

# DENTAL SUCCESS TODAY

## ADVANCED PRACTICE GROWTH

### PATENT EXPERIENCE

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I'm going to go to the next one and it's going to say new patient experience but, quite frankly, it could be just patient experience, period. It doesn't just have to be new patients. Now you say to me, well, maybe on page one, you're doing all those things already. Here's how we're going to create bigger cases. We're going to start with new patients for right now and I'm just going to give you a very general synopsis. We don't have time to go through every specific detail. I want to just give you some general ideas of things that we can all work together on to cultivate more treatment from every patient. So the first thing is, we did this by the way when I met with all of the team originally.

Every patient, we're going to treat with new opportunity, but the new patients coming in specifically, it's critical and essential that we design an experience that is going to facilitate our only goal that matters which is get them to accept whatever treatment is necessary to make them healthy. We do not care about stepping over dollars to pick up pennies. We don't care about hasteful visits. We don't care about cramming patients in just so that we can take care of some minor things. **We want to cultivate relationships.** Your practice is a brand built on a reputation of service, a brand built around taking care of all the people. So in order to do that, we have to say to ourselves, what's taking care of patients? Taking care of patients is about having time to have

intimate conversations, to get to know people, and to move them forward with their health.

The new patient experience should be just that, an experience for the patient, something that lets them run away telling everybody about how great it was and that they can't believe they love coming to the dentist. The first piece is having a pre-appointment phone call. Every new patient has to be called the day before in a very excited way. You may have to help each other about this but the bottom line, every person is not calling and saying, "Hey, by the way, your appointment is tomorrow at 2:00. Don't forget" but telling them, "You know something, tomorrow is an extraordinary day in your life. I know it seems very minor but it's actually a very special thing. You're going to come into High Peaks and you're going to become a new patient tomorrow and you're going to have a great time. Every single one of us is so excited to meet you and I just want to explain a little about what's going to happen and what you can expect. By the way, because tomorrow is your very first time, we want to take the chance to get to know you better, to understand your goals and objectives with your health." By the way, they have no goals and objectives but we need them to and so we condition in their minds in advance of the visit what's supposed to happen.

Now, I can tell you this, the people who are on the phone with you the longest are the people who are going to write the biggest checks. So taking time to dig deeper in the emotional investment, they will always make an emotional investment before they will make a financial investment. That requires us to be the guide and to help them to understand how dentistry fits into their overall life.

Next, when they walk through the door, the last place they go is in a chair with a clipboard or in an operatory with their mouth open. We're going to sit them down and have an intimate conversation and get to know them, look at all the paperwork they have to fill out, and ask them

specific questions to get them to focus on why they might be here. My favorite question, which you're probably asking all this already on the phone, is to ask "What motivated you to call us today? Why did you decide?" If they say, "Well, I have a sore tooth." "Was the tooth store last week? Why today did you decide to call?" If they say, "Well, I need to have a new cleaning, to clean my teeth." "Well, what motivated you to get your teeth cleaned today?" There has to be a reason they had a catalyst today. It might be as simple as, well, they had time or it might be that there's some specific thing.

This is when they'll say, "Well, I have a graduation coming up. I have a wedding come up. I have a Christmas party coming up. I have a reunion coming up" or "You know, I have a lot of money that just landed in my bank account and I decided I wanted to do something nice for myself." We don't know why. "I need to get my teeth cleaned because my gums are bleeding a lot and I have this one place on my tooth that's very chipped and I don't know what to do about it." You have to dig deeper. They're never going to tell you at the beginning what they need or what they want. So it's very important. The same thing happens when they walk in for the very first time. You're sitting down talking to them and getting to know them and you're getting them to start answering your questions in a deeper way. Below the surface is always where we're going to find the big dentistry. It's always where we're going to find our ability to truly help that patient.

Next, they visit the back and you're creating the vision. When you do the handoffs, please make sure the handoff is not just you introducing the patient. The patient doesn't want to be introduced to anybody. They're already shy and embarrassed and not certain that they even want to be here. You want to make the person you're introducing the star. The clinical person, the doctor, the hygienist, the assistant, whoever, the treatment coordinator, that person is the one who needs to have

credibility. The patient, when you hand them off, you don't say anything about their personal lives unless it's very relevant. You're focused on what the outcome is that the patient wants, what you've learned about the patient.

You're handing them off sharing what you learned about them so they don't have to start all over and you're always making sure you're anchoring in what the patient's victory for that visit is. The patient is here because this is what they'd like to accomplish. This is something that maybe we should talk about or you should know about the patient and most of all, you constantly restate in front of the patient what you believe to be their clinical objectives. The more they hear it, the more they're going to be okay with it.

Finally, the doctor does the exam. When the patient is set up, I'm certain that you're already doing the full series of photos on every patient. You're taking intraoral cameras. You're doing all the right things. We're never concerned about insurance paying for things. We're only concerned about doing what's necessary to build a big vision of the case which I'm going to talk about in a second. The patient has to see visual proof of what's necessary. I will explain everything and it will change, it will blow your minds. In a second, I'm going to give you nine specific things that will be very helpful. So when you transfer to the treatment coordinator, this is what must happen. The treatment coordinator will come into the room and you need to hand the patient back off to the treatment coordinator and give them clinical authority.

If the doctor is conveying the treatment or the hygienist or clinical lead, whoever's doing it, in handing over the treatment to the treatment coordinator, the patient must accept the treatment in the backroom. You do not give the treatment coordinator nothing to work with. It's not go out and talk about money. That's terrible. We're not setting them up for success. We need to say "Mr. and Mrs. Patient, here's what we discussed

today. This is what you agreed to. Do you have any questions about the treatment that we've outlined?" No, because this person is going to take care of you from this point forward. The patient says yes, accepts. Treatment coordinator says, "Do you have any more questions? Are you sure no questions for Dr. O'Connor or Dr. Caldon?" "No questions." "Very good, then let's go get it taken care of." If they're moving forward with something same day, then obviously it may be a slight adjustment. Now, one of the most important things is getting the patient to avoid talking about money or insurance.

If the patient brings either of these things up, you're going to say to them and ideally everybody in the practice is going to say, "You know something, Mrs. Smith, we decided a long time ago at High Peaks, we were never going to allow money to stand in the way of the health of our patients. Here, we're going to focus on what's best for you and then we'll work out an affordable plan. As long as you're committed to your health, money never stands in our way, so back here, we're not going to discuss it." So now they move on and do what they do.

So the follow-up, we have to follow-up if the patient does say yes. That's a topic for another time. We already have that all figured out. Next, the wow patient experience, just remember this, every person has an opportunity to create a wow experience. Every person, they will never remember what went well. They always remember what didn't go well.

So we have to make sure that every person is dialed in and focused on every patient but certainly the new patient. The only two things I want to leave you with today about new patients, remember this, the new patient experience does not end on the first visit when they say yes to a case. It ends when the patient completes their treatment and technically it never ends but certainly if they're coming back in for a treatment conference or to go over some kind of diagnostics or if they're coming

back in for their treatment, we're going to continue to be judged on every visit.

Now, my favorite thing to do, number two, which I believe you will receive or already received, when the patient says yes to anything, we need to reward them for good behavior, whether it's a handwritten note, whether they accept a big case or write a check, and we send them a gift at the place of employment. To celebrate their good decision, we want to always be showing up, always congratulating them, always be reaffirming a positive decision. Now I'll handle all of your objections about money and stuff and all these other things another time. Right now, we're just building a framework. Remember, it is a team approach to patients.