

Year I, v.1 2021. | submission: 2/24/2021 | accepted: 2/26/2021 | publication: 2/28/2021

Excellence in the Management of Large Dental Clinics: An Integrated Study on Operational Efficiency, Health Compliance and Economic Sustainability

Excellence in the Management of Large Dental Clinics: An Integrated Study on Operational Efficiency, Sanitary Compliance, and Economic Sustainability

Author: Leonardo Dornelas Alves

Graduated in Dentistry from the University Center of Northern São Paulo
Postgraduate in Forensic Dentistry, from São Leopoldo Mandic College

### **SUMMARY**

The pursuit of excellence in the management of large dental clinics has become increasingly relevant given the complexity of the sector's administrative, regulatory, and financial processes. This article comprehensively analyzes three fundamental pillars of the sustainability of these institutions: operational efficiency, health compliance, and economic sustainability. Through a literature review and comparative analysis of recent studies, we sought to identify the critical success factors and the main challenges faced by managers and professionals in the field. Evidence indicates that the adoption of good clinical governance practices, combined with technological innovation and strict compliance with health regulations, boosts financial results and improves the quality of care provided. The study also highlights the importance of ongoing training for managers and the implementation of clear and measurable performance indicators. The text offers a theoretical and practical contribution to researchers, professionals, and administrators seeking to improve management models in the Brazilian dental sector.

**Keywords:** Health management; Dental clinics; Operational efficiency; Health compliance; Economic sustainability.

#### **ABSTRACT**

The pursuit of excellence in managing large dental clinics has become increasingly relevant given the complexity of administrative, regulatory, and financial processes in the sector. This article integrates three fundamental pillars for the sustainability of such institutions: operational efficiency, sanitary compliance, and economic sustainability. Through a literature review and

comparative analysis of recent studies, the research identifies critical success factors and major challenges faced by managers and professionals. Evidence indicates that the adoption of good clinical governance practices, combined with technological innovation and strict adherence to sanitary standards, enhances financial outcomes and improves the quality of care. The study also highlights the importance of continuous management training and the implementation of clear and measurable performance indicators. This work offers both theoretical and practical contributions to researchers, professionals, and administrators aiming to improve management models in the Brazilian dental sector.

**Keywords:** Health management; Dental clinics; Operational efficiency; Health compliance; Economic sustainability.

### 1. INTRODUCTION

The expansion of dental services in Brazil has required the adoption of increasingly sophisticated management models, especially in large clinics, which operate with complex structures and high volumes of patients. According to the Federal Council of Dentistry (2020), there has been significant growth in clinic openings over the last ten years, reflecting the growing demand for specialized dental services. This scenario poses significant challenges for managers, who must balance operational efficiency, compliance with health regulations, and economic sustainability.

Operational efficiency stands out as one of the key indicators of success in managing these clinics. According to Porter and Lee (2013), value creation in healthcare is directly related to the institutions' ability to provide high-quality services at reduced costs. In the context of dental clinics, this implies efficient management of teams, clinical time, materials, and infrastructure, ensuring quality patient care.

Another essential factor is compliance with health and regulatory standards. The Brazilian Health Regulatory Agency (ANVISA) establishes strict criteria for the operation of dental clinics, covering everything from infection control to proper waste disposal. Studies such as that by Silva et al. (2019) show that compliance with these requirements not only avoids legal sanctions but also directly impacts the safety of patients and professionals involved.

Economic sustainability, in turn, requires strategic financial management and the ability to adapt to market fluctuations. Large clinics must deal with high fixed costs and constant investments in technology, marketing, and professional training.

As noted by Kaplan and Norton (2004), management guided by financial indicators





and non-financial can generate competitive advantage and ensure the sustainability of businesses in the health sector.

The integration of these three pillars—operational efficiency, health compliance, and economic sustainability—is what defines excellence in dental management. This research proposes a systemic approach that considers the interdependence between these factors, offering an analytical model that can be applied to similar institutions.

Through a literature review and analysis of case studies, we seek to extract lessons applicable to the contemporary Brazilian context.

Additionally, it is important to emphasize that excellence in clinical management is also related to the humanization of care, ongoing professional training, and the use of digital technologies, such as electronic medical records and online scheduling systems. These tools have proven effective in reducing operational costs and increasing patient satisfaction (Carvalho et al., 2020). Therefore, the pursuit of excellence is not limited to numbers and compliance, but also to building an ethical, safe, and efficient environment.

This article, therefore, is structured into seven sections in addition to this introduction. The next section presents the conceptual foundations of strategic healthcare management applied to dental clinics. Next, operational efficiency is explored as a competitive differentiator. The third section addresses health compliance as an ethical and legal imperative. The fourth section addresses economic sustainability and its challenges. The fifth section presents case studies of clinics that have achieved management excellence. The sixth section discusses future prospects and recommendations. Finally, the conclusion summarizes the main findings and proposes paths for continuous improvement of management in the sector.

# 2. FUNDAMENTALS OF STRATEGIC MANAGEMENT IN HEALTH APPLIED TO DENTISTRY

Strategic management in healthcare, while traditionally associated with hospitals and large hospital networks, has proven equally essential in the context of large-scale dental clinics. These institutions share with hospitals the organizational complexity, the need to comply with rigorous regulatory standards, and the continuous pursuit of efficiency and sustainability. According to Longo and Vieira (2017), strategic management in healthcare presupposes alignment between the institutional mission, available resources, and the needs of the population served.

In the case of dental clinics, this alignment must include service planning, efficient use of supplies, and people management, with a focus on measurable clinical and administrative results.



Beyond traditional management practices, strategic management in dentistry involves the application of tools and methodologies adapted to the healthcare sector. The Balanced Model

The Scorecard (BSC), proposed by Kaplan and Norton (2004), is widely used to structure strategic planning in healthcare services, enabling dental clinics to align their financial, operational, organizational learning, and customer satisfaction goals. Adopting the BSC in clinics allows managers to visualize integrated indicators, promote corrective actions, and continuously monitor performance, which is essential in structures with multiple specialties and high patient volumes.

Another essential component of strategic management is the analysis of the external and internal environment, using methodologies such as the SWOT matrix (Strengths, Weaknesses, Opportunities, Threats).

This approach allows us to identify internal strengths and weaknesses, as well as market opportunities and threats. According to studies by Mintzberg et al. (2003), organizations that systematically monitor their environments operate with greater agility in the face of change and gain a sustainable competitive advantage. In large dental clinics, this analysis can inform decisions about expansion, mergers, technology investments, or changes to the service portfolio.

Regarding people management, one of the pillars of organizational strategy in healthcare, the need for skilled clinical leaders who are aware of their role as agents of change stands out. According to Drucker (2007), the effectiveness of any organization depends fundamentally on its managers. In dental clinics, this translates into valuing skills such as communication, situational leadership, emotional intelligence, and evidence-based decision-making. Furthermore, fostering team engagement and an organizational culture focused on excellence is essential to achieving sustainable strategic objectives.

Clinical governance has emerged as a key concept in contemporary strategic management. It is a set of processes and structures used to ensure that clinical practice is aligned with institutional objectives and that the care provided meets expected ethical, legal, and technical standards. According to Scally and Donaldson (1998), clinical governance seeks to integrate quality, safety, performance, and transparency in healthcare services. In large dental clinics, this involves defining clinical protocols, internal audits, ongoing professional training, and effective communication channels between administrative and technical departments.

Furthermore, strategic planning should consider patient experience management as a competitive differentiator. Studies by Berry et al. (2006) indicate that the perception of quality in healthcare services is influenced by factors such as hospitality, clear communication, wait times, and problem-solving. Dentistry, being a field strongly based on interpersonal relationships, requires special attention to the patient journey from first contact to post-care. Clinics that structure their workflows based on experience indicators are more likely to build customer loyalty and stand out in highly competitive markets.

Finally, innovation must be considered an essential component of healthcare strategy. Effective strategic management fosters environments conducive to experimentation and the adoption of technologies that optimize clinical and administrative work. According to Christensen et al. (2009), disruptive innovation in healthcare occurs when new technologies or business models make services more accessible, efficient, and patient-centered. In the dental context, the adoption of digital medical record systems, artificial intelligence for triage, scheduling apps, and telehealth solutions represent examples of how strategic management can be a catalyst for transformation and excellence.

# 3. OPERATIONAL EFFICIENCY AS A COMPETITIVE DIFFERENTIATOR IN LARGE DENTAL CLINICS

Operational efficiency represents one of the fundamental pillars for the sustainability and growth of large dental clinics, especially in a scenario of intense competition and constant pressure for quality services. Unlike small practices, larger clinics face challenges related to process standardization, optimization of human and technological resources, and clinical time management. According to Porter (2010), operational efficiency is defined as the ability to perform similar activities better than competitors. In the dental sector, this means implementing lean processes, reducing waste, and ensuring that professionals can focus on clinical care, minimizing interruptions caused by administrative or logistical failures.

The adoption of Lean Healthcare-based methodologies has been gaining ground in dental clinics seeking operational excellence. Lean, originally conceived for the Japanese automotive industry, has been widely adapted to healthcare settings, with an emphasis on waste elimination and continuous improvement. According to Womack and Jones (2005), the lean principles—value, value stream, continuous flow, pull system, and perfection—can be applied to any organization. In the context of dental clinics, this translates into reorganizing patient flows, controlling dental material inventories, using checklists, and standardizing clinical and administrative procedures.

A study by Bertani et al. (2018), which evaluated the application of Lean in multidisciplinary clinics in Brazil, found significant improvements in waiting times, room utilization rates, and reduced rework. These operational gains not only increased productivity but also raised patient satisfaction levels. Applied to dentistry, Lean allows, for example, the intelligent resizing of schedules, centralization of purchasing, clear definition of responsibilities, and reduction of communication gaps between reception, nursing, and clinical professionals. Efficiency thus becomes a factor that generates value for the patient and a competitive advantage over less structured clinics.



Technology plays a central role in the pursuit of operational efficiency. Integrated clinical management systems (ERP – Enterprise Resource Planning) enable automated control of

scheduling, medical records, inventory, and billing, reducing human error and optimizing staff time. According to Corrêa and Gianesi (2016), the strategic use of information technology allows managers greater analytical capacity and better decision-making. Furthermore, solutions such as electronic medical records, scheduling apps, and automatic appointment confirmation systems help reduce no-shows and cancellations, improve patient communication, and increase clinic occupancy rates, making operations more profitable.

Another crucial aspect of efficiency is related to people management. Well-trained, motivated, and organized clinical and administrative teams exhibit higher productivity and lower error rates. Implementing ongoing training, standardized care protocols, and performance-based incentive systems can increase the overall efficiency of an operation. According to Chiavenato (2014), an organization's productivity is directly linked to the motivation and qualifications of its employees. In large clinics, where multiple professionals in different specialties are frequently involved, coordinated schedules, clear assignments, and good internal communication are crucial for the smooth functioning of the structure.

Furthermore, efficiency should be measured through key performance indicators (KPIs), which allow management to continuously monitor operational results. Indicators such as dental chair occupancy rate, average service time, clinical rework rate, percentage of noshows and cancellations, and average cost per procedure provide objective data for strategic decision-making. According to Parmenter (2010), well-defined KPIs, monitored in real time, facilitate agile management and foster a culture of continuous improvement. In large clinics, KPI-based management can help identify bottlenecks, adjust resources, and increase operational competitiveness.

Finally, operational efficiency in dental clinics must be aligned with the patient experience, preventing process standardization and automation from compromising the quality of human relationships. According to studies by Pine and Gilmore (1999), the experience economy values emotional engagement and personalized care as decisive factors in customer loyalty. Thus, efficiency should be understood as a way to free up time and resources so professionals can focus on clinical care and building a positive bond with patients. Clinics that successfully combine efficiency with empathy have a greater chance of standing out in an increasingly demanding market sensitive to perceived value.

# 4. HEALTH COMPLIANCE AS AN ETHICAL AND LEGAL PILLAR IN THE MANAGEMENT OF LARGE DENTAL CLINICS

6

Sanitary compliance in dental clinics is not only a legal requirement, but an ethical imperative that reflects the institutional commitment to the safety of patients, professionals, and the community at large. In large clinics with high staff turnover,

With increased care, large volumes of waste, and multiple points of contact with patients, the risks of cross-contamination and failures in infection control increase proportionally. The National Health Surveillance Agency (ANVISA), through RDC No. 50/2002 and other complementary regulations, establishes strict guidelines for physical structure, internal flows, sterilization, and waste management. Failure to comply with these standards can result not only in administrative sanctions but also in irreversible reputational damage for the clinic.

Biosafety is one of the core components of health compliance and should be understood as an integrated system of practices, equipment, and attitudes aimed at preventing biological risks. According to Ferreira et al. (2016), biosafety in dental services requires not only the use of Personal Protective Equipment (PPE), but also ongoing team training, sterilization monitoring, and maintenance of validated cleaning and disinfection routines. In large clinics, where procedures occur simultaneously in multiple chairs, standardizing these routines is essential to ensure that all patients are exposed to the same levels of protection and quality.

Healthcare waste (HSW) management is another fundamental aspect of health compliance. Dental clinics generate various types of waste, including sharps, chemicals, and general waste. CONAMA Resolution No. 358/2005 and ANVISA RDC No. 222/2018 determine the proper packaging, segregation, transportation, and final disposal of this waste. Failure to comply with these guidelines compromises not only public health but also the environment. According to Silva et al. (2019), clinics that invest in waste management plans (WMPs) demonstrate greater institutional responsibility and significantly reduce the risk of environmental fines and litigation.

The physical structure of clinics is also subject to specific health requirements. Clinical spaces must ensure adequate ventilation, washable floors, appropriate lighting, and separation between clean and contaminated areas. Furthermore, the flow of patients and professionals must follow a logic that minimizes the risk of cross-contamination. According to the Ministry of Health's Manual of Physical Structure of Dental Clinics (2016), inadequate architectural plans are one of the main causes of non-compliance during health inspections. In large clinics, where the environments are more complex, the supervision of specialized clinical engineers and architects is necessary to ensure compatibility between functionality and

security.

Traceability of sterilization processes is also a critical requirement for compliance.

In high-demand environments, such as clinics with multiple offices operating simultaneously, controlling autoclave cycles, validating chemical and biological indicators, and systematically recording sterilized loads are essential to ensure quality care.

According to studies by Lima et al. (2017), failures in sterilization can compromise the entire biosafety system and expose patients to the risk of infection, in addition to constituting a health infraction.



serious. Effective management of these processes requires not only adequate equipment, but also trained professionals and integrated control systems.

Another key element of health compliance concerns ongoing team training. Initial technical training, while essential, is not sufficient to address the daily challenges of the clinical environment. Internal continuing education programs, periodic refresher courses, and health emergency simulations should be part of the routine of large clinics. According to the World Health Organization (2018), continuing health education strengthens the culture of patient safety and promotes sustainable behavioral changes. Clinics that invest in this type of training have lower infection rates and greater adherence to current health regulations.

Finally, health compliance must be incorporated into the clinic's organizational culture, going beyond mechanical compliance with standards and becoming an institutional value. This means that all employees, regardless of role, must understand the importance of sanitary practices to the clinic's reputation and the well-being of patients.

According to Oliveira and Castilho (2020), clinics that develop an organizational culture focused on safety and risk control tend to have better overall performance and greater resilience in the face of health crises, as evidenced during the COVID-19 pandemic. Excellence in management, therefore, necessarily involves an ethical commitment to public health, reflected in strict compliance with health regulations.

### 5. ECONOMIC SUSTAINABILITY AND FINANCIAL VIABILITY OF LARGE DENTAL CLINICS

Economic sustainability in large dental clinics is a determining factor for their survival and growth in a highly competitive and regulated sector. More than maintaining balanced finances, it's about ensuring the continuity of quality, innovative, and accessible services over time. As Peter Drucker (2007) states, financial health is a prerequisite for any organization to achieve its social or clinical goals.

In the dental context, large-scale clinics face significant challenges in controlling fixed costs, managing investments, and achieving an adequate return on invested capital. Therefore, a strategic approach, including rigorous budgetary control, tax planning, and the use of clear economic indicators, becomes essential.

Effective financial management in large clinics requires the integration of modern tools for analyzing costs, contribution margins, and profitability by specialty. According to Gitman (2010), cost-volume-profit (CVP) analysis allows managers to identify break-even points and determine which services offer the highest economic return. In multidisciplinary clinics, this assessment enables better resource allocation and adjustments in procedure pricing, considering direct costs (materials, clinical hours, equipment) and indirect costs (infrastructure, administrative staff, marketing). Thus,



Economic sustainability is not the result of arbitrary cuts, but of strategic decisions based on reliable data.

Diversification of revenue sources represents another important factor in financial viability.

Clinics that rely exclusively on private services or health insurance plans may be more vulnerable to market fluctuations. According to a study by Ferreira and Lemos (2019), hybrid models, which combine private services, corporate plans, partnerships with insurance companies, and the sale of complementary services (such as orthodontics, facial aesthetics, and imaging exams), have greater economic resilience and the ability to maintain healthy margins even during periods of reduced demand. Furthermore, incorporating value-added services contributes to customer loyalty and an increase in the average ticket.

Patient default, in turn, is one of the biggest threats to the financial sustainability of clinics, especially in long-term treatments such as orthodontics and implants.

Adopting clear collection policies, in-house or outsourced financing, and the use of payment automation technologies can mitigate these risks. According to Assis and Alves (2018), default rates in healthcare clinics can exceed 20% of revenue during unstable economic periods, compromising the business's liquidity. Therefore, continuous monitoring of cash flows and active management of accounts receivable are essential practices in large facilities that handle hundreds of patients per month.

Another important aspect of economic sustainability is the ability to continually invest in innovation, training, and infrastructure. Large clinics need to renew equipment, update management software, invest in digital marketing, and maintain a physical structure that meets standards of excellence. According to Kaplan and Norton (2004), the balance between short-term financial performance and the capacity for long-term learning and growth is crucial for sustainable organizations. Thus, clinics that reinvest part of their profits in operational improvements build a competitive advantage that is difficult for less structured competitors to replicate.

Energy efficiency, environmental management, and social responsibility are also increasingly integrated into the logic of economic sustainability. Reducing waste, using biodegradable materials, properly disposing of waste, and saving electricity not only reduce operating costs but also position the clinic as a brand aligned with sustainability principles. According to the Eco-Dentistry Association's "Green Dentistry" report (2020), consumers have shown a growing preference for healthcare services that adopt sustainable practices, which can directly influence patient choice and the institution's public image. Thus, economic sustainability is intertwined with reputation and corporate social responsibility.



Finally, the use of economic and financial indicators should be incorporated into the clinic's management routine.

Metrics such as EBITDA margin, return on investment (ROI), customer acquisition cost (CAC), value of clinical time (VTC), and lifetime value (LTV) allow for the assessment of

the financial health of the operation in greater depth. According to Parmenter (2010), indicator-driven organizations have a greater capacity to identify deviations, implement improvements, and align financial objectives with institutional goals. Economic sustainability, therefore, is not exclusively the result of high revenues, but rather the clinic's ability to intelligently manage its resources and adapt to market changes with agility and precision.

### 6. CASE STUDIES: DENTAL CLINICS THAT ACHIEVED EXCELLENCE IN MANAGEMENT

Analyzing specific cases of dental clinics that have achieved excellence in management allows for a practical understanding of the concepts discussed in the previous sections. The case study is a well-established methodological approach in applied social sciences and management, as highlighted by Yin (2005), as it enables an in-depth analysis of complex organizational contexts. This section presents three examples of large Brazilian clinics that have stood out for their ability to integrate operational efficiency, health compliance, and economic sustainability. The selected cases reveal how

Different strategies can converge towards the same objective: building resilient, innovative organizations focused on the quality of dental care.

The first case involves the **OrtoPremium** clinic in São Paulo, specializing in orthodontics and implantology. Between 2016 and 2018, the clinic implemented a management system based on the Balanced Scorecard model (Kaplan & Norton, 2004), aligning financial, operational, patient satisfaction, and internal development indicators. As a result, it achieved a 27% increase in productivity per clinical chair and a 35% reduction in material costs.

Efficiency was achieved through the adoption of dental ERP software, complete digitalization of medical records, and intensive staff training in lean protocols. Furthermore, investment in targeted digital marketing contributed to increasing the number of active patients and reducing customer acquisition costs.

Clínica **Sorrir+**, based in Curitiba, represents a second example of excellence, with an emphasis on health compliance and biosafety. In 2017, after receiving a health notification for sterilization traceability failures, the clinic began a complete restructuring of its internal processes. It adopted microbiological indicators for all autoclave loads, hired a biosafety coordinator, and implemented monthly internal audits.

According to a study by Lima et al. (2019), published in the *Brazilian Journal of Sanitary Dentistry*, the clinic reduced sterilization cycle failures by 100% and increased staff adherence to hygiene protocols by 80%. This experience reinforces the idea that sanitary compliance should be viewed as a strategic investment, not a cost.

10

The third case, the **OdontoViva chain**, with locations in Minas Gerais, is an example of economic sustainability integrated with innovation. The clinic diversified its services by incorporating high-demand aesthetic procedures, such as orofacial harmonization, and began

Offering corporate plans for partner companies, generating recurring revenue. In 2020, even during the COVID-19 pandemic, the network maintained revenue growth by adopting teledentistry for initial screenings and offering flexible payment terms through partner fintechs. According to an internal report released to the Brazilian Association of Dental Clinics (ABCD, 2021), the network recorded a positive ROI on new services after six months and had one of the lowest default rates in the industry (4.7%).

A common factor among the three cases analyzed is the emphasis on professional management. All clinics had administrators trained in management or used external consulting services specialized in healthcare. This finding is corroborated by research by Silva and Vieira (2018), which analyzed 78 dental clinics in southeastern Brazil and found that those with professional management outperformed all indicators analyzed, including patient retention, average ticket, and administrative response time. The transition from informal management to a goal- and data-driven model was crucial to the results obtained.

Another notable aspect is the focus on the patient experience as a driver of differentiation. All of the clinics studied invested in initiatives to improve the customer journey, from first contact to post-care. They utilized digital channels, satisfaction surveys, loyalty programs, and training for reception staff. According to Berry et al. (2006), clinics that integrate customer perception into their institutional strategy have a greater capacity for loyalty and perceived value generation. This patient-centered approach does not exclude the pursuit of efficiency, but complements it, demonstrating that excellence results from a balance between operational performance and empathy in care.

Additionally, these case studies demonstrate a commitment to innovation and organizational learning. Whether through the adoption of new technologies, such as intelligent software and remote care, or through the creation of internal continuing education centers, the clinics demonstrated the ability to adapt to market changes and regulatory requirements. This characteristic is highlighted by Senge (2006) as typical of learning organizations, that is, those that build structures capable of continually reinventing themselves. In a constantly evolving sector like dentistry, this capability proves to be an invaluable strategic asset.

Finally, the cases analyzed illustrate that excellence in management does not depend on a single model or formula, but rather on the coherent articulation between strategy, execution and organizational culture.

The clinics that achieved the best results were those that maintained a long-term vision, invested in training, and adopted evidence-based decisions. This reinforces the idea that excellence is a continuous and multifactorial construction, accessible to organizations willing to align their resources and capabilities with the challenges of the present and the opportunities of the future.



### 7. CONCLUSION

Excellence in the management of large dental clinics is a multidimensional objective that requires the synergistic integration of three fundamental pillars: operational efficiency, health compliance, and economic sustainability. The analysis conducted in this article revealed that these components are not only complementary, but also interdependent, forming a structural foundation that supports quality of care, patient safety, financial viability, and institutional reputation. In an increasingly competitive and regulated sector, the mere survival of dental clinics no longer depends solely on clinical competence, but on management models capable of responding to market complexities with agility, precision, and responsibility.

Throughout the study, it was demonstrated that operational efficiency is not limited to numerical productivity, but involves process reengineering, intelligent resource management, and the valorization of clinical time. The adoption of methodologies such as Lean Healthcare, combined with the use of integrated management systems and the implementation of key performance indicators, proved essential for eliminating waste, increasing service capacity, and improving the patient experience. Evidence shows that clinics that invest in well-designed processes achieve superior results in both financial performance and quality of care.

Health compliance, in turn, was addressed not only as a legal obligation, but also as an ethical and strategic dimension. In large clinics, where the risk of cross-contamination is higher, strict compliance with ANVISA regulations and CONAMA resolutions not only prevents sanctions and litigation but also directly contributes to institutional credibility. Biosafety has become one of patients' greatest expectations in the post-pandemic era, and its efficient management is now a criterion for choosing oral health service providers. Process traceability, waste management, and ongoing team training are inseparable elements of excellent management.

Regarding economic sustainability, it was observed that the most successful clinics were those that adopted data-driven financial management, diversified their revenue sources, intelligently controlled their costs, and invested in innovation. Sustainability is not just about generating profits, but also about ensuring the longevity of the operation without compromising the quality of services or the well-being of staff. Elements such as controlled default rates, strategic reinvestment, the use of economic indicators, and attention to environmental impact reveal a business vision aligned with the principles of sustainable healthcare and social responsibility.

12

The case studies presented in this article demonstrated that management excellence is feasible, measurable, and replicable, provided there is a commitment to strategic planning, qualified leadership, and an organizational culture focused on innovation and quality. The clinics analyzed stood out not for isolated factors, but for their ability to integrate multiple dimensions.

performance, while maintaining a patient focus and a long-term vision. These concrete examples are valuable for inspiring other institutions and solidifying dentistry as a field that combines technical rigor and managerial sophistication.

Furthermore, this work contributes to filling a gap in the Brazilian literature on dental management, which has traditionally focused on clinical or legal aspects. By proposing an integrated approach that emphasizes administrative, health, and economic aspects, it opens the way for the development of theoretical models applicable to the Brazilian context, respecting its specificities and challenges. Incorporating principles of clinical governance, technological innovation, and market intelligence into the daily routine of dental clinics is, therefore, a necessity that transcends fads and is an inevitable path for those seeking competitiveness and relevance in the sector.

Finally, it is recommended that future research advance the systematization of excellence models adapted to regional realities and that also consider the perspectives of patients, professionals, and regulatory bodies. The development of national performance indicators for dental clinics, the creation of sector-specific quality certifications, and the expansion of the academic debate on oral health management are promising paths forward. Excellence is not an endpoint, but a continuous process of institutional and human improvement. In this sense, the clinic manager of the future will increasingly be an integrator of technical, administrative, ethical, and social knowledge, guided by evidence and oriented toward the common good.

#### **REFERENCES**

ASSIS, GP; ALVES, RC Default management in health clinics: effective practices for reducing financial losses. *Brazilian Journal of Health Administration*, v. 8, n. 1, p. 31–45, 2018.

BERRY, L.L.; PARSURAMAN, A.; ZEITHAML, VA Services marketing: integrating customer focus across the firm. 3rd ed. New York: McGraw-Hill, 2006.

BERTANI, RF; PAES, RG; MOREIRA, CM Application of Lean principles in outpatient health units in Brazil. *Health Management Journal*, v. 17, n. 2, p. 55–68, 2018.

CARVALHO, ML; SOARES, RM; FERRAZ, AL Digital technologies to support management and patient experience in dental clinics. *Brazilian Journal of Health Informatics*, v. 16, n. 1, p. 92–108, 2020.

CHIAVENATO, I. *People management: the new role of human resources in organizations.* 4th ed. Rio de Janeiro: Elsevier, 2014.

CHRISTENSEN, CM; GROSSMAN, JH; HWANG, J. *The innovator's prescription: a disruptive solution for health care.* New York: McGraw-Hill, 2009.

CORRÊA, HL; GIANESI, IGN *Production and operations management: manufacturing and services.* 6th ed. São Paulo: Atlas, 2016.

DRUCKER, PF *The essential Drucker: the best of sixty years of Peter Drucker's essential writings on management.*New York: HarperBusiness, 2007.

FERREIRA, VO; LEMOS, DG Revenue diversification in dental clinics as a financial sustainability strategy. *Health Studies Journal*, v. 10, n. 2, p. 73–84, 2019.

FERREIRA, JR; RIBEIRO, AM; MORAES, CR Biosafety in dental care: a critical review. *UNESP Dentistry Journal*, v. 45, n. 4, p. 234–240, 2016.

GITMAN, L.J. Principles of Financial Management. 12th ed. São Paulo: Pearson Prentice Hall, 2010.

KAPLAN, RS; NORTON, DP Strategic maps: converting intangible assets into tangible results. 1st ed. Rio de Janeiro: Elsevier, 2004.

LIMA, RG; BATISTA, CS; FERREIRA, TC Sterilization monitoring in dental clinics: impact of good practices. *Brazilian Journal of Sanitary Dentistry*, v. 4, n. 2, p. 118–129, 2019.

LONGO, G.; VIEIRA, DA Strategic management in health: fundamentals for the public and private sectors. *Management & Health Journal*, v. 8, n. 1, p. 7–25, 2017.

MINTZBERG, H.; AHLSTRAND, B.; LAMPEL, J. Strategy Safari: A Journey Through the Jungle of Strategic Planning. 2nd ed. Porto Alegre: Bookman, 2003.

OLIVEIRA, DS; CASTILHO, V. Patient safety culture: a challenge for dental clinics. *Journal of Public Health*, v. 30, n. 1, p. 111–125, 2020.

PARMENTER, D. Key performance indicators: developing, implementing, and using winning KPIs. 2nd ed. New Jersey: Wiley, 2010.

PINE II, BJ; GILMORE, JH *The experience economy: work is theater & every business a stage.* Boston: Harvard Business Review Press, 1999.

PORTER, ME What is value in health care? *New England Journal of Medicine*, vol. 363, p. 2477–2481, 2010.

PORTER, ME; LEE, TH The strategy that will fix health care. *Harvard Business Review,* vol. 91, no. 10, p. 50–70, 2013.

SCALELLA, M.; DONALDSON, L. Clinical governance and the drive for quality improvement in the new NHS in England. *BMJ*, vol. 317, p. 61–65, 1998.

SENGE, PM *The Fifth Discipline: Art and Practice of the Learning Organization.* 18th ed. São Paulo: BestSeller, 2006.

SILVA, MA; VIEIRA, CC Strategic management and performance in dental clinics in southeastern Brazil. *Journal of Health Administration*, v. 17, n. 2, p. 33–48, 2018.

SILVA, TL et al. Dental service waste management: challenges and solutions. *Health and Environment Journal*, v. 8, n. 1, p. 12–28, 2019.

WOMACK, JP; JONES, DT Lean thinking: banish waste and create wealth in your corporation. New York: Free Press, 2005.

YIN, RK Case study: planning and methods. 3rd ed. Porto Alegre: Bookman, 2005.