

The Journal of the Michigan Dental Association

Volume 106 | Number 9

Article 6

9-1-2024

A Problem-Solving Tool You Can Use

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Recommended Citation

Dziurgot, Michelle C. DDS (2024) "A Problem-Solving Tool You Can Use," *The Journal of the Michigan Dental Association*: Vol. 106: No. 9, Article 6.

Available at: <https://commons.ada.org/journalmichigandentalassociation/vol106/iss9/6>

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By Michelle C. Dziurgot, DDS
Editor-in-chief

A Problem-Solving Tool You Can Use

At our MDA summer Board meeting we had a lesson in WOOP — a new tool to aid us in problem-solving. It's an evidence-based method of figuring out how to get to the end goal by working through barriers.

Whoomp! (*There It Is*). Does this song title bring back memories from the '90s? I was a second-year student in dental school when this song rocked the airwaves. It helped motivate me during long hours studying and carving teeth. Such hard days at the time, but looking back it was the best of times. No worries except taking care of myself and getting the most out of my dental education.

Fast forward 31 years and I am responsible for 3,000 patients and a dental team of eight — yes, I have grown my team due to the summer months providing high school dental aides interested in the medical/dental field. Hallelujah. But with responsibility comes problems — some big, some small, but all need to be addressed to have less stress.

At our MDA summer Board meeting in June, we had a lesson in WOOP — a new tool to aid us in problem-solving — from our own speaker of the MDA House, Dr. Deb Peters, and our current MDA president, Dr. Todd Christy. WOOP is an acronym standing for *Wish*, *Outcome*, *Obstacle*, and *Plan*. It is an evidence-based method of figuring out how to get to the end goal by working through barriers.

I'll showcase a WOOP work-through I had this past week: I'm still low on hygienists in my practice. Patients are feeling the pinch. If they call to reschedule their upcoming appointment, my current full-time hygienist is booked into January 2025 for openings. So, I sat down with her to use WOOP to devise a plan for our hygiene scheduling issue.

- Our *Wish* is to make hygiene rescheduling available within one month, not three.
- Our *Outcome* is to educate patients on their roles in keeping their scheduled appointments in the first place.
- An *Obstacle* is those patients who are FANS (failing appointment, no show). To overcome this obstacle, we decided they would not be offered the one-month-out openings we would be creating. These “bad apples” would still be placed in the three-month out openings. If we are to open early, stay later, and open on off days this summer, we agreed “good apples” would be offered these slots. Meanwhile, we'll educate the “bad apples” that they're not only hurting themselves, but other patients on the call list. The “Bad apples” holding time in the schedule, who are habitually rescheduling or no-showing, will now be questioned as to why they are putting their health care in jeopardy. Education is key in their health care.
- Our *Plan* will come to fruition by getting the entire team on board, both the front-office staff who answer the cancellation, and the back-office staff who scheduled the original appointment.

Our WOOP taught us to educate our patients to provide us full schedules of “good apples,” so we can dance at our morning huddles.

“Whoomp! (*There It Is*)” with gusto! ●