Keeping your patients informed

The sixth in the series of managing information articles, by Dr Ed Bonner

1. To inspire people to work—individually or in groups—in ways that produce the best results, you need to tap into their own personal motivational forces. Individuals working as part of a group (and probably do) have needs that are different from the needs of the group as a whole. A way to find a balance to meet the needs of the individual with those of the group. The art of motivating people starts with learning how to influence individuals’ behaviour. How do you find out what motivates individuals? Simple: just ask them!

2. Motivation is the will to act. To realise the full potential of employees, organisations (including dental practices) are rapidly moving away from ‘command and control’ to ‘advise and consent’ as ways of motivating others. It used to be believed that one could not motivate another, but it is possible to create a fertile working environment, which allows others to flourish and grow. Several motivational theories are based on the premise that, given the opportunity and the right stimuli, people work well and positively. The basic component of a motivational environment is co-operation, which you should give to, as well as expect from your staff.

3. The aim of motivation is to ensure that people will give, provided you support them, the effort required to act. The ability to take initiative depends on empowerment as well as on the reward that the individual receives from the effort. Like all of it is aimed at one objective: the dissemination of information, and patients should be informed about current advances in dentistry. It is essential that information be provided in a language the patient can understand, and that they should not be overloaded with facts. A surefire of information is no more welcome than an insufficiency.

4. Patients should be informed about their treatment—both past and present—whether their treatment met, exceeded, or failed to meet expectations; or they can be financial (e.g. there is a wealth of opportunity via the printed and spoken media to disseminate information to existing and prospective patients that will allow us to fulfill our mission. Here’s a list of things:

   - Brochures
   - Leaflets
   - New patient information packs
   - Website
   - Blogging
   - Newsletters
   - Telephones
   - SMS text messages
   - Advertisements
   - Articles in newspapers

   What should you be telling existing and future patients about yourself?

   - Your name and qualifications
   - Education and places studied
   - Experience of work and training
   - The practice name, address, phone number
   - Website and email
   - Membership of organisations:

GDC, BDA, Academies, Societies, study groups
- Photographs of self or family
- Particular expertise, for example, implants
- Diagnostic skills
- Specialised interests.

You should be telling your patients about current advances in dentistry:

- Prevention of oral and dental disease
- Dietetics
- Aesthetic and cosmetic dentistry
- Dental whitening
- Facial aesthetics
- Implantology and other dental specialties
- Orthognathic surgery
- Orthopaedic orthodontics and orthodontics for adults
- Prosthodontic and periodontal reconstruction

The prevention of oral cancer.

5. Always ask your staff for their opinions about decisions that affect them. Two key motivational questions to ask your staff are:

   - What should I do to help you perform better?
   - What do I need to be doing from a better job?

   Remember, however, that not acting on such feedback will de-motivate them.

6. For most individuals, the maxim ‘I will only do as much as I have to do’, as stated as ‘I will never do more than is absolutely necessary’ applies. Motivation is directly proportional to the answer of the question: ‘What’s in it for me (WIFM)?’ Unless there is a compelling reason to do otherwise, most people will always take the path of least resistance.

7. Motivation used to be in one direction only—downwards, the superior motivating the subordinate. Today’s management is increasingly accepting of good ideas and enthusiasm from employees, as long as it suits their purpose, which should be congruent with those of the organisation. Ensure staff know both their roles and its importance.

8. You can improve communication by keeping your staff informed wherever possible—uncertainties are very de-motivating.

   The ideal is that everyone should know everything that affects them directly or indirectly as soon as possible. You can never communicate too much, but take care over the content and delivery of a message so that it inspires motivation upon its reception.

9. Motivation by or through others lasts only as long as the stimulus lasts. Self-motivation, by contrast, is long-lasting. Give people the opportunity to use their initiative when possible. The ability to take initiative depends on empowerment as well as on the environment that recognises contribution. The more you expect of people, the more they will give, provided you support them. A sure sign of high motivation is a lot of initiative. On the other hand, high staff turnover and absenteeism are sure signs of de-motivation.

10. To understand and employ motivation, you need to:

   - Analyse what it is by recognising needs and understanding behaviour
   - Build it up by assessing your own attitude, improving communication, creating a no-blame culture at work, winning co-operation, and encouraging initiative
   - Get the best from people by motivating individuals and groups, preventing de-motivation, enrich jobs, empower staff, and build careers
   - Reward achievement by recognising excellence, rewarding exceptional performance, and motivating through positive change.

Positive feedback

Once the patient has taken up treatment, the flow of information needs to be reversed: you need to and should want to know whether your patient was satisfied or not. The simplest way of obtaining this information is to ask your patients whether their treatment met, exceeded or failed to meet expectations. You can achieve this via a post-treatment questionnaire or by personal communication. The big benefit is that if you failed to meet your patient’s expectations, i.e. if their wants were not met, you would be able to redress the disappointment faster where they voice their dissatisfaction to others. Or worse.

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