

The Challenge of Leadership in Private Dental Practice

by Michael Perry, D.D.S.

There are fundamental characteristics most dentists share. Dentists tend to be: analytical, compassionate, introverted, and linear thinking. These are attributes which often create an aptitude for being an effective doctor and micro surgeon, but not necessarily the leader of a dental practice in today's marketplace. Indeed, in those practices in which I have consulted, leadership was the most common issue challenging the owner/dentist.

My father practiced pedodontics for 44 years. My clinical career overlapped his for about 15 years. Observing my dad, his colleagues, my clients, and in my own practice experience, I have seen 3 basic styles of private practice leadership: 1) the authoritarian (military) model, 2) the family model, 3) leadership by facilitation.

I've met very few dentists who declare or are even aware they are utilizing one of these specific styles. For better or worse, the vast majority adopt one style by default.

During the 70's and 80's, most dentists were men and were typically the unquestioned authority in their practices. They gave orders concerning every detail of practice operation and employees complied. A diminishing percentage of dentists still use this model.

In recent years, a greater variety of private practice types have evolved including those with tiered management -- which often separate the dentist from a significant portion of business decisions. This evolution, dentists' fundamental characteristics, and their lack of management and leadership training have created, in my view, the family model that commonly exists today. In the family model, leadership is often performed via consensus and relationship dynamics within the practice are a significant force in decision making. Some dentists have made the family model work to create their version of success. In general, however, I do not see this model as effective in today's marketplace.

Max DePree in his seminal book, Leadership is an Art states: "Everyone has the right and the duty to influence decision making and to understand the results. Participative management guarantees that decisions will not be arbitrary, secret, or closed to questioning. Participative management is not democratic. Having a say differs from having a vote." This statement catches the essence of leadership by facilitation -- the optimum style, in my opinion, for today's private practice.

Leadership by facilitation is the art of moving an organization toward a declared purpose. In a dental practice, it is the owner/dentist's responsibility to define and declare his/her purposes for being in practice. A purpose could be the overall mission of the practice or a more specific one such as the level of service and profitability in the hygiene department. Employees are respected and receive a say in defining a purpose, but they do not receive a vote.

Once a purpose is defined, the dentist engages in a participative process with employees that leads the practice toward that purpose. This "facilitation" revolves around the question: "how can we move as effectively, efficiently, and enjoyably as possible from where we are now toward the purpose I've defined?" The answer to this question always creates an action plan. Employees continually participate in answering this question and are then responsible for playing their respective roles in implementing the action plan.

I have talked with many dentists who would like to change the way they lead their practices, but feel trapped in their current circumstances with their employees. Changing a practice which utilizes a family style of leadership to a one utilizing leadership by facilitation can be a challenge, but is well worth the resources and effort to achieve it. In my own experience, making that transition and running my practice via facilitation has been one of the most freeing and effective experiences of my professional life.