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DENTAL EDITION SPRING 2013

PROFITABLE PRACTICE



EDITORIAL

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MANAGING ASSOCIATE EDITOR

One of the goals of this magazine is to feature the give back that many dental professionals do for their patients, local communities and national/international charitable organizations. Dr. Roger Avila typifies not only the strong nationalistic feelings he has as a foreign trained dentist for his new country, Canada; but, equally his passion to give back to society as a result of his good fortune. Dr. Avila pictured below relates his story as a Cuban trained dentist who relocated in Canada.



I arrived in Canada in March of 2000 from Cuba, my home country where I had been practicing dentistry earning a very small monthly salary.

One of my first steps was improving my and IELTS tests. Although I attended the I will always remember it as valuable program. It not only helped me polish my four skills, especially writing, but also helped me to fulfilling my goal of resuming my career in dentistry.

My preparation included the saving of tens of thousands of dollars. Thus, I worked like a horse day and night. I started off as a busboy in a restaurant for three months, and

six months. I also worked as a telemarketer until I found a job as a dental assistant at a downtown clinic where I continued to work for five years. At the same time, I was working at night at a banquet hall. And, somehow, I managed to squeeze in other part time jobs over the years, including selling ice cream and cotton candy at the beach, wearing a lion suit in the middle of August to promote a restaurant - and selling RESPs to help families put away money for their children's education.

While working ridiculously long hours over a period of five years, I continued to study very hard in order to pass the qualification exams. Finally, I got into the U of T's Advanced Placements Program for foreign trained dentists. My acceptance into this program was an achievement in itself since only 25 out of 1000 applicants are selected and thankfully in 2008, I finished the program. Immediately, I began working as an associate dentist.

After six months, I bought my first practice in Etobicoke. Having gotten into the habit of managing my money wisely, I was financially stable to buy a second practice in 2009. As a young dentist in Cuba, I had been earning only a tiny fraction of what a dentist in Canada can make. Thus, I feel very grateful to Canada for what I have now: a flourishing dental career, a beautiful house and several investment properties. I have also been able to pursue my hobby of buying and selling cars, something that would have been impossible in my homeland where the average dentist is lucky to own a bicycle to ride to work on each day.

Most importantly, I have my freedom. Living in a free country, I have had the opportunity to enjoy vacations in various corners of the world. I have also been able to fly back and forth freely to and from Cuba for visits with the family members I left behind.

Looking back on my past thirteen years in Canada, I realize how lucky I am. All this was just a dream when I was living in Cuba Today, my dream has become a sweet reality. I genuinely love and appreciate Canada, the country that embraced me over a decade ago. As a result of my good fortune, last year it was the Roger gives back in my offices. I

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GIVE BACK AND MORE

English skills in preparation for the TOEFL level 8 academic preparation classes at Jones Avenue Adult Centre for only two months, feel at home in this country. I wanted to stay longer at Jones, but I had to work to support myself and my family members from Cuba. I also had to start preparing for the next step

then I moved up to become a server for about

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donated more than \$15,000 in total to the Scott Mission, the Hospital for Sick kids, Operation Smiles and other charities.

One day soon I will express my gratitude by setting up a charitable foundation to try to make a difference in the lives of disadvantaged children with dreams of their own.

Dr. Avila will be featured in an interview in our next issue of *Profitable Practice* along with another dentist, **Dr. Bill Johnston** who provides dental care for the homeless in Clearwater, Florida. **Dr. Johnston** is pictured below at the HEP centre where he volunteers along with many other dental professionals.



Botox and Dentists Revisited

The debate as to whether or not dentists should administer Botox treatments is ongoing. **Dr. Janice Lowe** BSc, DVM, DDS offers her take on this issue.

I just wanted to comment on the Botox dilemma. I am a Nova Scotia dentist. I had the two-day intensive Botox training in Florida in 2007. There were medical doctors there learning the procedure, some of which I was concerned had never even handled a needle. Also, their knowledge of the head and neck was surprisingly minimal. Who better to treat the head and neck with Botox than a dentist! We deliver injections everyday, all day. We have intimate knowledge of head and neck anatomy. Think of how invasive an inferior alveolar block is, or Gow Gates or maxillary! How much training does a dermatology assistant get? Nurses can also be trained by a doctor who took the course! I've seen the medical knowledge first-hand that these nurses have - scary!

Botox is a cosmetic procedure - yes! So are veneers, crowns, bridges, tooth whitening etc. Part of health is improving the self image of our patients and their presentation to the world. They put their best "face & teeth" forward! Botox can also be used therapeutically for muscle pain, TMDD and migraines. It is a recognized approved treatment! Who better to treat the muscles of the face!

So the NSDA has determined that as of yet, Botox administration is not within a dentist's scope of practice. I beg to differ!

Our regular contributing authors

Once again our regular authors continue to provide outstanding insights and advice with regard to issues in the dental industry. Thanks to Mariana Bracic at MBC Legal, Daniel Pisek at FCM, Todd C. Slater of The Simple Investor, Inna Husband and authors at RBC and Nicolas de Rooij and Andrea Chan at MNB for continuing to provide their wise counsel.

Our feature interviews

This issue features an interview with **Timothy A. Brown** the publisher of this magazine and an industry leader in appraisals and sales of professional practices. In addition, **Dr. George Browes** a recently retired dentist who has cycled around the globe also provides insights into where dentistry has gone in recent years.

Special thanks

Profitable Practice wishes to thank and acknowledge the work of Natalia Decius and her design team at Full Contact Marketing for making our magazine a first class professional publication.

Things to remember

Readers are reminded that for subscriber information, please go to the inside back cover of this magazine. Don't forget to check out our Fun Facts there as well. As always we welcome your comments and suggestions for the magazine or if you would like to write for the magazine and have a story to tell that would interest or dental professional reading audience, please contact: editor@profitablepracticemagazine.com



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Feature Interview With Dr. George Browes



Dr. George Browes can best be described as an adventure cyclist who practiced as a dentist for many years. At 70, this avid cyclist retired and sold his practice in Ajax, Ontario and immediately mounted his bicycle. Since that time he has ridden across two continents. His trip segments included Guangzhou, China to Hanoi, Vietnam continuing to Kunming, China: St. Petersburg, Russia to Venice, Italy: Istanbul, Turkey to Samarkand, Uzbekistan: Vancouver to Inuvik, Northwest territories. His longest continuous trip was from Beijing, China to London, England.

These trips were not a whim but part of a plan to allow Dr. Browes to cycle across the perimeter of the globe. His passions for cycling and staying fit are two of the driving forces in his life.

Dr. Browes' trips required planning and training. Being fit was just part of the equation.

At age 70, training for stamina and agility was more difficult and much of what he did was to prevent any decline to his body as a result of age. Needless to say he is exceptionally fit. The planning side required knowledge of many things including the roads/routes to be traversed, predictable weather conditions, local customs and regulations, to mention but a few. Where possible, Dr. Browes enlisted the expertise of local bike clubs and fellow bike enthusiasts to learn from, travel with and share the experience.

Planning also involves having proper clothing and equipment. At least two sets of tires are required for any extended trip and many additional inner tubes. Tools and spare parts, plus knowledge on how to improvise on-the-spot needed repairs, partially round out what is required for the journey. Suitable clothing for any and all weather conditions was a given.

Dr. Browes confessed to a satisfying career in dentistry but knew he should retire after witnessing some of his long-standing patients experience poor and declining health. His advice to those thinking of retirement is to act on your dreams – listen to and consult with them. This requires courage, determination and preparation. He advocates that you will be better for it if you do so ... even if all your dreams do not come to fruition fully.



Dr. Browes answered the following:

How would you describe your dental career?

Professionally satisfying, very rewarding. I was fortunate to have chosen dentistry as a career. I worked as an electrician before I became a dentist. I liked the work but became frustrated with the union and my inability to control my own destiny. In 1957, I entered dental school and have never looked back.

At age 70, you decided to retire and sell your practice and walk away or cycle away as the case may be. What were the main factors in you making this decision?

A dentist works in a very small confined world. I needed to experience life outside of my tiny dental office. I wanted to learn about geographic areas, various cultures and relate to historic events in the places I travelled to.

What were the most rewarding aspects of your practice over the years?

Dentistry is a health profession. Being able to successfully deal with a dental health problem and enhance overall health brought me great satisfaction.

As a long serving dentist, what changes surprised you the most over the years you practiced?

The profession is losing its health care perspective and rotating into a more aesthetic-valued focus. When you see a dentist sitting on a box in a market square in Kurdistan and extracting a tooth from an ailing patient – you understand again how much dentistry is about health care.



If you were doing a lecture for a large group dental students about to graduate, what would be your most important piece of advice to them?

Do not allow your dental education to be your only post secondary education.

When and why did you get interested in cycling and make it a large part of your lifestyle?

About twenty years ago in the summertime as a means to conditioning for the winter ski season, I discovered the joy and freedom of being on a bicycle. To feel the sun, wind, rain to see the countryside and to stop for a treat and say hello to a stranger.

Please give us some highlights of the trips you have made and which one of these was the most satisfying?

Crossing Canada I learned so much about our country and to appreciate the values of Canadian citizens. Experiencing the severity of life in deserts I have crossed, the harshness of living in the Canadian Arctic made me grateful for my home. Riding throughout Europe, I learned of the cultural traits of these countries and how they have shaped Canadians. All my trips had special things to offer.

Besides cycling, what other hobbies or interests do you have?

I volunteer in my community as a member of the Rotary Club and skiing.

What are your plans for the immediate future?

I will ride from Anchorage, Alaska to Mexico City this summer.

Is there something you'd like to say? What final words do you have for our dental industry readers?

Enjoy and be grateful for your profession as you concentrate on practice success. Do not neglect the world outside your office. Travelling in many countries where dental care is under-serviced I realized or it reinforced my realization that I was essentially a health care provider.

Bottom Line: An interview with a remarkable dentist and world traveller who has much to say about dentistry.



Dr. George Browes

Dr. George Browes is a retired dentist and avid cyclist from Ajax, Ontario. He can be reached through the editor of the magazine.

Making The Move To Canada Are You Ready?

by Dr. Perry Shievitz

For those practicing in the United States, is it time to get out of the downpour of the past and ongoing U.S. financial storm? Whatever your reasons, making the move to Canada for lifestyle and professional reasons will be worth it; however, planning is required prior to your move to Canada. I made the move years ago and was glad I did.

The ease and requirements for this move will depend on whether you are a Canadian with or without an active dental license or if you are an American (or non-Canadian) with or without an active dental license.

Here are some of the obvious issues that must be dealt with before coming to Canada. Depending on your situation not all of these will apply to you.

Issues

- 1) Immigration
- 2) Dental License
- **3)** Financing
- **4)** The Practice
- 5) Residency and Tax Issues
- 6) Cash Flow
- **7)** The Economy
- 8) Dentistry in Canada vs. the U.S.

Immigration

If you are a Canadian citizen or have a permanent landed immigrant status, then immigration is not an issue. Just come back. However, if you are using a lender for financing, he/she will want proof that you are in Canada long enough to service the loans.

If you are not a Canadian or do not have permanent landed immigration status, then contact an experienced Canadian immigration attorney early in the process for the move to Canada and be prepared for extra costs and time.

Dental license

This issue must be dealt with first. If you have an active dental license in the province you wish to practice in, you simply show this license to your lender to obtain financing.

If you have a dental license for a Canadian province but wish to practice in another Canadian province, contact the dental regulatory body in that province and find out what is needed to obtain that province's dental license. If you do not have a dental license for a Canadian province, then contact the appropriate dental regulatory body to find out what is needed and be prepared for the extra costs and time to acquire the dental license.

Since the standard of care for dentistry is the same for Canada and the U.S., check to see if some degree of licensure reciprocity exists between the U.S. state that you have a license in and one of the Canadian provinces. If such reciprocity exists, then

obtaining a license is easier and takes less time. Once you have that provincial license, check what is required for the provincial dental license that you need to practice in the province of your choice.

Financing

Before your financing will be approved, the lender will want to see proof of an active dental license for the province you will be practicing in and proof of your immigration status.

The financial climate in Canada for 100% financing for purchase of a dental practice is favourable and relatively easy to obtain. In my opinion, practice brokers are excellent sources for referrals to commercial bankers eager to handle such transactions. Also be sure to negotiate a generous credit line, especially when first starting in your practice as unexpected costs commonly occur especially in the beginning just after a purchase.

The practice

If you are living in the U.S. and trying to purchase a Canadian practice, you will not be able to act as fast as if you were living in Canada. Be prepared to make one or more trips to Canada to see different practices until you find the one you want. For general practices, when in a sellers' market, time is of the essence and once you make your decision to buy, you will have to act quickly as multiple offers may be on a practice. This means you must have your contacts in place with respect to financing, legal, insurance, accounting before or shortly after contacting the practice broker. Contacting a practice owner that does not have a practice broker will add time and expense to the process. In a buyers' market you will have more time to act; however, for a desirable practice, you are likely competing against other local buyers to acquire that practice.

For specialty practices no matter whether it is a sellers' or buyers' market, you will have more time to act compared to general practices simply because there are less suitable buyers for the specialty practices.

Residency and tax issues

Speak to your accountant about the best time to declare your Canadian residency for tax purposes. This step assumes you already have taken care of any immigration issues beforehand if that applies to you.

Cash flow

The name of the game here is cash flow especially when you are moving from another country to Canada. There will be additional foreseen and unforeseen expenses compared to if you already lived for a while in

the province that you want to practice in. With enough cash flow, things that you did not like initially can be changed when you want to do so. An established practice allows for the immediate cash flow you will need.

The economy

You can change your house but you can't change the neighborhood. Stated another way, there is nothing you can do to change the economy of the state or country you are in. If your patients are losing their jobs, homes and have less disposable income to spend on dentistry, then your income from dentistry will decrease significantly. Patients will postpone or simply refuse to do needed treatment resulting in a decline in your dental earnings. The economic difficulties in the U.S. will continue for some time.

Fortunately for Canadians, the economic downturn compared to U.S. was minor and will be much shorter than for those living in the U.S. The standard of living is about the same in Canada and the U.S.

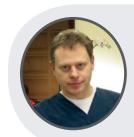
Dentistry in the U.S. and Canada

Basically, the standard of dentistry in the U.S. and Canada is the same. Anything you can get in the U.S., you can get in Canada. The only annoyance for the short term is learning the different tooth numbering system used in Canada.

There are many pleasant surprises for practicing dentistry in Ontario, Canada. Namely, the presence of PPO's and HMO's is insignificant in Ontario and fee for service, with or without insurance, is predominant. No more contractual huge discounts on your fees and much less insurance influence in your dental operation. In my opinion, these facts alone, regardless of the economy, are reasons enough to practice in Ontario and in any province that is similar to Ontario.

In summary, there are many issues to be aware of and managed before returning or coming to Canada to practice dentistry. To me, these are common sense issues and advisors like immigration lawyers, accountants, practice brokers and bankers will be required for this move. The dental license is up to you. Welcome/Bienvenue to Canada.

Bottom Line: This article contains advice to non-Canadian dentists who wish to move to Canada and start a dental practice.



Dr. Perry Shievitz

Dr. Perry Shievitz has practiced dentistry in Toronto and Miami. His current practice is located in Woodbridge, Ontario and he can be reached at the following: Phone: 905.850.9864, Fax: 905.850.1704 or info@vaughan-periodontics.com.

Big Plans For Your Future? Take a Bite out of Debt to Achieve your Goals

by Andrea Chan

After years of studying and financial sacrifice, it can feel liberating when you begin your career as a dentist and finally start earning a substantial income. Visions of buying a home, building a practice, travelling, now seem within reach. But before signing up for any new loans, consider a few statistics.

In Canada, the average education debt upon graduation from dental school is \$170,000¹. The average loan to buy a dental practice is \$450,000². The average home mortgage is \$301,000³. These three common loans tally almost \$1 million – without yet factoring in a vehicle loan, credit card debt, personal or business lines of credit, and other types of loans.

Before taking on additional credit to fulfill your aspirations, it's important to consider how you will manage these obligations. While bankers may be eager to extend funds because dentists are typically a low default risk, be aware that taking on too much credit can negatively impact your lifestyle and your professional career for many years. Debt overload can also put at risk your business and personal assets – even the financial security of your loved ones

Don't allow debt to direct your life. By taking control of your finances, you can make informed decisions, meet your obligations, and achieve your financial goals. Here are some ways to accomplish this.

Document your goals

Setting goals helps to focus on what you want to achieve for the future and to estimate what this may cost. Take some time to think about your personal, professional and financial goals for yourself and for your family. Involve your household members in the discussion to ensure you're all on the same page. Then establish a timeframe for each goal so you can determine what you need to do by what date in terms of saving, investing and paying down debt. Consult with your accountant or trusted advisor for help with evaluating options and to support your ongoing efforts to effectively manage your debts.

Consider your risk tolerance

Determine what risks you're comfortable with to achieve your goals. You don't want to place yourself in a situation where you're constantly worrying about finances. Some people are content with high debt and low savings, others are not. Consider your age, income, cash flow, time horizon and personality. And keep in mind the more you borrow today, the more of your future earnings will be required to service credit obligations.

Benchmark your spending

Know where you're starting from. Create a baseline by tracking both your personal and your business spending for a few months. This will give you insight into the inflow and outflow of funds so you can make knowledgeable decisions.

Determine potential impact of debt choices

When making decisions about financing options (Should I take that line of credit? How much do I need?), consider the impact on the rest of your liabilities. What would be the total principal and interest? Monthly payments? How will this impact cash flow? How long will it take to pay off this debt? How will this affect my financial security? It's important to consider your entire financial picture before taking on new credit.

Investigate loan options

Generally, dentists don't find it difficult to secure personal or practice loans or lines of credit. However, what this credit will ultimately cost can vary widely depending upon the source and type of financing. Some financial institutions offer special rates and packages to dental and other health care professionals. Ask your accountant for referrals to ensure you receive the best rate as well as the right form of financing to address your needs.

Develop a debt elimination plan

Too often dentists reach their 50s and 60s and discover they are still carrying hefty loans and don't have sufficient savings to retire. Along with Registered Retirement Savings Plans and Individual Pension Plans, debt elimination is key to a comfortable retirement. The less interest you pay, the more you can save.

Ask your accountant to help you develop a loan repayment schedule that will enable you to pay down debts in the most timely, cost-effective way. Balances, interest rates and tax consequences are all important considerations. For example, if you have an unincorporated dental practice, you would be paying any debt associated with the business on an after-tax basis. If you own a professional corporation and wish to withdraw funds to pay down personal debt, you could trigger a significant tax hit. Careful planning is essential to minimize the cost of debt obligations.

Maintain a good credit rating

Essentially, the better your credit score, the less you will pay for a loan. To ensure you maintain a good credit rating, avoid overextending your credit, always make payments on time and never ignore overdue bills. Making a payment even one day late can weaken your credit profile.

Establish an emergency fund

Unexpected things happen in life, which is why you should have a reserve to safeguard your financial security. At a minimum, set aside sufficient funds in a bank account to cover your daily personal living expenses for three months.

If you own a practice, determine what ongoing expenses need to be paid every month for the business to operate. Then set up an account with funds to cover at least six months of expenses should an emergency arise.

Secure appropriate insurance

Ensuring you have sufficient Insurance coverage is another important aspect of protecting yourself, your loved ones and your dental practice from debt and other financial challenges. Insurance can serve a variety of protective purposes, from collateral for a practice loan to protecting your family's wellbeing if something were to happen to you and you were unable to work.

Optimize tax planning

Strategic tax planning also offers opportunities to manage debt effectively. Talk to your accountant about the options available to you. For example, if you set up and structure a professional corporation to allow family members to be shareholders, you can tax-effectively pay down personal debts by paying out income to those who are taxed at a lower marginal rate than you.

If debt becomes a burden

Should you find yourself overextended, don't fall behind on payments. This could negatively impact your credit rating for years or, in the case of late government remittances or payroll, could trigger major penalties. Instead, meet with your accountant to discuss possible solutions. You may, for example, be able to refinance a student assistance loan or to consolidate certain debts to reduce interest rates.

You deserve the lifestyle you've worked hard to achieve. By putting some teeth into managing debt today, you'll soon be smiling about your financial future.

Bottom Line: This is an easy-to-read account that provides a plan to reduce the debt that dentists incur as a result of educational, professional and personal reasons.

- 1 TheNewDentist.net, summer 2010
- 2 TheNewDentist.net, summer 2010
- 3 Mortgage Pulse, RateSupermarket.ca



Andrea Chan, CA

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The Lease Of Your Worries

Negotiating a commercial lease can be a complex and potentially risky process. Find out why more dentists are using the services of professional lease negotiation firms.

With Dean Yuhar and Seun Ogunsola



You wouldn't launch a legal battle without a proven lawyer in your corner. You wouldn't build your dream house without a skilled architect at your side. But you'd be amazed at the number of dentists who negotiate their own leases.

If you're one of the many dentists who views an office lease as a standard document that doesn't require inspection by an expert, you could be putting yourself, your practice and your finances at a competitive disadvantage.

"There's no such thing as a standard lease. It's a myth as every landlord has their own standard document," says Michael Permack of Calgary's Spire Group, a firm that specializes in handling lease negotiations and real estate purchases for dentists and other health care professionals. "A lease document is a contract that outlines the financial terms, along with each party's responsibilities, conditions, rights and remedies. As such, each party should make sure they have a very clear understanding of exactly what it is that they're signing."

"When it comes to negotiating or renegotiating their leases, many professionals tend to focus their attention on the rental rate or the square footage size of their premises," says Permack. "A typical commercial lease can be up to 60 pages long. Rent and square footage generally represent just one or two paragraphs in that document. The question the professionals should ask themselves is "what is in the rest of the document?"

"The lease is so important that it can literally make or break a practice sale or a financing," says Permack. "Think about it. The biggest portion of any practice sale is the goodwill. And the majority of that goodwill is based on the location of your practice and the accompanying lease. If you're unable to secure the right location or buy a practice because of lease issues, that goodwill and, by extension, the deal itself, is out the window."

Increasingly, dentists are enlisting the services of professional lease negotiation companies to guide them through the process. "We approach the deal from the lens of the dentist and look at every aspect of the lease, from A to Z, to make sure our client is informed and that their best interests are represented every step of the way. If dentists are considering a sale then a lease evaluation and possible renegotiation should be part of the upfront planning to maximize the value of the practice and to facilitate a smoother transition. Purchasing dentists need to carefully examine the lease to make sure it is secure."

So...what sorts of potential problems can be found in the fine print of your commercial lease? Permack says one example is what's called a 'sale redevelopment clause'. "This essentially means the landlord can choose to knock down the building at any time and redevelop the land. Banks and purchasers expect to amortize their loan over a fixed extended period of time. When your financial institution and buyers see that the landlord is within their rights to demolish the building with six months' notice, it may put your sale and the purchaser's financing in jeopardy."

Another potential problem can occur when a dentist is acquiring a practice in which the selling dentist's lease term is coming to an end. The vendors in these situations often think the short-term nature of the lease helps to make the deal more attractive. In reality, however, the financial institution may be reluctant to amortize the loan beyond the length of the lease because so much of the goodwill of the practice is inextricably linked to the location and the lease itself. "This is just one of the numerous examples in where we recommend our clients use lease negotiation experts to address key issues and pave the way for a smooth transition," says Seun Ogunsola, Senior Account Manager with Royal Bank of Canada in Calgary.

One dentist who knows the value a lease negotiation firm can provide firsthand is Dr. Brayden McCue, owner of Inglewood Smiles in Calgary, Alberta. "Last year, I was looking for a plot of land to build my own clinic," says Dr. McCue. "I retained the Spire Group to guide me through the process. They helped me find a suitable piece of land and crunched the numbers in a way that made it incredibly easy to understand."

In the end, the firm helped Dr. McCue realize that building a commercial property from scratch wasn't feasible at this point in his career. Then, the group shifted focus to purchasing a commercial building."There were a lot of ups and downs through that process. At one point, after we had signed the sales agreement with the vendor, we realized the square footage the seller quoted was off by a few hundred square feet. The Spire Group worked to have the cost prorated as a result of this discrepancy. They kept level heads throughout and helped me understand the psychology of the deal."

"Ultimately," says Dr. McCue, "I got the property I wanted at a fair price. And the amount of money the lease negotiation firm was able to save me was magnitudes greater than what it cost to work with them."

When asked about the 'Type A' personality traits many dentists exhibit, Dr. McCue agrees there's a tendency to want to, "Do it yourself and save some money. But that's missing the point. Most dentists will go through this process three or four times in an entire career. These people have gone through this process thousands of times and can really add value to the process of negotiating or renegotiating your lease."

At a time when a typical dental practice can sell for a million dollars or more, there's a lot on the line. "When you're preparing to ask a buyer to pay top dollar for a practice, do you want the process to go smoothly or do you want to have complications?" asks Permack. "Time and time again we hear from professionals, financial

institutions and practice sale companies that practice sale transactions go uncompleted after months of work because the lease was not set up properly for transfer".

According to Ogunsola, if you know your lease is coming up for renewal or you're contemplating an acquisition down the road, the key is to start early. "This process can take between six and 18 months. You want to have adequate time to engage the right experts, who can evaluate your situation, pick the most important things in the lease and to go after those." The objective is to provide you with expert advice and put you and your practice in a position to create the best possible deal when it comes to signing on the

This is yet another example of how assembling the right team of experts, whether they be your bankers, tax planners or lease negotiators, can help you and your practice succeed at any stage of your career. As Ogunsola says, "By working with the right experts, dentists can help mitigate any unforeseen risks, improve the profitability of their practice and gain peace of mind, allowing them to focus more of their valuable time and effort on working with their patients."

Bottom Line: This article examines leasing issues most dentists face in the course of their careers.

The information contained in this article is for informational purposes only and is not intended to provide specific leasing, financial, business, tax, legal, investment or other advice to you, and should not be acted or relied upon in that regard without seeking the advice of a professional. Your advisor can help to ensure that your own circumstances have been properly considered and any action is taken on the latest

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Dean Yuhar

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The Need To Connect Online: Associates, Principals and the Hiring Process

by Greg Tanner



What is the first thing that comes to mind when considering the associate/principal hiring process? Overwhelmingly, I have found that the common answer to this question is frustration. Dentists are fortunate to have bucked the universal unemployment trend due to their specific training and demand – yet the hiring process has remained static, inconsistent, and inefficient, leading to frustration for both associates and principals.

Since the Internet reached mass adoption, hiring processes have been integrated into the ebb and flow of online environments. The Internet provides increased transparency and accountability, something every employee and employer should intrinsically desire.

It is only in relatively recent times that the Inter-

today) were in their infancy regarding how to access the possibilities of the Internet. However, in the last three years they have begun to navigate the Internet like veterans – from their phone, no less. Ericsson Mobility has shown that Internet traffic on mobile phones between 2011 and 2012 has doubled.

This is largely thanks to Moore's law. A term coined to describe the period of time – commonly acknowledged as 18 months – that it takes for computer processing to double its capacity. These exponential increases in processing speed translate into more efficient products, more user-friendly applications, and more dynamic online social

It might be hard to believe, but Facebook has been online for eight years, LinkedIn for ten. There are 4,600+ Canadian dentists with profiles on LinkedIn and countless more on Facebook. With the new generation of graduate dentists, in many instances, their social networks will hold more relevant content than they would ever fit on a resume;

or call him at 403.292.3979. net really began attracting a diverse mass audience. Ten years ago, my parents (67 and 65 years old,

but social networks are still maturing, and their content remains scattered and somewhat abstract. As social networks mature, perhaps the hiring process will be changed in ways we cannot yet conceptualize – but that future does not concern us now.

Right now, dentists – associates and principals alike – are evidently frustrated by the inefficiency and fragmentation of the hiring process. In the same ten years that saw my parents go from Internet infants to Google gurus, the avenues for dental recruitment have not changed. Job opportunities are living breathing things, and the dental industry's reliance on static print articles



and cluttered, fragmented websites lacks that dynamic user-friendly feel that Moore's law has otherwise pushed to the forefront.

You may be thinking, 'Well, there are headhunters that can be hired to find associates,' and there are, but headhunters are in the same boat as principals – they have no central associate source to rely upon. Again, the discovery process is fragmented and inefficient.

Principals and recruiters should be going to where the associates are. More and more associates are adopting an online presence, but there is no go-to place for them to create an identity and get noticed. Much like the job postings they are seeking, associates are scattered about, and opportunities are being missed.

Of course, by human nature, we all have our own professional and personal preferences and these differences can cause tension in associate/principal relationships. While individual differences will never be eliminated, aligning values and improving hiring processes will

mitigate the risk of incompatibility, and will always result in better business decisions.

In 1996, Bill Gates wrote an article on the Internet titled *Content is King*, explaining that content is the means by which money will be made using the Internet. Seventeen years later, we are absolutely inundated with content. Now and in the future, navigating that content is the name of the game; it can be said that *relevant content* is the ace.

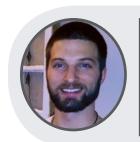
Big business is leveraging relevant content because, although hard to specifically quantify, the return on investment cannot be ignored. Recent data shows that 79 of the Fortune 100 companies are using multiple social media networks to connect with and parse their stakeholders. It follows that the relevant content revolution is inherently improving our hiring processes.

As a niche, associates and principals have unique needs such as confidentiality and anonymity. They deserve a service that addresses these unique needs and encourages the communication of relevant content. Associates should be able to search jobs *and* post their profile. Principals should be able to post jobs *and* access associate profiles.

A search of the online dental employment marketplace shows that there is more than one service, but they are difficult to navigate, and almost make it seem like the Internet is a fad. Associates want the perfect job; principals want the perfect hire; but print tradition and disorganized online attempts have suppressed the adoption of an effective central hub. The analogy that comes to mind here is plowing fields with horses: it has been getting the job done, but there is a better way. The above analyses led to the creation of www.dentalgigs.com, a site designed to be user-friendly, to facilitate relevant content, and to be that central hub.

Bottom Line: This article explores the catalyst behind our online presence, and how our online presence can be leveraged to improve the associate-principal hiring process.

1 Retrieved on: March 5, 2012; http://hootsuite.com/leadership



Greg Tanner

Greg Tanner is a co-founder of www.dentalgigs.com, a website designed to improve the hiring process between associate and principal dentists. He is an investor, entrepreneur, lifelong student, and outdoor enthusiast.

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Professionalism And Work Ethic: Have Times Changed?

by Anita Jupp



Has the work ethic changed so much over the years? Am I imagining that employees' work ethics have changed to the point that some just do not care about meeting their employers' expectations? I do know there are some wonderful committed employees who have employers that are focused and committed to hiring, training and setting company policies and protocols for them to follow.

With positive ethical and professional values, your dental office will rise above the offices you are competing with in the dental market. Professionalism starts with the conduct and quality of work of both the employer and employee and allows everyone in the office to respect patients and staff alike. Professionalism builds self esteem. For employees and employers, honesty and commitment to duties both delegated and performed increases the success of the business. In the end, everyone benefits for having a productive professional work ethic and attitude.

Why do these things happen?

There are offices where the business team go home at the end of the day when there is unfilled time in both the doctor's and hygienist's schedule. The schedule is totally related to the production and profitability of the practice. Some employees (whose job security is based on the viability of the schedule) miss this point.

Stress is reduced and profitability is increased by being pro-active with the schedule and planning ahead for a well scheduled week. In addition, tracking unscheduled treatments and having a system to call and follow up with patients is both professional and profitable.

Often a dental practice has a high accounts receivable and the office team does not seem to worry about it. This is a crucial mistake by staff. Where can anyone go and not pay for services rendered? Consider if owners of restaurants, hotels, grocery stores etc. did this – how long would they be able to pay their staff?

It is important for the business team to collect what is produced in the practice to eliminate financial stress. Calling in overdue accounts is a thankless job. It is easier to give patients an estimate of treatment required and explain payment is expected at each appointment unless there is a commitment to pay with an accepted credit card that is on file for the larger treatment plans.

Doctors have often asked me "Why does my dental hygienist refuse to take patients' photos when asked to and then tell me the photos will be taken next time they come in?" I suggest the dentist politely let the hygienist know that he/she needs the photos for a treatment plan for the patient, along with the x-rays, and he/she will be back in a few minutes when the photos have been taken.

Dentists have also commented that when they have a patient in the chair the assistant is up and down constantly for material or instruments that should be right there during the treatment, this can be very time consuming and frustrating for the dentist.

Another common concern is that inventory is unorganized and no one seems to be responsible for the unorganized lab in the office, the lack of a system for lab cases coming in and going out on time.

Finally, some employees must learn to take pride in the appearance of the practice by reducing the clutter, organizing the magazines in the greeting area, making sure the business desk is functional and professional.

How do we fix the above concerns? Leadership is imperative to encourage a good work ethics and professionalism.

Leadership

Leadership is essential for the success of any business, you may not win a popularity contest but employees need guidelines and share in the philosophy of the practice.

What can be done?

Professionalism is the way we talk, the way we dress, the way we act and interact with others, arriving on time for work and meetings, controlling emotions when things are not going well and being fair and consistent. Leadership can set the stage for professionalism within the office. Leadership is a skill to be learned like dentistry itself. Here are some factors.

- Hire team members who are caring and truly people oriented
- Train your team members so they can meet your expectations
- Communicate at morning meetings and monthly team meetings
- Schedule annual team evaluations
- Update and review office policies on an annual basis
- Set realistic practice goals with the team and have a vision of how you see your ideal practice
- Make customer service a priority for the entire team
- Each team member will benefit from a detailed job description in order of priority

To conclude, there are many things that could be done to get back on track if you feel your practice needs to be fine-tuned. A priority list of changes in an organized manner, with regular meetings is the best way to start. If there are people on your team that are not professional or have a poor work ethic, you need to communicate your concerns and see if they are willing to make changes. A professional caring team with an excellent work ethic is worth its weight in gold, why put up with anything less!

Bottom Line: This article suggests what can be done to improve the professionalism and work ethic in a dental practice.



Anita Jupp's

Anita Jupp's career in dentistry spans 30 years. She is respected internationally as a practice management expert having lectured in the UK, USA, Asia and Europe including the BDA, ADA, AGD and FDI. She has written four books and has developed a series of training tools on CD. Recently, Anita has helped dentists transition the difficulties of a practice sale or retirement planning and can be reached at 905.339.7843 or www.roicorp.com

How Do I Hemorrhage Thee... Let Me Count The Ways

Part I of II

by Mariana Bracic



If you are a typical dental practice owner, you pay out approximately one-third of all your collections toward staff compensation. Payroll is likely your single-biggest expense. And if you are like many dentists when they first contact us, your expenditures on payroll have some element of economic irrationality. Here is what we mean by that: significant amounts of your money are being paid out with no or inadequate business results. Increasingly over the last few years, we encounter dental practices that are actually hemorrhaging earnings through payroll.

In a well-run, maximally *profitable practice*, the dentist has attracted and retained high-quality employees who are worth every penny they are paid. An economically irrational approach to compensation will result in the opposite result: the

office will attract and retain low-performing staff who merely drift like dead wood. As a business owner myself who works hard to be a destination employer (MBC's superstar staff regularly tell us, for example, that we have spoiled them for any other law firm), I have distinct views on how to approach compensation to achieve the optimal business result. In my professional opinion, the goal is to pay as competitive an hourly rate as you possibly can (I like to pay well above market rates to attract and keep the very best people) and pay only when the employee is being productive. As human beings, we all generally respond to economic incentives and a wise business owner needs to consider that in approaching compensation policies.

There is a long list of ways in which a practice can waste enormous sums of money through payroll. In this first of a two-part series, we will address five of them, and the legal techniques we suggest to stop the bleeding.

Time records policy

We see a disturbing amount of time theft happening in the offices of dentists who first come to us from across the country. When we prepare contracts and policies (a Practice Protection Package TM) for them to help clean up their employment law affairs, what we generally recommend among the more important policies that we include is a Time Records Policy. The gist of the policy is to impress upon staff that they must be scrupulously careful and scrupulously honest in recording and reporting their time worked. A misrepresentation about hours worked, it is important to note, should be taken as the serious offence that it is: it is time theft. Having a clear policy on this has two important effects:

- (1) Practically, it deters the behaviour.
- (2) Legally, it improves the support that we can reasonably expect from a court in the event that we need to discipline or terminate an employee for a breach of the policy.

No unauthorized over-time

It is not uncommon for a disgruntled, former employee to make a claim to the Ministry of Labour for overtime pay that allegedly was not paid over many months (or years!). To protect against this, one of the standard terms in our Practice Protection PackageTM stipulates that employees are not permitted to work overtime without express prior authorization. Similarly, we like to cap the maximum amount of time prior to the first patient arrival, and after the last patient departure, (typically 15 minutes) for which the practice is willing to pay an employee. Many of our doctors report that, otherwise, an employee may come in far earlier, and stay far later, than she is reasonably required just because she "needs the money" despite the total lack of value to the practice.

Down time

We see the issue of paying for down time come up most frequently where a young dentist has taken over a practice from an older dentist. Typically, the older dentist was in a very different financial position and had been paying staff for down time for years. The young dentist usually has little to no savings, an enormous amount of debt, and cannot afford to pay staff for down time. Irrespective of whether the doctor can afford it or not, on principle, in my opinion it is intrinsically harmful to the practice to pay for down time as there is then no incentive for the employees to fill the schedule. If they are paid when the schedule is not full anyway, why

would they fill it? In the end, it is harmful to employees as well as they lose one of the most important elements of human happiness: the motivation to do satisfying work.

Office closing

A business that is optimally run should have the right to open and close the office according to business needs. We generally recommend that we contractually reserve for our doctors the right to close the office and/or send staff home whenever required (because the dentist is attending a course, because of patient cancellations, etc.). While there are certain constraints legally on our ability to do this, there is still an enormous amount that can be achieved.

Lay off policy

In the Great Recession, many dentists contacted us wishing to lay off some of their bloated and least productive staff. Those who already had well-drafted contracts in place were able to do so. This right is sometimes a life-saver to a business, as it permits the employer to send an employee home (in Ontario, for example, for up to 13 weeks) without notice or pay in lieu of notice. But it is important to understand that this right does not exist without a properly drafted contract. At common law (i.e. the law that prevails when your contracts with staff are unwritten) in Canada a lay off is a wrongful dismissal. (For a fuller discussion, and to see how dangerously misleading it can be to call your provincial Ministry of Labour, please see "The Law is an Ass" on the articles page of mbclegal.ca.)

In the next edition of *Profitable Practice*, we will finish this list of ways that payroll can hemorrhage your practice earnings, and the techniques that we suggest to stop the bleeding.

Bottom Line: This is the first part of a two part article that outlines five ways to stop wasting money on your practice's payroll.



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Mariana is proud of the dramatic benefits her completely unique, niche specialization (employment law + doctors) provides to her clients' wealth and happiness.

Feature Interview With Timothy A. Brown



Can you tell us how ROI Corporation Brokerage got going?

In 1948 at the age of 18, my father Roy Brown stepped into a career that would define his life for the next 55 years. He began as a salesman with the Associated Dentists Co-operative (ADC) and worked his way up to Manager and eventually President by 1973.

It was during his tenure with the ADC that Roy saw the need for the dentists of Canada to be given a return on their investment and to be rewarded for the many years of hard work spent building a practice. Prior to the 1970's a retiring dentist rarely found a purchaser; most equipment was destroyed, employees were dismissed and they were lucky if a nearby dentist would accept their patients.

In 1974, Roy formed ROI Management (later renamed ROI Corporation) to offer the dental profession a reliable service to document the fair market value of their practice and to ensure a confidential sale. Roy was the first in Canada to recognize the emerging market for dental practice sales and he was the first to obtain registration under the Real Estate and Business Brokers Act, specifically for dental practice brokerage. Roy pioneered the value of an appraisal.

The business always depended on family; my mother Joan was his partner from the beginning. My elder sister Lanee became involved in the 1980s and ended up selling practices for many years. I started working with my father at age 11

and now of course run the company. My father is now Chairman Emeritus and continues to be a cherished member of the ROI team.

Why did you become a publisher?

I am in a very fortunate role; I have an extensive network of associates across this country and as a result am a recipient of a huge amount of collective wisdom information that I have always felt should be known. To be honest I felt like a sponge that needed to be wrung out... and the only way to share my knowledge with everyone was to publish. So we started creating business advisory guides for dentists, then veterinarians and eye care professionals, with articles written by bankers, lawyers, accountants, marketers, and real estate brokers that provide common sense solutions to business problems. These individuals understand the cold, hard, common sense facts and have valuable tales of the real world to share with our readers.

The first magazine you created was for dentists; why did you choose to publish for veterinarians and then eye care professionals?

Quite honestly, of the many types of health care professions out there those of veterinarians and eye care professionals are the most similar to dental practices. We already understood their business systems and billing styles. It was a natural segway. The other major factor was that the practices of these professionals have substantial value that is documentable.

What do you enjoy most about being a publisher?

I went on a personal learning journey, over 20 years ago ...a very in-depth retreat. The purpose of it was for participants to answer the question: Why are you on this planet? It was a very tough, emotional exercise. In the end we had to look in the mirror and decide what's my purpose. The only thing I could come up with was to help others and to teach. A lot of people want to teach, to help others so it's not an uncommon discovery. I suppose I would have made a great university professor or teacher but my method is via books, magazines, and seminars because I have such extensive business experience in health care practice, valuation and sale. So this is how I help others.

What are your biggest challenges?

Finding great writers! A lot of people have great stories but they suffer from nerves or anxiety...if I put it in writing, people may judge me. I think a lot of people are very reluctant to be published. So we always need good quality content that is not fluff. I don't want to publish corporate speak, brochure speak or web site garbage. We create real advice and real stories. I think our content is quite exceptional. If you notice, many of the authors do have a financial motive – they would love to have readers call them and retain them for their expertise but their primary goal is to contribute solid, useful information, not sales pitches. So I repeat – finding solid content remains my biggest challenge!

How do you see the role of technology influencing the way you distribute your publications?

I would certainly like to see digital editions of all our magazines...we are killing trees. Clearly it's very costly to print, distribute and mail. However I just don't think the nature of the intended reader we're after is fully digital yet. Yes there are digital editions of countless publications – newspapers, magazines - I totally understand that digital editions of almost everything are readily available; we do have PDF versions of our magazines which could be even more interactive. But we have to be realistic; there are still many print health care publications because these professions are fairly late adaptors regarding technology. The intended reader is still a paper user and wants it this way. There is a business argument for staying paper-based; print ads provide more revenue than digital ads. As you know we do not have ads in our publications. Yes we have advertorials, and yes, some of our contributors are paying to be in our publications. It says so on our masthead. Would you

read magazine articles on your iPhone? I wouldn't. We feel our readers are more likely to read our publications in print.

What is your vision for the magazines now and in the future?

There are the three editions now; my plan is to see them all go national, including Quebec and see more professionals benefitting from the advice we offer. Health care professionals are woefully poorly trained in business and economics. The majority of practitioners are very successful but most of their success comes from trial and error and accidental learning. We see horrible mistakes made in the early years of a practice because a lot of what we talk about – the business side of a practice – is not taught in schools. Maybe a few of the mistakes we too often see could have been prevented if a publication like ours had existed.

What do you do for fun?

Boating and snowmobiling are my favourite hobbies. I love the lake.

What are three things people who know you don't know about you?

Umm...I work a lot more hours than most people think. I don't know how to say this elegantly but I really do give a damn. Some see me as a ruthless broker, a sharp guy who has been successful but this is a family business – our family name is on it. I have three nephews working in the building today. I do care, I really do. The life of a broker does not always reflect this. You sometimes have to be hard nosed, a negotiator, a tough advocate...you need to rattle some sabers. I am like the hired gun. But do I have a tremendous soft side. Everyone has a soft side but the role I have to play allows little opportunity to reveal this.

A third thing is I built this market single handedly. I have stuck my neck out in front of banks, accountants and dentists and fought and advocated fiercely for sweat equity value and founding generation value. My father started that but he could only get so far before he ran out of steam. I came along...younger and fiercer, and because I had a foundation to stand on that my father had started I really, really created a major market. Twenty years ago dental practices in Canada were worth between two and four billion dollars; today they are worth over \$15 billion...twenty years after I started advocating for the fair value of practices. Today the average practice is worth about a million dollars because they have been properly documented and fought for. Somebody has to fight the fight. There are so many forces that are trying

to drag values down; ten more people want to devalue a practice as opposed to one owner or broker trying to fight to get the value up. It's a huge battle to fight. Quite frankly I had the gumption to do it because I had my father's reputation to stand on. I would never have had the courage to start this industry but as soon as you step in and are second in line you can see the hard work has been done. The market was formed. I just had to expand it. So if you have the courage and are prepared to make predictions...many of which did not come true or were wrong, or my timing was wrong but



I still kept going, still sticking my neck out and making predictions. Today there is a thriving industry out there; we are by far the biggest player. There are many competitors out there making handsome incomes thanks to the efforts of my father, myself and my associates.

What are you most proud of at this stage of your career?

My whole team but in particular my two nephews in their late 20s...seeing them become very capable young businessmen. They are on a much faster learning curve than I was and are far more engaged in the industry than I was at their age. Every generation wants the next to do better; I accelerated the business after my father's initial push and these two are going to accelerate it faster than me.

In your opinion what role does luck play in achieving success?

Luck definitely plays a role. I feel that luck is probably responsible for about a third of what successful people achieve. Here's what I have seen through my own research: Whenever you read a book by a successful person – Bill Gates, Michael Dell or other corporate pioneers – when pressed about what was most responsi-

ble for their success, many will speak about luck, timing, hard work, a new invention...but in the end what most will say is that surrounding themselves with the right people is the ultimate success determinant. I don't think my situation is any different. I have surrounded myself with the best; front and centre is my wife Sandy who has been instrumental in helping me grow and maintain the business. Her human relations and recruiting skills are far superior to mine. We also work with the right people outside the business - including deans and registrars. Human resources, human resources, human resources are the top three things for business owners. That's what keeps us awake at night, what thrills us and what breaks our hearts. It's the people around you who create the success. Sometimes luck plays a part in who walks through your front door.

Is there anything else you want to add to our discussion?

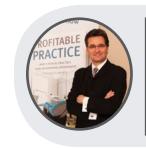
Some members of the health care sector have been pampered and catered to by the practice sales industry...the lunches, the free gifting, the accolades. Many professionals are put on a pedestal. It's no secret.

As a result many have very high expectations regarding service, expectations which are getting more difficult to meet as my business grows. Everyone is just trying to get along and trying to help; some health care professionals have to keep this in mind. I am very visible in the marketplace because of my speaking and writing and at times I am a little overwhelmed by the service needs of practitioners. I need them to trust and rely on my associates as well as myself and to read the magazine! Please visit profitable-practice.com!

What do you want to spend the majority of your time doing in the future?

I want to be a continuing education leader. I want to continue writing and speaking to meet the needs of many thousands of health care practitioners across this country.

Bottom Line: An interview with the recognized leader of the professional practice sales and appraisal industry and the publisher of Profitable Practice Magazine.



Timothy A. Brown

Timothy A. Brown is the president and CEO of ROI Corporation Brokerage and the publisher of *Profitable Practice Magazine*.

Dispelling The Myths Of Online Marketing

by David Rourke



Dentists love technology... they really do!
Recently a client spent a great deal of time excitedly walking me through all the things that he was able to do with CBT. While I generally had no idea what I was looking at I was blown away by what I was seeing. The catch is, dentists love technology when it comes to dentistry but quickly shy away when it comes to marketing. Those that embrace it often spend far too much money on *social media gurus* who produce a lot of exciting things that deliver poor results.

The reality is the online world has dramatically changed our world and will only continue to do so. Best Buy, the number one North American retailer in technology is struggling because they didn't adapt to the world of online retailing, at a time when they should be flourishing. All the major car companies are shifting advertising dollars away from cable television and moving them to YouTube, leaving NBC searching for the next Seinfeld that not enough people are going to watch.

The shift is inevitable and the trick is to be smart on how you leverage it. Here are thoughts on some of the key online marketing approaches that dentists are facing today.

Websites – Yes, you need to have one now. A typical new patient doesn't walk into an dental office and ask to talk to the dentist. Instead, they see the name on the door, go home and Google the name looking for office and staff pictures and information before they make their first call. The good news is patients have

a low expectation of a dentist's website. A clean, simple, friendly and welcoming website with photos goes a long way. Dentists should use a templated website with a designer to keep costs down but provide personal content – it costs little and is better than a fancy, complicated and overbuilt website. This level of website will suffice for the next 3–5 years. Right now a sophisticated, next level of website is like buying a flat screen TV in 2002. Very cool, but also very expensive.



Social Media – However you want to define it, this is a content driven, user based platform. In other words, if people aren't genuinely interested in what you have to say then you won't see any benefit from it. I'm not saying don't have a Facebook, Twitter or Pinterest account. I'm just saying don't spend any money on it, the ROI will be non-existent. That being said, if you have young staff in your practice this is a great way to leverage their knowledge and engage them in an important aspect of your business. Instead of paying a guru to run it for you, let your staff get involved. It will play a bigger role down the road and it doesn't hurt to get a head start, just don't spend money on it.

Videos – If you aren't camera shy this is an incredibly effective way to engage your patients and future patients. YouTube offers a completely free although uncontrolled means of hosting a video while companies such as Vimeo offer you the chance to share videos in a controlled manner. Either way, with your basic templated website you can now share videos of you speaking directly to anyone who chooses to view them. Take the message that you share over and over on a daily basis with your patients and put it online.

Search Engines – This is where more and more people go to find service professionals and there are two ways to approach it. The more aggressive marketer will

want to target their city or region. To do this, there is no simple solution if you are situated in a competitive urban area. Unfortunately, many dentists are paying the experts big bucks to keep them at the top of the listings. While effective, I would question the return on investment. What you can easily do and should do – is protect your name. Make sure that when someone Googles you, Dr. XXXXXXX, they find your web page and office map. I recently Googled a prominent dental lawyer as a quick way of finding his phone number. Imagine my surprise when Google identified his office as being the same as my office at ROI Corporation Brokerage. Long story made short is that a reference to this lawyer was on our website and Google drew a natural correlation – that is how it works.

The Mobile Revolution – This is the next step and one that most experts believe is going to happen faster and have more impact than the Internet revolution. I completely agree and believe that to stay ahead of the curve we need to consider how everything we do going forward interacts with a phone. What is exciting about this for the dental world is that it will shift the focus away from bringing in new patients to retaining the patients they have and engaging them better outside of the operatory. This is a fundamental shift that warrants its own discussion that I will follow up with in my next article. Full Contact Marketing who also writes in this magazine is a great source for Marketing advice.

Bottom Line: This article addresses head on the new marketing strategies using the Internet and various other forms of social and visual media.



David Rourke

David Rourke is a sales associate with ROI Corporation Brokerage, operating in the province of Ontario. He can be reached at david@roicorp.com or 647.519.5775.

Real Estate Investment – Some Thoughts

by Todd C. Slater



Hello everyone and welcome to this edition of *Profitable Practice*. For those of you that have been following my articles, you'll know I always try to focus on investment real estate advice that will benefit you for years to come. In this article, I would like to discuss the current state of the actual real estate market as it looks for spring 2013 – as well as mortgages and rates.

So let's get right to it. The market....it's horrible....or is it? If you want to compare today's real estate market to the last 10 years, then today's outlook is not good. But I think that is very unfair. The last 10 years were incredible and something that cannot be viewed as normal; other than for the last 10 years. The average increases year over year ranged from 7 to 10 per cent, which is remarkable. If you were a real estate investor with the proper leverage in place, your returns would have exceeded 30 to 40 per cent annually. But that was yesterday and yesteryear.

So what does the future hold?

The latest forecasts allow me to say I told you so. The national prediction is a 2 to 3 per cent increase with some of the major markets out performing those numbers. The "I told you so" comes from our Simple Seminar®. For those of you that have attended or have read my previous articles, you will always hear me say ... Be Conservative. Real estate markets can fluctuate and if you always use a 2 per cent market increase year over year in your forecasts, you will be safe.

Where will the markets end up?

We should see volume (the number of sales) cool off as they already have, but values should remain stable. The main thing that has remained consistent is mortgage rates. This in itself has made our strong market remain solid and it looks like it will remain so for the near future. I will get back to rates in a minute. Of course, the other factor which drives all markets is the first time home buyer. Real estate markets are driven by the first time buyer purchasing from the first time seller who is moving up to the next level, with that seller moving up as well. This sequence normally ends when families move into their final home for many years and then start the downsizing process, which we will see many baby boomers do in the years to come. The entire process is driven from the first time buyer, and this is where interest rates come into play.

Where will interest rates go?

If Mr. Flaherty had his choice, he would make them go up substantially. One of the large banks recently published their five-year rate at 2.99 per cent and Mr. Flaherty immediately went to the media and declared that he did not encourage competition in mortgage rates. Wow, I am not sure if he understands the difference between good and bad debt, but home ownership encourages responsibility, employment and forced savings. Over the last few years, the borrowing restrictions have tightened which makes sense. Canada never wants to follow the path of the United States in lending, but that said, the restrictions in place are definitely able to safeguard both the lenders and consumers. Ultimately it looks as if rates will remain low for the next 12 months, which allows borrowers an excellent opportunity to buy or invest in real estate. However, there is one rule that has recently become more apparent and this has directly affected real estate investors. The number of mortgages you may have or the dollar value of the mortgages has changed. Some lenders will limit



you to five mortgages or one million dollars in mortgage amount. Needless to say, this is making it difficult for investors to build real estate portfolios. The lenders want to move investors over to their commercial departments so they can get higher interest rates and have investors put more money down. I understand they are trying to limit their risks, but when professionals like you have strong income and good equity, this rule is ridiculous. We have found that one of the top five banks will allow more exposure – which is good news. If you are interested in whom that is, please feel free to contact me.

In closing, I would like to say that I feel the market is going to remain stable. This is actually the way it should be. Decent properties available that can sell in realistic time frames with affordable interest rates will stabilize a market. They say slow and steady wins the race and this market will produce winners for a long period of time. I would be happy to answer any questions you have, so feel free to contact me anytime. Until next time, take care and enjoy the spring!

Bottom Line: This article analyzes the current real estate market for investment purposes.



Todd C. Slater

Todd C. Slater is the President of The Simple Investor Real Estate Group Inc. Todd has been one of Canada's top realtors as well as host of Realty TV for 4 seasons. With his innovative approach to managed real estate investment properties, Todd educates and provides investors with solutions and opportunities for investment real estate. He can be reached at todd@thesimpleinvestor.com or visit www.thesimpleinvestor.com .

Positioning Your Practice Brand For Success

by Daniel Pisek



Here is a typical scenario.

A family has just moved into your local community and they are starting to establish their new lifestyle. They are looking for a new dentist, so they call your dental office and ask the big question:

"We noticed you and three other dental offices in our local area. What makes your dental office so special? And why should I choose you?"

Let's face it – with the competitive world that we live in today, it's all about creating a position for your brand identity that is **unique**. Whether you're a real estate agent, restaurant, or dental office, today's consumer has many options to choose from. What separates the average from the good, and the good from the great, is the overall **brand experience**.

For lunch yesterday, we went to one of our regular Asian fares. In past visits, while the food was always good, there was nothing great or **differentiating** happening here. You got a simple hello (sometimes), you ordered your meal, you paid, they prepared your meal right in front of you, they handed you your meal on a disposable plate and then you went to seat yourself and ate. *Pretty simple – it was all good*

But things were quite different yesterday. With a few simple changes, yesterday's lunch transformed from *Pretty simple – all good* to *Pretty simple – all VERY good!* This time, we were greeted with a warm "Hello. How are you today?" After ordering and paying for our meals, they brought our meals to our table, on real and quite eye catching plates, which greatly improved the presentation of the meals. While there was nothing different about the taste of the food, the taste of the entire lunch and brand experience was a superb upgrade.

Similarly, two of my good friends are realtors. While both are very successful, they each have very different approaches to their business. One focuses on selling beautiful homes to families, while the other deals exclusively with million dollar plus properties. Both are very talented, but the way they position their businesses in the super competitive world of real estate is very different.

The restaurant and realtor stories above are just two examples of the power of **brand positioning**. The way you present yourself and the way you conduct your business says a lot about the type of success you can achieve. It also speaks to the type of clientele you will work with.

The same logic applies in the world of dentistry today.

In today's marketplace, more and more of FCM's work with dental practices is starting with a real discussion about the positioning of the brand identity and how they will differentiate themselves from their competitors. After all, today's consumers expect dental offices to provide quality dentistry. It is the other little things that make you unique and strengthens your position for acquiring and retaining patients.

Last fall, we had the pleasure of working with Dr. Thomm and her successful dental practice in western Ontario. In a very competitive marketplace, Dr. Thomm was using her name as her practice identity. Our discussion with her confirmed that her existing practice name position would limit her opportunities for growth, as most prospective clients' first impression would be *smaller practice*. By rebranding with a new name *Great Lakes Dental*, she could appear larger, more ethnically diverse – and have associates working under her new brand identity. In partnership with Dr. Thomm, FCM created a game plan to rebrand, reposition and relaunch her dental practice.

After the rebrand was complete with a new brand identity and website, it was time to engage her existing patients. We recommended mailing a newsletter to all existing patients announcing the relaunch and position-

ing the practice for growth. Patients were very happy to hear from Dr. Thomm and the news of the rebrand. Dr. Thomm commented to me how this positive patient reaction greatly exceeded her expectation.

Dr. Thomm made a good marketing investment in her dental practice. Her patients are engaged and excited about the practice moving forward. Her practice was now also ready for the next phase of marketing with a focus on revenue building and new patient acquisition.

We are currently working with a client in the downtown core of Hamilton, Ontario. To be more competitive, the doctor realizes that he needs to relaunch and rebrand his twenty year old practice. With the dental office being located in one of the downtown business towers, our target audience is business professionals who work in the building and the local downtown core. Our first order of business was to understand this target audience and what was important to them in a dental visit. These insights would be used to establish our new brand identity, positioning strategy and patient experience. It is safe to say that the brand positioning for this downtown practice will be something very different from Dr. Thomm's family practice.

Stay tuned later this summer when we will unveil this next FCM client success story!

Whatever the business, people like to be associated with leaders or winners. Starbucks, Mercedes and Nike are just a few of the bigger name brands that embrace the power of **brand identity** and **brand positioning**. The first step to taking your practice to a higher level is to examine the current status of your brand identity and your positioning, and asking yourself how well you stack up and differentiate yourself against the competition. It's a question FCM asks clients each and every day.

Bottom Line: This article explains the importance of your brand experience, brand identity and brand positioning for improving your dental practice's revenue building and new patient acquisition.

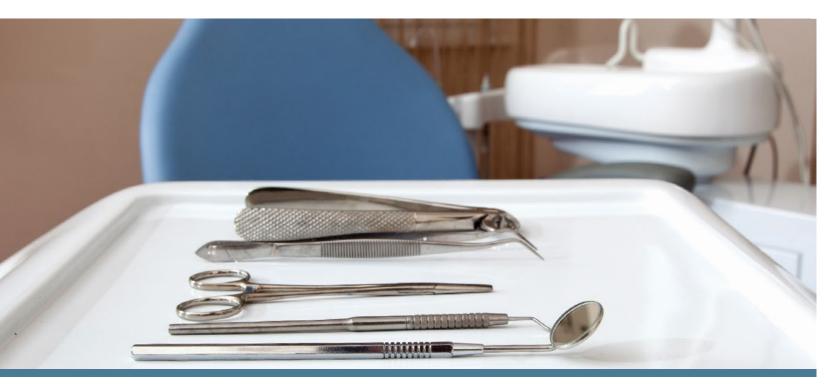


Daniel Pisek

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A Primer On Dental Office Design

by Dave Love



Dental offices vary widely. Some are luxurious while others are basic and dated. *Profitable Practice* asked Dave Love of Patterson to shed some light on what is current in dental office design.

1. What are the major considerations when designing a dental office to suit the needs of today's dentists?

The major consideration is to ensure that the office design primarily focuses on the function of dentistry while being appealing and attractive at the same time. It's critical the office be designed around the dentistry that is going to be performed and the specific needs of the dentist.

For example, some dentists prefer an open concept operatory that utilizes an island cabinet to separate operatories that can save space and money. Others prefer a closed operatory set-up where privacy is important. Prime examples are surgery rooms or dental offices focused on pediatric care.

The attractive/appeal factor can play an important role as it makes the office a warm and inviting place for patients and can attract new patients. It also plays an important role to the dentist and his/her staff, as it is another reason they look forward to going to work each day.

Think of a room in your home that was in need of a serious makeover and became more appealing and inviting after the renovation was completed. Patients perceive the look and feel of your dental office as a reflection of the dentistry that is performed.

The office design should facilitate work-flow and patient-flow. This requires you have a clear vision of what you routinely do and the type of setting you want to do it in. A dental dealer such as Patterson can help with your design needs and

consider working with an interior designer to help enhance the look and feel of your dental office.

Lastly, ensure that your office is compliant with all building codes and labour law requirements.

2. What are some common mistakes or bad planning that are evident in many older designed offices.

Older offices may not have made allowance for computers, monitors and other new technologies. I often see operatories with two or three foot pedals and countertops cluttered with numerous devices. It's certainly not appealing to a patient and it compromises functionality within the operatory. Many of the ancillary devices that clutter countertops in older offices are now housed in the dentist's and assistant's delivery units, as well as within cabinetry providing a more aesthetically pleasing and functional operatory.

The reception area often lacks an area where a private conversation can occur with a patient and the office staff. Whether consulting on future treatments or discussing benefit plans and treatment financing, it is important to include a defined space. Other common mistakes are: insufficient sterilization areas which are vulnerable to cross-contamination and a general lack of storage.

Dental offices (like many things in life) have progressed in design and can be made better and more efficient. Dentists often don't plan for future expansion, whether it's an extra operatory or even new equipment.

3. What future changes do you anticipate most offices will have to make or undergo in the foreseeable future?

Dental offices will continue to convert to 'paperless' saving time and money. The technology is proven and reliable. It's a better way to protect the most valuable asset in your practice – your patient charts. Use a service such as InfoSafe to safe guard your valuable data. It will also save 10 to 20 square feet of office space.

Technology will be integrated into cabinetry and delivery units so the operatory looks soothing and inviting and yet the dental equipment can be accessed easily when needed. A dentist or hygienist needs to access technology such as an intra-oral camera in the same manner as a hand piece. It's also important to make space allowance for technologies such as CEREC, Lasers, and Microscopes. If renovating a building or starting from scratch ensure that operatories have sufficient conduit. Offices will need to be properly connected for the use of computers, monitors, security cameras and televisions. And of course, Wi-Fi is a must.

Green technologies within the office such as oil-less compressors, dry vacuum systems, efficient HVAC systems, Energy Star appliances, energy efficient lighting, low voc paint, cabinets made from green materials, such as formaldehyde free resins, and air purification systems such as those from Surgically Clean Air.

Patients appreciate that your office is up-to-date, and they feel more comfortable and confident in the dental care they receive. Update your office at least every five years. Making an investment in your dental practice is one of the best financial decisions you can make.

4. In recent years we have seen the emergence of dental offices that resemble the setting and feel of an expensive spa with a decor that enhances the feeling of comfort, luxury and decadent exclusivity.

What are your comments on this development?

People like to be pampered. The spa experience has grown from a hot towel at the end of the patient's procedure, to a service like a facial, manicure, pedicure, massage therapy and in certain provinces Botox and Restylane, etc.

A dental spa setting means more than pampering a patient, it can also be used to help relax a patient as an estimated 10–15 per cent of people deal with a fear of going to the dentist. The decor, interior design and the equipment used play an important element in this type of office.

Dental Spa offices are typically located in high-end areas that want to attract a demographic that enjoys being pampered. It's another way to differentiate your dental practice from the competition, in a competitive marketplace.

Bottom Line: This interview contains interesting and insightful comments about current dental office design.



Dave Love

Dave Love is a Territory Representative with Patterson Dental Canada and has twenty-five years of professional client service experience.

He can be reached at 905.598.1521 or dave.love@pattersondental.ca



- Polishes silver coffee servers or jewelry (removes tarnish) don't use on pearls or opal, though.
- Fills nail holes in the wall (white toothpaste, of course).
- Adheres posters to walls without damage.
- Adheres bows to baby's hair (gel toothpaste); it washes out and it doesn't pull out the baby's hair.
- Takes the sting and itch out of bug bites with just a dab.
- Removes crayon from walls rub white toothpaste on marks with damp cloth, then rinse cloth and remove and residue.
- Cleans under fingernails with dab on a nail brush or old toothbrush.
- Cleans running shoes (white toothpaste).
- Gives a mirror finish when grinding steel or aluminum.
- Clears up a zit with a dab at night
- Brushes your teeth (as a last resort)
 Source: Harold O. Enoch, DMD



Could Coconut Oil Save Your Smile?

September 7th, 2012

Recent research shows that coconut oil may have more than

just taste benefits. According to a study from the Athlone Institute of Technology in Ireland, coconut oil's antibacterial properties could spell good news for your smile and help you avoid cavities.

A team of researchers is presenting the research at the Society for General Microbiology's Autumn Conference this year. They looked at what effect coconut oil had on the mouth when it came into contact with certain enzymes used in the digestive process. The results showed that the coconut oil reduced the growth of several strains of the Streptococcus bacteria, including a strain involved in tooth decay.

Researchers will now work to discover more about the interaction between enzyme-modified coconut oil and bacteria. Research has also shown a possible positive effect of the coconut oil on yeast bacteria, which could make it a good treatment for thrush (oral yeast infection).

These are just preliminary findings. However, this could lead to the development of oral health products that use coconut oil to help fight cavities.

Source: http://bestdentistnews.com/

Not Your Average Day At The Office

Editor's Note: It is normally against our policy to report anonymously on information or events in the dental industry. In this case we do so as a result of the dentist's request and an ongoing police investigation.

Not long ago a dentist in southwestern Ontario had an unusual day at the office. The town in which this dentist practices is not known for criminal activity and needless to say it was a surprise to discover that one of his/her patients was on a local police wanted list. Coincidentally, the wanted patient was due for an office appointment.

This dentist's office staff informed the police of the day and time of the appointment. The dentist insisted that the arrest not be made in the office and that he be allowed to provide the scheduled dental care. As planned, the arrest was to take place outside of the office in a crowded public area.

Two undercover officers made the arrest but only after the patient in question made an attempt to run and resist with much yelling and confusion going on in the background.

The dentist in this case prefers to be in the back-ground, tries to avoid controversy and purposely located his/her practice in a sleepy, sedate setting. A normal, mundane day at the office was dramatically altered with the help of the dentist's staff who felt compelled to do their civic duty.

World poverty is shrinking rapidly, new index reveals

UN development report uses nutrition and education as yardsticks as well as income

Editor's Note: Here is some good news about world poverty as reported in an article by Tracy Mc Veigh of The Observer, Sunday March 17, 2013. For the complete article go to http://observer.guardian.co.uk Here are some highlights:

- An Oxford University poverty and human development initiative predicts that countries amongst the most impoverished in the world could see acute poverty eradicated within 20 years if they continue at present rates
- This positive prediction is a result of national and international aid that focused investment in schools, health clinics, housing, infrastructure and improved access to water... as well as increased trade
- Rwanda, Nepal and Bangldesh are listed as star performer nations along with Ghana, Tanzania, Cambodia and Bolivia.
- New methods/indicators have been used to more accurately define and measure the nature of poverty (see article)*.

Filling Good

A little boy was taken to the dentist. It was discovered that he had a cavity that would have to be filled. "Now, young man," asked the dentist, "what kind of filling would you like for that tooth?"

"Chocolate, please," replied the youngster.
Source as cited on http://www.dentalchoice.ca/

Quote Of Note

I always wanted to be a dentist from the time I was in high school, and I was accepted to dental school in the spring of 1972. I was planning to go, but after the Olympics there were other opportunities.

Mark Spitz

Source: http://www.brainyquote.com/quotes/keywords/dentist.html#zAli-HZMepuf8suHP.99



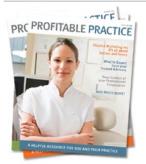
The Tooth Fairy Would Have Been Broke

Brother Giovanni Batista Orsenigo of the Ospedale Fatebennefratelli, Rome, a monk who was also a dentist, kept all the teeth he extracted during the time he exercised his profession from 1868 to 1904. In 1903, the number was counted and found to be 2,000,744 teeth, indicating an average of 185 teeth, or nearly six total extractions a day!

Source as cited on http://www.dentalchoice.ca/

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^{*} Source: http://observer.guardian.co.uk