Managing Time

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time and tide wait for no man’

in the chronicle of wasted time.’ (Shakespeare sonnet)

The abbreviation of time, and the failure of hope, shall alack thy tongue with a braver shade the evening of life.’

(Edward Gibbon, English historian)

The moving finger writes, and having writ, moves on: not all thy piety nor wit

shall have it back to cancel half a line, nor all thy tears wash out a word of it.’

(The Rubaiyat of Omar Khayam

Edward Fitzgerald)

What message does all of above (and many other pro-

verbs and proverbs) have in common? That of all the resources available to us, time is the scarcest and most valuable of all. We don’t value it when we have it in abundance, and fret when we don’t have it. Stephen Covey (First Things First).

Consider the following list of time wasters in practice:

1. Failed and cancelled appointments
2. Having to redo dental work through poor technique by self and/or dental technician; greying out or re-cementing provisional restorations
3. Misplacing laboratory work; mistifying x-rays and files
4. Defective equipment breaking down
5. Down-time between patients
6. Not having appropriate instruments and materials to hand
7. Inadequately trained staff
8. Pausing tooth preparation to work on another tooth, or to be interrupted by suction or rinsing
9. Being interrupted during clinical procedures by phone-calls etc.; having to de-glove/ re-glove, during clinical procedures
10. Spending more time than necessary striving for perfection when good is good enough.

Each of these statements would contribute to inefficien-

cy together, to frustration, loss of earnings, annoyed patients, and poor interpersonal rela-

tionships. Just think who gets stressed when you run 15 min-

utes late; your patient; the next patient in the waiting room; your nurse, your receptionist, and not least, you! Time man-

agement is a necessary skill to be learned and applied, and be-

gins with a considered and sys-

tematic analysis of one’s daily activities. That said, it is worth employing someone to sit in your surgery with a stop-watch and note-pad and observe and measure your daily routine.

However, this is only a start-

ing point, for what you will be quantifying is the percentage of your time you are using inefficiently. Stephen Covey defines ‘efficiency’ as getting more done in less time. How-

ever, doing more is not necessarily doing better. To do better is to become more effective, and this should be your goal. One way of becoming more effec-

tive is to prioritise your time, and scrap what’s unneces-

sary. Just think: improving your time by 20 per cent is equiva-

lent to working one day less per week, having a day off to play golf, or read or spend with your family. This creates a bet-

ter balance among the various roles in your life... not worth striving for? Got a comment on this article? Email editor@dentaltribuneuk.com and let us have your views.

Most dentists spend eight hours in a cell. Why then would you walk to and through your front door of the practice defying anything less than ‘great’, you are selling yourself and your profession short. That aforementioned cell will be no more welcoming than a prison cell, and you will feel just as imprisoned.

Are you for or against dentists improving their practices? Would your patients think if a positive move? Email editor@dentaltribuneuk.com and let us have your views.

Most of us would jump at the chance to improve our dental practice for free of charge if we were given the chance. This is, of course, unlikely to happen unless we win a competition or someone just hands us the money. In reality, it’s a totally different story. Making improvements to surgery costs a lot, so a large sum of capital will be required, and is

Creating a space

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tistry. Most dentists spend eight hours a day, five days a week, in a cell. Why then would you not want that cell to be as per-

fect as you can make it, with design, equipment, lighting, air exchange and general am-

biance all functionally and aesthetically optimal? Why would you want to subject your back, and neck, eyes and ears to more strain than is necessary?

A question of pride

What about your self-es-

teem? And that of your employ-

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tients feel about your place of work? A place to be tolerated (or worse, endured), or one to be praised at Saturday night dinner? Your surgery and re-

ception room are your shop-

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piece, an essential part of your extended being. To be seen as less than excellent is to be less than excellent, and you pay a price for that, perhaps greater than the price you would pay to be seen as the best. There is a very simple test: how do you feel when you walk to and through your front door of the practice defying anything less than ‘great’, you are selling yourself and your profession short. That aforementioned cell will be no more welcoming than a prison cell, and you will feel just as imprisoned.

On the other hand, walking into a newly-created or refur-

bished, functionally designed, aesthetically pleasing, state-

of-the-art practice can lift your spirits, improve your output, increase your earnings, pre-

tect your body, reduce your staff turnover and please your patients. Which of those would you not wish to have, whatever the cost?

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The 10th Dimension

The power of 10...

...a series of articles by Dr Ed Bonner BDS MDent, Sloan Fellow London Business School, practice development consultant & coach

Improving your practice will make it more appealing, but there are many pitfalls. Ed Bonner weighs up the pros and cons

The case for... and against...

The Sceptic presents

Managing Time

Practice Development Consultant & Coach

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