



Practice Focus

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Series 8 The Four Pillars

Session 10 Transforming the End of the Year Into a New Beginning by Leveraging the Four Pillars (Part 1)

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Scott: Hey Maegen, it's good to have you again, and welcome DST family to another Practice Focus session. We call it Focus because, ultimately, that's what is required. We love the great feedback that we've had from changing format and different things that we've been doing. This year, I think there's a lot more interactive response, and follow through, and implementation, so Maegen, thank you so much for all you've done to level these babies up and give people some tangible things to implement, and make better, and get results, and take action with. So Maegen, I'll let you say hello and then we'll hit the ground running.

Maegen: Great. Well, thank you, Scott, I'm happy to be here. It's a very special time of year as you describe it with the hourglass. We're starting to get to the bottom of the hourglass and this is where it goes very fast. And so, taking this time together to slow down, really get very intentional, and very honest as well, about what are our challenges and how can we take more control, how can we intentionally overcome it? And so, with a special consideration that there are some very real seasonal, special circumstances with the holidays, and we also know with human behavior that people's number one tendency is going to be avoidance and using the holidays as an excuse.

And maybe some people, they want to rush in and there's not space and both ways we have to manage. We have an opportunity to have more control and more pre-decisions. This is our goal for today, is to get you thinking about how can you be more of a guide, more in control of helping our patients not use that number one block that can come up at this time of year to put things off and not letting them fade into the holiday abyss, as they may call it. So Scott, let me know your thoughts on that and we'll dive right in with some thoughts to consider.

Scott: Well, listen, it's so awesome, Maegen. I love that you brought that to the theme of the year and the time that we're in. What's most powerful here is you're talking about what many people use as an excuse. This is one of the basic principles that we actually teach, Maegen. I say, "If somebody gives you an objection, you turn it into the reason why." And the same deals with any excuse. We can use the calendar as an excuse, end of year as an excuse, all these things, but the reality of it is you should have the single greatest case acceptance on the planet earth at the end of the year because you have built-in deadline. Your best friend is the calendar, you call it the hourglass, that, how on earth would this not be the most motivating time to do something for a person's health?

We say get healthy before the end of the year, get healthy for the holidays or get healthy heading into the new year. There's just so many different ways that we could explain this so I like that you brought that up. And today you have some wonderful things you're going to share. I want to just culminate because really what we're doing is we're revisiting the first two key pillars of growth or leverage factors of the practice. The reason is because, very simply, they tie together: diagnosis and case acceptance. Locking these two babies together is the key.

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Scott: No matter how much you create, it really only matters what you get said yes to. No matter how much is said yes to, it only matters to what extent, how big is the vision. So understanding this one-two punch, linked together, integrated, diagnosis, case acceptance, is the vital piece.

Since we're at the end of the year, there's a couple things that I would point to. Number one is, treat every patient like a new patient every single time. That's 365 days a year, and it also goes back to, let's go back to the well. Look at all the patients that maybe haven't accepted or didn't move forward completely, or maybe they're just ready for something new or next, and we can be doing... you know I joke about this, I'm getting a little bit ahead of myself...some of our great practices and our wealth group doctors, they actually have the greatest surge in the last 60 days of the year. Whenever you're getting this, last 30 days, last 60 days, it doesn't matter to me, because they're dialing for dollars to front load the first quarter in terms of the schedule.

I don't want to talk about prepay and schedule control because we're going there next, but right now I just want everyone to realize you've been wildly prolific, you have unlimited abundance of diagnosis. The question is, are we tightening it up? Are we closing the holes in the bucket? Are we dialing for dollars? Are we following up and helping patients follow through with their health and their goals? That's a couple points there, Maegen, I know you have some things to go over and then with some questions we'll talk through.

Maegen: That's great. Thanks Scott. So diving right in with our first question, when it comes to diagnosis what is the tendency that we see with doctors this time of year and what can we maybe think about together at this time together? Where can we put awareness on this and make more intentional choices when it comes to diagnosis?

Scott: Well look, it kind of goes back to your points. You made a great introduction and I know you have some key things there that you want to double down on. Here's the thing, Maegen, it's just a mindset. It really comes back down to the tendency is that we slow down with the end of the year. The difference is that we end up making excuses for the patient or for ourselves, and it's constantly suppressing or coming from a place of fear, or looking at the, "Well, what if the patient doesn't..." or trying to go lowest common denominator instead of the greatest opportunity for them. We are running into the end of the year as a deadline, it's a fourth place deadline, and we want to run up the score like crazy, but for heaven's sake, it's also, this is not the end of anything, it's the beginning of everything else.

We're heading into a new year where we have to load up a bunch of opportunity in the schedule. The tendency is to play it safe, to conserve the opportunities, not share with the patient everything, to suppress the diagnosis, to be in a fear-based scarcity mentality instead of abundant surplus, as well as not execute with a sense of urgency. If you can stay in the mindset of abundance and go all in while adding the layers of sense of urgency, then we're in good shape.

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Maegen: It's a great point and I like your idea of the end of the year being a natural deadline, and truly it is. There's only so many appointments you have left, there's only so many spaces we have left, and so it shifts the responsibility when it comes to diagnosis to not just share the what and expect the patient to make a good choice on how they move forward. It really makes it our responsibility from beginning with the diagnosis and how the patient is presented with that diagnosis, starting from our doctor, to really think about how to say yes. Really encouraging this based on the type of dentistry you want to do and what you think is truly best for the patient, even if you know that nine times out of 10 they're going to use the holidays, maybe even write to you as the doctor as a reason to delay or do the least amount, and this is the idea of taking this time to just see where you can go next.

You may be already there and then it becomes, well what do you do when that comes up? How can you embrace this opportunity where, like Scott said, really making the objection or whatever the patient's excuse is as the reason why. Something like, "I'm so glad you said that. I'm so glad you brought up the holidays. This happens every time of year. Would you be open to hearing my advice, or would you be open to hearing what I would recommend to my own family at this time?" Just taking it a step further, just not letting that be the end of the conversation. I think this is certainly not just on our doctors, it just begins there, and this is where we want to keep exploring this idea. So Scott, I'll let you tap into anything there if you'd like to and then we can move into question number two.

Scott: Yeah. No, I think it's emphasizing with the patient where they're at and what's on their mind, but then not stopping there, moving them forward and championing and challenging the status quo in any way to where you set...you have to articulate. One of the best things to do would be get healthy before the holidays or to get this organized for the first of the year so we can hit the ground running. I don't want to get into utilizing insurance and all that other kind of scapegoats and cop-outs, but there are other tools based on your practice modality that you could add into that, but let's keep moving.

Maegen: Great. Question number two: when it comes to case acceptance, where do you see teams are tending to hold back this time of year? Where are the patterns that you see where we're giving into the patient's resistance a little too easily? You kind of led into it with insurance there, but it's certainly beyond that, the resistance, so what do you think there?

Scott: Well, look, I think that the funniest part of what you just said, it's kind of what I mentioned in terms of when people are scarcity, fear, whatever. But really since you brought up the team, okay, what we have to say on the team front, a lot of times it's we lose focus. We kind of get distracted, maybe by our own lives, maybe by the holidays, maybe by we see challenges. There are also some people, they get discouraged by let's say the number of clinical days and say, "Well, how are we going to hit our goals?" And so, you get maybe a little bit, even demoralized.

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Scott:

So I think that we have to summarize all those key points into one idea where we really need everyone to stay motivated and not miss the principles. It's like it's more important to execute, if you think about this last quarter or two minute warning of a game, a sports team. **It's more important to execute impeccably at the end than it is any other time, really.**

I mean, you always have to be impeccable and execute and all that, but that's the key. Kevin and I, as you know, we recently did this think bigger, be bolder, follow up and follow through, and we talked a lot about focus, consistency, execution, so that's what I would just say, Maegen. **When it comes to diagnosis, where are we suppressing, holding back, cutting corners, missing things? When it comes to case acceptance, how tight and strong and completed are our triangles? Are we following up and following through? But, more importantly, are we building enough compelling clinical value that the yes is on the health outcome and then the money is just a matter of fact and details, instead of there's this weight, obstacle, that we're sort of waiting to get thrown in our face.**

The only other thing I would add to the team is, **don't forget the pre-frame, pre-condition.** When we're getting ready to do something with the patient, whether that's the phone call, whether that's the intake, whether that's the diagnostic workup, whether it's the same patient's been there so many times and we're having to look at their mouth. What better time of year to blow diagnosis out of the water than to say end of year, beginning of year, anytime of year, we say, **"Hey, today is the day we're going to take a reassessment. We're going to look into the crystal ball, the future of your life. It's time to update your long-term plan for your overall health. Why not now?"** Again, we can use the same excuses as the reasons why and that all ties into diagnosis and case acceptance. Above all else, don't lose the motivation, don't lack the focus. Stay on point and let's run.

Maegen:

That's great, and I think what helps with that mindset is that embracing of the guide or the trainer. We're responsible for the patients to, again, not fade into that holiday abyss, not lean into those. **So this idea of just as a team, because certainly case acceptance also goes beyond the treatment coordinator, it's everyone's responsibility to build case acceptance.** And this idea of let's be prepared, let's really know what patients are going to use when it comes to human behavior is the excuse so that when inevitably they may say, "Let's wait until next year." Let's wait until my insurance resets." That's something, if maybe they don't want to come in before the holidays or maybe we don't have space.

Either way, if we're putting people into next year, being the guide means you get to decide and influence how that patient goes into next year. This is something that's a really cool concept to discuss as a team because you get to pick what kind of dentistry you want. If you want quadrant dentistry, then frame it that way in your recommendation. If you want full-mouth dentistry, then that's how we can frame it. And we also know, you touched on insurance, we certainly don't want to go into that topic, we don't have time for it.

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Maegen: **But one thing I will say when it comes to insurance is reframing for the patient just with common sense** that, “Hey, we’re going to max your benefits anyway so whether we do your plan on January 1st or December 31st, it’s going to be the same amount of insurance that contributes. The thing that you want to know is that if you wait until December 31st, you may and most likely will be looking at a much more expensive problem, and the insurance doesn’t go up, it doesn’t go up, that just becomes your personal cost. This is why we want to help you. Let’s make a plan in the new year. Before you leave today, let’s really get you set up so we can start the new year fresh, on your terms, in control of what happens with your health.”

I mean, that’s a different type of conversation. This is something that can happen chairside, it’s something that can happen in the treatment presentation, but just something to consider of how can we get creative. Like Scott said, don’t let the holidays become the excuse. Don’t let insurance become the excuse. It becomes the reason to move forward and you get to define what that looks like.

Scott: Wow. Okay. Thank you so much, beautiful words. I love, Maegen, you give people something to work with, some tangible tools to play with, ideas that we’re sharing so it’s more applicable and exactly what to say and how to position to the patients. Because I’m here to fire people up and give them some strategy, but really, you’re giving them the tools to engage with the patient directly.

Maegen: Great. Well, let’s go into our final question, Scott. This is a great one. I’m curious to hear what you have to say. **If you could give any advice to our teams in this very vital end-of-the-year, final moments of the hourglass, what would you ask everyone to pay attention to today in their discussion?**

Scott: Well, listen, it all comes back to diagnosis and case acceptance, and this is the deal. The other two principles don’t even matter unless you have these. And I would just say, you need to be at your absolute very best at the end of the year. There’s no excuse, zero, not even possible, we don’t give a shit if there is one. You have to be at your very best. The second part of this is, you can look in the rearview mirror and assess where are we at? **Again, go dialing for dollars, go following up on patient treatment plans, go back, send a letter, an email, a text. Pick up the phone and tell people that, “Hey, before the end of the year we got to get you in.” And if you want brownie points, do some incentivization.** You didn’t capture the treatment anyway so why not give them incentive to get healthy before the end of the year or get it scheduled for 2025?

Get ‘er done now. This is a vital, vital piece of this, of thinking about being on offense, thinking about running up the score. Now, the flip side of this is I go back to what I said, you really got to stay focused. You have to act with a sense of urgency. You got to keep your goals in mind and be bold, not bashful, right? Think bigger, don’t belittle what you’ve done all year, but what you are going to do in the last stretch.

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Scott: I will always say, how you finish will determine very strongly how you start. So if for no other reason, whether you've had the best year of your life, run up the score, whether you've had a little bit challenging year that's not been so great, you've got to run through the finish line because it's going to determine how you start the future, and that's the bottom line.

And then, my very, very last piece of advice very simply is this, since we're doing this a little bit time-based, I guess. We're going to fill in the blank by January. By January, I want to what? Save some money, lose some weight, read a book, spend more time with my kids. I want to hit our daily goals every day for the rest of the year, land a couple of our biggest cases, have the greatest number of case starts, reach out to more referring doctors by January, and you just have to do that. Once you speak it, you write it, you post it on the board, and then you execute and you run through the finish line. So that's the advice I have at this point, Maegen.

Maegen: Great, that's wonderful advice, Scott. I'm going to do that myself, that activity. I think it's good for everyone to do every year and just take stock, that's what we say. It's fun to win, it's fun to improve, it's fun to get better. That concept of shifting from, "I have to do something," to, "I get to," really changes the way you think about these ideas.

And so think about that in the meeting too today, that's all I would ask as a final request before we launch you into this discussion, is, if you do catch yourself talking about why something won't work, just shifting that framework to, "Well, how can we get something to work? How can we make something better? What's that progress versus perfection?" You know that's our whole deal. That's what we hope for you, we're honored to be along the ride. And Scott, thank you for sharing these thoughts today, it's really helpful for me too.

Scott: Awesome. Well, I love it. Thank you, Maegen, and everyone get out there and crush it, and focus on creation, stay on offense, run up the score. Diagnosis, case acceptance, full year assessment, and most of all, finish strong, run to the finish line. Take care everybody.