Staff Meetings: From Dull & Boring to Dynamic & Effective (Really!)

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taff meetings... desperately needed by all dental teams, yet no one looks forward to them. The drill usually unfolds something like this. Everyone comestogether, is greeted by the boss, actually, most of them stroll in within 5 or 10 minutes of the appointed hour. They take their designated spots around the room. With props in hand, such as notepads and pens, they dutifully give the appearance that they are prepared to offer their unvaried attention. That little charade lasts for roughly three to five minutes.

After that, a glance around the room reveals a packed house, one person gazes at the ceiling, another strolls at the far side, still another looks strategist. One fourth is eying the stain on the doctor's coat and wondering how she should approach the scheduling coordinator. The person standing next to her is wondering when the doctor's going to talk about something important like raises or vacation time.

Ah yes, the staff meeting, a monthly ritual. It's a ritual that ultimately results in lost production and lower revenue. The common lament from doctors is, 'I've tried staff meetings only to abandon them because everyone was looking at me to do all the talking.' Conversely, team members will assert, 'We give input but nothing ever comes of it.' In virtually all cases, the meetings couldn't produce results that would satisfy anyone because there wasn't a system or a standard established. Is it any wonder that the staff meeting is disliked by dentists and dental teams alike?

Unfortunately, staff meetings are often boring, dull and tedious. Worse yet, they seldom contribute to the success of the practice. So it's time to abandon this tired business ritual. No, it's not as easy as it sounds. But, I recommend you invest a bit more energy and effort on them. Why? Because most critical business decisions are made in meetings.

Such is the case when it comes to the business of dentistry. It is in staff meetings that system barriers and solutions, problems, and key performance indicators are shared and discussed during the meeting. Additionally, every month the team has the opportunity to address those barriers and help identify solutions to problems that may be occurring in the scheduling system.

Welcome Opinions, Views & Disagreements
Seek input from everyone, and don't be afraid of conflicting views. In fact, encourage it. When individual members of the team raise concerns, problems and issues, enable the entire group to explore the positives and negatives of a particular topic, and make certain to address those effectively. If consensus is reached too quickly on major issues, chances are good that members of the team are not sharing their views openly and honestly. They are afraid to challenge those true opinions after the meeting.

Prepare or Perish
Monthly meetings must have an agenda that includes standard items the practice is continuously monitoring. Without one, you and your team are left to wonder aimlessly, which is incredibly frustrating for everyone, not to mention totally inefficient. Specifically you want to discuss all areas affecting the profitability/success of the practice. For example, numbers of new patients, recall patients, collections, treatment acceptance, production, accounts receivables, scheduled time units for doctor and hygiene, uncollected insurance revenues over 60 days, overhead, etc.

One person, not the dentist, is responsible for compiling and distributing the agenda to doctor and staff in advance of the meeting. However, this person is not in charge of developing the entire agenda. That task is the responsibility of the full team.

Post the agenda in the break-room or other area where staff will see it regularly and can add items as they come up during the month. Issues that present themselves regularly in the daily huddle but require more involved discussion and analysis should be put on the monthly meeting agenda.

In addition to practice systems, which should be standard on each month's agenda, consider items such as improving the work environment, examining the patient experience in detail, practice-patient communication, etc.

When putting the final meeting agenda together, list the most critical items at the top of the list to ensure there is adequate time to talk about them. Determine how much time you will spend discussing each matter, avoid getting bogged down on unrelated topics, and insist that team members come prepared to discuss the items listed.

Lead the Way
Assign a facilitator—other than the doctor—to ‘guide’ the group in the discussion. Talk about only what is on the agenda. First, cover the key systems. Each month the individual team members report on the status of their specific areas.

For example, the scheduling coordinator would report on key indicators within the scheduling system, including:

- The number of new patients scheduled for the month.
- The number of new patients actually seen by the doctor and/or hygienist.
- The number of emergency patients scheduled for the month.
- The number of emergency patients treated for the month.
- The number of emergency patients converted to preventative care.
- The number and dollar amount of unscheduled time units for doctor and hygiene.
- The number of patients with unscheduled treatment.

While consensus is good to strive for, it’s not always possible. Ultimately, the team needs to accept that while individuals may have disagreements during the discussion, everyone supports the final decision, which is made by the doctor.

To encourage discussion, the facilitator should ask questions such as, “How do you feel about this? What is your reaction to that? As the patient, how would you react? What are the advantages of this approach? What are the potential disadvantages? Team participation is essential to the success of not only the meeting but also in implementing recommendations that may result from discussions during the meeting.

Develop the Plan of Action
Delegate responsibility and establish deadlines for completing tasks identified during the meeting. For example, if hygiene cancellations are high, the group might develop a plan to reduce the cancellations. The person responsible—probably the hygiene coordinator—needs to know she/he is accountable for implementing the changes and should be aware of the effect of those changes at the next meeting.

Once the systems are reported on, the remaining time can be used to cover other items on the agenda, including staff training and education. For example, if members of the team attended a continuing education program, they should be expected to share with the team highlights from the program and specific techniques or strategies that they believe can be implemented in the practice.

If the office is offering a new service or product, the staff meeting is an excellent venue to instruct the team on the new item, answer any questions and ensure that every employee is prepared to answer questions from patients. If the doctor is offering a new treatment, such as implants, he/she should schedule time during the meeting to update the entire team about the procedure. The group can discuss how to market the procedure, how to effectively discuss it with patients, how to handle questions about it, where they can acquire additional information, etc.

Teams also can use the time to address particular challenges, such as collections or effectively explaining the financial policy to patients throughout the month. In addition, journal articles on numerous practice issues can be shared and discussed during the meetings.

Consider the Environment
If possible, the two-hour monthly staff meeting should be held off-site in a conference room with a conference table, and eliminate outside interruptions. Seek consensus from the staff as to the next time to hold staff meetings, and remember that meetings scheduled outside of normal work hours should be paid.

Evaluate the quality of your monthly business meeting by answering the following questions:

- Were the discussion topics known prior to the meeting?
- Did co-workers have an opportunity to contribute to the meeting?
- Was the meeting environment comfortable?
- Did the meeting start and finish on time?
- Did everyone have a voice in the discussion?
- Did anyone dominate the meeting?
- Were minutes distributed after the meeting to document what was discussed?
- Were recommended actions identified and tasks for completion?
- Was each topic given adequate time?
- Were there outside interruptions?

Meetings are intended to be designated times in which you can focus all of your energy and team resources on addressing key practice issues. Run correctly, they are the most effective means to identify and solve problems, establish policies, share information, motivate each other, define areas of responsibility and exchange ideas. Use them to your practice’s full advantage.

Visit www.mckenziemgmt.com and find Sally McKenzie, Certified Management Consultant, is a nationally known lecturer and author. She is CEO of McKenzie Management, which provides highly successful and proven management services to dentistry and has since 1980. McKenzie Management is a full line of educational and management products, which are available on its website, www.mckenziemgmt.com. In addition, the company offers a vast array of Practice Enrichment Programs and team training. Ms. McKenzie is the editor of the e-Management newsletter sent complimentary to practices nationwide. To subscribe visit www.mckenziemgmt.com or www.thedentistsnetwork.net. Ms. McKenzie welcomes specific practice concerns through her newsletter and www.thedentistsnetwork.net.