

Developing Practice Leadership

Developing a Strong Team:

A team may be defined as: “a group of *independent* people working *interdependently* for the good of the practice and patients”. Independent teammates take responsibility for all of their tasks and never blame circumstances, teammates, patients or whatever for their problems or failures (nobody’s perfect). Interdependent teammates work hand-in-hand to support each other’s responsibilities (tasks)—refer to the attached file “Automate Your Team Management” for all position responsibilities.

Are your employees a team? To definitively answer this question, have them all fill out the self-evaluation below. Make copies of this page and give one to every employee and doctor. Have them answer ALL of the questions to determine what must be done to improve team morale and effectiveness.

Table-1: Check off the strengths of <i>YOUR</i> Beliefs about Teamwork:	Strong	Moderate	Weak
I consider <i>all</i> of the employees in this practice a part of <i>my</i> practice team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I support the tasks of my teammates, yet I complete my own tasks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I allow my teammates to support my tasks and I truly appreciate them for it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I do <i>not</i> make negative comments about my teammates when they are not present.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If ALL above are Strong, you are a strong team member. In any case, please answer the following two questions.			
For <i>me</i> to be an <i>even stronger team member</i> I should _____			
_____ (continue on back if needed)			
For my practice to be an <i>even stronger team we</i> should _____			
_____ (continue on back if needed)			

Individual independence and team interdependence are highly affected by one’s *self image* (level of self-esteem). If a team member has a poor self image they will find it difficult to change their un-team-like behaviors to build a better team. Have each team member and doctor fill out this self-image questionnaire.

Table-2: Check off the strengths of <i>YOUR</i> Beliefs about your Self Image:	Strong	Moderate	Weak
I truly like myself as an individual who has a lot to offer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am capable of expressing my love to those close to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am loved by others, just for being myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am responsible for and appreciate my successes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am responsible for and do something about my failures (nobody’s perfect)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am a person who does what I say I will do, even when it is to my disadvantage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am of value to my team and to this practice and its patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If ALL above are Strong, you have a great self image and can do whatever you set your mind to. If two or more are <i>not</i> strong you need to take a look at yourself and see how you might create better self-esteem.			

Next, schedule a team meeting and play “The Relationship Game” (see attached  to help develop stronger team beliefs and your self-image. Also, use “Mind Set” (see attached  the night before the relationship game to help dispel any fears or anger that will make the game null and void. At the end of the meeting, ask each team member to make a commitment to have a stronger team!

Developing Strong Team Leadership

Being a successful orthodontist means more than just straightening teeth: it means being the team leader of a great team. For a practice to survive today, the doctor must lead the practice in a direction that makes it successful. To do this the doctor needs strong Clinical & Clerical Coordinator team leaders. To be strong leaders the doctor and team coordinators must have strong beliefs about teamwork (see Table-1 above) and have a good self-image (see Table-2 above)—otherwise, it is difficult if not impossible—you can't be what you don't believe you *can* be.

Team-wise, there are three types of people: dependent, independent and interdependent. You can be dependent or independent, but not both. You can be either dependent or independent and also interdependent:

- **Dependent** team members *don't* take responsibility for their lives, typically blaming others and the situation for their failures—they *don't* make successful team leaders.
- **Independent** team members take responsibility for their successes and do whatever it takes to correct their failures—they *can become* successful team leaders.
- **Interdependent** people help each other perform their tasks (for example, when assisting the doctor with patient treatment)—they *can become* team leaders *if* they are also independent.

Independent people have strong beliefs and dependent people have weak beliefs about most to all of the items in Table-1 above—people with moderate beliefs can become independent if they work at it.

Being a leader means that we must be **both** independent (taking responsibility) and interdependent (working well with others). When working *independently alone* making our usual decisions (refer to the “Automate Your Team Management” pearl), we can attain our usual results. When working *interdependently with others* we take responsibility for our part, adapt it to enhance the work of the others involved, and attain the results that are best for *all* involved, especially the patient. For example, when assisting the doctor at the chair the assistant must do what supports the work of the doctor and the doctor must do what supports the work of the assistant no matter how menial or important each may view their tasks—it's what's best for the patient.

We all act dependently, independently and interdependently from time to time, but we have a *natural* preference for being one or the other depending on our personality. Thus, we all have a natural affinity (our personality) to take responsibility for our lives...or not. As a quick review, each of our four personality styles has a purpose, emotion, orientation, motivations and sensory styles that supports that style's purpose:

- **ANALYZER** (task-oriented) Purpose—to *unerringly proceed*—using *fear* to alert us to danger
Motivations: avoid any pain or loss—do what your supposed to do—focus on what's *not* right with the situation
Sensory style: visual (fast) task-details thinking or kinesthetic (slow) feelings thinking
- **DIRECTOR** (task-oriented) Purpose—to *attain quick, adequate results*—using *anger* to alert us to confrontation
Motivations: reject beliefs that are different from yours—focus on your own concerns—be very decisive
Sensory style: visual (fast) see-it-in-action associative (not details)
- **RELATOR** (people-oriented) Purpose—to *stay connected to others*—using *sorrow* to alert us to any disconnections
Motivations: accept other's beliefs, as important—focus on other's concerns—be very indecisive
Sensory style: auditory (moderately-fast) people-details thinking
- **SOCIALIZER** (people-oriented) Purpose—to *socially interact with others*—using *joy* to alert us to our connections
Motivations: seek pleasure or gain—do what's new and exciting—focus on what's right with the situation
Sensory style: visual (fast) non-detail associative thinking

If you don't already know it, reflect on the above definitions and determine *your strongest style*. Then use the table below to determine your *natural tendency* to be dependent, independent or interdependent.

	Dependent	Independent	Interdependent
Analyzer	MODERATE	STRONG	WEAK
Director	WEAK	STRONG	WEAK
Relator	STRONG	WEAK	STRONG
Socializer	MODERATE	MODERATE	STRONG

Most task-oriented analyzers and directors are independent, but typically not interdependent. People-oriented relators and socializers are strongly interdependent, but not necessarily independent. Bottom line, since good leaders are strongly independent and interdependent, there are *no* genetic styles that make us

natural leaders—we all have to *learn* to be a leader in spite of our genetics. We all have all four styles, using our strongest when distressed and the other styles as needed when not distressed. Thus, a specific blend of styles (our personality pattern) can give us a better *potential* to be leaders. We cannot be too weak in the director style or else we won't get results. We cannot be too weak in the analyzer style or else we won't get accurate results. We cannot be weak in *both* the relator and analyzer styles or else we can't work interdependently with others. Being moderately strong in all four styles gives us the *genetic potential* to be successful leaders, but this type of pattern is rare.

But, you can make yourself a better leader if you can get a better self-image by working on your weak beliefs indicated in Table-2 above. Many people have weak self-images because of their upbringing and feeling that they were not loved—this can be resolved by playing “The Relationship Game” with family members. If negative emotional memories are propagating your weak self image you can use “Mind Set” to get rid of them—The Relationship Game and Mind Set can be found among the management pearls. Once you feel better about who you are you will automatically have stronger beliefs about teamwork in Table-1 above. This will put you on the path of becoming an independent, interdependent team member and a better leader.

Other than overcoming your personality tendencies and your emotional hang-ups, adapting Dr. Steven Covey's “Seven Habits of Highly Effective People” can also help you to become a better leader.

I must take responsibility for the tasks in my position:

Basically, you need to be more independent and less dependent as noted above.

I must put “first things first”:

To be a leader you must be able to prioritize “what's important” and “what's urgent”, then choosing what's important over what's urgent to attain your goals. For example, the doctor should see the patients on schedule, which is important, instead of answering the phone, which is urgent. Chairside assistants must work on scheduled cooperative patients, which is important, instead of cleaning up emergency patients or broken appliances, which is urgent. This is not an easy habit for anyone to establish, no matter what their strongest style, but it is important to establish it to lead the practice through a successful treatment day—this is not easy for “impulsively decisive” directors and socializers.

I must visualize my goals in order to attain them:

You must be able to *see-in-your-mind* the best path to take to attain your goal (or effectively complete your task) and then work you way backwards to know where to start—otherwise you may never get there. We only think in this manner when using our director style, which is why we shouldn't be weak in it.

I must think “win-win or no deal”:

An example of “win-win or no deal” is when the practice provides an exceptional service and the patient pays for it according to an acceptable financial arrangement and cooperates during treatment. Another example is when team members fulfill all of their responsibilities and are adequately compensated for it. Indecisive, dependent thinking makes a win-win situation. Analyzers and socializers are moderate at and directors and relators are weak at attaining “win-win or no deal” solutions—we all need to work at it.

I must first seek to understand and then to be understood:

If we listen intently to what others say and then respond in terms of what they said, our responses will be more acceptable to them. Directors and socializers are poor listeners and thus, find it difficult to respond accordingly. Analyzers (tasks) and relators (people) are intent listeners and find this easy to do.

We must work *interdependently* and arrive at a solution that is acceptable to all:

To do this we must strive for a “win-win solution” and be able to “understand and be understood”—to listen to each other and determine everybody's possible solutions. For example, a patient with a cooperation problem who is listened to, instead of lectured to, will give valuable information on what is causing the problem from which a win-win solution can be found that *allows* the patient to cooperate. Directors are weak at arriving at solutions beneficial to others and must work on this habit—using Mind Set can help.

I must develop healthy habits for my mind and body:

It is not easy to develop worthwhile habits—change is stressful, but we cannot progress without change. We must eat well and exercise and we must resist our natural tendencies not to change. Directors and socializers are moderate at making changes; analyzers and relators find it very difficult to make changes.

I hope that this pearl will help you to develop a stronger team and stronger team leaders.