# **HOW DO YOU MANAGE?**

**Shaz Naseem** traded in a career in oral surgery for general dental practice – and hasn't looked back, he tells Moira Crawford



Shahzad (Shaz) Naseem was a consultant oral surgeon for many years, until he made the career switch to general dental practice. He is now the owner of Dental Works in Milton Keynes, which opened its doors in June 2005. He and his wife and practice manager, Ruby, were runners-up Best New Practice at the *Private Dentistry* Awards 2006, and are constantly looking to improve their practice.

## PD: How did you come to open Dental Works?

I graduated in 1986 from Punjab University, Pakistan, and came to the UK where I did my Master's in oral surgery at Birmingham University. From there I went to Saudi Arabia, where I was appointed consultant oral and maxillofacial surgeon, as well as holding several key administrative positions within the hospital and the regional health department and acting as dentist to the Saudi royal family. I became a fellow of Royal Australasian College of Dental Surgeons.

After eight years there, I returned to the UK and worked in the maxillofacial units of Chichester and Northampton hospitals. During this period I passed the IQE (International Qualifying Exam), and in 2001, I was entered onto the list of specialist surgical dentists, now known as specialist oral surgeon.

After 16 years of oral surgery, in December 2002, I wanted a change. I gave up my hospital-based career and decided to go into general dental practice. I had a clear vision of what kind of practice I wanted, and I wasn't getting any younger, so I needed to get the widest possible experience in the shortest possible time, so between 2003 and 2005 I worked at a number of NHS/private practices in Northampton, Milton Keynes and London. It all reinforced my ideas about what I did and did not want for my own practice.

By the end of 2004 I was ready to turn my dream into reality. I wanted to build a state-of-the-art practice, with cutting edge technology and a cordial atmosphere that would make the dental experience less stressful and traumatising for all involved.

#### PD: How did you set up?

I wanted a practice where the staff and I would be comfortable working, so that this would be transmitted to the patient, helping them to relax. Key to my plan was that it should all be on one floor. My mother was still alive at the time and was wheelchair bound,

so I saw close up what it's like to be in a wheelchair and how it limits one's mobility and accessibility. I looked at bungalows but finally came across a commercial unit within Milton Keynes station, 3,200 sq ft in a very busy, central location, which gave me a completely blank canvas where I could see myself creating the atmosphere I wanted to provide. After consulting various designers and architects, I decided to design it myself. I'd always wanted large, roomy surgeries and waiting areas where people would not feel claustrophobic and could move freely. I also wanted a consultation area for each surgery, as I'd realised that patients, especially nervous ones, do not like talking to the dentist from the dental chair.

#### PD: What is the practice like?

We started with four surgeries and have now added a fifth. I am a great believer in technology, so we have a state-of-the-art practice incorporating a wide variety of both clinical equipment but also gadgets to increase patient comfort, like DVD goggles, music, etc. I have four associates, plus a visiting implantologist, sedationist and anaesthetist, six full/part-time nurses and three reception staff. I have just appointed a hygienist, and a consultant plastic surgeon is available for consultation as and when required.

#### PD: What hurdles did you hit?

Finding the property was initially difficult. We discovered when looking at buying freehold bungalows that planning required us to provide parking for three cars per surgery – which for us would be 12 in all. In the city centre, that was not possible.

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Instead, we have gone for a leasehold commercial property, which gives us the necessary parking, if not the freehold, but it is in a great location: a central place where there is plenty of passing traffic and people just come through the door. I have not really felt the need to advertise.

I also ran into staffing problems early on, but I now have an excellent team working with me.

### PD: What have been your best decisions?

The location – it has been far better than our initial plan of a bungalow, which would have been out of the main traffic flow. I'm also glad I didn't go into partnership. Several people expressed an interest in doing so, but I've noticed that most partnerships fail after a time. They start out in good faith, but over the years differences and bitterness seem to creep in. I am lucky that my wife Ruby has been a great support both in setting up and running the practice. Now our children are older, she is the practice manager and it is great to have someone whom I can completely trust. She has taken on more responsibility in the practice, which allows me time to concentrate on clinical issues and the patients. I believe that provided you have a good understanding with your wife, she is the best partner you can have.

## PD: In hindsight, would you have done anything differently?

I think I would have done it all again, except for the practice website, which I'm not completely happy with. If I did it again, I would – and still probably will – get a professional in to do it, rather than use a 'friend of a friend.'

## PD: What lessons have you learned in the two years since opening Dental Works?

I learned a few hard lessons about

personnel very quickly. The success of Dental Works is down to the team I have in place now. Several of them were staff in places I'd worked before, like Jan West, and Andrea Cox; others, like Joan and Anne-Marie Clarke, were patients. My team now comprises Wendy, Rachael, Debbie, Laurie, Pauline and Jenny. I could not as a clinician operate a top-class dental practice without my team. I am by nature a relaxed and easy-going person, and to me this comes from inner confidence and belief in myself; once you have the inner belief you always know deep down that you are in control and can keep your cool even in adverse situations. Occasionally this outwardly relaxed attitude and seemingly casual approach gets misinterpreted, and I have had to learn to be firmer!

I've also learned to manage patients' expectations better. In the hospital environment people come to an oral surgeon for specific procedures: wisdom tooth extraction, cyst removal, apicetomy, facial injuries - they don't have many options. In general practice, however, the wishes may be at times unrealistic; a number of procedures are elective such as change of amalgam fillings, teeth whitening, smile makeovers, etc. In the early days I wanted to say yes to everyone's requests, but have learned how to manage this better. For example, if someone has major perio problems, you can't give them that Hollywood smile and I've learned how to explain that sensitively.

#### PD: How do you manage now?

I've moved away from oral surgery

– I've had enough of that! I refer
extractions etc to one of my associates,
and I prefer and enjoy cosmetic
dentistry, for which I've studied
extensively in the last few years and
have trained my associates as well. I

find immense satisfaction in treating and comforting nervous patients.

Ruby and I work closely on the management side. In my view management consists of two parts: macro-management and micromanagement. I do the former. I appoint my staff to do a certain job - the macro-management - the detail or micro-management of how they carry it out, is up to them; they decide how they can do the job best. I do not interfere in that and keep an eye on the end result which should be smoothly achieved without distraction to me; as I want to concentrate on what I enjoy doing most, ie. treating patients. Ruby's role in this respect is pivotal, she makes sure everything goes smoothly on a day-to-day basis, without unnecessary hassle to me.

#### PD: Do you delegate?

Yes! I trust people and I'm basically an optimist. My staff are mature individuals and that's how I treat them. I can trust them to do things responsibly. I often tell my staff that I am not a headteacher, looking over their shoulder all the time, and they do not disappoint me.

## PD: How do you communicate with your staff?

I find the idea of regular morning or monthly meetings too formal, and apart from a few, staff members do not speak or come out with their ideas, and some feel intimidated. Therefore, most of my communication is on a one-to-one basis, in a rather informal and friendly manner and usually through Ruby, as she is more accessible than I am (micro-management again). When the need arises, of course we do have formal meetings, and this works for us.

## PD: How do you manage relationships with patients?

Word of mouth has been our best tool

for promoting the practice. We have hardly felt the need to advertise, and the quality of our work and the way we treat our patients has been our recommendation. Satisfied patients are the most sustainable advertisement – if people are treated well, they are bound to come back, and we have retained over 90% of our patients, despite the fact that at present we do not feel the need to have a recall system in place.

## PD: What do you love and hate most about your job?

I enjoy the variety in general dentistry. I don't miss oral surgery at all – I've tasted the power and authority of being a consultant and had enough of it. I now enjoy doing a good perio treatment, root canal filling or cosmetic dental procedures, or comforting and treating dental phobic patients. I enjoy using gadgetry, and the management side of being a practice owner and working with people.



## PD: How would you like people to regard Dental Works?

As a modern, state-of-the-art practice that delivers high-quality dental treatment in a friendly atmosphere – and for nervous patients, a dental practice that doesn't feel like a dental practice! The whole package of technology, layout, sedation options and staff attitude contributes to that.

#### PD: What next for Dental Works?

Success is a moving target and as soon as we reach it, we aim higher. We were delighted to do so well in the Private Dentistry and Dentistry Awards 2006; being shortlisted for Best New Practice, Best Patient Care and Best Practice of the region is a real big achievement considering my background ie. no previous experience whatsoever of running a practice. We are very happy with how the practice is now, but in a few years time I'd like to redesign it again, which could mean demolishing the whole present set-up and having a totally different layout with perhaps water features, indoor plants, rockeries, staircase, balcony etc, but at the same time maintaining the spacious surgeries and waiting areas. I am currently in the process of updating the in-house plasma TVs, changing the soft furnishings, replacing wall hangings from Ikea with blow-ups of our patients' smiles, taken by myself. The other plan for the near future is to have two or three internet stations for the patients. My daughter is in her first year as a dental student, and I will need to get it ready before she qualifies!

I've been asked if we plan to expand or open another branch, and my answer is that there's only one Harrods – and there's only one Dental Works. We want to maintain it and continuously improve the standard.

#### PD: What would be your advice to someone looking to set up a new practice?

There are several components to success:

- · Wholehearted commitment
- Have confidence in what you want to achieve – I knew from the outset what kind of practice I wanted, and set out to get it
- Set realistic targets and work towards them. Then set higher goals
- Do your research. When I worked in a variety of practices, I observed what did and did not work, and I also closely researched the area where I decided to open my practice
- Have a team you can trust and rely upon. Surround yourself with good people and look after them – the practice is only as good as the whole team
- Location, location, location. For a new practice you need a lot of traffic flow and people passing by
- Provide high-quality dental care.
   Constantly improve yourself in terms of your clinical skills and your communication with the patient.
- Use your common sense and common sense is not that common!

### Fact File

Dr Shahzad Naseem (Shaz), GDP, Milton Keynes; GDC specialist list, oral surgeon

Qualified: BDS 1986, Pakistan, Master's in oral surgery and oral medicine 1991, Birmingham, FRACDS Australia 1998, Statutory Exam 2002 Practice: Dental Works by Shaz and Associates, Milton Keynes

www.dental-works.co.uk

Lives: Milton Keynes

Family: wife, Ruby; children: daughter, Fatima, 18; two sons, Shahyan, 16 and Faizan, 14

Interests (dental): cosmetic dentistry; technology, nervous patients

Interests (other): all kinds of sports, especially cricket, squash, tennis and badminton; scuba diving and snorkelling; watching football; photography; cooking – especially a good BBQ and koftas (meatballs) for my daughter, who comes home at the weekends only