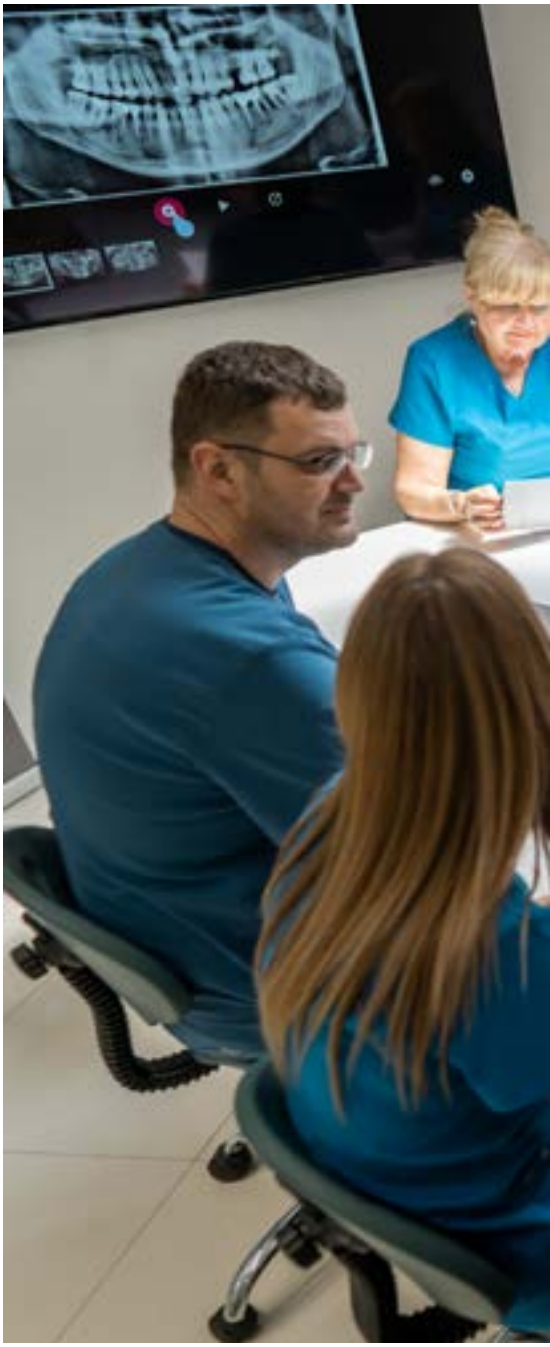
How to build a high-performance team

Rahul Doshi presents a complete leader's guide.



Two dental practices can have remarkably similar teams on paper: comparable experience, similar salaries and the same number of people. Yet their working days can feel completely different.

In one practice, the principal remains the centre of almost every decision. Problems travel upwards, responsibilities overlap and progress slows whenever the owner is unavailable. Everyone is busy, but the team never quite develops momentum.

In the other, people understand what they own. They raise concerns early, solve appropriate problems independently and maintain standards without constant supervision. Patients experience a calmer, more consistent service, and the principal has space to lead the business rather than continually rescue it.

The difference is rarely talent alone. More often, it is the leadership environment in which that talent operates.

A high-performance dental team is not created by a single training day, a new bonus scheme or a round of recruitment. It develops when clear direction, defined responsibilities, honest communication and meaningful accountability become part of everyday practice life.

Start with leadership, not recruitment

When a team underperforms, recruitment can appear to be the obvious solution. Sometimes a practice does have the wrong person in a role, but replacing people before examining the leadership environment can simply reproduce the same problems with new employees.

The first question for a principal should therefore be, 'what has my team learned from the way I lead?'

If decisions are routinely taken back from team members, they learn to wait for instructions. If commitments are announced and then quietly abandoned during a busy month, they learn that new initiatives are temporary. If problems are met with frustration, they learn to hide difficulties until they can no longer be ignored.

Effective dental leadership rests on four closely connected qualities:

- **Credibility:** doing what you say you will do
- **Consistency:** maintaining recognisable standards, even under pressure
- **Self-management:** responding thoughtfully rather than reacting emotionally
- **Self-awareness:** recognising when you are leading people and when you have slipped into controlling every detail

A team cannot consistently exceed the standard modelled by its leader. Before introducing another system, meeting or job title, principals should consider whether their own daily behaviour supports the culture they want to create.

Give every role a clear edge

Ambiguity is one of the greatest obstacles to team performance. In many practices, several people are notionally responsible for the same task, but nobody has genuine ownership of it. Patient enquiries are followed up inconsistently, treatment discussions fall between clinical and administrative teams, and the principal becomes the default destination for unresolved questions.

A high-performance practice gives each role a clear edge: a defined area in which that person is expected to take ownership and become excellent.

For a reception team, this might relate to the quality and speed of the first response to a new enquiry. For a treatment coordinator, it could be guiding patients through the non-clinical elements of their treatment journey. For a practice manager, it may be maintaining the operational rhythm



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that allows everyone else to perform effectively.

This does not mean eliminating collaboration. Deliberate overlap can provide resilience when a colleague is absent. The important distinction is between overlap that has been consciously designed and overlap that exists because nobody has clarified responsibility.

Ask each team member three questions:

1. What outcome do you personally own?

2. How will you know that you are performing the role well?

3. Which decisions can you make without referring them back to the principal?

If the answers are unclear, the structure is unclear.

Make it safe to tell the truth

Psychological safety is sometimes dismissed as a 'soft' subject. But in a dental practice, it is operationally essential.

Principals need timely, accurate information. They need to know when a patient is dissatisfied, when a process has failed or when a team member is struggling. That information is only available when people feel able to speak honestly.

How a leader responds to bad news determines whether the next problem is raised early or concealed.

Psychological safety does not mean accepting poor standards. It means separating the person from the problem sufficiently to understand what happened, agree what must change and prevent a recurrence.

The objective is not to remove accountability. It is to create an environment in which accountability can operate intelligently.

Consider the normal response when➲

someone admits a mistake. Does the conversation create clarity and learning, or does it teach the person that honesty is personally dangerous? Teams remember these moments. Over time, they become the culture of the practice.

Replace supervision with real accountability

Micromanagement often begins with good intentions. The principal wants to protect patients, quality and the reputation of the practice. But when every task must be checked by the owner, the practice becomes constrained by one person's capacity.

Real accountability begins before a task is delegated. The team member needs to understand the required outcome, the boundaries around the decision and how success will be measured.

Once these are clear, follow-through should be visible and predictable. That might include agreed measures, regular reviews or a simple meeting rhythm, but it should not depend on the owner continually hovering over the work.

A useful test is what happens when the principal is in surgery, on holiday or simply unavailable. If standards immediately decline, the practice has supervision rather than ownership.

The goal is not to make the owner irrelevant. It is to ensure the practice does not require the owner's constant intervention to function properly.

Hire for behaviour as well as competence

Clinical and technical competence will always matter. However, a technically capable person who is fundamentally misaligned with the practice's values can create friction that no job description will resolve.

Values should therefore be translated into observable behaviour. If 'patient-centred' is a practice value, what should colleagues and patients actually see? If teamwork matters, how is that demonstrated during a difficult day? If continuous improvement is important, what behaviour shows that a person is open to feedback?

Recruitment becomes more effective when interviews explore how candidates have behaved in real situations, rather than relying only on qualifications and rehearsed answers.

Onboarding is equally important. A new employee's first weeks teach them what the practice genuinely expects. Clear standards, early feedback and regular conversations help good habits form before uncertainty becomes embedded.

A structured first 90 days is likely to achieve more than an enthusiastic first-day welcome followed by three months of silence.

Create a rhythm that survives busy weeks

High-performance teams communicate regularly, but this does not mean filling the diary with meetings.

Different conversations require different rhythms. A brief daily huddle can align the team around immediate priorities. A weekly operational meeting can address recurring obstacles and responsibilities. A monthly review can connect team activity with broader practice performance.

The real test is whether these conversations continue when the practice becomes busy. Cancelling them whenever pressure increases teaches the team that structured communication is optional, precisely when it is most needed.

Effective meetings should have a clear purpose, relevant information and named actions. If every issue ends with "the principal will look into it", the meeting is reinforcing dependency rather than building ownership.

Measure what the team can influence

A high-performance culture should be visible in the practice's results.

Relevant measures might include:

- Response time to new enquiries
- Patient conversion and case acceptance
- Patient retention
- Diary utilisation
- Unfinished treatment follow-up
- Complaints, service recovery and patient feedback

Numbers should not be used simply to judge people after something has gone wrong. Shared appropriately, they give the team a common picture of reality and allow progress to be recognised.

A dashboard viewed only by the owner is a management report. A focused set of measures understood and influenced by the team can become a source of ownership.

Build a practice that performs beyond the principal

Creating a high-performance dental team is not only about making the working day more pleasant. It can materially strengthen the business.

A practice that depends entirely on its owner's energy, clinical output and personal relationships carries significant operational risk. It is also more difficult to grow, more difficult to step away from and potentially less attractive to a future buyer.

By contrast, a practice with capable leadership, clear roles, reliable systems and a team that can see and improve its own performance is a more resilient asset.

This matters even if a sale is not on the horizon. The same qualities that can support long-term practice value also give the principal greater freedom today: time to think strategically, pursue other interests or take a genuine holiday without wondering whether standards will collapse.

Where to begin

Do not attempt to change everything at once. Start by identifying the part of the practice that relies most heavily on the principal. Then ask whether the underlying issue is unclear ownership, inconsistent leadership, missing information or a lack of confidence within the team.

Choose one leadership behaviour and one structural improvement to protect consistently over the coming weeks.

High-performance teams are not assembled through a single dramatic intervention. They are built through clear expectations and small leadership habits that survive ordinary pressure.

That consistency is what turns a group of capable individuals into a team, and a busy dental practice into a business with the capacity to grow.