



Practice Focus

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Series 1 The Fundamentals

Session 4 Mastering Daily Tracking

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 3. Use the transcript to help complete your Team Activity: **key points are highlighted.**
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Good morning, good afternoon, good evening, good night, whatever you're doing listening to this right now, depending on where you're at in the country, what you're doing. Thank you for working so hard, for giving these special Practice Focus sessions your undivided attention. We just finished up a powerful 1, 2, 3 punch on your new patients, which of course is usually the life blood of your practice, driving in the most new diagnoses and new opportunity.

Today, we're going to take a deep dive into mastering the five buckets. This month is so very special because we're going to talk about the necessity of tracking and understanding exactly how to build your practice for the future. I cannot emphasize enough, I know I say it every day, how important it is to be future-focused. So many people get caught up in the vicious cycle of running on the treadmill of production, every day trying to make another dollar, instead of focusing on building the demand into their schedule and creating the dentistry of tomorrow today.

To begin with, I don't want to hear any whining or any bull about tracking. It's important. It's essential. However, the tracking, most practices do it all wrong because it's focusing on the past instead of the future. Anyone can find out how much production and collections they have had in the past. What matters most is how much we're going to do in the future, next month, the month after that, one quarter ahead.

You will only be able to make smart decisions about what is going on in your practice when you know the following items:

1. Phone calls to schedule appointments. How many incoming phone calls we have that are directly tied to new patients and how many scheduled appointments do we get from those phone calls?
2. How many scheduled appointments do we have tied to the value of treatment diagnosed? So important. If we have 100 new patient phone calls, we get 35 new patients, how much money will each one of those new patient scheduled appointments be worth and we can even go back further and say, how much was each phone call worth and value of treatment diagnosed?
3. Out of your total diagnosis value, how much of that was scheduled, scheduled treatment? This, of course, is the most important factor every day in your practice and it should be monitored by each individual, each hygienist, each assistant, each doctor, each treatment coordinator, everybody. It's like how many at bats you had in baseball, how many times you swung, how many times you hit the pitch, like how many shots you took in basketball, how many went through the hoop. It's so important. You have to know total diagnosis and amount of acceptance on that presented treatment.
4. How much money you captured on that scheduled treatment, meaning the collections for the day. Remember, our objective is minimum 50%. You should be getting much better at that, especially if you're not being greedy and cheap and you're offering reductions in the fee, discounts on full paid treatment plans. You should be out collecting every day in production. You may product \$7,000, \$8,000, \$10,000, \$12,000, \$20,000, but if you presented, if you diagnosed \$27,000, \$37,000, \$47,000 and you got case acceptance on 30% to 50%, some of you even 70%, then your collections should be crushing your production numbers every single day because the production that you schedule today,

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the collections that you get today, is money that's going to be paced out in your schedule and organized into the value base.

5. How far out you are scheduled and your average total daily production based on your scheduling goal you set. I love it when people say to me, "Oh, we're scheduled for four weeks out" and I say, "Well, when you can see the next new patient?" "Oh, we can't see a new patient for four weeks."

"You're crazy. How many new patients are on the schedule?" "Oh, we can see six new patients in the next two weeks." You're scheduled full, but you only have six new patients on the schedule and you can't see any new patients for four weeks. You're morons. You're not doing it right.

Your value-based schedule says if your goal is \$100,000 a month and you're scheduled out three weeks, then those days better be scheduled at \$5,000 to \$7,000 a day without breaking any of the rules. If your goal is \$300,000 a month and you've got 15 clinical days, you've got \$20,000 a day and you say "I'm stacked full for four weeks", well, you better have \$20,000 a day scheduled.

If you are prescheduled but you're not to your goal, then we're scheduling all wrong and also we're not getting enough dentistry every day accepted to be able to build a profitable practice. This is why the bucket system is so important because it allows you to have x-ray vision into what is going on.

The last few months, we've taken an x-ray vision look at your new patients to see how you're doing, to see what the reality of it is there. Now, we're taking x-ray vision at the actual flow of treatment, the flow of money, diagnosis, scheduled treatment, collected value, daily goals of value-based scheduling.

Once you look at each of these numbers, we can now get more specific. Then, we can know where there's a hole in the bucket or a broken link in the chain. The reason we have created the five bucket tracking sheets is to make it easy for each team member to know how they are performing, and the results added up amongst all team members should blow away your goals for the day, every single day.

If they are not, then you have parameters, statistics, ways to track exactly where and what and possibly who went wrong. So, included in this month's Practice Focus, in case you have misplaced them or needed a reminder, are a series of tracking sheets that allow you to see what each individual team member and what each area of the practice did today for the key factors and numbers to follow to ensure you're heading in the right direction. Now, this month, you have some very basic homework and I want to walk you through the three things.

The first piece is this- I want you to discuss and describe the perfect daily flow of treatment and the patients through your practice from your own perspective. Listen and take notes on what I'm about to say compared to what you're doing.

So, before the end of the day, we looked back at today and say, "What the hell happened?" Then before tomorrow, we did all of our chart reviews. I'm walking into the huddle, every team member walking into the huddle prepared.

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Morning Huddle Example in Scott's Words:

I show up, I say “Today team, for my huddle, I want to tell you I have eight patients coming in. Out of these eight patients, I have \$32,000 of unscheduled treatment sitting in their mouths in the computer system I’ve already verified. Now, of those eight patients, I think four of them are very straightforward. Two of them, we haven’t seen for a year and a half. Doc, I think we may need a couple extra minutes there. I’m going to reshoot some photographs and get a great exam. I’m going to see if we can engage them and give them a full mouth treatment plan moving forward today. Treatment coordinator, if you’ve got a few minutes, I’d like to flank these two patients. Let’s make sure we solidify our triangle. Are you going to be available at 3:30?”

Now, I have two other patients here that they’re doing pretty good. They just came off a nice full mouth reconstruction. We’re getting them in for a hygiene visit. However, they were supposed to move forward with Invisalign, and they never did. Today, I would like to address this with them, and we’re going to bring back up the smile photos because I don’t know if we took any after shots after they finished up the cosmetic redos. I’m going to go ahead and shoot a few pictures there, and then maybe Doc or treatment coordinator can give me a little hand, see if we can’t push forward on the Invisalign. So, that’s it, team. I’m excited. \$32,000, we’re going to knock it out of the park.”

Now, next hygienist, boom, okay. Next, I’m assistant. Assistant walks up and says, “Okay, my turn, team. Today we’ve got six patients scheduled. **High five everybody for knocking down that giant case last week.** We’re doing the full roundhouse of preps today. We’re going to get a nice set of veneers on this patient. I know that they paid 50%. Today, they’re supposed to come up with the rest of it. I’m going to have my eyes on that. Treatment coordinator, if you can be available to help cash out the rest. Now, we also discussed with them about moving forward with the bottom. I’m not exactly sure what the delay is, and I’m just going to bring it up casually. Anybody got any advice for me? We’ll see what we can do, if we can get them scheduled back next week with the others or maybe when we do the seats on the top, we can go ahead and prep up the bottoms.

Now, the next thing, I have these other two patients coming in. It’s a beautiful thing, it’s husband and wife. They haven’t been in for a while. They called last week, just got back from vacation. They’re going to be in town for a couple weeks and want to come in. They said they had some problem areas. We know that they haven’t been in for an exam for a while, so we went ahead and scheduled them here. I’m going to triage them up like a new patient. We’ll deliver the exam. If I can get them for a full series, we’re going to do that. Doc, we’re going to need some back and forth here to create a treatment plan.

I’d like the treatment coordinator, if you have a few minutes, you can meet with them before our visit, get to know them a little bit more, do the interview. Let’s just treat them like a new patient today. I’ve got two other patients this afternoon. We’re going to be doing implants. They requested the afternoon, so we cleared out the schedule.

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First one, pretty straightforward. They have a couple crowns on the left-hand side we didn't get. I'm going to shoot some pictures before we go in for the numbing and let them know that this will be done next step, and the second patient is very easy. I think we'll be fine there. All in all, I have \$17,000 of treatment not counting that other roundhouse on the bottom or the two husbands and wives coming in. So, we'll see what happens."

Now, that's a daily huddle, okay? Each person talks to their column in the schedule. You can, of course, be briefer about it. What did I not talk about? I didn't belabor what's already in the schedule, what we can look at and see. Give me a break. You already know what the hell's going on. **So, we talked about the future value of the treatment available.**

Now, I have a game plan. I've pinpointed where I need the doctor, where I need the treatment coordinator, and then we pushed the pedal to the metal. When each team member does that, you add up the treatment that's in the patient's mouth coming in for the day, you know what the targets are.

We go through the day, as soon as the patient's asked to the chair, I welcome them, say a few nice things, say "Before we get started, we're just going to take a few updated photographs here, take a look around and see. I know we're coming in for A, B, and C today. We're going to see where we're going to go next with this." I immediately shoot pictures, **so that I don't forget, so that I don't run out of time, so that I can talk to the patient about the pictures.**

When the doctor comes in, I immediately engage that patient and the doctor with the photographs that we've taken. Then, we do the hygiene. Then, we do the restoration. Then, we do the implants, whatever. Very important. In the schedule, I might also note where I have time to start some impressions, to do any same-day turnarounds, whatever.

So, now, at the end of the day, everybody shows back up. I'm the hygienist. I say, "Team, thanks for all your support today. I was hoping for \$32,000 but, you know what, we got \$20,000 today out of my single column, so happy about that, and I extended this 32 to 52. I went ahead and presented a couple of other nice cases. It's really a great thing. So, good teamwork on that. Next week, you're going to have that \$20,000 available in the assistant column. I know we're going to pick it up."

Next is the hygienist assistant. "Today team, I had \$17,000 and, you know what, beautiful things happened. The two implant cases, we didn't get any more treatment on that. They want to wait. Obviously, implant is a big deal. The next time they come in, we'll get them. Husband and wife, full mouth treatment plan, they're very excited. They're coming back next week for a treatment conference. High five, treatment coordinator. They're really happy about the possible cosmetic work we've done, and today, we knocked down two Invisalign cases, same-day impressions, fired up."

So, treatment coordinator says, "Team, you're amazing. I collected \$27,000 today off the two columns that you presented to me. That's great teamwork. Most of all, we actually scheduled \$40,000 of treatment today. It was a beautiful day." Now, that's a good day.

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If you have more than two clinical team members, you ought to be talking the numbers I'm talking about. You lack creativity, you're not following through, you're not thinking very big if you're talking about piddly stuff, single surface composites all day long. You need to help these patients. Are you a tire-patcher or are you a professional dentist? Now, every person is going to do a huddle exactly the way I'm talking about.

Secondly, you need to go through, this is part two, homework for the day, who is responsible for each bucket, each column, in the schedule and how the reporting is going to be done at the end of the day. I want you to discuss it. The morning huddle shouldn't take more than 10 or 15 minutes done properly. End of the day huddle shouldn't take more than 5 to 10 minutes done properly.

Now, number three, I want to know what you're doing with these numbers and this information. It certainly isn't for my reading pleasure. The numbers are for you. In fact, I don't even care how you track it, but you have got to be future-focused, and you have to be accountable for it. Doctor, listen up, I need your involvement here. You want babysitting feedback or you want to own your business? Look at the top columns. It's very simple the way it's laid out, and you understand how much is diagnosed, how much is accepted, how much do we collect, and you can break it down by person and know who's doing great, who needs some help. You can look at who's taking pictures, who isn't.

There's no excuses for this, zero excuse available. You have to execute in the way that's going to get you the results. Now, please listen, I want you to have a feedback loop, and you should be discussing these things in your weekly touch base meetings consistently.

This month, please write down your top three or four or five takeaways from this Practice Focus. Share with me your top three commitments that will be made as to what you can do better specifically to improve.

Finally, I want you to share your daily goals for creation, diagnosing, scheduled treatment, and your goals should always be at least 50% of collection of every scheduled dollar. I want to know this out of each department of the practice and that total should add up to more than what you need to hit your monthly objectives.

If you are a specialty practice, all you have to remember is to customize. If you're doing the perio, you may have the implants, the surgeries, the oral surgery, the wisdom teeth. If you're doing some other specialties, TMJ and sleep, you may have consults for ortho, consults for TMJ, consults for sleep. For our orthodontists, you may have limited starts, full starts, adult starts, traditionals, Invisalign. There may be lots of different ways to track this. You can track referrals, whatever, but you have to have clinical accountability of the flow of the human patient through the practice.

The bottom line is this, everyone loves to focus on big numbers and making your goals, but that's only going to happen when you have individual execution and effective follow-through from every team member in every part of the practice.

Otherwise, you're just getting lucky and not really taking ownership and controlling your success. Let's make next month your best month ever, at least until the one after that, and I promise you, you're in control of breaking free from production and driving your future value of your practice and collecting what you could ever produce. It's a liberating and amazing

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feeling, and it's what the advanced and most successful practices do. You've got to break this link. I'm telling you, my friends, you've got to.

When you out-schedule your daily goals, you will soon be able to stack production on demand and hit any number you want. Make it happen. You have the power, and tracking is the key for understanding your reality and making good and smart decisions to have more success next month than you did in this one.

Please, if you need any help at all, Kevin and I are all here for you, standing at the ready to support in the execution of these specific tracking forms and the approach that we with 100% certainty know is the best way for you to get ahead of your goals and to start being in charge of your daily victories. I look forward to your amazing results.

Please, do your homework. Those of you that do, I appreciate it. Those of you that don't, there's no excuse. It's obvious the situation you're in. I want you to execute and follow through. You have to provide me feedback just like you need feedback for yourselves. Thank you very much.