Dr. Sheela Raja - Building Trust in the Workplace

CDA : How would you approach the conversation you have with the team?

Dr. Raja: So, basically when you know your team wants something and you're not able to meet that, I think as a manager you've got to look at the long-term goal of, how do you build trust with the team? Not just around this issue but longer term. And obviously you have more relative power. There's some interesting work that's been published in the Harvard Business Review for example, on how do managers build trust and especially this, this idea of relative power. So, of course if possible, even if you can't give the team exactly what they want, maybe, are there other things that you could offer them? Other options that are maybe less than ideal for you but also makes them feel like they have some say in the decision making, if that makes sense?

CDA : What could you offer the team instead?

Dr. Raja: So, maybe in this case what you could do is you could try to form a compromise with your team. So, if they want a lot of equipment replaced, you could start a conversation with them and say, okay, you know, I'm willing to be able to commit to what you guys think is the most important piece of equipment to replace. So in this case, maybe it's replacing the scalers over time and trying to share that relative power and come up with a timeline that's acceptable.

CDA: What is relative power?

Dr. Raja: Relative power is this idea that whenever you're in a management position, at the end of the day, you do have the final say. And so, I think in a dental practice, you do have to be careful about not being perceived as coercive. You don't want to be perceived as that manager that is, oh, well, you know, I know I'm not going to go to her because she's never going to hear my point of view anyway. She's not interested. So that's where, I think that the best managers really figure out how do they share that power in a way that feels more collaborative. Of course, at the end of the day you do have to be recognized as the person who is going to make the decisions for the practice. And at any time, you are weighing what's good for the patients, what's good for practice management overall, and what's good for your employees? And continually sharing that thought process with them is a way to share the relative power. Of course, you get to have the last word on it, but at the same time at least you can say, well, my thought process is open to feedback on it and I think a way that you can share that power.

CDA: How much of your decision-making process do you share with your staff?

Dr. Raja: I think that in this case you do have to share a fair amount of at least why you're making this decision. Because you want to show what we call benevolent concern. Benevolent concern is that you have, you know, an awareness of what the staff needs, but you also have an awareness of what the practice needs, and you also have an awareness of what

the patients need. And so, I think you have to, even though it may be obvious in your own mind, you need to share with the staff, these are all the things that I'm trying to balance.

CDA: How do you manage the potential impact of a negative decision on staff in terms of low moral?

Dr. Raja: This is where I think the level of communication really becomes important. So, if you are not able to do anything at that time in terms of what your staff wants, I think then you have to increase the frequency of meetings and sort of how candid you are during those meetings. So, for example, saying, okay, well this is right now the profit margin that we're dealing with, or this is where the practice is at. Again, not necessarily specific numbers, but saying, you know what, I want to check in with you guys in two months about this because you've raised an important issue. I want to make sure that we're not losing track of it. And that helps people feel like they have still a seat at the table and that their ideas are important. So that ongoing communication. So sometimes even if you can't meet the request right then, the fact that they feel like, okay, there's an opportunity in the future for feedback is meaningful.

CDA: Can you tell me about Maslow's Hierarchy of Needs and how these needs relate to employment motivation?

Dr. Raja: Definitely. You know, when we look at this scenario, I think it's important for anybody that interacts with a team to really think about, where is a request coming from? So at the bottom of Maslow's hierarchy is this issue of physiological needs. We all need food, we need shelter, you know, all of those things. That's basic. And then we need to feel safe. We need to feel like our workplace is free of danger and that we can perform in a way, in an environment that's safe for us. Then we have social needs that work their way up to the pyramid, which is interaction, on a day-to-day basis. It doesn't mean that everybody's social all the time, but it means we have ability to connect with people in our workplace. As we move up that hierarchy then we have esteem needs and esteem needs are the need to be recognized. We're all good at something that we do and (we wonder) is our manager, is the dentist in charge, are they recognizing some of those things? And then finally it's sort of self-actualization, which is a fancy way of saying what is in our workplace that is supporting our own personal values and our own growth? And we want to try to get our employees to shine in this area. To like, recognize them. That's the esteem needs, but then how do we then support those particular needs and get them to grow in whatever they're doing.

CDA: How can mangers use Maslow's Hierarchy of Need to guide their decision-making?

Dr. Raja: I think when they make a request like this, you really need to try to figure out, okay, where is this coming from? Is this a safety need? Do they feel like, something is going on where maybe patients are being put at risk or they're being put at risk. When it's lower on that pyramid, we have to act on it more. Whereas if it's something that they feel like

the practice would be enhanced overall, it's going to do better. We're going to look like we have, you know, better equipment, but it's something that can wait, and maybe we recognize them at that point for saying, thank you for being so proactive about something that can help our practice grow and be seen as cutting-edge. So, I think we have to try and figure out where is that requests coming from.

CDA: What can managers do to increase the likelihood that their employees are going to meet all levels of Maslow's Hierarchy?

Dr. Raja: That's such a good question. I think part of that really depends on the individual, employee, because there are employees that come in and they want to meet with you frequently and they want to check in and you're going to have to try to figure out what are their strengths and how can you create some professional development around getting them to where they want to go. There are employees that are more introverted and probably need a little more encouragement in meeting with you. And those are the employees where you may say, hey, I would love to have a discussion with you every six months just about how things are going, any ideas you have, how I can support you. The more introverted employees are the ones I think that actually kind of slip through the cracks. We, we miss the opportunity for some professional development with them because we think, oh, they're just kind of showing up. They're doing what they need to do. But those are also people that need our attention. And that we need to move them towards finding out what their strengths are and trying to figure out how to recognize them in the workplace, and also giving them more tasks that are specific to what they're good at.