



Practice Focus

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Series 8 The Four Pillars

Session 8 Schedule Control (Part 1)

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Hello and welcome to another one of our very special Practice Focus Pillars, or Leverage Points, of Success. Today we're talking about the fourth item in the magical formula: diagnosis, case acceptance, money flow, or prepay you remember, and schedule control. You know this as value-based scheduling. **Schedule control is such an important pillar of success because it's literally the field of play of your life.** As I promised in day number one, we would start with schedule and we would end with schedule, and we would just rinse and repeat again and again. Because the difference between a \$5,000 day and a \$25,000 day, the difference in any practice growth again and again, is all going to come down to how effectively are we controlling, not the schedule only, the schedule outcome. Controlling the schedule outcome. It's all about reverse engineering success. No different than if we can get one patient a day or two patients a day and we've got limited space and capacity, we're going to increase the quality of that patient. If we just take all the patients, then we're watering down. Screening and scheduling, example.

So with schedule control, it's time for you to put your advanced take on how you go about doing your schedule control so that we can move value-based up to the very next level of growth and leverage and value for your days. **Not just your daily goals, but for your quality of life throughout your days.**

So today, because this is Practice Focus, we're going to move very rapidly into some discussion points for you. I do want to cover a few key ideas around what schedule control is and then certainly what is not. Schedule control must be purposeful, and we have to remember the core objective. The core objective, of course, begins with the goal itself. We know the schedule control achieved through the goal. **However, it's not just about a production goal, it is about a diagnostic goal. It is about creating enough opportunity to give ourselves a chance to achieve the schedule objective.**

So, the last thing I want to say about this is, **understand the schedule control facilitates the diagnosis. The schedule control facilitates the case acceptance. The prepay helps make the schedule control possible by getting more bundles and chunks.** Now, for our specialists out there who are in the new patient business, you have to balance the new patient stream with the delivery stream, with whatever follow-up stream you might have. For the traditional side of practice, we have our existing production base, we have our hygiene opportunities, and then of course we have our new patient flow, all of these things co-mingled into a deliberately, intentionally orchestrated and designed schedule control; the field of play for how all your goals are made possible.

So remember, **number one, we're managing the pace or the flow of the day. Number two, we are scheduling to increase experience. Increase experience means we're not rushed. We're not doing any one of the 12 sabotage factors. You should be studying the sabotage factors from the advanced event—12 items—constantly revisiting at least once a year, and I recommend quarterly. All of this leads to greater diagnostic opportunity.** That means you have to have time for pictures, you have to have time for consultations, you have to have time for repurposing or re-updating exams or delivering phase two on top of phase one. **You have to have time to be creators.** That means dialed-in morning huddles. That means disciplined and accountable end-of-day meetings. Schedule control impacts all of these, even to a simple example of if you're always running late, you cut into your meeting time, you have poor communication, and then you wonder why everything, you know, the wheels are falling off and everybody's stressed out. **It all comes back to proper schedule control.**

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Okay. The next aspect of schedule control is really the tactics side of value-based. So value-based scheduling, you must have a growth goal. A growth goal is going to be designed by the value of the anchor appointments accepted. If you are growing the anchor value, what used to be an anchor now needs to be a greater anchor. What used to be a secondary appointment now needs to become a miniature anchor. What used to be a third appointment is now the old standard anchor. You're building a scalable day, whereas just one or two or three, no more than four, patients should equal your entire goal. Everyone, no more than four, should equal the entire goal. For our specialists, it's the same thing. One or two or three or four case starts, one or two or three or four implants, one or two or three or four full-arch cases. Everything should be designed to facilitate your success out of no more than four patients a day. So this is the value-based goal of the day, anchor appointment value, and then creating that disciplined primary production column that goes with assistant-supported or assistant-driven dentistry column. If you haven't recently gone back and reviewed the value-based scheduling video training, I would do that so that this will all make more sense.

Lastly, remember, our greatest limiting factor is time. Our next greatest limiting factor is capacity. Capacity is the result of space, time, and people brought into one. The amount of space we have, the amount of people we have, the amount of time we have equals our capacity. We want to turn our capacity from a limitation into leverage. Limitation into leverage. That is what schedule control is all about. So your first big assignment here is to say, state of ideal based on everything we know, everything we've learned, everything we're doing today (very successfully)...What would better field of play be like for us? What different approaches or vantage points? How should we tweak or change our perspective with our schedule control?

And my favorite question is, if we were going to get more out of our days, we were going to increase...Eh, that's boring. Double the goal! If we were going to double the goal, if we were going to go up by 50% in the goal, if we were going to add not one or two new patients, what would it look like? What is required to take schedule control to the next level, to focus on outcome objectives based on diagnosis, creation of opportunity, enhancing patient experience? Okay. These are the things we're looking for: improving the pace and the flow and the speed of the day.

The second aspect of your question would be to take your value-based principles, what they were, what they are. What does the future look like? How are we doing our one, two, three, four patient stack for the day to achieve a greater goal value? How are we organizing our two columns? (Or whatever you have, maybe more.) And ultimately, what is our goal structure going to be?

And then lastly, we're then going to be talking about future-focused. Future-focused is morning huddle forward, which you all should understand very much. Is everyone showing up prepared? What does success look like? The three things you're doing is enhancement to patients...How can we discover opportunity to be of service and add value? Number two, what's the outcome of every visit, from the doctor walking in to the doctor walking out or no doctor at all? And number three, what is the flow of the day? Any bottlenecks or log jams that we need to deal with in advance so that we can seamlessly move through this day?

And nothing gets in the way of our hierarchy of success, which goes back to creation of opportunity, high-level customer service, and our diagnostic objectives. All of the rest of the items, case acceptance and prepayment, float out of this structure.

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Now, two weeks minimum. Maybe you're three, maybe you're four, maybe you're more. Whatever you are, as far out as you're scheduled, today in this Practice Focus, you are looking out at the future and you're reverse engineering backwards a day at a time and saying, "Is it state of ideal?" Not just, "Is it the goal?" That's the old, basic level.

Advanced level, is it state of ideal? Is there anything that's wasted? Is there any leverage that can be found? One day at a time, all the way back to today. Remember, you're living two lives at once: you're living today's schedule...future-focused for the visit...future-focused for the day...future-focused for the doctor...future-focused for the patient's health. That is all today. Today.

End of day huddle, you have accountability backwards to say, "How did we do?" The second part of your life, 50% this, is the future-focused. Every diagnostic dollar, every next appointment, every place a patient must go. It lays in the schedule of the future. To have amazing days, we had to create them in advance by being future-focused right here. So you got future, reverse engineer back, state of ideal every day, ways to leverage up and create opportunity, and then you have mastering the success of the day.

So the last key piece to your success discussion is, what is everybody? Busy. Everybody's busy. Everyone's life is full. This is a cop out. This is an excuse. So if you have the best day in your life, you have the worst day in your life, it's your day, therefore it's your fault, okay? You got to own this baby, and understand that, yeah, everybody's busy. And yes, every doctor sees one patient at a time, and yet some doctors are doing \$5,000 a day and some are doing \$25,000 a day. Some are fixing teeth at a time, some are fixing whole bodies and whole mouths at a time. Some people are seeing a few new patients or lots of new patients. None of that matters. Busyness isn't the point. The point is, what do we have to show for the day?

And that goes to my greatest equalizer, we've all heard it: everybody gets 24 hours a day as long as they're alive. The difference isn't the number of hours, the difference is the output of those hours. It is the quality of the input in the time that gives us the quality of the output of the time. So it is your responsibility to master the maximization of what everybody gets. Same amount of time. You also get to make an impact on one person at a time. That's why taking responsibility is the key.

Your final questions and assignment for today for your Practice Focus. At this point, you could write the rules. You can play the game, better than the best of them. You know exactly where you're going from here. Stop thinking about where you've been. Stop thinking about where you are. Let's start future-focused, projecting out what does schedule control need to be to get us to the next level in our operational life, in our daytime family, in our patient success?

Prosperity, financial, goals of all kinds. And then once you understand that piece, you're going to then plug value-based principles at a higher level than ever before, with more discipline and more intentionality than ever before, to create your future-focused vision for the field of play.

So I leave you with: highest and best use of time, operatories, patients, of people, of our team. Schedule control is, are we doing the highest and best use and value of our team and of our time? That's a question for you to assess and brainstorm and discuss together.

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The next one is, **is there any place we're sabotaging ourselves?** Where we're putting things in and we shouldn't? Where we're running too tight on time and it throws the day off? Where we're missing triangles of trust, diagnosis, taking new pictures? Where we're happy to follow up with patients after the fact when we could have closed them while we had them? Where are we sabotaging?

And then what's the first domino that needs to fall? To improve our schedule control, to elevate our value-based, what's the first domino that's got to fall? And the next way to think of that: **is there any clutter we need to clear out?** Clutter in our verbiage? Clutter in our minds? Clutter in our appointment structure? Maybe we should be moving to some virtual. Maybe we should be doing some no-doctors. Maybe we should be shaving off units. **Overall, less volume and quantity, more value and quality.** Where do we need to shake the bushes, dump some patients, free up some space?

Because the one thing we know about schedule control: it always is relevant. The only difference is, like time, is the value out of it is going to equal the value in it. And that's what brings us together with our diagnosis, our case acceptance, our money flow and prepay, and our schedule control and our value-based. And that's how you master those four leverage points of growth, but **it's all going to come down to creating space and making room for more of what you want by removing space and leaving no room for less of what you don't.** And that whole thing is going to become a rising tide. **Elevate the field of play and watch what happens.**

Go get 'em, team. I can't wait to see your responses and your results; see you take this to the whole new level, by being future-focused, challenging the status quo, expecting more out of yourselves, elevating the excellence from your value-based, your schedule control, your future-focused. Create the opportunities. Create the schedule. Create the future, and you'll be amazed at the goals you can achieve, the impact you have, and the overall rising tide benefit for everyone involved. Proud of you. Can't wait to see what you make happen.