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# ANGRY PATIENTS, TROUBLESOME STAFF: CREATIVE WAYS TO DEAL WITH CONFLICT

Resolving conflicts creatively and productively can make your practice grow

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Most of us fear conflict, and perhaps for good reason. It's usually unpleasant, unsettling, and it often doesn't accomplish very much. But the problem isn't the conflict at all—it's communication. Even people who do well in periods of calm often communicate very poorly during a conflict, if they communicate at all.

So what's all this got to do with helping you run your dental practice? Plenty.

In a modern dental practice, conflict is like wet hands and tense patients—it comes with the territory. If you work in an environment where people are frightened and in pain, you'll find conflict. If your working conditions include pressure to relieve pain and the demand for jeweler-quality precision, conflict will exist.

We've learned a few things about

conflict through our consulting business and our research. First of all, it tends to fall into three main categories:

- *Attack* is an all-out verbal assault with winning as the goal, no matter what the cost. We've all seen stressed out patients move into an attack mode when they're forced to wait because you are behind schedule.

"My time's worth as much to me as your's is to you! If I showed up 90 minutes late, you'd be mad as hell!"

- *Surrender* is caving in to another's position. In one office, where the chairside assistants and hygienists alternated clean-up chores in the sterilization, dark room, and lab sections, one assistant ended up doing it all.

"This office just isn't big enough for a lot of bad feelings," she told us. "It's easier to do it myself, not say anything and avoid all that stress."

- *Guerilla warfare* looks like surrender, but it's more like sabotage. A disgruntled staff member can find many ways to "get even." When one receptionist was reprimanded for under-scheduling appointments,

she quickly packed the waiting room so the doctor didn't have a spare minute all week.

"Don't get me wrong," he told us. "I want a high-volume practice, but with my patients rolling through like bottles in a brewery, I didn't have time for the barest amenities."

To avoid making someone angry, people often let important problems like these go unresolved. These problems, in turn, become obstacles to essential practice objectives. Although no one can say for certain how another person will react to a confrontation, we usually assume that their reaction will be negative. "I have to work with these people every day," our clients often tell us. "Why make waves?"

## Action, not reaction

Most of us need a new approach—a way to keep conflict creative and productive rather than nasty and disruptive. For that, we must first learn to *act* rather than *react*. Reacting is allowing pressure to build to an emotional explosion. When we act, we read a situation, decide what action to take, then act on that plan

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with precision.

Let's assume you've overheard your receptionist issue an ultimatum to a long-time patient who was so preoccupied with her own discomfort that she allowed her two children to roam the waiting area, meddling, whining, and squabbling. Your receptionist overreacts:

"Mrs. Brown!" she snaps angrily. "If you can't control those children, please leave them with a babysitter during your next appointment."

How do you handle this situation? What do you say to your receptionist? We teach our clients a simple, five-step plan:

**1. Know what you're after.** Your immediate reaction may be to read her the Riot Act. Most people raise issues during the emotion of the moment, but until you know

what you want to accomplish, you're not ready to talk. If you don't know what you want, she won't be able to figure it out either.

Time and place are crucial factors in any conflict. Chewing her out in front of patients and the rest of the staff just isn't going to work, even if you are an orator reminiscent of William Jennings Bryan.

**2. Describe your feelings.** Accusations are hard to hear—they make people feel attacked. Telling her how you feel is less threatening and, in terms of sorting things out and organizing your thoughts, it's a good place to start.

"Nancy, I was embarrassed and upset this morning, for myself and for Mrs. Brown."

**3. Pinpoint details.** If you think she was out of line or rude to a

patient, tell her when, how and, if you can, quote her actual words. Without this information, even if she capitulates, readily admitting her error, she still doesn't know what you mean exactly, nor what you expect her to do.

"It was this morning, during Mrs. Brown's appointment, when you said. . ."

**4. Share the problem.** "It's not all your fault—I'm partly to blame. I could have briefed you about several of these patients, and made our policy about children in the waiting room more clear."

This is a strategic point, which enables your listener to feel more receptive to what you say. It's hard to do, but important. Always keep in mind what goal you are trying to reach.

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**5. Agree on a solution.** Again, this is important strategically, because it allows the other person to feel some sense of gain, without feeling pushed to the wall. As clearly and concisely as possible, tell your receptionist what *you* will do and what you want *her* to do.

"Well, Nancy, I'm going to be more careful about giving you direction and briefing you on office policy and patients. For your part, remember that patients are our guests. Do what you can to make them feel like a special and valued part of our practice."

Using this five-step method will allow you to give negative feedback that motivates people to change rather than making them resentful and defensive. But it only represents half of the conflict picture. The other half is knowing what to do when you are on the receiving end of anger and criticism.

### The flip side

Let's assume it's been another busy day—a Monday during vacation break at the local university, and you've been booked solid. On top of that, you've had several emergencies and you are running late. You step into the waiting area and see Mr. Jones, a local building contractor whose patronage and endorsement of your practice is important.

"Hello, Mr. Jones. How are you this afternoon?" you say. His answer blisters your ears.

"As a matter of fact, Doctor, I'm sick and tired of the way I get treated when I come here for my appointments!" he answers.

It's very hard to remain positive when you're faced with such strong criticism. But it's very important to do so. There are two basic rules for dealing with angry patients:

- Ask for more information, and
- agree where you can.

This can be more clearly illustrated in our second, five-step plan for responding to criticism:

**1. Paraphrase the speaker's ideas and emotions.** As a first step toward getting to the bottom of things, describe what you see and hear to the speaker in your own words.

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## To be successful, you must learn to manage the people part of your practice

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"Well, Mr. Jones, it looks like we've done something to make you quite upset. . . ."

**2. Ask for specifics.** ". . . can you help me out and tell me what's bothering you?"

Mr. Jones responds: "Well, I can't believe you're able to stay in business when you're so disorganized and inconsiderate of your patients!"

**3. Guess about specifics.** "We're running a little late today. Are you upset because you've been kept waiting?"

"You know damned well I am!" Mr. Jones retorts. "Don't pretend that you don't know it! My appointment was for three o'clock, and I've already been waiting 50 minutes. I've got a business to run, you know. I don't have a lot of time to waste!"

**4. Agree with the facts.** "Well, you're absolutely right. You've been waiting for almost an hour."

**5. Agree with the critic's perception.** "I can see how this has been a real problem for you—especially at such a busy time of year for

your business. And I can understand how you might have felt as if we didn't care about you as our patient."

The value of this procedure is that it not only gives you the information you must have to resolve problems within your practice, but it makes you an effective listener and allows the angry or critical person time to cool off.

Our clients are often startled when we tell them to agree with their critics, but there are always two things about any statement with which you can agree: the literal facts and the other person's sincerely held perception of those facts. This certainly does not mean you have to cave in to any differing point of view. On the contrary, you can easily maintain your own views, while simultaneously acknowledging that the incident did take place and the other person feels strongly about it. It's an orderly way of making sense of a disorderly situation.

To become a successful dentist today, you have to be more than a technical expert. You have to learn a great many additional skills they never taught in dental school—such as public relations and managing the "people part" of your practice.

Success in the 80s means you have to produce patients who will be ambassadors for your practice, and maintain an internal atmosphere where morale is high, people are direct, and where staff can hear and give criticism without defensiveness.

Marketing a modern dental practice is much more than advertising. Today, marketing begins here, with making conflict a creative part of your practice's growth, because conflict is a benefit, an opportunity to focus high energy in a creative direction. **DM**