In a perfect world, each team member is indispensable and the practice runs smoothly, but in the real world, team members might not feel indispensable and there can be peaks and valleys of emotion to deal with. Some of the peaks are extremely high and some of the valleys are extremely low.

The relationship between the dentist and team members sometimes becomes adversarial. This might be due to a lack of discussion about the actual business aspects of the practice. A common bone of contention is often related to compensation. Team members can become angry when routine raises are not given, yet they feel they are entitled and have earned a raise. Other complaints from hygienists, for example, deal with equipment and instruments not provided and paid for by the boss. These types of situations put a wrench in the gears of the machine called productivity and profitability. When team members’ expectations are not met and employees feel they are working extremely hard, increased productivity can actually be viewed as a negative.

Comments from team members might sound like this: “The business does better and we produce more and for what?” Consider that many team members might not understand the actual starting point of the practice. There is no understanding of the cost of doing business or how to actually impact the business. When they see the production going up, they assume it means they should make more money as well. Without understanding the business side, team members have no idea that the practice might be coming out of a deep financial hole or how large the staff compensation percentage is for the practice.

When team members actually understand the business model in its entirety, they have a tendency to take more ownership of the practice and their particular department and the financial results. The focus of this conversation is on the hygiene department, yet these concepts can be applied to the entire business and other team members as well.

Dental hygienists are oral health professionals trained to recognize and prevent caries and periodontal disease and provide non-surgical periodontal therapy when periodontal disease is present. In the majority of dental hygiene schools, little to no focus is placed on the relationship between optimal oral health and the restorative needs of the patient. Also missing from dental hygiene education is the cost of doing business within the entire dental practice. Hygienists can be remarkable partners who contribute significantly to the profitability of the business when they understand both the big picture and the details. It is when they get caught up in the details of the hygiene appointment and don’t see the big picture that there are problems. Encourage the hygienist to become familiar with both the details and the big picture. This will ensure the dental hygiene department is not only busy but profitable as well.

In the most successful dental practice models, dental hygienists are responsible for tracking their personal impact on the practice as well as the costs to operate the dental hygiene department within the business. Critical items to track daily include:

- Production (excludes exams and products)
- Hours available for patient appointments – total of hours that the provider should have worked today
- Hours scheduled with patients at the start of each day – hours that were actually booked with patients at the start of the day, before messages are checked
- Hours of cancellations and no-shows – hours of patient care were cancellations or no shows
- Hours of recovered time – any open time in the hygiene schedule that was filled with a patient during the day’s schedule
• Patient visits – total number of patients that day
• Co-diagnosed treatment identified – potential treatment discussed prior to the dentist entering the operatory, using intra-oral photos and radiographs
• Co-diagnosed treatment scheduled – of the treatment identified, those actually scheduled
• Pre-appointed visits – the number of hygiene patients seen who walked out with another hygiene appointment scheduled
• Total number for each dental hygiene service provided – total number of each service (code) provided during the day (Example: periodontal maintenance=2, adult prophylaxis=4, local SRP=2)

At the end of each month the management team reviews the data accumulated. The team generally consists of the doctor, office manager and lead hygienist if there is more than one. The production and collection numbers are reviewed as well as the percentages from the profit and loss statement. The ideal percentages are reviewed in relationship to the actual percentages achieved.

<table>
<thead>
<tr>
<th>Monthly Data</th>
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<tbody>
<tr>
<td>1. Staff Compensation: (20-25 percent)</td>
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<tr>
<td>2. Occupancy: (6 percent)</td>
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<tr>
<td>3. Human and Physical Resources (5 percent)</td>
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<tr>
<td>4. Supplies (4-5 percent)</td>
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<tr>
<td>5. Marketing (2 percent)</td>
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<tr>
<td>6. Laboratory (10 percent)</td>
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<tr>
<td>7. Administrative Services (6 percent)</td>
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<tr>
<td>8. Doctors’ Salaries and Dividends (24 percent)</td>
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<tr>
<td>Total Overhead Expense = 56 percent</td>
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<tr>
<td>Total Doctor Salary = 24 percent</td>
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<tr>
<td>Profit = 20 percent</td>
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The profit is used to fund the investment and security account. It is an eye-opening experience when team members hear for the first time that the staff compensation, for example, is at 38 percent of the net collection when it should be 20-25 percent. Of course the team initially interprets that to mean someone is going to lose their job or get a pay cut and they must be immediately redirected to realize how they can impact this number. They can impact the number with more production followed by more collections!

Dental hygienists are the liaisons between the dentist and the restorative and cosmetic treatment plan. They set the stage for the conversation the dentist will have with the patient during the exam. In many exchanges with patients, the dentist is left on his/her own to identify, uncover, review, diagnose, educate, enroll, close a case and in some cases, talk about the money too! This is where an indispensable hygienist can make the difference. The hygienist has more time with each patient than others in the office. Patients scheduled for hygiene services are a captive audience for 50-60 minutes. Contemplate these aspects of the hygiene visit.

• How quickly is the hygienist developing a relationship with the patient?
• What is the theme of the exchange of information that occurs in the operatory?
  ◦ Is the conversation driven by sharing personal information and interaction?
  ◦ Is the conversation driven by health-related information that inspires and motivates patients to make decisions about optimal oral health?
• Is the hygienist educating the patients using intra-oral photos?
• Is the hygienist completing a comprehensive periodontal assessment or does she/he only chart localized pocketing?
• Is the hygienist checking occlusal relationships?
• Is the hygienist forecasting future breakdown of dentistry (the work that is currently barely serviceable) or are they talking about the one tooth that needs to be fixed?
• What tolerance does the practice have for periodontal disease? What bleeding is acceptable during a prophylaxis before a different approach is taken?
• Is the hygienist educated on the impact of pH on overall oral health?
• Is the hygienist spending time reviewing the periodontal charting and intra-oral photos?
• During the appointment, is there value being developed for future appointments, using language that inspires commitment to keeping it?
• Is the tracking of the hygiene department viewed as an imperative of the business or just another task that must be completed?

Setting the stage for what to expect pre-frames the patient for what is coming next. Pre-framing is getting a person to a place mentally, prior to actually going there. When this occurs with the hygienist, it leads to success for the entire practice. The process of pre-framing and in many cases re-framing old beliefs will make the difference that inspires patients to accept high quality dentistry. This is the critical step that makes the dental hygienist indispensable to the practice; count on your hygienist to be the difference maker!

Helping your team to become indispensable to the practice is to create a business owner mindset and share with them the business aspects of the practice as they relate to the big picture. If you have not laid out the map of how the practice runs and you only attempt to get through the day, the results will continually be haphazard and life will be chaotic. Take action now by considering these actions steps:
The actions and perceptions mentioned are business-driven activities that will make the dental hygienist indispensable to the practice. When the hygienist can track the actual difference she/he makes to the bottom line of the entire practice, it is likely they will want to play a bigger game. When the hygienist plays a bigger game, it may warrant an increase in salary. Financial reward is one reason team members play the big game. The more important reason is they realize that they have made an impact not only on the patients’ health, but also the financial health of the practice as well. Encouraging the hygienist to track the difference they make will make all the difference in the world to your practice.

**Author’s Bio**

Sarah Cottingham is the owner of BCS Leadership, LLC, a practice management and consulting firm where she and her team work side-by-side all types of practice models and see first-hand the results of each. They have found that developing relationships as a business owner to a business owner; results in exponentially higher productivity and profitability. Sarah has two decades of dental hygiene experience, including conventional dental hygiene, assisted dental hygiene, working within a periodontal practice while using technologies such as the Perioscope, diode lasers and the Velscope. She is also one of the founders of O’Hehir University, an international online educational option for licensed/registered RDHs to complete their BS Degree in Oral Health Promotion. Sarah lives with her husband and two sons in Phoenix, Arizona.