



Practice Focus

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Series 7 Bettering Your Best

Session 4 Better Triangles of Trust (Part 2)

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Hello everyone, and welcome back as we continue our series: Bettering Your Best. Today, we're going to be doing a part two of the triangles of trust, and in particular, bettering our best with the triangles of trust. So if you haven't listened to last month, please go back and start there. And if you're ready for this session, we're going to be checking in on how well did we do. So, today's session is going to be all about progress. And as you hear us say often, we're interested in progress, not in perfection. And it's as long as we keep our focus on continued progress and looking at what's next for us and keeping ourselves sharp every time, that's what keeps sustained success coming.

So with our triangles of trust, it's one of my favorite parts of the entire new patient experience, and patient experience in general, and that's going to be where we're picking up today. So when we're thinking of the triangles of trust, we're not only looking at, do we have all the triangles of trust in place that we should, but how well are they going? What is the quality of them? Is the next team member being set up for success appropriately? Is there any opportunity to make them even better? And so, when we think about this, think about that in the back of your mind. If you're doing all three and we'll talk a little bit about each one again to give you a refresh, that's great. If we're missing one, maybe there's one particular area you want to focus in on today.

If you've been doing a great job with the new patients, perhaps we want to look at existing patients that we want to make new again, and picking particular criteria of which types of patients need a triangle of trust: could be type of procedure that we're recommending, could be a dollar value of a case of outstanding treatment. But this is going to be the types of discussions we want to open up for possibilities today. So, before we go into a quick review, just to get your minds thinking about this and areas of opportunity to level up, let's start with the morning huddle. It's a little bit of a detour, but it's really where we can build in intentionality. And intentionality is the key when it comes to the triangle of trust. After all, this is our opportunity to build value in the patient's mind.

Every time we use a checkpoint like this to be able to reframe and reinforce why it's important to move forward, we help case acceptance. So, thinking of that, in the morning huddle is where we can choreograph the triangles of trust and be very intentional. So as of today in your discussion, is every person involved when we're using the choreography of planning the day, do we know which person's going to be involved in the triangle of trust? Do we know which team member's going to be giving one, which team member's going to be receiving one? Do we know the approximate timing in the appointment when the team members should be ready to go? Do we know if it's going to be communicated through a messenger? Do we know if it's going to be a set time? We just need to be ready for ironing out all of these details. We want to make sure our morning huddles are being used effectively. So start there with your discussion: are we having the right communication to set our days up for success?

Now, going into the triangles of trust, we have our first, our second, and our third that we're focusing on. So in the first triangle, that's just as a recap, that's going to be our business team bringing the patient to the clinical team member and whoever's going to be starting that appointment and giving the introduction. So, checking in on how that's been going, please review and talk through your patients that you've had recently. Use new patients just to get the meeting started, start there. And let's see, let's get some feedback from our clinical team member if they feel like they have a good setup into the conversation.

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As a challenge, if right now we are not sharing the patient's goal in that first triangle of trust, that's a great opportunity for us to talk about today and make some commitments. This is where we get the whole conversation started. And as a tip from last session as well, if you aren't sure what the patient's goal is, you can always use something that's a lifestyle impact. And the simple one that almost always applies is, "Patient's goal is to get healthy and stay healthy, stay in healthy maintenance mode." Really good one you can always use as a default. First triangle, make sure you have everything you need there.

Second triangle of trust is going to be the doctor and the clinical team member having that triangle. So, are we introducing the doctor the way that they want to be introduced? Making sure we're getting some feedback there. Are we using that verbiage of, "Hey, doctor, patient and I have been talking about what's been going on, what we've been seeing in the x-rays and photos. Let me share where we're at so far." Bringing doctor up to speed, the way that they want to be brought up to speed. And then of course the final one, before we discuss getting the patient to their goal, and that's that goal, reinforcing that goal again in that spot, "Doctor, is there anything else you'd like an update on?" So making sure we're closing out that conversation with reminding everyone in the room of the patient's goal, keeping that at the center, and then allowing doctor to come in and get any clarifying details they might need or they can take the wheel from there.

One thing I will note is that if for whatever reason the second triangle of trust isn't happening in your practice, the most common reason that we hear is that the doctors are really excited to get going with the patient. Sometimes, they might be running behind from the patient before, and so they tend to want to start their part of the appointment right away. This is a really big missed opportunity. This is a perfect example of where we want to make sure we're prioritizing that triangle of trust because this is where we can slow down to speed up case acceptance. If we take the minute to validate how the patient has come with us this far, it's going to set up the doctor for the patient to be able to receive what they're about to tell them for the solution a lot better if we slow down in this moment. So if your doctor gets a little bit ahead of themselves, this is a great opportunity in your discussion to talk about how we can help each other.

A few tips from practices that have worked very well and hard on this, is some doctors like to have a little signal. It could be a physical signal, a little wave behind the patient's chair, it could be a little pat on the shoulder, it could be a little post-it note sticky that we hold up. Whatever it is, a visual cue tends to help our doctors just make that pause happen for a little bit and give the attention back to the clinical team member to finish that triangle of trust.

Another recommendation is sometimes the doctor will get started and then remember a few minutes in. So you can always pass the ball back and just using a little bit of verbiage. "Oh, patient, you know what, I got so excited about telling you how we can help today that I cut off Mary. So Mary, you know what, why don't you fill us in on what you and patient have talked about so far. I'll just pause, I want to hear what you guys have discussed so far." And you pass the ball back. So whatever you need to do to make the second triangle work, it's very powerful to keep building that trust from the patient.

Number three, this is going to be the final triangle. This is going to be from the clinical team member or the doctor to the treatment coordinator. So as a reminder, the things we want to see in this triangle, reinforcing the patient's goal. Again, that's going to be the third time that we're doing it.

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And a good way to tell if you're doing this is if you're using the phrase, "The reason why we're recommending treatment..." Or, "We are recommending this because..." Reason why and because, that's how you know you're making sure we're letting the patient know not only what they need to do treatment wise, but why it's going to be worth it. "So, the reason why we're recommending that you take care of all of the decay is because that's going to get you to your goal of being pain-free once and for all; being back to healthy maintenance mode." So we don't want to just say what we're recommending, reason why, that's a good check for yourself.

Another one that we focus on is removing any excuses or delay that the patient brings up. So instead of saying all the reasons why the patient's not ready, we replace it with, "Patient has some questions about next steps." Or, "Patient has questions about the pace of the next appointments." Try and avoid any negative words. We don't want to put any negative sort of feelings in the patient's mind or emphasizing any of their own feelings before they go into the treatment presentation. So avoiding words like, "just a little," or, "a small amount," or we'll just start with even the word, "just." Any time we're talking about that when it comes to treatment and next steps, we're already watering it down. So be very mindful and talk about that in your discussion today if any of those negative words are slipping through still.

And finally, in the third triangle of trust, packaging up the next steps the way you ideally want it scheduled. So if we want anchors and anchors for us are at minimum a quadrant of dentistry, well then, we want to make sure that we're not saying to the patient what the next steps are going tooth-by-tooth. Instead, we're going to admit we might have done that in the op, we might have educated tooth-by-tooth. But when it comes to that third triangle of trust and now it's time to schedule, we want to make sure our treatment coordinator is getting the treatment, how we want it scheduled. So, bundled into anchors right from the get-go. So, "Patient, we're recommending we're going to start with the left side and then we're going to do this, this, this, and this. And then we're going to bring you back for the right side and we're going to do this, this, this, and this. And all of this is going to get you to your goal of being pain free once and for all, back to healthy maintenance, being able to sleep well." Whatever it is. So, this is the key: we just want to make sure we're setting up that treatment coordinator for bigger yeses, even bigger yeses than what you're getting.

And that's the triangles of trust. So as we said before, this is the question in this discussion is, not only are we doing them all, but how well are we doing them. And this is going to be feedback-based. So please take a look at your past new patients, at least, starting with the new patients, of how well did we do in the triangles of trust. Get feedback, ask for more of what you need. It's through this so we can really see perspectives from across the practice. Your business team might not know what you need as a clinical team member to be set up for success, and this is going to be our opportunity to clarify any of that.

Remember, the morning huddle is going to be key to choreographing stronger triangles of trust and stronger days. And most importantly, the purpose of the triangles of trust is to help the patient feel connected to their own goals, their own outcomes, and really feel that responsibility at every touchpoint, not just when it comes to the financial hurdles in the conversation when it comes time to presentation. So, take the time to slow down. This is the moment to be able to speed up into bigger and better yeses and just be sure to be open and solution-focused. So, thank you so much for taking the time to set each other up better than before, and I hope you have a great discussion.