

# Running your business: a manager's view

Jane Lelean presents the tale of Karen, a novice manager

In this series of articles I am introducing you to the common personalities that venture into dental practice ownership – clinician, manager and visionary entrepreneur – and the experiences they encounter.

The articles provide you with the opportunity to understand some of the pitfalls of setting up your own practice, with each piece an amalgamation of the stories of several clients with similar characteristics. (Names have been changed for anonymity.)

In the last issue of *Implant Dentistry Today*, we met Richard, the clinician, and identified some of the many problems he encountered. This time around, I would like to introduce you to Karen and her practice.

### Learning the hard way

When I first met Karen, she told me her story of practice ownership and initially it was not



**Dr Jane Lelean is an experienced general dental practitioner and business coach and trainer. Jane ran her successful mixed practice in Buckinghamshire for 13 years before setting**

**up her business coaching and training practice, Healthy and Wealthy, specialising in working with dentists and other small business owners in the UK and Ireland, the rest of Europe and as far away as Australia. Jane has considerable experience dealing with the changing climate and regulations within the world of dentistry, and assists her clients in taking full advantage of the opportunities that others may consider to be problems. Jane is the only dentist in the UK and Ireland to hold both a dental qualification and an accreditation from the International Coach Federation. If you would like to discuss any of the issues she has raised, you can contact her by email at [jane@healthyandwealthy.co.uk](mailto:jane@healthyandwealthy.co.uk) or by phone on 01296 770456. Alternatively, you can contact her via her website at [www.healthyandwealthy.co.uk](http://www.healthyandwealthy.co.uk).**

dissimilar to Richard's. When Karen was faced with the choice of selling up and walking away or changing the way she ran her business, she chose to make changes. Karen, like Richard, found herself overwhelmed. She had heard of other practices that had recruited practice managers and, because she now recognised that she did not know anything about dental practice management, recruiting a manager seemed like a sensible step.

Like a gift from the heavens, she was approached by Pat. Pat had a long career in dentistry – she had worked as a receptionist and nurse – and had more recently worked as a bookkeeper and administrator for a local, small manufacturing company.

Karen thought that Pat must have all the skills that would make her a good practice manager and recruited her on the spot. Karen felt able to breathe a huge sigh of relief now that she had someone who could take care of the business, allowing her to focus on what she wanted to do – the clinical work and patient care.

Everything at the practice seemed to be going very well in Pat's hands. Karen had handed over the finance, the ordering, the recruiting – whatever Karen asked her to do, Pat said: 'Yes, that is fine, leave it with me'. Pat recruited new staff and, as she did so, much more seemed to be happening: staff attended courses and the practice was redecorated. Karen was happy she had her weekends and evenings back, content in the knowledge that Pat was taking care of everything.

But then Karen received a call from her accountants to warn her that there was a problem. They could not reconcile the computer takings with what was in the bank, and it seemed that significant sums were going missing.

Karen called Pat to find out what was happening but her phone was switched off and emails went unanswered.

Karen then received a brief letter informing her that Pat had found a new job and would not be returning.

Karen told me that she then started investigating what had been happening and found, to her horror, that not only had money gone missing but also that there were a significant number of unpaid bills and insufficient funds in the account to pay them. In a split second, Karen realised that she had not delegated responsibility but abdicated responsibility to Pat.

Just when Karen thought it could not get any worse, she received several letters from patients telling her that they were leaving the practice. The gist was that while they had been initially impressed with the service offered, they had subsequently been very disappointed with the customer care they had received from her new team.

### Plan B

Sadly, Karen now found herself facing another type of crisis – this time she had unpaid bills, missing money and an exodus of patients.

She knew that, somehow, management was the key, which is why she had employed Pat to manage. Clearly, that had not worked. Once again Karen was faced with a choice – to leave her practice or try another approach to practice management. Karen next decided to manage the team herself.

Curiously, even though she was facing a second crisis, Karen did not consider attending business skills or management training, or finding a coach to guide her through the problems to success. Karen thought she could figure it out for herself.

Not knowing how to manage people, Karen simply did the best she could. She started asking questions about how the team members were doing things, only to discover that nothing was being done as she wanted it to be. Karen started to worry about her team's capabilities and became critical about what they were doing, often standing over them, watching and listening and letting them know when they had not done it the way she wanted them to.

In many areas, Karen doubted anyone else's



competency and took various tasks away from the staff she still had. Once again, she was doing all the accounts, ordering and recalls, etc.

Karen became a management maniac – she wanted everything to be organised perfectly and thought that no one could do it but her. Karen would even answer the phone if she was in reception, rather than allowing her staff to answer it, in case they said the wrong thing.

To cope with the exodus of patients, Karen decided that she needed to do some marketing and build a website. Deciding that marketing wouldn't be a difficult task, Karen set about building her website, working into the early hours of the morning.

Slowly and surely the team that Pat recruited left, and Karen was back at square one. She felt overworked, had little quality time with her family, was eating poorly and drinking too much, and not sleeping, and this time she had the additional challenges of the loss of patients and the hole in her finances.

## Striving for success

It was at this point that I first met Karen; she was despondent and exhausted.

**When Karen was faced with the choice of selling up and walking away or changing the way she ran her business, she chose to make changes.**

As Karen told me her story, she recognised that, initially, she, like Richard, had started the practice focusing primarily on the clinical roles, and this had led her to near burnout.

From there Karen had tried a new approach, employing a manager and abdicating responsibility to someone who did the best they could but, without any guidance, it all went wrong. To compensate and manage her doubts, Karen then chose to micromanage everything herself.

Karen was desperate to know whether I could show her how to run a successful

practice that would allow her to live a fulfilling life. Happily, I could, and I will tell you more about that in the next issue of *Implant Dentistry Today*. **1**

If you are a principal and can identify with Karen, or are considering becoming a principal and don't want to make the same mistakes as Karen, contact [jane@healthyandwealthy.co.uk](mailto:jane@healthyandwealthy.co.uk), who will be delighted to help.