while reducing radiation exposure for patients.

- Digital radiographs:
  These offer higher-quality images compared to traditional film radiographs and can be instantly viewed, stored, and shared electronically. They also allow for image enhancement techniques, such as magnification or contrast adjustment, which can aid in detecting issues like caries or bone loss.

- Cone Beam Computed Tomography (CBCT):
  CBCT provides three-dimensional images that are invaluable for planning complex procedures like dental implants, root canals, and jaw surgeries. The precise imaging enhances both diagnostic capability and treatment planning, reducing the risk of complications.

3D Printing:
Precision and Customization
3D printing is one of the most exciting advancements in dentistry, offering endless possibilities for custom treatment solutions.

- Applications:
  3D printing can be used to fabricate orthodontic appliances (e.g., clear aligners), surgical guides, dentures, crowns, and even dental models for patient education and treatment planning.

- Cost-Effective Manufacturing:
  Once considered too expensive for general dental practices, 3D printing technology has become more affordable and accessible. It allows for the production of precise, personalized devices at a fraction of the time and cost of traditional methods.

Teledentistry:
Expanding Access to Care
Teledentistry is a rapidly growing field that involves the remote diagnosis and consultation of dental issues using telecommunications technology.

- Remote Consultations:
  Teledentistry allows patients to consult with a dentist from the comfort of their homes. This is particularly beneficial for individuals in rural areas or for patients with mobility issues who may find it difficult to visit a clinic in person.

- Emergency Triage:
  Teledentistry is also useful for triaging emergencies, helping to determine whether immediate intervention is needed or if the patient can wait for an in-person appointment. This can alleviate pressure on emergency dental services and reduce unnecessary visits.

Understanding the Role of Artificial Intelligence (AI) in Diagnostics and Treatment Planning

Artificial intelligence (AI) is revolutionizing how dentists diagnose conditions and plan treatments. Through the use of machine learning algorithms, AI can analyse vast amounts of patient data to identify patterns, predict outcomes, and assist in decision-making.

AI-Powered Diagnostics

AI tools can enhance diagnostic accuracy by analysing dental radiographs, intraoral images, and even CBCT scans with high precision.

- Caries Detection:
  AI algorithms can detect caries at early stages, even in hard-to-see areas, reducing the likelihood of progression and increasing the chance of successful preventive measures.

- Orthodontic Treatment:
  AI-powered tools can predict tooth movement and recommend the most effective orthodontic treatments, improving patient outcomes in less time than traditional methods.

- Periodontal Disease Management:
  AI can assess gum health and bone density through imaging, helping practitioners diagnose periodontal diseases early and offer targeted treatments.

AI in Treatment Planning

AI can streamline treatment planning by providing personalized recommendations based on the patient's unique data set.

- Implantology and Prosthetics:
  AI can help plan dental implants with precision, optimizing implant placement, angulation, and depth to ensure better integration and long-term success.

- Virtual Treatment Simulations:
  AI can generate treatment simulations that show patients what to expect from orthodontic, restorative, or cosmetic treatments, increasing patient understanding and engagement in the decision-making process.

Emerging Trends in Dental Materials and Minimally Invasive Procedures

Advanced Dental Materials

Advancements in dental materials have made restorative and aesthetic treatments more durable, biocompatible, and natural-looking.

- Biocompatible Materials:
  New materials, such as zirconia and bioactive glass, are highly compatible with human tissue, reducing the risk of allergic reactions or infections. They are particularly beneficial for patients who require durable, long-lasting restorations.

- Aesthetic Composite Resins:
  Modern composite resins have improved optical properties, allowing for highly aesthetic restorations that closely mimic natural teeth. These materials are often used in bonding and filling applications, offering both function and beauty.

Minimally Invasive Procedures

Minimally invasive techniques are gaining traction in dentistry as they preserve more of the patient's natural tooth structure while providing effective results.

- Laser Dentistry:
  Lasers can be used for a range of treatments, including cavity preparation, soft tissue surgery, and periodontal therapy. They are less invasive than traditional drills, reducing pain, minimizing bleeding, and accelerating healing times.

- Air Abrasion:
  This technique uses a stream of fine particles to remove decay, eliminating the need for a drill in certain cases. It is less invasive and can be used without anaesthesia for minor restorations.

How to Incorporate New Technology in a Cost-Effective Manner

While adopting new technology can seem costly, it is important to view it as an investment that can boost both the quality of care and the efficiency of your practice. Here's how you can incorporate new technology in a cost-effective manner.

Prioritize Your Needs

Start by identifying the technologies that will have the most significant impact on your practice. For instance, if you specialize in restorative dentistry, investing in a CAD/CAM system might be more beneficial than teledentistry. Prioritize based on your patient demographics and practice goals.

Lease or Finance Equipment

Purchasing high-end equipment outright can be expensive. Many manufacturers offer leasing options that allow you to spread the cost over several years. Alternatively, financing options may be available to help manage the upfront costs of adopting new technology.

Phase in Technology Gradually

You don't have to adopt every new technology all at once. A phased approach allows you to integrate technology at a pace that suits your budget and workflow. For example,

you might start with digital imaging and later add 3D printing or CAD/CAM systems.

ROI Evaluation
Assess the return on investment (ROI) for each new piece of technology. Consider factors such as time saved, increased treatment acceptance, reduced lab costs, and enhanced patient satisfaction. Technology that boosts efficiency or attracts more patients can quickly pay for itself.

Staff Training
Technology is only as effective as the team using it. Ensure that your staff is properly trained in the operation of new equipment and systems. Investing in comprehensive training reduces the risk of errors, improves productivity, and ensures that your technology is being used to its full potential.

Conclusion
Staying ahead of the curve in dentistry requires a commitment to embracing new technologies and innovations that enhance patient care and improve practice efficiency.

From CAD/CAM systems and digital imaging to AI-powered diagnostics and 3D printing, these cutting-edge tools are transforming the landscape of dental care.

By strategically incorporating these technologies into your practice, you can not only offer advanced, minimally invasive treatments but also maintain a competitive edge in the ever-evolving dental industry.

As a new graduate, remaining adaptable and informed about these innovations will empower you to deliver high-quality, modern dental care and ensure the long-term success of your practice.

Your journey to greatness starts here.

What Dentists Can (and Can't) Say In Reply to a Negative Online Review

Mrs Carla Güldenpfennig
SADA Legal & Corporate Governance Advisor

Patient complaints are an unfortunate reality of dental practice, and most dentists will encounter one at some point in their careers. As a ComServe dentist preparing to enter private practice, it is worth recognising that even the most skilled, compassionate, and well-intentioned practitioner is not immune. Being prepared to respond professionally is an essential part of the responsibility that comes with caring for patients.

Sometimes the complaint is about something you can see coming. A patient waits forty minutes past their appointment time because an emergency walked in, and by the time they reach the chair, they're frustrated. Another is surprised by the bill because the treatment cost more than they expected or their medical aid covered less than they assumed. Some complaints come from the treatment itself: a filling that still feels high, a crown that doesn't sit the way they imagined, or lingering sensitivity after a procedure that was done perfectly well. Others have nothing to do with clinical work at all. A receptionist sounded short on the phone, a rescheduled appointment wasn't communicated clearly, or a patient simply felt rushed and unheard.

What makes this so unfortunate is that dentistry is already a profession where patients arrive anxious. Many of them are nervous, in discomfort, or putting off care out of fear. When something goes wrong, or even just feels wrong, that stress can turn quickly into frustration. And these days, frustration doesn't stay in the waiting room. It ends up on Google, Facebook, or Instagram, in front of hundreds of potential patients who have never met you.

For a practice built on years of careful work and hard-earned trust, a single angry post can feel deeply personal and unfair, especially when you know there's more to the story and professional confidentiality stops you from telling it. That is the difficult position so many dentists find themselves in, and it is exactly why how you respond matters just as much as the complaint itself.

A negative review isn't always an attack that needs to be defeated. Often, it's simply a patient who wants to be heard. So before you type a single word in reply, ask yourself two questions. First, is there something here we can actually resolve? And second, how do we respond without making things worse?

Why responding publicly is so tricky

The HPCSA's Ethical Guidelines on Social Media (Booklet 16) make it clear that your professional obligations don't switch off just because you're communicating online. They deal specifically with patient confidentiality and privacy, and they say that disclosure of health information on social media to the public must be avoided at all times. They also point back to the HPCSA's confidentiality guidelines (Booklet 5), under which patient information can generally only be disclosed with the patient's consent, a court order, or where the law allows it.



In practice, this means you may know the whole story and still be unable to tell it. Imagine a patient writes, "The dentist told me I needed three fillings and charged me R4,000." You may know the patient had extensive decay, was told about the treatment beforehand, and signed a treatment plan. It's tempting to say so. But the information that would let you answer fully (diagnosis, treatment history, X-rays, fees, payment history, missed appointments, correspondence) was obtained because of your professional relationship with the patient. A reply such as "You had three cavities because you ignored our recommendations," or "You still have an outstanding account," or "We offered to redo your crown free of charge, but you refused" reveals details of that relationship, even if every word is true. Even a reply that simply says "we're sorry you were unhappy with your treatment" can confirm that the person was your patient.

The result is an uncomfortable imbalance. The patient can tell their side of the story publicly, while you have to respond without the details that

would put the complaint in context. That doesn't mean you must accept an unfair review in silence. It means you shouldn't try to win the argument on Google.

What to post

A negative review doesn't need a long answer. A short, courteous, neutral reply is almost always best. It doesn't take sides, doesn't confirm that the reviewer was a patient, and doesn't discuss the details of the complaint. Its only job is to show that you take feedback seriously and to move the conversation somewhere private. You can adapt this one to any review:

"*Thank you for your feedback. We take all concerns seriously and would welcome the opportunity to address them directly. Due to our professional obligations regarding privacy and confidentiality, we are unable to discuss individual matters on a public platform. Please contact the practice directly so that we can assist you.*"



Potential patients reading the review aren't necessarily waiting to see you "win." Mostly, they're watching how you behave when something goes wrong. A calm reply that invites the person to talk privately shows them that confidentiality, professionalism and respect continue to apply even when you're being criticised.

What to do after you post

What matters most is what happens next. If the complaint is genuine, look into it. Go back through the clinical records, treatment plans, consent forms, quotations, invoices and correspondence. Handling it through your normal complaints process also helps you work out what kind of complaint you're dealing with. A patient who misread a quotation may simply need an explanation. A patient who believes their treatment was unnecessary may need a thorough walk-through of the diagnosis and treatment plan. All of these can start with the same one-star review.

Invite the patient to discuss their concerns with you and make a genuine effort to reach a resolution. Many patients are pleasantly surprised to be contacted, and a conversation often clears up a misunderstanding that a public review never could. If the patient is satisfied with the outcome, you can then politely ask whether they would be willing to remove or update their review. Keep this request gentle and don't pressure them, as it should always be their decision.

If the accusations are serious, such as an allegation of negligence, professional misconduct or dishonesty, don't deal with it alone. Contact your professional indemnity provider as soon as possible and get legal advice before you respond further, either publicly or privately. What you say, and when you say it, can affect how the matter is handled later.

If the review is simply unpleasant but raises nothing substantive, the most professional response is sometimes a brief acknowledgement and nothing more.

Keep it professional, and keep it internal

It's completely natural to feel personally attacked by a bad review. Most dentists put a great deal of themselves into the care they give. That's exactly why it's important not to answer emotionally. Comments like "This patient was impossible to deal with," "You are lying," or "You clearly don't understand dentistry" might feel good for about ten seconds, but the HPCSA expects you to uphold professional and ethical standards online, and an angry reply can be screenshotted and shared long after the original review has disappeared. A good rule is to draft your response, leave it, read it again the next morning, and only then decide whether to post it.

The same applies to your staff. Receptionists, practice managers and other team members shouldn't get drawn into public arguments with patients. It's worth having a simple internal policy about who is authorised to respond to online reviews on behalf of the practice.

The golden rule

Receiving negative or inaccurate feedback can be difficult, but it is important to respond calmly and professionally. Patient confidentiality must remain a priority, regardless of what has been said publicly. Keep any response courteous, avoid discussing clinical details, and invite the patient to raise their concerns privately through the appropriate channels.

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Practice Profitability Simulator

Dr T Parbhoo
SADA Head Support Services

The South African Dental Association (SADA) has launched the newly enhanced DCalc™ Tool, now available at no cost to members and for purchase by non-members via the SADA website. This sophisticated yet user-friendly tool has been aligned with the latest edition of the SADA Dental Procedure Codes and Guidelines, incorporating associated Relative Value Units (RVUs), enabling practitioners to calculate individualised procedure fees that accurately reflect their unique practice expenses, income goals, and desired return on investment.

Built on the widely recognised Activity-Based Costing (ABC) methodology, the DCalc™ Tool is designed to assist practitioners in developing a scientifically grounded, practice-specific cost structure. Whether you are entering private practice for the first time or are an experienced practitioner seeking to reassess your fee schedule, DCalc™ offers a practical and evidence-based solution for informed financial decision-making.

Key features of the revamped DCalc™ Tool include:
Integration of RVU values tailored to your individual practice data;
Flexibility to input expenses on a monthly or annual basis;
Enhanced explanatory notes and instructions provided on each page for guided use;
Drop-down menus for intuitive navigation and data entry;
The ability to include labour rates and calculate labour cost per minute per practitioner, offering a highly customisable and accurate costing interface;
A comprehensive user manual offering step-by-step instructions to support first-time and returning users.
This tool represents an essential resource for any practitioner aiming to set fees that are transparent, justifiable, and financially sustainable.
For further information or assistance with using the DCalc™ Tool, kindly direct your queries to the author at clinical@sada.co.za

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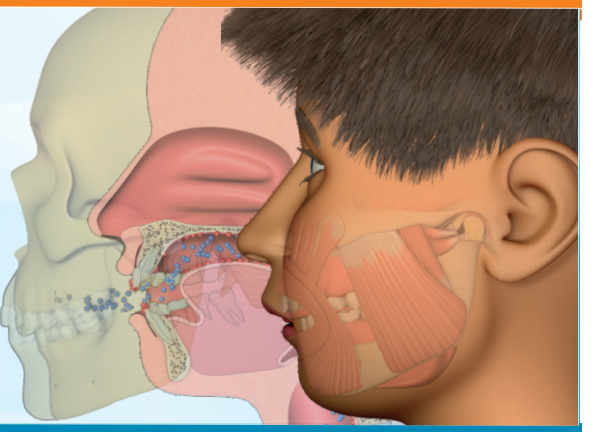
AVAILABLE IN OVER 100 COUNTRIES

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Integrating the diagnosis and treatment of

- Airway Dysfunction
- TMJ Disorders
- Malocclusions

into one simple and effective treatment system



GET STARTED WITH MYOBRACE® CASES

Myobrace® has established itself as the preferred pre-orthodontic treatment, for patients with soft tissue dysfunction. The Myobrace® system comprises patented pre-fabricated oral appliances and bespoke child friendly exercise activities to resolve breathing and myofunctional disorders(OMD's). More patients are asking for Myobrace® treatment by choice as they become educated around the epigenetic underlying contributors to malocclusions.



Our courses will equip you with the practical skills required to build your practice, and guide you through all the necessary steps in identifying soft tissue dysfunction, successfully treatment planning and getting started with Myobrace®

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DentalCare

Your Professional Home in Oral Health

Congratulations on your recent graduation! As a newly qualified dental professional, you have a unique opportunity to shape the future of oral healthcare in South Africa. Join the South African Dental Association (SADA), the only professional association dedicated to supporting your career and championing the interests of the oral health profession across the nation.

Why Choose SADA?

- Free Membership: Enjoy complimentary membership while you are a dental or oral health student, gaining access to invaluable resources and support.
- Diverse Community: Connect with a broad network of professionals, from General Dental Practitioners to specialists in Orthodontics, Prosthodontics, Maxillofacial and Oral Surgery, and Periodontics. Since 2020, we've welcomed all allied oral health practitioners, including Oral Hygienists, Dental Therapists, Dental Technicians, and Dental Assistants.
- Continuous Professional Development: Take advantage of regular branch events, workshops, and webinars designed to foster learning and mentorship, ensuring you stay at the forefront of your field.
- Exclusive Resources: As a member, you'll gain access to the South African Dental Journal, an internationally accredited publication, and The Golden Compass, your guide for navigating the community service year. Both are available digitally for easy access.
- Networking Opportunities: Attend our annual International SADA Dental & Oral Health Congress and Exhibition at discounted rates, where you can network with industry leaders and peers.

SADA's Commitment to You

At SADA, we are dedicated to your professional growth and the promotion of optimal oral healthcare for all South Africans. Our vision is to be recognized as the trusted leader and voice of oral healthcare in Southern Africa. By joining us, you become part of a movement that values Professionalism, Integrity, Excellence, Passion, Innovation, and Empathy.

Take the Next Step!

Don't miss out on this chance to elevate your career and make a difference in your community. Join SADA today and be part of a vibrant community committed to advancing oral health in South Africa!
Visit our website (https://www.sada.co.za) to sign up and learn more about the benefits awaiting you. Together, let's champion the future of oral healthcare!

From Graduation to Greatness: Building the Future of South African Dentistry

Graduation is a milestone every dental student dreams about. After years of lectures, practicals, examinations, clinical requirements and long days in the dental clinic, the moment finally arrives: you are a qualified dentist.

And then reality sets in. For many newly qualified dentists in South Africa, the next step is Community Service—a year that can feel both exciting and daunting. You are moving from the relatively structured environment of university into a professional world where you are expected to make decisions, manage patients, work within a healthcare team and take responsibility for your clinical practice.

It is a significant transition. But it is also an opportunity. Your community service year is not simply a year to complete before moving on to the next stage of your career. It is one of the first building blocks of the dentist you will ultimately become.

From student to professional.
At university, much of your learning takes place within a structured environment. There are supervisors to guide you, colleagues going through the same experiences and established systems around you.

Community service changes that dynamic. You will encounter patients from different backgrounds, with different expectations, levels of oral health awareness and access to healthcare. You may work in facilities where resources are not always what you are accustomed to. You will need to adapt, prioritise and find solutions.

This is where the transition from *knowing* dentistry to *practising* dentistry really begins.

Never Underestimate the Value of Asking for Advice

Your clinical knowledge remains essential, but so do your communication skills, judgement, professionalism, teamwork and ability to remain calm when things do not go according to plan.

The dentist you become will be shaped not only by the procedures you perform, but by how you respond to the people and situations you encounter.

Your first year will teach you more than dentistry. Community service can be one of the most valuable learning experiences of your early career.

You will learn how to communicate with patients who may be anxious or fearful. You will learn how to work with nurses, doctors, therapists, administrators and other healthcare professionals. You will begin to understand the realities of public healthcare and the broader oral health needs of South African communities.

You will also learn about yourself. There will be days when you feel confident and days when you question whether you are ready. There may be challenging cases, difficult conversations and moments when you wish you had more experience.

That is normal. Being a newly qualified dentist does not mean that you are expected to know everything. It means that you have developed the foundation to continue learning, asking questions and growing into your professional responsibilities.

Never underestimate the value of asking for advice.

A senior colleague who takes a few minutes to explain a procedure, discuss a difficult case or share an experience can contribute significantly to your development. Building relationships with experienced dental professionals is therefore not simply about networking—it is about creating a support system for your professional journey.

Remember the person behind the patient

It is easy to become focused on clinical procedures, schedules, statistics and workloads. But dentistry is ultimately about people.

Every patient who sits in your chair brings a story with them.

Some may have delayed seeking treatment because of cost. Others may have had negative experiences with healthcare. Some may be anxious about treatment, while others may simply not have had access to consistent oral healthcare.

Your clinical skills can treat disease, restore function and improve oral health. Your ability to listen, communicate and show empathy can influence how a patient experiences healthcare.

Never underestimate the impact of treating every patient with dignity and respect.

South Africa's oral health challenges are complex, and the future of dentistry will require professionals who understand that their role extends beyond the dental chair.

Your first year in practice is also the beginning of your professional reputation.

Professionalism is demonstrated in the small things: arriving prepared, communicating respectfully, maintaining appropriate records, protecting patient confidentiality, continuing to learn and taking responsibility for your decisions.



It is also about understanding that being a dentist is a lifelong commitment to learning.

Graduation does not mark the end of your education. It marks the beginning of a different kind of education—one shaped by real patients, real communities and real professional experiences.

Seek opportunities to learn beyond what is immediately required of you. Attend relevant educational sessions. Engage with professional organisations. Learn from colleagues. Keep up with developments in dentistry. Find mentors who can challenge and encourage you.

The professional network you build now can remain valuable throughout your career.

You are part of the future of South African dentistry. As a newly qualified dentist, it may be difficult to see yourself as part of the future of the profession. You may still feel like the student who was trying to pass the next examination.

But you are now entering a profession that needs your ideas, energy and commitment.

The future of South African dentistry will be influenced by the dentists beginning their careers today.

You will contribute to how patients experience oral healthcare. You will influence the communities you serve. Some of you will become practice owners, academics, researchers, specialists, public health leaders or mentors to the next generation. Others will take their careers in directions that do not yet exist.

Whatever path you choose, the foundations you establish during your early years matter.

Give yourself permission to grow

There can be pressure on newly qualified professionals to have everything figured out immediately.

You do not. Your first year is a time to learn, make mistakes responsibly, seek guidance, build confidence and discover what kind of dentist you want to be.

Celebrate the small victories: the patient who trusts you, the procedure you finally master, the difficult conversation you handle well, the colleague who becomes a mentor, or the day you realise that something that once intimidated you has become routine.

Progress does not always feel dramatic. Sometimes it looks like simply becoming a little more confident, capable and compassionate every day.

Your journey starts now. The transition from graduation to professional practice is not a single moment. It is a journey.

Community service will challenge you, but it will also give you experiences that cannot be replicated in a lecture theatre. It will introduce you to patients and communities who will shape your understanding of what dentistry means. It will test your resilience, develop your judgement and help you discover your professional voice.

So as you begin this next chapter, remember this:
You are not expected to arrive as the finished product.
You are beginning to build one.

The dentist you will be in five, ten or twenty years will be influenced by the choices you make now—how you treat your patients, how you respond to challenges, how willing you are to learn and how actively you contribute to the profession.

The Graduate We Hope You Become - You have worked hard to get here

The Graduate We Hope You Become - You have worked hard to get here

Years of lectures, practical training, clinical assessments, examinations, long hours and moments of doubt have led to this point. You are graduating as a dentist, ready to begin a new chapter of your professional life.

But beyond the qualification, there is a bigger question:

What kind of dentist will you become?
Your degree gives you the knowledge and clinical foundation to enter the profession. Your experiences from this point forward will shape your judgement, your character and the professional you ultimately become.

As you begin your Community Service year, we hope you will see it as more than a requirement to complete. See it as an opportunity to develop the values that will define your career.

Remain curious as you walk this journey

Dentistry does not stand still. Techniques evolve. Technology changes. Evidence develops. Patient expectations change. Our understanding of oral health and its relationship with general health continues to grow. The dentist who qualifies today cannot rely only on what they learned at university.

Lifelong learning is not an additional responsibility placed on top of being a dentist. It is part of being a good dentist. Ask questions. Read. Attend educational opportunities. Learn from colleagues. Keep up with developments in your field. Be willing



to reconsider what you know when new evidence emerges. Never lose the curiosity that brought you into dentistry in the first place.

Place patients before convenience
Behind every clinical procedure is a person. A patient may arrive anxious, embarrassed, frustrated or afraid. They may have delayed treatment because of financial circumstances, limited access to care or previous negative experiences. They may remember very little about the technical details of their appointment—but they are likely to remember how you made them feel.

Treat every patient with dignity. Listen before you speak. Explain before you treat. Respect their concerns. Protect their privacy. Communicate in a way they can understand. Clinical excellence matters enormously. But excellence without compassion is incomplete.

Professionalism is tested when nobody is watching. It is easy to talk about ethics when the answer is obvious. The more difficult moments come when there are competing pressures, uncertainty or difficult choices. Your professional responsibilities must remain at the centre of those decisions.

Be honest about what you know—and what you do not know. Ask for help when you need it. Take responsibility for your decisions. Maintain appropriate professional boundaries. Keep accurate records. Respect confidentiality.

And remember that your qualification is not simply a certificate hanging on a wall. It represents the trust placed in you by your patients and by the profession. Protect that trust.

Asking for help is strength not weakness
There may be moments during Community Service when you feel that you should already know everything. You should not. Being newly qualified means exactly that—you are at the beginning of your professional journey.

There is enormous value in asking a more experienced colleague for guidance, discussing a challenging case or admitting that you need another perspective. The strongest professionals are not those who pretend to have all the answers. They are those who recognise when they need to learn, seek appropriate support and use every experience as an opportunity to improve.

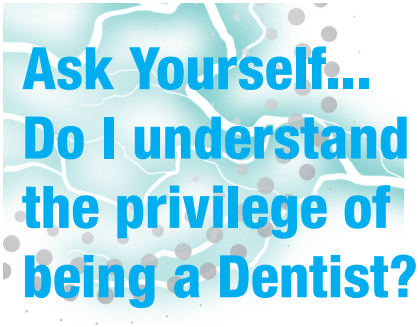
One day, someone else will come to you for that same guidance. Be the colleague you would want to have today.

Dentistry is more than a career. It is an opportunity to make a meaningful difference to someone's health, confidence and quality of life. For many South Africans, access to oral healthcare remains challenging. Your Community Service year may expose you to communities and circumstances that are very different from those you experienced during your training.

Take the time to understand them. Do not measure your contribution only by the number of patients you see or procedures you complete. Consider the trust you build, the knowledge you share and the dignity you bring to every patient interaction.

You are entering a profession with an important role to play in improving oral health in South Africa. Take that responsibility seriously.

Be a great colleague
A successful career is rarely built alone. You will work alongside dental professionals, doctors, nurses, therapists, administrative staff and many others. Learn to respect the contribution of every member of the healthcare team. Be generous with your knowledge. Celebrate the achievements of your colleagues. Give credit. Offer support. Communicate professionally, especially when circumstances are difficult. The reputation of dentistry is influenced not only by individual dentists but by how the profession conducts itself collectively. Be someone who makes the profession stronger.



Find your own definition of success
Your career may not follow the path you imagined as a dental student. Perhaps you will enter private practice. Perhaps public service will become your passion. You may pursue postgraduate education, research, academia, community dentistry or a completely different opportunity within the profession.

There is no single definition of a successful dental career. Success may mean becoming an exceptional clinician. It may mean serving a community for decades. It may mean becoming a mentor, practice leader, researcher or advocate for better oral healthcare.

Whatever path you choose, let your ambitions be guided by purpose as well as achievement.

Never stop being
The dentist who begins Community Service this year will not be the same dentist who completes it. You will learn. You will make mistakes. You



will overcome challenges. You will discover strengths you did not know you had. You will encounter patients and experiences that change your understanding of dentistry. Embrace that process.

Professional development is not something that happens only through formal courses and qualifications. Sometimes the most important lessons come from a difficult patient interaction, a challenging clinical decision, a conversation with a colleague or a moment when you realise you could have done something differently.

The graduate we hope you become

- We hope you become a dentist who is clinically competent, but also compassionate.
- A dentist who is ambitious, but never loses sight of service.
- A dentist who is confident, but humble enough to ask for help.
- A dentist who embraces innovation, but remains guided by evidence.
- A dentist who builds a successful career, but measures success by more than financial achievement.
- A dentist who understands that ethics are not optional, professionalism is not performative and lifelong learning is not something that ends with graduation.
- Most importantly, we hope you become the kind of dentist that patients trust, colleagues respect and future generations of dentists look up to.
- Your Community Service year is only the beginning.
- You have earned the right to call yourself a dentist.
- The Title Dr carries opportunity and responsibility
- The profession is waiting for your contribution.
- South Africa's patients are waiting for your care.
- And somewhere in the future, another young dental graduate will look to you as the professional they hope to become.
- Make sure you give them someone worth looking up to.


CONGRATULATIONS
SADA
THE SOUTH AFRICAN
DENTAL ASSOCIATION
Wishing you all the best in your next chapter.
Well done, graduands!

Documentation Examples

Pages 76-92
offer vaious examples of documentation.

They are made available for new graduates to be familiar with documentation which they will be required to complete and cross their paths.

These are examples of the most frequently used documents which we have. here are certainly further documents which you may be required to utilize which we do not have examples of.

For easy reference a Sample of an Employment Contract is also included in these pages.

SADA
THE SOUTH AFRICAN
DENTAL ASSOCIATION

Contact Us

Telephone: +27 11 484 5288
Email: info@sada.co.za
www.sada.co.za

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G.P.S. 11/01 TPH 3 (81/500909)

CONSENT TO OPERATION

HOSPITAL ..... CLINICAL DEPT. ..... WARD .....

I, ..., the undersigned, hereby consent to the administration of a general or other anaesthetic and to the performance of an ..... operation, the nature and possible effects of which have been explained to me and which I understand, on *myself/my child/my husband/my wife/the patient ..... (Name of patient) I also consent to such further or alternative operative measures as may be found necessary during the course of the above-mentioned operation.

*I understand that an assurance has not been given that the operation will be performed by a particular medical practitioner.

***Signature of patient/father/mother/guardian/husband/wife/near relative (capacity)/Superintendent:**

.....

Witnesses: 1. ..... Date ..... Time .....

2. .....

* **Delete that which is not applicable.**

PARTICULARS OF OPERATION

Date ..... Theatre .....

Duration of operation:

From ..... a.m./p.m. ..... a.m./p.m.

Surgeon .....

Assistant .....

Nature of operation .....

.....

Signature of surgeon

Anaesthetist .....

Assistant .....

Nature of anaesthetic .....

.....

Signature of anaesthetist

Mark with a cross in the appropriate blocks

	Complete	Incomplete
Swabs		
Instruments		
Suture needles		
	Used and removed	**Not used**
Tourniquet		
	Number	**Type**
Drains		
Catheters		
Plugs		
Specimens		

a.o. .....

Checked by (signature and rank)

(1) ..... (Scrub Nurse)

(2) ..... (Co-checker)

Sample Document

TPH 3 (81/500909)

HOSPITAL ..... **Ward** .....

..... Gender M F Age .....
Patient

Patient's No. ..... Classification .....

ADDRESSOGRAPH

..... *Doctor*

Phone .....

ADMISSION

Admitted by ..... Date ..... Time .....

Provisional diagnosis .....

Doctor's signature (if available) .....

DISCHARGE

Date of discharge ..... Time .....

Final diagnosis .....

Doctor's signature .....

REFUSED HOSPITAL TREATMENT

I, the undersigned, leave the ..... Hospital on my own responsibility and against the advice of the attending doctor.

Witnesses: 1. ..... ***Signature of patient*** .....

2. ..... Date ..... Time .....

I, the undersigned, take the patient ..... out of the ..... Hospital on my own responsibility and against the advice of the attending doctor.

Witnesses: 1. ..... ***Signature*** .....

2. .....

Date ..... Time ..... Capacity .....

For particulars of treatment use form TPH 3 (a).

Sample Document

Application for Patient Transport Document Example

Provincial Administration • Provinsiale Administrasie
HEALTH • GESONDHEID

81351502 TPH 94a

Hospital • Hospitaal

To: THE
Aan DIE SUPERINTENDENT

Hospital • Hospitaal

APPLICATION FOR TRANSFER OF A PATIENT
AANSOEK OM OORPLASING VAN 'N PASIENT

Name
Naam

Hosp. No. • Nr.

Dr

Res. Address • Woonadres

Age
Ouderdom

Sex
Geslag

The above patient is AN EMERGENCY / A NON-EMERGENCY
Die bogenoemde pasiënt is 'N NOODGEVAL / NIE 'N NOODGEVAL NIE

Tick here if ambulance is required
Merk hier indien ambulans verlang word

And is transferred to you by
En word na U oorgeplaas per

(If by ambulance, state reason)
(Indien per ambulans, verduidelik rede)

Condition on leaving / Toestand by vertrek

Together with / Saam met

DIAGNOSIS
DIAGNOSE

Clinical history and results of investigations, X-rays, etc., already done:
Kliniese geskiedenis en resultate van spesiale ondersoeke, X-straāls, ens., reeds gedoen:

Reason for transfer (Investigation and/or Treatment):
Rede vir oorplasing (Ondersoek en/of Behandeling):

Date
Datum

Superintendent

REPORT (To be returned to original hospital):
VERSLAG (Terug aan oorspronklike hospitaal):

Name
Naam

Hosp. No. • Nr.

Dr

N.B. – *This form in duplicate to accompany patient, third copy to be retained.*
Hierdie vorm in dupliko moet die pasiënt vergesel en derde afskrif moet gehou word.

Sample Document

Department of Radiology Document Example

DEPARTEMENT RADIOLOGIE/DEPARTMENT OF RADIOLOGY
MAG SLEGS DEUR GENEESHEER VOLTOOI WORD/MAY ONLY BE COMPLETED BY A DOCTOR

HOSPITAAL/HOSPITAL ..... Rö No: .....

PASIËNT/PATIENT: ..... LOPEND / WALKING ☐ BED VERVOER / BED TRANSPORT ☐ DRAAGBAAR / STRETCHER ☐

HOSP No: ..... STOEL / CHAIR ☐ **DOEN IN SAAL / DO IN WARD** ☐

GESLAG/ SEX	OUDERDOM/ AGE	INDELING/ CLASSIFICATION	AFDELING/ WARD	VOORHEEN GERADIOGRAFEER/ PREVIOUSLY RADIOGRAPHED	JA/ YES	NEE/ NO

VORIGE Rö ONDERSOEK MET DATUMS/PREVIOUS Rö EXAMS WITH DATES

VOLLEDIGE KLINIESE BEVINDINGS EN INDIKASIE VIR AANVRAAG/COMPLETE CLINICAL FINDINGS INDICATIONS FOR REQUEST

ONDERSOEK AANGEVRA/EXAMINATION REQUESTED

	JA/ YES	NEE/ NO	
IS PASIËNT MOONTLIK SWANGER? IS PATIENT POSSIBLY PREGNANT?			DEPARTEMENTSHOOF HEAD OF DEPARTMENT
VERSLAG/REPORT	JA/ YES	NEE/ NO	AANVAAT PASIENT : RADIOLOOG ACCEPT PATIENT : RADIOLOGIST

TEKENDE GENEESHEER (Drukskrif) / *HANDTEKENING EN DATUM*
SIGNING DOCTOR (Please Print) / *SIGNATURE AND DATE*

ADRES VAN KONTAKPERSOON/CONTACT ADDRESS ..... VIR DEPARTEMENT RADIOLOGIE/DEPARTMENT OF RADIOLOGY

ANKOMS (A) VERTREK (D) VAN PASIËNT
ARRIVAL (A) DEPARTURE (D) OF PATIENT
ADIODRAAF/RADIOGRAPHER

DATUM VAN ONDERSOEK
DATE OF EXAMINATION
STUDENT, VOLLE NAAM/ FULL NAME

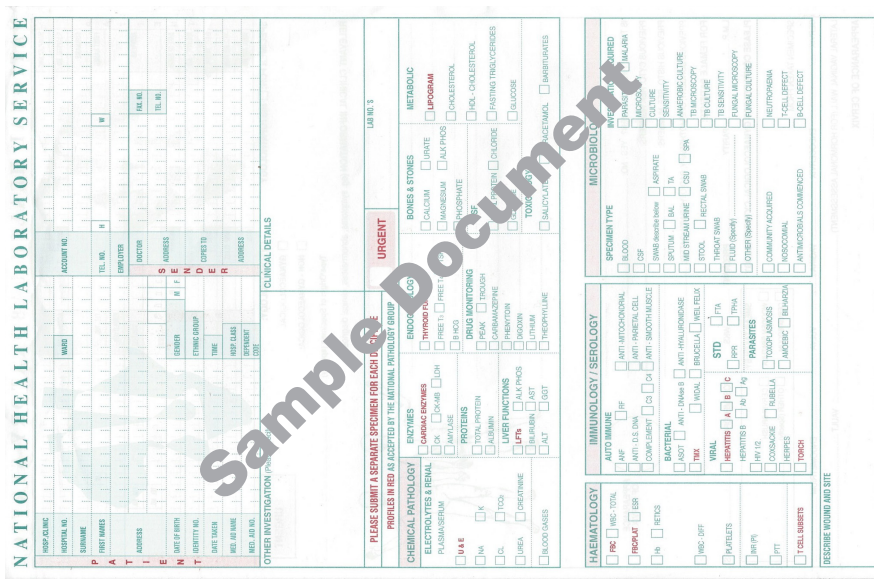
BLIGTINGSTYD/SCREEN TIME NTAL BELIGTINGS/No. OF EXPOSURES	PASSE / FOTTE EN GETAL/FILMS: SIZE AND NUMBER			
	18 X 24	24 X 30	35 X 35	
	18 X 43	30 X 40	35 X 43	
ONTRAS TOEGEDIEN EN STERKTE/ ONTRAST ADMINISTERED AND STRENGTH	KOEVERHEID EN STERKTE/ AMOUNT AND STRENGTH			

Sample Document

National Health Laboratory Service Page 1 Document Example

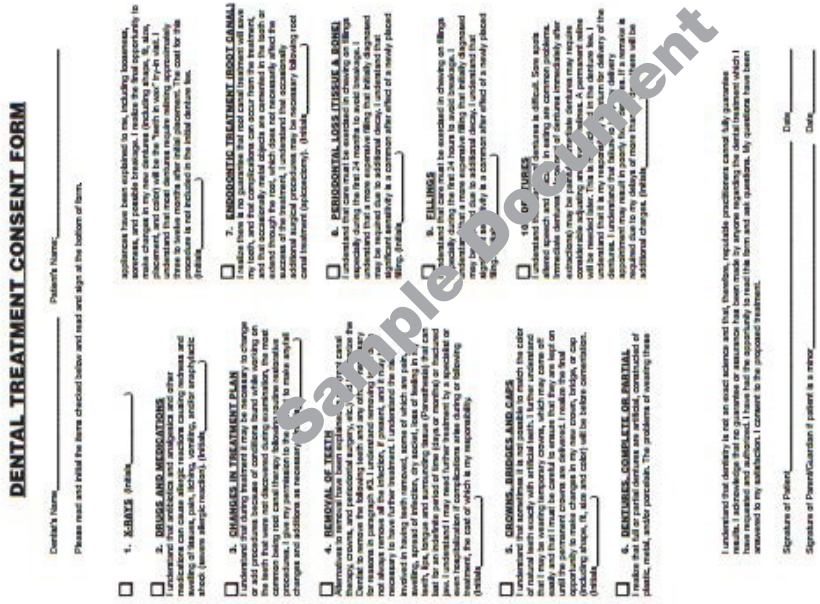


National Health Laboratory Service Page 2 Document Example



Sample Document

Dental Treatment Consent Form Document Example



DENTAL TREATMENT CONSENT FORM

Dentist's Name_____ Patient's Name:_____

Please read and initial the items checked below and read and sign at the bottom of form.

☐ 1. X-RAYS (Initials_____)

☐ 2. DRUGS AND MEDICATIONS (Initials_____)
I understand that antibiotics and analgesics and other medications may cause nausea, vomiting, rashes and swelling of tissues, pain, itching, vomiting, and/or anaphylactic shock. (severe allergic reaction). (Initials_____)

☐ 3. CHANGES IN TREATMENT PLAN (Initials_____)
I understand that during treatment it may be necessary to change or add procedures because of conditions found while working on the teeth. I understand that local anesthetics may be used. A common being root canal therapy following routine restorative procedures. I give my permission to the dentist and associates to make any changes and additions as necessary.

☐ 4. REMOVAL OF TEETH (Initials_____)
Alternatives to remove have been explained to me. I understand that the Dentist to remove the following teeth and any other teeth necessary for reasons in paragraph #3. I understand removing teeth does not always remove all the infection, if present, and it may spread the infection to nearby teeth, bone or tissue spaces. Complications involved in having teeth removed, some of which are pain, swelling, spread of infection, dry socket, loss of feeling in the teeth, lips, tongue and surrounding tissue (Paresthesia) that can last an indefinite period of time (days or months) or be permanent, sinus problems, jaw fracture, and death. I understand that even hospitalization if complications arise during or following treatment, the cost of which is my responsibility.

☐ 5. CROWNS, BRIDGES AND CAPS (Initials_____)
I understand that sometimes it is not possible to match the color of my teeth exactly. I understand that the color may change in time and that I may be wearing temporary crowns, which may come off easily and that I must be careful to ensure that they are kept on until the permanent crowns are delivered. I realize the final appearance of my teeth depends on many factors, such as my gums (including shape, fit, size and color) will be before completion.

☐ 6. DENTURES - COMPLETE OR PARTIAL (Initials_____)
I realize that full or partial dentures are artificial, constructed of plastic, metal, and/or porcelain. The problems of wearing these appliances have been explained to me, including looseness, soreness, and possible breakage. I realize the final opportunity to make changes in my new dentures (including shape, fit, size, placement, and color) will be the "teeth in wax" try-in visit. I understand that I must return to the dentist for adjustments at three to twelve months after initial placement. The cost for this procedure is not included in the initial denture fee.

☐ 7. ENDODONTIC TREATMENT (ROOT CANAL) (Initials_____)
I realize there is no guarantee that root canal treatment will save my tooth. I realize that endodontically treated teeth may discolor and that occasionally metal objects are cemented in the tooth or extend through the root, which does not necessarily affect the success of the treatment. I understand that occasionally endodontic surgery or extraction may be necessary following root canal treatment (apicoectomy). (Initials_____)

☐ 8. PERIODONTAL (GUM) DISEASE AND BONE LOSS (Initials_____)
I understand that care must be exercised in chewing on fillings especially during the first 24 hours to avoid breakage. I understand that a more extensive filling than initially diagnosed may be required if decay is found under the existing filling. Increased sensitivity is a common after effect of a newly placed filling. (Initials_____)

☐ 9. FILLINGS (Initials_____)
I understand that care must be exercised in chewing on fillings especially during the first 24 hours to avoid breakage. I understand that a more extensive filling than initially diagnosed may be required if decay is found under the existing filling. Increased sensitivity is a common after effect of a newly placed filling. (Initials_____)

☐ 10. DENTURES (Initials_____)
I understand that new dentures is difficult. Sore spots (ulcerations), speech problems, and excessive salivation are common with immediate dentures. Immediate dentures may require considerable adjusting and relining. Immediate dentures are placed immediately after extractions may require several visits for adjustments. A permanent reline will be needed later. This is not included in the denture fee. I understand that failure to return for adjustments may result in poorly fitting dentures. I understand that failure to return for delivery appointment may result in poorly fitting dentures. If a remake is required due to my delay of more than six months, the fee will be additional charges. (Initials_____)

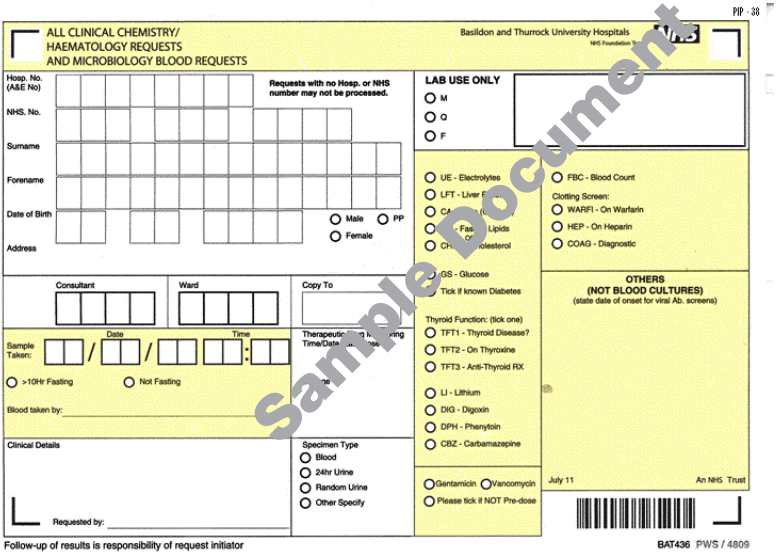
I understand that dentistry is not an exact science and that, therefore, reputable practitioners cannot fully guarantee results. I acknowledge that no guarantee or assurance has been made by anyone regarding the dental treatment which I have requested and authorized. I have had the opportunity to read this form and ask questions. My questions have been answered to my satisfaction. I consent to the proposed treatment.

Signature of Patient_____ Date_____

Signature of Parent/Guardian if patient is a minor_____ Date_____

Sample Document

Clinical Chemistry BAT436 Form Document Example



PIP - 38

ALL CLINICAL CHEMISTRY/
HAEMATOLOGY REQUESTS
AND MICROBIOLOGY BLOOD REQUESTS

Basildon and Thurrock University Hospitals NHS Foundation Trust

Hosp. No. (A&E No)
NHS. No.
Surname
Forename
Date of Birth
Address

Requests with no Hosp. or NHS number may not be processed.

Male PP
Female

LAB USE ONLY
M
Q
F

UE - Electrolytes
LFT - Liver F
CA
Fas Lipids
Ch olesterol
GS - Glucose
Tick if known Diabetes

FBC - Blood Count
Clotting Screen:
WARFI - On Warfarin
HEP - On Heparin
COAG - Diagnostic

OTHERS
(NOT BLOOD CULTURES)
(state date of onset for viral Ab. screens)

Thyroid Function: (tick one)
TFT1 - Thyroid Disease?
TFT2 - On Thyroxine
TFT3 - Anti-Thyroid RX

LI - Lithium
DIG - Digoxin
DPH - Phenytoin
CBZ - Carbamazepine

Gentamicin Vancomycin
Please tick if NOT Pre-dose

Consultant
Ward
Copy To

Sample Taken: Date / / Time :

Therapeutic ... Time/Date ...

>10Hr Fasting Not Fasting

Blood taken by:

Clinical Details

Specimen Type
Blood
24hr Urine
Random Urine
Other Specify

Requested by:

July 11

An NHS Trust

Follow-up of results is responsibility of request initiator

BAT436 PWS / 4809

Sample Document

Letter of Employment Example

An employment offer will be received with the following outline of information.
Please note each District may use slightly different wording.
The letter will be received on an offoicial Department of Health letterhead.
It will be personally addressed and contain your name, address which you use and your personal South African identity number.



health
MPUMALANGA PROVINCE
REPUBLIC OF SOUTH AFRICA

Indwe Building, Government Boulevard, Riverside Park, Ext. 2, Mbombela, 1200, Mpumalanga Province
Private Bag X11285, Mbombela, 1200, Mpumalanga Province
Tel: +27 (13) 766 3429, Fax: +27 (13) 766 3458

Litiko Letemphilo | Department van Gesondheid | UmNyango WezeMaphilo

Enquiries: Mr R Cloete
Tel: 013 766 3693

NAME (ID NUMBER)
ADDRESS
ADDRESS
SUBURB
POSTAL CODE

Dear

JOB OFFER FOR A ONE (1) YEAR CONTRACT COMMUNITY SERVICE: DENTIST: POST: NAME (ID NUMBER) - ROB FERREIRA HOSPITAL

1. I have pleasure in offering you a one (1) year community service employment contract in the Department of Health. Your employment is on a one year contract nature in terms of the Public Service Act, 1994.

   Your offer of contract appointment is effective from **01 January 2022 to 31 December 2022 (One year).**

2. Your contract appointment is subject to:

   - You accepting this offer within 14 days of the receipt of the offer in writing and you assume duty on or before 13 January 2021. **Should you not comply with this paragraph and not commence employment on or before 13 January 2021, this offer will lapse.**
   - the verification of information mentioned below:
     - In the case of misrepresentation on your CV and application and other misdemeanours that were not disclosed correctly and truthfully, the offer will be withdrawn:
     - Criminal records checks
     - Citizen verification
     - Financial / asset record checks
     - CIPS Screening (Company Intellectual Property Commission)
     - Qualification and registration certificate / study verification

KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING | INITIALS | 1

Sample Document

JOB OFFER FOR A ONE (1) YEAR CONTRACT COMMUNITY SERVICE: DENTIST: POST: NAME (ID NUMBER)- ROB FERREIRA HOSPITAL

3. DETAILS OF EMPLOYMENT OFFERED

Date of Appointment	: 1 January 2022 to 31 December 2022
Job Title	: Community Service Dentist
Notch:	: **Salary** p.a. All Inclusive Salary Package : Rob
Station	Ferreira Hospital Hospital
Benefits	: As per Paragraph 10 - 24

Please note that the above-mentioned salary notch/ appointment will only be effected on submission of the registration certificate with the relevant Professions Council as **Community Service: Dentist**

4. HOURS OF WORK

a) If employed as a Shift Worker, you will be expected to work shift according to the roster and have to render an average of 40 hours per week
b) If employed as Non-shift worker, you will be expected to work from Monday to Friday
c) The details are to be provided by your supervisor

5. REMUNERATION

Your will receive an all inclusive salary package and benefits listed hereunder, any overpayment or underpayment erroneously effected will be recovered or rectified when discovered.

ANY OVERPAYMENTS/ UNDERPAYMENTS WILL BE RECOVERED/ REFUNDED Your pay date is the last day of each month or the last working day prior to the date where the pay day falls on a weekend or public holiday. Upon confirmation of probationary appointment this changes to the 15th of each month or the last working day prior to the date where the payday falls on a weekend or public holiday.

Your salary will be paid into your banking/ Building Society Account. The required forms must be completed upon assumption of duty.

Salaries are registered as confidential. Details regarding your salary, may be obtained from your Human Resources Office.

Sample Document

6. SUBMISSION OF DOCUMENTS

Your contact employment is subject to submission of the following documents marked "X"

- You are required to complete and sign the attached Annexure A and return it to the Sub Directorate: HR Planning (TsepoMp@mpuhealth.gov.za / KarenBa@mpuhealth.gov.za / RonelC@mpuhealth.gov.za)
  It is mandatory for every employee to have a valid Tax Reference number on PERSAL. Please complete the attached pro-forma with the relevant details. Should you not

possess a valid Tax Reference number, then complete form IT77 and submit it to the SA Revenue Services for allocation of a tax reference number which must then be provided to your Human Resource Office. Your appointment is subject to you providing your Tax Reference number prior to your appointment being processed on PERSAL. Failure to supply all the information will result in your IRP5 certificate not being issued for the 2021/22 and 2022/23 tax years.

- Certified copy of all Educational *I* Academic *I* Professional / Technical qualifications and proof of Registration
- Registration with the Health Professions Council of South Africa as a community service practitioner.
- Certified copy of identity document and certified copy of identity documents of dependants, where applicable.
- Certificate copy of Marriage Certificate. Any subsequent change in conjugal status must be reported to this office immediately. Failure to do so may lead to a financial loss to you.
- Certified copy of current Driver's License
- Banking account advice (Z 56 attached).
- Any other particulars/documentation, which the Department may require.

Sample Document

7. PERFORMANCE MANAGEMENT AND DEVELOPMENT SYSTEM - ENTERING INTO PERFORMANCE AGREEMENTS

You are required to enter into a Performance Agreement within 1 months of assumption of duty. The Performance Agreement is applicable for 1 year.

8. REMUNERATIVE WORK OUTSIDE THE PUBLIC SERVICE

Approval for the Remunerative Work Outside the Public Service has been withdrawn as from 01 January 2010 whilst the Department reviews controls and processes. Consequently, in this Department, no Public Servant (Employee) is permitted to perform Remunerative Work Outside the Public Service.

You were screened for any business interest / outside Remunerative work outside the Remunerative Work Outside the Public Service (RWOPS) in terms of the Company Intellectual Property Commission (CIPC) Information Screening the results were clear. Your declaration form was checked for any disclosure and you had nothing to disclose.

9. LEAVE

Application for leave must be in writing on the approved form as well as applied for on the E-Leave System.

10. VACATION LEAVE

You are entitled to twenty-two (22) working days per annum (less than 10 years' service) but where a full year is not worked, leave is granted on a pro-rata basis. The granting of vacation leave is subject to the prior approval of your supervisor.

Vacation leave must be authorised before you proceed on leave. Unused vacation leave for any year lapses at the end of June the next year. However, you will be paid cash value in

respect of unused leave credit upon termination of service. Vacation leave granted may be withdrawn by calling you back to work if it is in the interest of the Department.

11. SICK LEAVE

Sick leave is available to a maximum of 12 days on full pay. Sick leave is not accumulative.

A medical certificate must be provided if 3 or more days' leave are taken or if your supervisor requests one for lesser period or as required in terms of the policy. If your supervisor so request, it must be in writing

12. SPECIAL SICK LEAVE

Special leave, with full pay may be granted to you for the full period you could be incapacitated owing to an injury on duty provided that liability is accepted by the Workmen's Compensation Commissioner for the injury on duty.

13. STUDY LEAVE

No study leave, with full pay, may be granted.

14. MATERNITY LEAVE

Kindly note that maternity leave should be regarded as appropriate service for the purpose of community service and does not in any way extend the period of community service.

Maternity leave may be granted for a total period of 4 consecutive calendar months per confinement as prescribe by the OPSA.

15. PATERNITY LEAVE

An employee shall be granted three (3) working days paternity leave per calendar year for utilisation if the employee's spouse or life partner gives birth to a child.

16. INCAPACITY LEAVE

Once sick leave has been exhausted you can apply for incapacity leave. Kindly note that incapacity leave is not a right and it is the discretion of the employer. All application for incapacity leave must be accompanied by a medical certificate and the relevant Annexure obtainable from the Human Resource Office.

17. FAMILY RESPONSIBILITY LEAVE

In terms of Public Service Bargaining Chamber Resolution 7 of 2000, you may be granted family responsibility leave of 3 days per annual leave cycle if:

a) Your spouse of life partner gives birth to a child; or
b) Your child, spouse or life partner is sick

Five (5) days leave may be granted if your spouse or life partner dies or if an immediate family member dies (i.e. child, parent or sibling)

Sample Document

The overall leave for both incidents above may not exceed five (5) working days per annual cycle unless there are exceptional circumstances. Reasonable proof may be required.

18. INJURIES ON DUTY (COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES)

The Compensation for Occupational Injuries and Diseases Act, 1993, will apply to you should you be injured as a result of an accident or should you contract a disease arising out of and in the course of your employment. All injuries on duty must be reported to your supervisor immediately.

19. HOUSING ALLOWANCE/ RENTAL ALLOWANCE

No housing/rental allowance will be paid to Community Service Employees.

20. RURAL ALLOWANCE

Rural allowance is only paid to specific categories employed at specific Institutions at a specific percentage of their basic salary as prescribed in PHWSBC Resolution 2 of 2004.

The following Institutions are excluded and appointees do not qualify for rural allowance:

- Ermelo Hospital
- Impungwe Hospital
- Middelburg Hospital
- Rob Ferreira Hospital
- Witbank Hospital
- Witbank TB Hospital

21. ACCOMODATION AND TRANSPORT

Should you be required to perform official duties away from your headquarters, you may claim for subsistence and travel, in accordance with the Departmental Policy on S & T.

22. PERSONNEL ASSOCIATIONS (UNIONS)

In terms of the Labour Relations Act, 1995 read with Chapter 111 of the Labour Relations Amendment Act, 1996, you have the right to be fully represented by the union of your choice, provided the union meets the requirements in terms of the conditions stipulated in the Labour Relations Act, 1995.

Membership of a union is voluntary. However, those who do not belong to a union that signed agency shop agreement have a fee deducted from their salaries every month.

23. LEVY

A compulsory deduction is made every month from your salary in respect of the levy that was agreed to in the Public Service Bargaining Council Resolution 2 of 1998 and Public Health and Welfare Sectoral Bargaining Council.

Sample Document

24. RESIGNATION

One month's written notice is required should you wish to resign. If you resign by giving at least a month's notice, salary and allowance will be paid for the full month irrespective of whether or not the month ends on a day of rest or consecutive days of rest, provided that you are normally paid for days of rest and that you remain in active service up to and including the last working day of the month. If you do not give at least a month's notice, you will only be paid up to and including the last day of the on which you actually render service.

A certificate of service will **be** issued to you once you have indicated you wish to resign from the Department.

Community Service appointees who resign without completing community service must note that they must re-apply for community service via the ICSP On-line System and will not be allowed to return to the institution from where they resigned without being placed by the ICSP System.

25. GRIEVANCE PROCEDURE

Should you **be** dissatisfied or discontented with an official action or omission, you may raise the matter with your Supervisor. It is the supervisors responsibility to attempt to determine the cause of the dissatisfaction or discontentment and possible deal with it accordingly.

If your complaint concerns a matter which cannot be dealt with by your supervisor, or if your complaint is about your supervisor, or if you are not satisfied with the answer given by your supervisor, you may make representations about the matter to the officer in the Human Resources Office or another competent senior officer specifically designated by the Head: Health to deal with complaints and grievances.

It should be noted that in all cases of dissatisfaction and grievance the provisions of the collective agreement must be strictly complied with. Should you wish to consult this agreement please contact your Human Resources Office.

Sample Document

26. DISCIPLINE

You will be subjected to the disciplinary procedures and rules applied by this Department and as contained in the PSCBC Resolution 1 of 2003. You are obliged to comply with the provisions of the Code of Conduct. Non-compliance will result in a misconduct case being instituted against you.

27. DEPARTMENTAL POLICIES AND PROCEDURES

Other than the conditions of service detailed in this document, you will be subjected to those policies and procedures laid down by the Department as amended from time to time.

A copy of the Department's policies and procedures may be viewed during office hours on request to your immediate supervisor.

JOB OFFER FOR A ONE (1) YEAR CONTRACT COMMUNITY SERVICE: DENTIST: POST: NAME (ID NUMBER)- ROB FERREIRA HOSPITAL

28. SECURITY SCREENING

In terms of the Security Screening i.e. criminal record check, citizen verification and financial and asset record checks from the State Security Agency, are being undertaken with Security Services Unit to ensure compliance with verification of information when posts are being filled.

29. VERIFICATION OF YOUR EDUCATION QUALIFICATIONS

In terms of verification of your education qualifications i.e. matric certificate, will be verified by the South African Qualifications Authority to ensure compliance with the verification of information when posts are being filled.

30. JOB DESCRIPTION

You are required to sign a Job Description with your Manager / Supervisor which will be provided to you on assumption of duty by your Manager / Supervisor.

31. INDUCTION PROGRAMME

You will be required to attend an Induction Programme on the date to be arranged by your Manager/ Supervisor.

32. ASSUMPTION OF DUTY

You are required to assume duty on 1 January 2022.

Please report to the HR: Manager of the Institution who will refer you to the relevant person after confirming that all documentation is in order. Please ensure that you have all relevant documents with you.

Please note that the assumption of duty date is not negotiable.

33. BURSARY OBLIGATION

Kindly be informed that if you are a bursary holder of the Mpumalanga Department of Health, upon completion of your community service you are expected to continue with employment as a **Dentist** Grade 1 within the Mpumalanga Province allocated according to service delivery needs of the Department. Should the Department be unable to appoint you within 3 months from the date of completion of your community service, you will be released from your bursary obligation.

34. INDEMNITY

The State accepts liability for all claims arising from the acts or commissions of said persons instituted against the State or against the said persons unless the State Attorney, after consultation with the accounting officer, is of the opinion that the said person, with regard to or during the act or omission that gave rise to the claim -

- was not acting in the execution of his official duties or did not bona fide,
- believe that he was so acting,
- mala fide exercised or exceeded his powers,

Sample Document

JOB OFFER FOR A ONE (1) YEAR CONTRACT COMMUNITY SERVICE: DENTIST: POST: NAME (ID NUMBER)- ROB FERREIRA HOSPITAL

- made excessive use of liquor or drugs (for which there is sufficient proof}, which may have resulted in or contributed to liability,
- without prior consultation with the State Attorney, made an admission of guilt that was detrimental to the State's care;
- acted recklessly or willfully; or
- failure to comply with standing instructions of which he was aware or could reasonably have been expected to be aware, in which case the amount which the State was compelled to disburse and the legal costs shall be recovered from the said person.

N.B. It is trusted that your association with the Department will be a fruitful one.

Yours sincerely

MS DC MDLULI
ACTING HEAD: HEALTH

15/[illegible]/2024
DATE

Sample Document

JOB OFFER FOR A ONE (1) YEAR CONTRACT COMMUNITY SERVICE: DENTIST: POST: NAME (ID NUMBER)- ROB FERREIRA HOSPITAL

ANNEXURE:A

ACCEPTANCE CLAUSE

By my signature hereto, I acknowledge understanding and acceptance of the conditions of employment as set out in this letter, especially the conditions under Section 2 of this letter.

I will/ will not assume duty on 1 January 2022.

The following documents are attached as requested:

1. The whole acceptance letter (pages 1 up to 9 initialised and page 10 signed)
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

The following documents will be forwarded in due course:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Sample Document

SIGNATURE : _____

DATE : _____

N.B. You must complete and return this acceptance form together with a copy of the initiated offer of employment within 14 days of receipt of this letter.

Accommodation (where available) should be arranged with the Hospital HR

REGISTRATION FOR COMMUNITY SERVICE

Qualifying in any of the health care professions is an important personal responsibility and, as a practitioner, there are several legal obligations.
Registration with the Health Professions Council of South Africa (HPCSA) is a pre-requisite for professional practice, and it is also a legal requirement to keep all personal details up to date at all times.
An annual fee is payable for this registration and failure to pay this fee could result in suspension from the register. If, for some reason a practitioner is suspended from the register, they can redeem themselves by applying for restoration and paying the restoration fee.

Voluntary erasure from the register is possible if the practitioner does not intend to practice his/her profession in South Africa for a given period of time. A request has to be submitted in writing before 31 March of the year voluntary erasure is requested.

After completing the requirements of each of the registration categories, the onus is on the individual to formally apply for registration in the next category. Penalty fees are charged upon application for a new registration category if the individual has not been registered as student in the required category.

REQUIREMENTS FOR REGISTRATION AS A COMMUNITY SERVICE DENTIST – SA QUALIFIED.

- Duly completed original form 11 A duly completed
- A copy of ID document.
- Registration fee

DOCUMENTATION REQUIRED FOR REGISTRATION IN THE CATEGORY: INDEPENDENT PRACTICE – GENERAL PRACTITIONER (SA QUALIFIED)

- Combined Form 27 Com Serve duly completed the applicant and the clinical manager /
Medical Superintendent bearing the official stamp of the institution;
- Otherwise Form 23 and copy of report of completed Community Service signed by
Clinical Manager / Medical Superintendent indicating the exact dates of community
service and bearing the official stamp of the institution.
- No registration fee required, only an annual fee to be paid.

Health Professions Council of South Africa

Form 23

APPLICATION FOR REGISTRATION

COMMUNITY SERVICE

NON COMPLIANT APPLICATION WILL BE REJECTED AND SENT BACK TO YOU!

Please PRINT and return the ORIGINAL FORM to:
The Registrar, PO Box 205, Pretoria 0001 by registered mail or courier for ease of tracking mail.
553 Madiba Street, Arcadia, Pretoria 0083

A. PERSONAL PARTICULARS

HPCSA Registration Number: .....

I, (Dr, Mr, Mrs, Miss) ..... Surname: .....

Maiden name (if applicable): .....

First names: ..... Identity No.: .....

Postal address: .....

..... Postal code: .....

Residential address: .....

..... Postal code: .....

Tel (H): ..... (W): .....

Cell: ..... Fax: .....

Email: .....

*Marital Status: Married | Single | Divorced Gender: M | F

* Race: African | Asian | Coloured | Indian | White Country of Origin: .....

hereby apply to register as .....

to perform Cummunity Service and declare that I am the person referred to in the attached certificate or qualification referred to below. I also declare that I have never been convicted of any criminal offence or been debarred from practice by reason of unprofessional conduct in any country and that, to the best of my knowledge and belief, no proceedings involving or likely to involve a charge of offence or misconduct is pending against me in any country at present.

SIGNATURE: .....**Date:** **20**

B. THE FOLLOWING IS SUBMITTED IN SUPPORT OF MY APPLICATION:

1.	Registration fee, prorata annual fee, bank banking details (**Registration number as deposit reference**) **Please attach proof of payment**
2.	A copy of my marriage certificate (should you wish to register in your married surname).
3.	A copy of my identity document or birth certificate.
4.	A copy of my registration certificate as a student with the Health Professions Council of South Africa.

ALTERATIONS TO THIS SECTION WILL NOT BE ACCEPTED

C. TO BE COMPLETED BY THE UNIVERSITY/UNIVERSITY OF TECHNOLOGY/COLLEGE

Name of University/University of Technology/College: .....

It is hereby certified that ..... complied with all the requirements for the Degree/Diploma/Certificate ..... of this institution on ..... (day) ..... (month) ..... (year) and that this qualification will be conferred/issued at a graduation ceremony on ..... (day) ..... (month) ..... (year).

I consider him/her to be a competent and fit person to practice as a .....

WE RECOMMEND him/her for registration		**ORIGINAL OFFICIAL DATE STAMP OF INSTITUTION**
SIGNATURE: RECTOR/DEAN/OPERATIONAL HEAD	**DATE**	
SIGNATURE: REGISTRAR/PRINCIPAL	**DATE**	

*** Please complete for statistical purposes.**

NB: Please note that the Council, in the normal course of its duties, reserves the right to divulge information in your personal file to other parties.

Updated/MM/February 2019

Sample Document

Form 27 Comm Serv Completed

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

CERTIFICATE OF COMPLETION OF COMMUNITY SERVICE

Return the ORIGINAL FORM **completed form to: The Registrar, P O Box 205, Pretoria, 0001 / 553 Vermeulen Street, Arcadia, Pretoria**

NB please take note that the Council, in the normal course of its duties, reserves the right to divulge information in your personal file to other parties.

DECLARATION

It is hereby certified that:

HPCSA Registration Number .....

Dr/Mr/Mrs/Miss.....

.....

was employed at this institution (name and address of training institution).....

.....

.....

from:.....to.....

as a .....

category (if applicable).....

that he/she complied with the requirements for community service as determined by the Department of Health; and that his/her service was satisfactory.

Sample Document

(1) ....

Signature: Head of the Department/Directorate **Name: Please print**

Designation: ..... **Date** .....

Telephone number:.....

(2) ....

Signature: Medical Superintendent/Head of Institution **Name: Please print**

Designation: ..... **Date** .....

Telephone number:.....

OFFICIAL DATE STAMP OF INSTITUTION

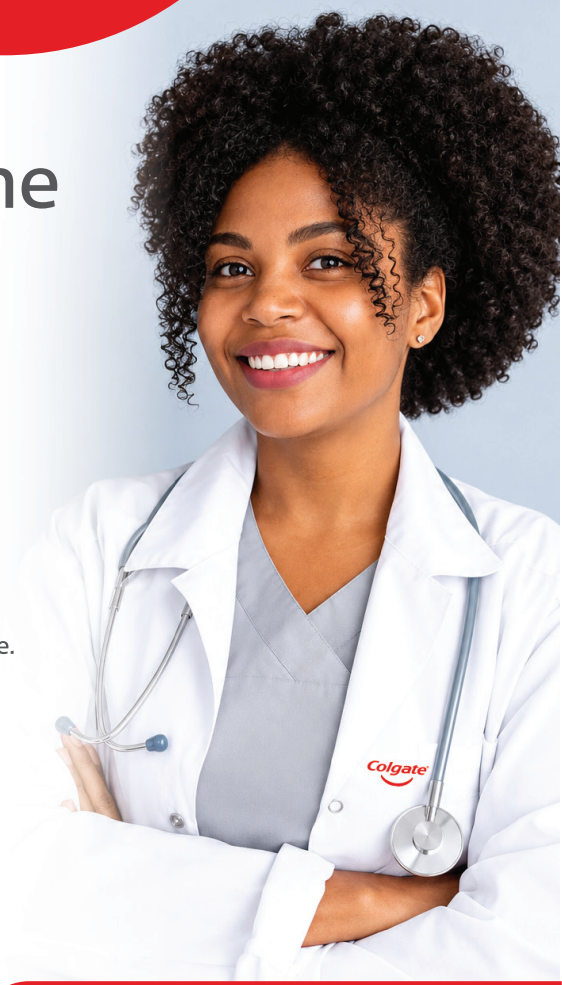

CONGRATULATIONS
SADA
THE SOUTH AFRICAN
DENTAL ASSOCIATION
Wishing you all the best in your next chapter.
Well done, graduands!

Colgate®

Welcome to the **Profession:**

Let's make more smiles together

Congratulations on your graduation! Stepping into practice comes with endless decisions, choosing the right products shouldn't be one of them. Colgate is here to support your professional journey with proven products and resources from day one.





STAY CONNECTED

Let's keep the conversation going.

professionals_sa@colpal.com

@Colgate_sa

@Colgate_sa