

PRACTICE MANAGEMENT

Practice building – an evidence-based approach

SHEILA SCOTT offers valuable advice on building your practice.



With the dust settling on the PRSI change and the medical card fund expected to be slashed at the time of writing, it's no surprise that Irish dentists are a little apprehensive about the future.

But there is plenty that practices can do to ensure continued regular attendance from loyal patients, and to encourage more new patients:

1 Start by finding out what your existing patients think is really important to them when they visit their dentist. In the UK, I have surveyed thousands of patients and found that most patients most value:

- a. trusting their dentist (that means 'the practice' as much as 'the dentist'); and,
- b. treatments to ensure that teeth and gums stay healthy.

In most practices patients are also looking for evidence that the practice is 100% clean and following cross infection procedures, and for reassurance that patients will be seen quickly in an 'emergency' and that problems will be sorted. It's also very important to them that they are being screened for oral cancer and that their dentist is skilled enough to be let loose inside their mouths!

So far, the picture looks similar in Ireland – with the possible caveat that Irish patients (have been allowed to) believe that 'sorting dental problems' is relatively more important to patients than it is in Scotland, England and Wales.

Once you have identified what is 'most important' to your own patients, you can then organise care and communications to make it clear to patients how their needs are being met – and this is what builds 'value for money', loyalty and referrals to friends and colleagues.

2 Do make sure that the focus of your regular exam is on 'health screening and monitoring' rather than allowing patients to think that you are 'looking for holes in their teeth'. Start by telling patients that you are going to check to see how healthy their mouths are – or better still, ask them if they know how healthy their mouths are, instead of opening with the world wide favourite of dentists: 'Any problems?' (This common opening question simply highlights to patients that the purpose of the exam is to look for things to fix – and, of course, if there is nothing to fix, why should they

return before they experience obvious pain or a problem?) The practices I work with offer nine-, 10-, 12-, and 14-point dental health checks, and the dentists follow defined protocols for checking, recording and communicating the results of the specified number of checks made each time. Patients are always impressed and the most common response after their first one is: "I've never had an exam like this before!" (Of course they have – dentists just haven't been very good at giving patients feedback about what they've been doing!) Another potential response is to tell a friend about this new style 'health'-based exam.

3 Do not build your practice on too many promotions for cosmetic dentistry. Although there is still significant interest in cosmetic improvements and makeovers, the importance of this element is well down the list of what patients 'want' from their dentist – and of particular relevance is the fact that large proportions of patients definitely do not have an interest. In fact, this large uninterested proportion is very suspicious about the perceived 'hard sell' of cosmetic dentistry. The opportunity is there in all practices, but you must be careful about how it is introduced to patients, and it is best if cosmetic dentistry is offered in the context of a clear approach to keeping patients as healthy as possible.

4 Do encourage all your patients to keep up their visits to your hygienist. After all, for most of your patients, isn't it more important that they visit the hygienist to learn how to care for their mouth every day at home than it is to keep regular visits to their dentists? For success in this aspect, you must give every patient clear information about what the hygienist does for them (surely she helps to keep them dentally healthy – exactly what they most value?) and how (by showing them the skills, tools and techniques they need to control the factor that does all the damage to teeth and gums). In my practices, the words 'scale and polish' and 'cleaning' as descriptors of the hygiene appointment are banned, as these words do not convey to patients exactly what the hygienist does for them. Worse, they allow patients to expect only the least important part of the hygiene visit. Please watch your language!



5 If you could use some new patients and if your patients feel that 'sorting of dental problems' is really important to them, do make sure that you have a very clear policy for emergency or 'problem solving' appointments. Monitor the number of phone calls you get each day of the week, and each week of the month, and make sure you always have time set aside to handle the 'usual' amount of emergency cases for each day – preferably keep this time towards the end of each day, so that your callers can organise to come in shortly after they call. Make your conditions for these appointments very clear – I prefer set fees for these appointments so that receptionists can reassure patients about costs immediately. They should also be able to tell callers that the set appointment time and fee can 'get most patients out of trouble'. You could also have clear information about your problem solving appointment on your website and signage, to reassure potential new patients that you could help them, but do also make sure that you encourage these new 'emergency' patients to return for full health screening/dental health checks at a later date.

6 Finally, don't lose your patient's trust over insecurity in another key area. Please discuss with your team ways in which they can make sure that patients are left in no doubt about your attention to sterilisation and preventing cross infection. Patients across the world are now judging practices by the standards they believe are practised in cross infection control – we have heard of patients walking into east coast USA practices asking to see the practice's sterilisation records, and certainly we know that new patients who are asked to write a 'stream of consciousness' record of their visits always mention what they see of sterilisation processes. So please mention the word 'sterile' or 'sterilisation' at least once during each patient visit ('Please pass me a sterile pointy thing?' 'I'll take this for sterilisation?' 'Here's your sterile tray for Mary, Dr Dentist?'). Please ensure great signage on the door of the sterilisation room, or pointing towards the sterilisation centre at the back of the practice. Please do watch what you touch with gloved hands – use tissues or take your gloves off to use pens, computer keyboards, light switches or record cards. And if anyone is caught outside a surgery with gloves on (and no tray of instruments or x-ray in the one gloved hand) there should be an immediate €5 fine levied! Patients seeing you do seemingly innocent everyday tasks with gloves on is a far bigger crime than the €5 pays for! They think you are wearing gloves to protect yourselves, not them, and they are very very scared! After all, they know exactly what infections they can get from their dentist!



Sheila Scott is a dental business and marketing consultant. She helps practices to develop their businesses and spoke at the conference in Croke Park in January.



The Council of the Irish Dental Association

would like to thank all the
Trade Sponsors
of our recent Annual Conference in Galway

Members of the Association are encouraged to favour these Sponsors with their business.

GOLD

Colgate
Nobel
VHI DeCare
Wrigleys

SILVER

Denplan
Dentsply Friadent
DPAS
GSK
Kodak (Practiceworks)
Listerine
Practice Plan
The Dental Plan
Voco

BRONZE

Biomet 3i
HSF Healthplan
I-Stream
Kerr/Sybron Endo
MedAccount
Oral B
Septodont
Straumann

STANDHOLDERS

3M	Initial Medical Services
A-dec Dental UK	Karma
Ardagh Dental	McDowell and Services
Celtic Marketing	Omega Financial Management
Dental Protection	Optident
Discus Dental	Promed
DP Medical	SDC Laboratory
Happy Threads	Southern Implants
Heraeus Kulzer	