Free yourself from the daily ‘grind’

If you dread going into the practice each day, it’s time to re-evaluate your leadership role

By Sally McKenie, CEO

Are you settling for mediocrity? Is your practice merely getting by? Do you feel surrounded by complacency? Is there a lack of excitement or enthusiasm? Perhaps it’s not that the team is outwardly negative or difficult, it’s just that “average” has become simply good enough in their minds. New ideas seldom emerge because they are shot down as quickly as they surface. Issues with systems are perpetually on the backburner, kept there by the proliferation of excuses explaining why the changes won’t work, can’t work or would simply be too much work to fix.

So there you stand having lost control of the practice you once loved. It’s become the daily grind, and it seems that you wile away the hours at the mercy of those who seemingly care to do nothing more than simply get by.

As familiarity breeds contempt, complacency breeds mediocrity. If teams are not challenged to continuously improve, then when the push is on to do things differently the shift can be unnecessarily traumatic because the staff members feel threatened and they resist any change.

They’ve settled into their “way” of doing things and don’t understand why what seems to have worked perfectly fine in the past is suddenly called into question.

Sounds like a major issue with the team, right? Wrong. What we have in circumstances such as this is more likely to be a major issue with the leadership. The team mirrors the leadership of the practice.

Take off the rose-colored glasses

Look carefully at your team. Do they reflect your commitment to excellence? Are they open to change? Are you willing to challenge them to make change? And are you willing to invest the time to educate them on why change is necessary?

Or, do you shun better, more efficient systems and procedures because “Mary Jane” has been there since the beginning of time and you decided long ago that it’s not worth it to challenge her negative attitude and poor performance?

You rationalize your fear of addressing the problem by telling yourself that she handles all the insurance, or she knows all the patients, or whatever the excuse.

If you’ve chosen to ignore the problem, you’ve abdicated your responsibility as the leader. You can count Mary Jane as one of your concrete blocks — as in dead weight tethering your practice to an average standing for all time.

Being the leader takes courage to examine systems, processes and staff. Change those things that don’t work, but most importantly, challenge everyone — not just yourself — to continuously improve.

They follow the leader

Your team members are taking their cues from you. If you have a Mary Jane and she is unwilling to change or do things differently, she is the shining example for the rest of the team to follow suit.

Employees are expert “boss watchers.” They are quietly watching as you look the other way, make excuses and allow employees such as Mary Jane to run the show.

The irony is that most employees want to excel, and they want to be challenged. But they look to the dentist to be the leader and address Mary Jane’s unacceptable attitude and poor performance. Yes, I know it’s not easy, but it’s mandatory. Read on.

Reluctant leaders

Dentists by virtue of their position as CEO of the practice are the leaders, but often they don’t take on that role naturally, and frequently they do not have leadership experience to prepare them for the responsibility.

Dentists are trained to be excellent clinicians and they are. They are not, however, trained to have the necessary communication or business skills to lead teams and steer clear of complacency.

However, dramatic leadership improvement can occur under the right circumstances if the dentist truly wants a practice that reflects the level of excellent dentistry he or she provides.

In order to improve leadership skills and avoid settling into a state of mediocrity and ultimately the loss of power and control over the practice, dentists must take three essential steps:

• Change your definition of leadership.
• Change your behavior as the leader.
• Change your expectations of the desired outcomes.

The leadership definition for small businesses is quite different than it is for large companies. The vision is to make a good living. The plan is to work hard every day delivering the best service and quality to patients.

The required communication skills consist of knowing what you want your staff to do and telling them.

The leader must explain to the staff what is expected of them, how their performance will be measured and how that performance will be rewarded. In exchange, the followers will be paid and appropriately recognized.

Rather than allowing your practice to sink under the weight of mediocre minions, choose to build...
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‘Eeny, meeny, miney, mo …’
How to choose a digital camera

Part 2 of 2: switching from analog to digital

By Lorine Lavine, DMD

In part 1 of this article we discussed how to choose an intraoral and an extraoral camera with detailed information about how to evaluate the different aspects of the camera as well as an explanation of pixels. Now, we’ll delve into making the leap from analog to digital.

For many dentists, the transition to digital photography is exciting and opens up many new possibilities for them. The difficulty for most, however, is trying to figure out how to digitize their current photos and slides.

There are a few methods for getting your prints and slides onto a computer where they can then be manipulated and output to different sources.

Photo or picture CD. For film that hasn’t been developed or with negatives, you can ask the photo developer to put your images on a photo or picture CD. These CDs can be read by all but the most ancient CD-ROM players, and the files on them can be downloaded onto your computer’s hard drive.

Scanner. This is currently the only method for getting existing photos or slides into a digital format. I would recommend that when you search for a scanner, find one that has both a backlight and a transparency adapter. Models that I have found to be particularly good are the Epson V700 and V760-M. In addition, look for a scanner that has the highest dpi (dips per inch) resolution that you can afford. Better models have at least a 1,200 by 2,400 dpi.

Online. Many companies offer online storage and scanning of existing photos. While these online services are an option, they are hardly the cheapest. Expect to pay from $1 to $10 per scan, which can get very expensive if you have hundreds of photos and slides to be scanned.

After it’s all digitized

Once you find a method of getting your analog or digital photos and slides on to a computer, you need to have some method of storing, cataloging and manipulating these images. The only method before true integration became a reality was to use a stand-alone image management program. Some of the better and more popular ones are XDR, Apteryx and Tigerview.

As dental practice management software has evolved, there was a need to find a way to integrate these image databases with the management program so most of the developers of these programs built “bridges.”

Most bridges, however, are still one-way in that you can call up the image management program from the patient screen and all the patient information will already be transferred.

However, this method does not allow images that you capture to be transferred back to the patient file in the practice management program. To accomplish this, you too need to explain the process. This type of integration is found with some of the more prevalent programs such as Dentrix, Softdent and Eaglesoft.

Output

Once you have access to your images and have manipulated them to your liking, the final piece in the puzzle is to determine how you want to output these photos. Obviously, this will heavily depend on how you plan to utilize the images, such as patient presentations, dental lab communication, lectures, insurance documentation or online collaboration. Some of these choices include the following.

Inkjet printers. It is important to use a printer that is not only capable of printing medical quality images, but using the right paper is also important. The paper and supplies will tend to be more expensive for these types of printers; ink cartridges run about $50 and a high-quality paper costs 50 to 60 cents per page.

DVD writer. Most new computers come with DVD burners known as DVD-R and DVD-RW drives. These drives are capable of writing the images (or any other files you designate) directly to the DVD so that you can easily send the DVD through the mail or make backup copies for yourself.

Removable media. There are many types of removable media that can be used depending on the amount of storage capacity that is needed. Some of these options include USB flash drives, E-mail. Once you have a digital image, any e-mail program will allow you to attach files to be e-mailed. You should ensure that the images are in a standard format that can be read by other programs and, just as importantly, that the files are copyright-free.

An image created with a 10-megapixel camera can be many megabytes in size. Converting this to a JPG file (these are files that have the .jpg extension on the end) will reduce them to 500–750 KB on average. Keep in mind that many people still use a dial-up connection to access the Internet and downloading large files can be very time-consuming, so compressing the images makes a lot of sense.

Online collaboration. There are many services that will allow you...
Continued, ‘Free …’

Moreover, performance measurements and a credible system for employee review consistently yield more effective and higher performing team members.

The fact is that when we understand the rules of the game and how we can win, life and work are a lot more fun and rewarding.

Step No. 5: Celebrate.

Inspire the team with a practice vision and goals, and recognize the progress you make together in achieving those goals. Take time to pat yourselves on the back for the accomplishments that you achieve.

Create incentives for staff members to use their skills and training to develop plans to continuously improve patient services, boost treatment acceptance and build a better practice, and reward them for their efforts.

If you create a structured environment with clear expectations and a plan for total team success, then the Mary Janes and the rest of the crew will likely rise to the occasion. And you will no longer be suffering through the daily grind.

Rather, you will be leading a happy and successful team that is not only open to change and continuous improvement, it is actively pursuing it every day.

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