



Why bigger is better!

By Kia Pajouhesh, BSc, BDS (Melb)

Dr Kia Pajouhesh is presenting another series of intimate one-day educational events titled "Breaking Glass Ceilings in Your Practice" in Adelaide on 23 April; Sydney on 7 May; and Brisbane on 21 May. Here he shares some answers to common questions posed at past events.

Q *I was amazed to read in a previous issue that your practice is made up of 9 dentists, 4 specialists and 4 dental hygienists all working under one roof. There are a lot of claims in our industry that the most productive practices are made up of only 2 to 3 clinicians. What do you say to that?*

A Since I wrote the above-mentioned article in October 2007, Smile Solutions has further expanded with the addition of two general dentists, a fifth registered specialist and another dental hygienist. Our 14 operatory suites are being utilised by a total of 21 clinicians, almost all of whom work 4 days a week between Monday and Saturday.

We are therefore at temporary saturation point: our business is currently at full capacity, with a total of 84 days of dentistry a week. Our growth is restricted by the number of surgeries we have available. This problem is a kind of glass ceiling - one of the many kinds we discuss in my "Breaking Glass Ceilings" seminars but one that I have been unable to avoid, despite my best intentions.

For this reason, the two dental hygienists who recently emailed me their resumes, the Collins Street general dentist wishing to relocate the patient base of his 25 year practice and join our team, and the orthodontist and oral surgeon with whom I

recently met will all have to wait until the 9 additional operatory suites on which we are just starting construction are complete. In the meantime, our influx of over 500 new patients a month will probably blow out our 3-to-4 week waiting list to over 8 weeks - not ideal by any means.

So, despite the glass ceilings we encounter in the growth of our practices, do I believe in the notion that bigger is better? I shall answer you this way: Does the Pope have a balcony?

You have used the word *productive*. I believe, given the claims you cite, that you are referring to a gauge of practice profitability, or the "bottom line". Contrary to what business analysts and management gurus in our industry define as productivity, we dentists and the staff working for us define productivity as a measure not purely confined to dollars and cents.

A productive dentist is one who enjoys the balance his/her career offers, one who offers superior patient care and staff management, and one who appreciates the feeling that commercial success brings with it. In light of this, I'll attempt to summarise the reasons why my entire team of over 50 and I believe we can all be more "productive" in a bigger practice.

In a larger practice:

- Due to cost sharing across a group of dentists, it is far more manageable to purchase and maintain technological equipment such as CEREC, lasers, digital radiology, dental microscopy, 3D imaging, and the latest advances in audio visual and computer applications.
- The economies of scale allow you to market your practice both internally and externally with more vigour and efficiency, and ultimately success.

- With reduced overheads, the proficiency of the business will mean lower dental fees for the general public without income diminution for the clinicians.
- Informal group interaction is more dynamic, social events are more memorable and friendships are formed across a broad base of individuals. The pleasure of observing your team positively interacting in the hustle and bustle of a busy day's work fills you, as principle of the practice, with a sense of achievement that is hard to match.
- You have more clout with dental supply companies, dental laboratories and equipment servicing companies. Imagine a world where you can command up to 25% discounts off the cost of your supplies when most can only conjure 8 to 12%; where dental laboratories will prioritise your work; and where your dental equipment will be serviced within 30 minutes of breakdown.
- Employing multiple nursing, reception and management staff may give you some administrative challenges but also brings some undeniable advantages:
 1. The need for temporary agency staff is removed because, in almost all cases, contingency staffing is available from within your own infrastructure.
 2. Auxiliary staff will educate, train, mentor and manage each other, freeing you from the endless cycle of training new junior staff.
 3. Training more than one dental assistant in the particularities of each clinician allows for smoother succession at times of auxiliary staff sickness, annual leave and family planning.

4. Greater career opportunities and diversity of roles within your establishment will, in turn, improve retention of existing personnel and promote the attractiveness of your practice to talented prospective staff. According to the dentist's definition of a productive practice, any ambitious auxiliary staff can enjoy the satisfaction that comes with managing a cohesive substantial-sized team – and be handsomely remunerated for doing so.

5. Your management team will formulate new ideas and constantly enhance the existing procedural, administrative and patient management systems within your practice, thus releasing more precious time for you personally.

6. In the event that staff temporarily or permanently leave your practice, the gap is more readily filled in a larger team with a sound foundation of effective delegation. In a small practice the adverse effects of such losses are far more tangible and at times irreversible. Not just the financial but also the emotional stress that comes with losing key individuals, albeit auxiliary staff or assistant dentists, from a small dental practice is something that is rarely quantified or gauged by the business analysts who defend the 2-to-3 clinician mantra.

- Having multiple clinicians practising in one location has its own unique benefits, including the following:

1. An ideal forum for the administration of superior dental care is provided by interactive peer review, constant mentoring by more experienced clinicians, in-house dental workshops and the accessibility of multiple specialists for opinion, treatment planning advice and discussion.

2. Clinicians can focus on areas of dentistry they most enjoy or are better skilled at. The simple transition of delegating patient care to individuals specialising in a particular field or to individuals with a keen interest in a specific area will inevitably promote better comprehensive dental care. Dental hygienists are an obvious example of this notion.

3. Patients can be offered extended hours, out-of-hours emergency care and a choice of dentists, and can be

seen all year round (even when their own dentist is away), at the location they have learnt to trust, by a clinician who has direct access to all their clinical history and radiographs.

4. Removal of the need for locum dentists, with its associated problems during periods when a clinician takes extended leave.

5. The ability to cater for emergency patients or a sudden influx of new patients within the group without having to routinely over-exert yourself after hours and during breaks.

6. Less experienced clinicians will be guided and mentored by other dentists, specialists and senior management in your team. Apart from the clear benefit of reducing your own

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workload, it is a very fulfilling exercise for senior dentists to mentor and give back in this way as they diversify their role in the profession. For the training clinician, it is also a learning hothouse in which they are exposed to a readily available variety of philosophies, techniques and skills.

7. Clinicians can enjoy more frequent and longer holidays and continuing education. As the overheads of the practice are spread across greater numbers, the financial burden of dentists away from the practice is reduced. Also, with clinicians taking parental leave and wanting to reintegrate back into practice when they are ready to do so again, a larger practice is inherently better equipped to deal

with the complications of continuing patient care, avoiding auxiliary staffing layoffs, and minimising strain on the practice overheads.

8. Retiring dentists can phase out of clinical dentistry at their own pace, usually in stages, eventually cutting down to 1 to 2 days per week – a luxury that is near enough impossible in a small practice.

In essence, when you consider the quandary of whether to expand your own practice, I urge you to put your negative thoughts and internal belief systems aside. Bigger does not have to equate to compromised personal patient care, uncontrollable staff and dentist turnover. It does not have to be a sweatshop of recent graduates doing palliative drill-and-patch dentistry. It does not produce more medico-legal grievances. It does not imply practices run by accountants in large corporations, and it does not have to result in more headaches for the practice principle. *Smile Solutions* is an example of a mega practice that defies all of the above misconceptions.

To conclude, if you are still focused on the bottom line, I can tell you that in the days when I worked with 2 to 3 clinicians, I was cutting teeth for over 40 hours a week and my business ran on a \$100K overdraft (line of credit) facility. These days my overdraft is a distant memory and the handpiece is very well rested! To have done this for myself and to have received the gratitude of my team assures me that I am on a winning formula.

“In September 2004, I joined Kia Pajouhesh at Smile Solutions. This has been one of the best decisions I have ever made. I previously ran my dental practice in Collins Street, Melbourne for over 30 years, but I don't believe I have ever enjoyed dentistry as much as I do today.”

Dr Ian Aitken, BDS (Melb) LDS (Vic)

*To learn more about the tools you need to expand your practice, you can hear Dr Kia Pajouhesh speaking in Sydney, Adelaide or Brisbane in April/May 2008. If you are unable to attend one of Dr Pajouhesh's seminars, please email your questions to kia@smilesolutions.com.au for publication in a future edition of *Australasian Dental Practice*.*