Would it surprise you to know that 9 out of 10 dentists aren’t satisfied with their team’s performance in the practice? This was one of the most startling findings from our surveys of practice performance. A couple of reasons this is alarming:

- The level of success in a practice is highly dependent on how engaged the staff members are.
- This is something where we as business owners have complete control. If we aren’t satisfied, it’s very likely our fault.

To illustrate how the level of success in your practice is highly dependent on how engaged your staff members are, let’s walk through a new patient’s experience. Think of all the checkpoints patients reach where they make judgment calls about you, your office and your team:

1. Marketing pieces, online reviews, website.
2. First phone call.
3. Walking in the door for the first time.
4. Talking with staffers at the front desk.
6. Speaking with assistants and hygienists.
7. Dental exam.
8. Treatment presentation.
10. Scheduling.
As much as dentists like to think that they’re the star of the show, our stage time is actually fairly limited—when it comes to a patient’s perception of us and our practice, interaction with our staff makes up the majority of the experience.

When team members each understand their role, the gears mesh together, and we begin to see a real rhythm. Patients are treated better and are happier, which leads to scheduled treatment, increased production and positive reviews, which then lead to more new patients. It’s a positive feedback loop, bringing in more business and creating an upbeat, happy environment.

by Dr. Derek S. Williams

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performance—and here’s how to get started
Dentists: It’s up to you

But these results take time and effort. They don’t happen on their own, which leads to my next big point: This is an area over which we, as business owners, have complete control. If we aren’t satisfied with our team’s performance, it’s very likely our fault.

When things go wrong, the natural instinct for most of us is to blame external circumstances. It’s the easy way out because if it’s something we can’t control, we have no responsibility for the outcome. We may have the tendency to think, “Why doesn’t anyone do their job? People just don’t have a good work ethic anymore.”

Let’s shift our mindset, though. Let’s see how we are responsible for what’s happening in our practice and can take control of the situation.

If you’re not happy with your employees, it’s likely for one of the following reasons:

• They haven’t been properly trained and don’t understand expectations.
• If they have been trained, they haven’t been followed up on and likely reverted to old habits.
• If they’ve had both training and follow-up but still aren’t performing, they need to be let go and replaced.

A common complaint in dental practices is that the schedule isn’t as productive as it could be. That could be the result of several things, but let’s consider two: scheduling and case acceptance.

Scheduling

As far as scheduling, lower production could be the result of holes in the schedule, appointments scheduled for too long or too short, cancellations, etc.

The first question to ask is whether the staff has been properly trained on these principles. When we find ourselves frustrated at the way things are going, our first question should be, “Does the staff know how I want things done? Have I done my part to train them?”

If not, arrange a time you can sit down with any staff members who are involved in scheduling patients and share with them that you want to discuss scheduling.

An appropriate way to begin would be, “Things are going well! Thank you for your hard work. I have some ideas for making the schedule better and would like to discuss them. I’d like to hear any ideas you have as well.”

The way you carry yourself should show that you are in charge, but also that you are willing to listen to your employees. There have been many times I’ve been impressed with ideas I’ve heard as I’ve listened to my staff.

Establish some guidelines/rules. Here are some examples in my office:

• Appointment times: When offering appointment times and the schedule is wide open, only the first or last time slot in a block should be offered. Offering it in the middle will make it more difficult to fit in other appointments of varying lengths, and has a higher likelihood of resulting in holes. If there is already an appointment scheduled (should be either at the beginning or end of the block), only offer the time adjacent to the other scheduled appointments.
• Appointment lengths: You should have something your team can refer to in order to estimate the time needed for different procedures. Each procedure will need to include at least two numbers—one for the length of time needed to do a single procedure,
another for the time added if doing it at the same time as another procedure. For example, you may require 45 minutes for a single Class II filling, but if it's done with something else, add 25 minutes. So two Class IIs would be 45+25=70 minutes. Don’t get hung up on the numbers; the principle is what’s important.

- **Cancellations:** There are several things that can be done to mitigate cancellations or no-shows.
  - Review your reminder system. Generally, patients need some kind of reminder 2 weeks, 2 days, and 2 hours before an appointment. Some might say this is overkill, but it drastically cuts down on the number of failed appointments.
  - Create an ASAP list of patients who have flexible schedules and can come in on short notice. You can offer these patients a discount to incentivize them.
  - When all else fails and you have a hole in your schedule, make every effort to convert same-day treatment. Your staff needs to be diligent at offering to complete treatment while they’re there, if time allows. This can provide a huge boost to your daily production, even if you don’t have holes in the schedule.

**Case acceptance**

Another possible cause of a slow schedule is poor case acceptance. When many of us hear “case acceptance,” we may be inclined to think of sales tactics, persuading patients, etc. There’s definitely a component of case acceptance made up of those items, but the majority is not.

The checklist we ran through previously has more of the big picture of what case acceptance really entails. For example, when patients look online at your reviews, or at your website, they’re already making up their mind as to how much they believe they’ll like your office. The more they like your office, your staff and you, the more likely they are to place trust in you and commit to treatment.

Let’s review those items and how staff can help increase case acceptance by helping patients feel comfortable and accepted in your practice.
Your online reviews should help potential patients set their minds at ease, knowing they’ll be taken care of. Staff should be asking patients for reviews or letting them know they’ll receive an email asking for feedback.

Your website should help viewers feel like they get to know you and your staff a little better. Do away with the stock images and replace with nice pictures of you, your family and your staff.

During first-time phone calls, staff should let new patients know, “You’ve chosen the right practice. You’re going to love Dr. Williams.”

Patients need to be greeted warmly by staff when they first enter the practice.

Pleasant smells are a nice change from the normal “dental aroma” people have come to expect from dental practices.

Staff should do their best to call patients by their names, get to know them, and find out their cares and concerns involving dentistry. Before the dentist enters the room, staff should reassure the patient, “Have you met Dr. Williams? You’re going to love him. He’s easygoing and will take great care of you.”

After the treatment plan is presented and accepted, staff can help by asking what other questions or concerns the patient may have. There are many times patients are more open with staff members than they are with the dentist.

If there’s an opportunity to begin treatment on the same day, this is a great way to ease patients into their treatment and help them commit to completing treatment.

All of these areas are ways that staff can become more engaged in their roles in helping patients to accept the treatment that they want and need.

**Follow-up**

Training and setting up systems is often the most difficult and time-intensive part of building an exceptional practice. But following up with your team is just as important. At the end of a meeting, decide on a timeline to meet again and discuss progress. Ask your team members to keep notes of what went well and what if anything could use some modifying.

Remember that an important part of the follow-up is pointing out successes. Make an effort to commend team members when they do what they were trained to do. Mention successes that came as a result of following the new systems. Doing these things will keep staff motivated and feel excited about their adherence to their training.

And lastly, if you do these things and are not seeing changes from certain team members, it’s time to let them go and replace them with employees who will help you reach your goals. This is an extremely difficult step but a critical one. Retaining second-rate employees will slow the growth of your team, your practice and your ability to provide the greatest care for your patients.

Believe me, I wish there were some magic pill that could be used to get results, but it comes down to improving our leadership skills and teaching our team what we expect. Making suggestions is not enough; we must set clear expectations and then follow up.

So, take some time and think about your satisfaction with your team and your patients’ perception of your practice. Where can you improve? How can you step up and take your team to the next level? Putting in the effort now will make things easier in the future, and pay you dividends over and over again.