

digital

international magazine of digital dentistry



case report

Digital approach in the anterior area

trends & applications

Zygomatic dynamic navigation

news

Study finds differences in intra-oral scanners

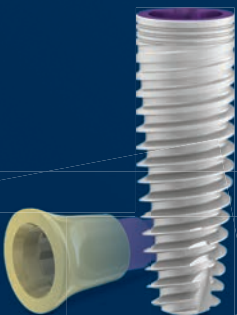
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Dr Scott D. Ganz

Editor-in-Chief



per·ma·nent

/ˈpərmənənt/ adjective

1. *lasting or intended to last or remain unchanged indefinitely*

Dentistry is dedicated to understanding the workings of the oral cavity, the maxillomandibular relationship, the repair of tooth decay, the reconstruction of partially or completely fractured teeth, the replacement of missing teeth, aesthetics, smile design, the creation of proper tooth alignment, the fixing of bite discrepancies, and much, much more. Regardless of what we as clinicians do for our patients, are there any solutions that should necessarily be described as being permanent?

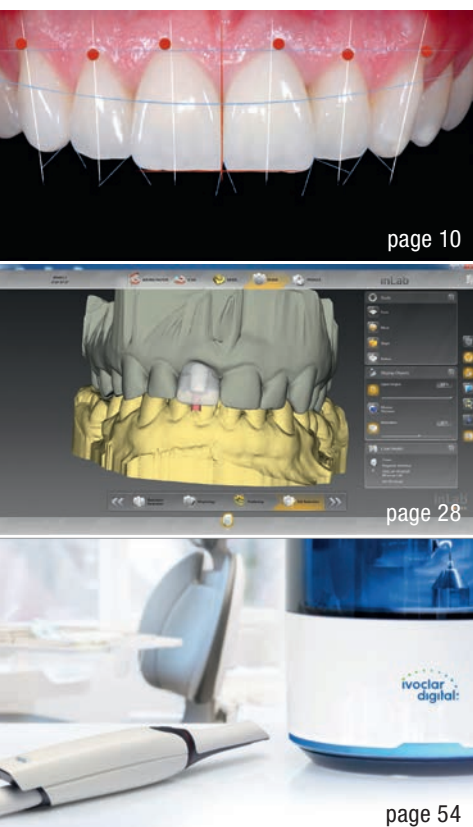
We are all aware that the oral cavity is constantly under attack from the foods we eat, the liquids we drink, abrasive toothbrushes, parafunctional habits, accidental trauma, etc. Therefore, why do we often see dental professionals advertising services that are permanent? In the world of dental implants, the concept that dental implants are a permanent replacement for missing teeth is a common one that has inhabited print media, social media, television commercials, websites and radio advertising. A simple online Google search for dental implants using the word “permanent” will reveal an almost endless list of entities who promote this concept. While we all know that dental implants are perhaps the most predictable biological replacement in all of medicine, they are not truly permanent replacements. In today’s world of misinformation, is the dental industry being prudent when promoting services that are permanent? This is some food for thought.

On another note, however, the use of technology and our digital workflow have created methods which can aid clinicians in providing an extended timeline for the

care delivered to their patients. Digital dentures are an example. Once the digital STL file has been designed and finalised, it can be stored on a local or remote computer server to fabricate the definitive prosthesis that will be provided to the patient. In the past, we would need to start over again if the patient accidentally dropped the denture and it fractured or lost the prosthesis, as the analogue process often destroyed the working cast used for the fabrication of the denture. Using today’s digital workflow, we can retrieve the STL file and fabricate a new prosthesis without the need for additional impressions or many office visits. The same can be stated for implant-supported restorations fabricated with an intra-oral scanner and designed using CAD software and milled with CAM technology. If we can maintain the digital files, when unforeseen events happen, we can recreate a lost implant crown with a few clicks of a mouse, instead of many patient visits.

Therefore, as the profession of dentistry has been highly successful in providing long-lasting treatment to our patients, the digital workflow has provided new and exciting opportunities to extend the true lifetime of restorations, saving both time and money for the clinician and the patient. While still not permanent, digital technology does give us additional and important solutions to the potential lifespan of the restorations we provide to our patients. Please enjoy the most excellent state-of-the-art information contained in this latest issue of **digital**.

Dr Scott D. Ganz
Editor-in-Chief



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editorial

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The COVID-19 practice manager 2021: Four steps to confidence

Chris Barrow, UK

Introduction

It was American politician Adlai Stevenson (1835–1914) who observed that “it’s hard to lead a cavalry charge when you think you look funny on a horse”. I have spoken to many practice managers in the last 12 months who have shared with me their sense of imposter syndrome, as team members, clinicians, owners and family members have looked to them for guidance in the ever-changing pandemic landscape. In this four-part series, I am going to suggest a step-by-step approach to overcoming any feelings you may harbour that you are not good enough and, I hope, provide you with a framework on which to grow your self-confidence.

I will be talking about the following in steps:

1. Leadership—why you do not have to be a Marvel superhero to be a good leader;
2. Management—a checklist of all the systems you need in place to reduce your stress levels (and remain compliant);
3. Teamwork—the psychology of teams and how to create environments in which morale improves;
4. Extreme self-care—making sure that the best possible version of you turns up for work (and arrives home again).

Leadership

Let us begin our journey atop that horse, the cavalry regiment waiting for you to give the orders and you (just maybe) wondering how the devil you ended up there. “C’est magnifique, mais ce n’est pas la guerre: c’est de la folie.” [It is magnificent, but it is not war: it is madness.] Thus spoke Pierre François Joseph Bosquet, distinguished French army general, as he watched Lord Cardigan lead the British light cavalry to their doom at the ill-fated Charge of the Light Brigade on 25 October 1854, during the Crimean War. One hundred and eighteen men were killed, 127 wounded and 60 taken prisoner after the carnage created by the misinterpretation of an order. The good news is that you are unlikely to experience such devastation in a dental practice, but there has never been a time when so many orders have been flying around in the heat of battle (nor so many people asking questions)—and there are plenty of times when everybody is looking at you.

Let me define “everybody” a little more specifically. When you are a practice manager, you have a leadership responsibility to multiple communities. These may be your employer, patients, team, self-employed clinicians, referring general dental practitioners, suppliers, lenders, local community or family. They are all looking to *you* for guidance, and you dare not have a bad day, because your emotion is contagious.

As soon as the UK lockdown started, the first important message to my practice managers was to keep communicating with all these communities. The quality and the quantity of that communication have clearly differentiated the winners and losers in the pandemic period.

“Whether it is silence
or noise, good or bad,
people will not forget how
you showed up.”

My second message was that people will remember the things you did and the way that you did them. Whether it is silence or noise, good or bad, people will not forget how you showed up.

My third message was to keep your message confident—no matter how difficult things become.

I define leadership as the combination of the following attributes:

- communicating a clear vision: knowing where we are going, why we are going there and how we intend to do it;
- listening regularly to feedback on how your people are feeling;
- being an example of the standards of performance and behaviour that you expect from those around you—people will follow your lead and that is a constant burden that the leader must bear;



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- creating environments in which people can choose to become self-motivated;
- understanding what makes people tick and being prepared to walk the floor;
- being an effective delegator, focusing on your own unique abilities and learning to delegate, automate or eliminate everything else.

The challenge for the practice manager can arise from a sense that some of the attributes mentioned may feel out of their control.

How can I share a clear vision when the owner has not or will not tell me where we are going?

It is essential that you bring to the owner's attention that teams cannot function in the current landscape unless they have a sense of direction and destination—the groundhog days will burn them out. Sometimes, it might be impossible to draw a finish line in an uncertain landscape, but it remains important to commit that you have their backs so that people feel reassured that you care about them and know where the team is going so that people can follow your lead.

How can I listen when I am chasing my tail every day?

It is essential that protected time is booked out in your day to allow for your own planning and preparation—and to facilitate conversations with all team members in which you do the listening and gather in what is working and what is not, what is good and what is bad, and how the team can improve.

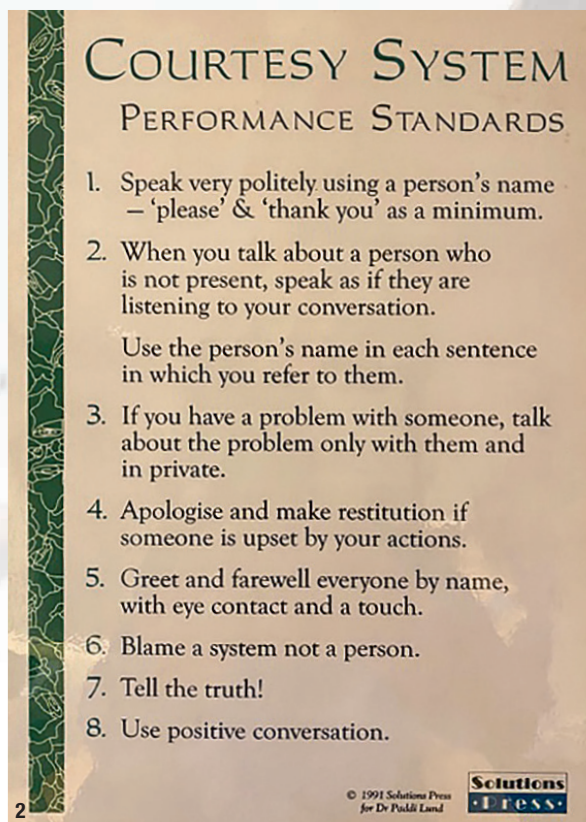
Why must I set the example when I am exhausted?

After spending much of January listening to myself moaning and realising that I was depressing the people around me, I recently wrote out for myself a February manifesto (Fig. 1):

1. There are 28 days in February 2021, and I am going to read this manifesto out loud to myself at the beginning of every day.
2. I am not going to complain—about lockdown 3.0, about the economy, about other people's performance and/or behaviour, or about my life.
3. I am going to become the beacon of light and assume the role of leader to all those around me.
4. I am going to make a list of my three most important tasks every day—and get them done.
5. I am going to take time, every day, to practise extreme self-care and ensure that I have adequate sleep, nutrition, exercise and fun.

How can I create environments in which people become self-motivated?

Please remember that you cannot motivate people; you can only create environments and then people choose to become self-motivated, or not, and that will largely depend upon their own personal circumstances. I have seen too many practice managers burned by the mistaken belief that they carry everyone else's motivation on their shoulders. Not true. Your job is to create the kind of environment in which people can do their best work, described many years ago by dentist and author Dr Paddi Lund as his Courtesy System, which has taken pride of place on my office wall for over 20 years (Fig. 2).



What resources are available to me to help me to understand what makes people tick?

Frankly, the list is endless, and a few moments on any search engine will reveal countless resources to assist with your leadership role. The best teacher is, of course, your own personal experience of dealing with people over many years of interaction.

For the beginners, I strongly recommend any reading on simple psychology. One of the most revealing lessons I have learned on understanding the behaviour of other people is the *Karpman Drama Triangle*. Dr Stephen Karpman conducted research in the 1960s into three modes of behaviour adopted by those who are emotionally charged (and what to do or say in response). There is never a week that passes without my discussing this with managers. To read more, go to <https://karpmandramatriangle.com> (a rather dated website) or take a look at *The Karpman Drama Triangle Explained: A Guide for Coaches, Managers, Trainers, Therapists—and Everybody Else* by Chris West.

How do I delegate when I do not trust the people that I am delegating to?

This is, perhaps, one of the greatest challenges the practice manager faces, and it is all too easy (especially in a pandemic landscape) for the practice manager to argue that it is easier just to do it himself or herself. That, of course, is no use as a long-term solution. Business author Harry Beckwith

suggests that “there is no performance without accountability and no accountability without measurement”.

To delegate, follow the simple rules:

1. Be specific about what you want to be done.
2. Be specific about who you want to do it.
3. Agree on a deadline.
4. Agree on how you want to be informed of completion.
5. Walk away and do not micromanage.

To begin, people will make mistakes. Then you will train them. If the mistakes are repeated, you have the wrong person. If you have the right person, the mistakes will not reoccur. Finding the sweet spot between abdication and micromanagement is a skill of a true leader.

Finally, let us deal with the Chimp. *The Chimp Paradox* is the 2012 groundbreaking book by psychiatrist and sports performance coach Dr Steve Peters. The Chimp in question is the limbic (emotional) brain. The paradox is that the Chimp can be our best friend or our worst enemy. The book is about dealing with what happens when the Chimp whispers in our ear that we are not good enough, that our plans will fail, that we are the imposter; when we start comparing our inside with everybody else's outside.

My Chimp attacks me every September, when we begin marketing our coaching programmes for the following year. My team will tell you that I repeat the same behaviour every year, fantasising that I will have no clients and I will be out of work—being revealed as the imposter coach. My business coach Rachel Turner will also confirm that we have the same coaching session every year, during which she asks me to grab pen and paper and make a list of the top ten reasons that the Chimp is wrong—you might say, the top ten reasons that you look just great up there on that horse. I keep my list with me at all times—and refer to it when I feel those moments of uncertainty.

Leaders are quiet and confident, firm and fair, inspiring and vulnerable, above all else, that beacon of light I referred to in my manifesto. You *are* a leader.

about



Chris Barrow has been active as a consultant, trainer and coach to the UK dental profession for over 24 years. His main professional focus now is through his Extreme Business company, providing coaching and mentorship to independent dentistry around the world via face-to-face meetings, a workshop programme and an online learning platform.

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