



HR 411

PRIOR to the Hire



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For more about
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full bio on page 5

Some lessons I've learned in life have caught me by complete surprise. Just when I thought I knew something well, I've come to realize I didn't know it at all. Those are the kinds of lessons that seem to hit you right between the eyes and, yes — those are the lessons that stick.

Here's a memorable one: Fresh out of college I was working for a dentist who loved his music as much as he loved dentistry. The doctor would often plan the music to complement our schedule for the day. The twenty-somethings in the office groaned at some selections, but I surprised myself to find that soon I was looking forward to Broadway & Motion Picture Soundtrack theme days. It was really fun to sing and dance our way through *West Side Story*, *Cabaret* or *Oklahoma...* really!

My favorite days by far were the days when we'd have a patient scheduled for major restorative care, because that almost always meant we'd be listening to the soundtrack from *A Clockwork Orange*. We began bright and early with Beethoven's *Ninth Symphony* and Rossini's *William Tell Overture*. It's

amazing how focused you are with this music setting the pace. *Pomp and Circumstance* would take us through the second phase of a procedure and we'd finish up with the whimsical Gene Kelly and *Singin' in the Rain*. I absolutely fell in love with the soundtrack from *A Clockwork Orange!*

I had not read the book or seen the movie, so I was thrilled one day to see to see it was the midnight movie at a local theater. I even invited my mom to come along with me since I knew she'd love the music too! We arrived at the movie theater with great expectations for a fun show and instead were horrified to see the violence that unfolded before us. Wikipedia describes *A Clockwork Orange* as a film that "chronicles the horrific crime spree of the main character's gang, his capture, and attempted

rehabilitation via controversial psychological conditioning.” I remember thinking there must be a redeeming plot twist since the soundtrack held such promise, but no, it was brutal, disturbing and truly the stuff of nightmares.

My expectations about this movie were based solely on having heard the soundtrack. While the soundtrack was amazing, my logic was faulty. I thought beautiful, happy music = wonderful movie. I couldn't have been more wrong. Had I looked any further than my impression of what I had heard, had I reviewed the plot, read the reviews, seen the trailer or spoken with someone more familiar, I could have had the advantage of a three-dimensional preview. Instead, I heard what I wanted to hear. I regretted that decision.

SO WHAT DOES THIS HAVE TO DO WITH PRACTICE LEADERSHIP?

You might be thinking, “Who does that? Why would you judge a movie strictly by the music you heard?” Unfortunately, I don't think my response was an unusual one and I've spoken with enough doctors and practice administrators to know that for sure. Premature decisions based on incomplete research and faulty assumptions happen every day. After all, we're all busy and we're human. The resulting consequences are expensive; they create stress, turnover, low morale and high drama.

One area of practice leadership that often proves challenging is hiring new team members. What's behind all the bad hires? A 2012 Career Builder survey reported 40% of the time managers say it was pressure to fill a job quickly. 22% say they didn't know enough about the candidate prior to hiring, 9% didn't check references and 25% don't know why things turned out badly. Studies also show that hiring managers typically make their decisions within ten minutes of meeting an applicant and spend the rest of the interview looking for evidence to support that opinion. Decisions are being made based on first impressions rather than objectively evaluating each candidate. Maintaining objectivity is harder than you might think because we each bring our own bias and life experience with us and that sets us up to prejudge.

There are typically six common biases that create bad hires. Let's take a closer look to see if you can recognize these behaviors in yourself or your hiring process:

Stereotyping: forming a generalized opinion about how people will think, act, or respond, i.e.: Judging applicants by their physical characteristics such as hair color, body type, or gender, for example, thinking men wouldn't do well working in the front office or being the only male member of a team.

Inconsistent Questions: Asking different questions of different applicants, i.e.: if you're not grading on responses to the same questions, how can you truly

make comparisons? You must be able to do some quantitative analysis.

First Impression Error: Allowing a snap judgment to cloud the entire interview, i.e.: thinking poorly of an applicant because of the school they attended or because you don't like their fashion sense.

Halo / Horn Effect: Allowing one strong or weak point to overshadow everything else, i.e.: learning that an applicant is from your hometown or school or conversely, has a tattoo or piercing visible. Often this occurs based on an answer to one question that is different than you expected.

Contrast Effect: Believing good candidates who interview right after weak candidates are stronger by comparison than they truly are. Let's face it, after a few disappointing interviews, it's easy for an average applicant to make a big impression.

Cultural Noise: Failure to recognize when an applicant is being politically correct and/or telling you what you want to hear rather than the actual truth. Don't take answers at face value, dig deeper. One of the best replies to a first response is simply “tell me more.” Get very comfortable with a silent pause... give the applicant time to think and chances are you will gain valuable insight. Also be certain to keep your eyes on the candidate as they answer your questions, otherwise you risk missing the visual, the body language clues that they are making things up as they go along.

HERE'S THE REAL CHALLENGE

Most dental practices are interviewing at a time when they are short-handed and feeling pressure to bring the team back up to full strength. It's easy then to understand how the hiring doctor or manager would want to expedite the process and hire quickly and yet that is precisely what you should avoid doing. It's far better to ask for the team's support and explain that you are committed to hiring the 'right' person who will be an asset and make the team stronger. Your team should appreciate that commitment and pitch in to give you the time you need to make a great hire.

If you settle for 'good enough' you soon find out that good enough simply isn't. A poor hiring decision will lead to stress, drama, disappointment, frustration and eventually turnover. Unfortunately, sometimes it's the best employees who choose to leave. This is precisely the kind of lesson that smacks right into you; it's a hard reality when you realize that you've waited too long to remove a deficient member of the team and it's cost you big time.

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It's very sobering to read a recent Gallup poll that reports 46% of new hires fail within the first eighteen months and 71% of people think about quitting their job every day! 73% of the doctors I interviewed listed 'keeping the team enthusiastically engaged and focused' as their top management issue. This is a wake-up call for employers and especially for dentists. Given the nature of dentistry, your people are without a doubt your best competitive advantage. It's critical that we raise the bar on both recruitment practices and team development to attract, develop and retain the best people.

WHAT'S A HIRING SYSTEM LOOK LIKE?

1. First and foremost, you must know the law and follow it or you risk serious consequences. You should know what you can and cannot legally ask an applicant. You must also be aware of legal guidelines regarding reference checking, background checks, credit checks, and social media implications. Here is a partial list of ten employment law acronyms. How many of these Employment Law Acronyms are you confident you recognize and understand?

**FLSA DOL PDA EPA ADEA
GINA NLRA FMLA ADA IRCA**

Hints:

DOL is not distal, occlusal, lingual

PDA is not public display of affection

EPA is not the Environmental Protection Agency

ADA is not the American Dental Association

Don't worry that you need to be an HR expert; you don't. But you do should have an HR partner who can guide you regarding the laws. Ignorance of the law is not an excuse.

2. Your system should include a series of score-able, objective, behavioral-based interview guides that will provide insight into each candidate's potential for success. This should include a telephone interview guide, a personal interview guide, and a written interview guide.

Asking questions is the easy part; determining the best questions to ask is the challenge because your goal is to uncover relevant, useable information from the candidate. Your interview is not simply a conversation, it is the first phase of a measurement of your candidate – it's basically data collection.

The second phase is data analysis. If you haven't used the same tool for each candidate, how can you confidently make a comparison? Your system must be your best predictive modeling tool. If you're not measuring, you're guessing. Your bias will get in the way of your objectivity much like how my bias for the amazing music from the *A Clockwork Orange* soundtrack colored my expectations for the actual movie plot.

3. Establish a process that allows you to evaluate and hire for talent, not just for skill. This begins with your classified ad. You want to attract candidates who compliment your practice vision and culture. Create an ad to appeal to the top 20% rather than matching all the vanilla listings that are out there. Lay down a challenge so the cream of the crop can set themselves apart from the rest so you can invest your valuable time with the best candidates. Generally speaking, about 20% of applicants are worthy of your review time.

Utilize hiring assessments that can give you valuable insight into a candidate's behavioral tendencies, emotional intelligence levels, stress level, energy level, pro-activity and core competencies such as preparation, issue discovery, reliability and work ethic. Be certain your assessment has been validated and is legal for hiring.

Conduct background checks and reference checks that provide solid evidence of a candidate's past performance, since it is the best predictor of future performance. Know when and how to safely take advantage of social media in this process.

4. Provide a realistic job preview to your serious candidates. The candidate is interviewing you and trying you on for size just as you are doing the same to evaluate their fit for your practice. Involve your team in the process and once hired, be sure to assign a mentor to the new hire to support them in the training and orientation process.

Send a strong leadership message by having a current job description ready for review prior to hiring and a formal training and orientation program ready for the new hire on day one. This should include a training schedule, as well as time to review your Policy & Procedures Manual and to get all the essential paperwork in place. Baptism by fire is not a good strategy for onboarding a new team member.

TRUST, BUT VERIFY

We've all learned the hard way that things are not always as they seem. It's time to take a different approach. Admittedly, just like movies, hiring will always be more of an art than a science. However, you can stack the deck in your favor by doing your due diligence, while also trusting your instincts. A systematic, objective and quantitative approach to hiring allows the doctor and team to peel back the layers and see the depth and scope of talent and potential prior to the hire. This method provides a much more three-dimensional preview of candidates to support your goal of making the best hire the first time. It also goes a long way to help you avoid nightmares once the picture is clearly in focus. ✨

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