The Sceptic presents

The case for... and against...

Improving your practice will make it more appealing, but there are many pitfalls.

Ed Bonner weighs up the pros and cons

Most of us would jump at the chance to improve our dental practice 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 usually borrowed at a cost that might haunt you in the future.

The hidden costs

Change rarely happens easily and the stresses brought to bear on you and your staff are not insignificant. Few people deal readily with building work going on around them. The alternative to closing your surgery while building work is carried out merely adds to the cost. There is also the risk that the end result falls short of the standard you envisaged. There may be technical issues that are difficult to correct. Your new equipment might have looked sensational at the trade show or showroom, but not so good in your new environment.

Designs that look clever on paper, might be dysfunctional in practice.

Most dispiriting of all, is that your patients might respond rather than approve of the changes. They might see it as a cost they’ll have to bear, and when you come to sell your surgery, it may be difficult to recoup your investment. These are the downside factors against change.

Creating a space

There are few professions more confining or restrictive in a physical sense than dentistry. 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 perfect as you can make it, with design, equipment, lighting, air exchange and general ambiance all functionally and aesthetically optimal? Why would you want to subject your back and neck, and eyes to more strain than is necessary?

A question of pride

What about your self-esteem? And that of your employees? How do you feel your patients 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 reception room are your shop-front, your ‘come hither’ show-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? The answer is anything less than ‘great’, you are selling yourself and your profession short.

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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

Managing Time

What is done, cannot be undone ‘time and tide wait for no man’ when in the chronicle of wasted time... (Shakespeare sonnet)

‘The abbreviation of time, and the failure of hope, will always deny to 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 the above (and many other proverbs 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 yourself or dental technician; greasing or re-cementing provisional restorations
3. Misplacing laboratory work; mistifying x-rays and files
4. Defective equipment breakdown during dental procedures
5. Down-time between patients
6. Not having appropriate instruments and materials to hand
7. Inadequately trained staff
8. Pausing tooth preparation to change impression material
9. Being interrupted during clinical procedures by phone-calls etc; having to de-glove / re-glove during dental procedures
10. Spending more time than necessary striving for perfection when good is good enough.

Each of these statements would contribute to inefficiency; together, to frustration, loss of earnings, annoyed patients, and poor interpersonal relationships. Just think who gets stressed when you run 15 minutes late: your patient; the next patient in the waiting room; your nurse, your receptionist, and not least, you! Time management is a necessary skill to be learned and applied, and begins with a considered and systematic 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 starting 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. However, doing more is not necessarily doing better. To do better...