

Caring Your Way to a Successful Practice, Pt 1

by

Steve Cartin

Dentistry and ministry. You do both. And while you don't perform root canal therapy on Sunday mornings, the ministry side of life goes on. For almost 20 years, ministry and dentistry have co-existed in some proportion in my life and work. Caring for people commands a top priority in both. You probably feel much the same.

Last February while flying out to work with dentists in England and Ireland, a book display in the Atlanta airport caught my attention – the title: *What Would Google Do?* Honestly, I like the title. Sure, it's a play on the phrase *What Would Jesus Do*. But the point is that it highlights the radically new and profitable business model of the young entrepreneurs at Google. No doubt, the book calls for a radical transformation in corporate thinking. How much more do we as joint-heirs with Christ need to let God's truth impact the way we approach the business of caring for people and their oral health?

Jesus set the standard for caring, the standard that becomes a lifelong pursuit for those in healing professions. With this in mind, if the Great Physician were in fact the Great *Dentist*, how would He motivate patients to accept the treatment they need? Two aspects of the care He provides come to mind.



Steve Cartin, BS, MDiv provides practice management coaching and services to dentists and teams in the US, England and Ireland. As an ordained and active minister whose previous experience includes directing Cathy Jameson's consulting network in the United Kingdom, his services are based upon Biblical principles for business, leadership, relationships and ministry. Steve will be a featured speaker at the 2009 Christian Medical & Dental Association Annual Conference in Ridgecrest, NC. He can be reached at 803.335.3128 or by email at steve@cartincoaching.com.

We spend time with Him daily to nurture our devotion and to keep ourselves spiritually strong. And then when we have fallen, become sin sick or downhearted, His Spirit prompts us in each instance to move forward again by His forgiveness or power. His philosophy of care for us provides a framework for our philosophy of care as well. Embracing that philosophy will impact the way you do dentistry in profound ways as it relates to superior levels of patient care and increased profitability and satisfaction in your practice. Let's look deeper here in the first article of a three-part series to get our minds around a better approach to scheduling than we have likely been taught. How do we get started?

Step 1: Think Biblically

Caring for your patients' calls for a dual approach just as our spiritual nature needs daily care and our yet unredeemed nature needs special attention in time of crisis. Patients who are regular in hygiene keep their oral health at an optimal level while receiving early detection of serious or even life-threatening situations. Those who follow through with recommended operative treatment receive the care they need and avoid developing associated conditions that negatively impact their oral health. What if we approached filling our schedule from the basis of patient care rather than profitability? Would there be enough dentistry scheduled in your practice to make it successful? You can count on it. And you'll find a deeper level of satisfaction and fulfillment in your work along the way.

Practice evaluations I have conducted in the States and in England and Ireland confirm that more than enough treatment has been diagnosed and recommended among our active patients than we could schedule in a timely manner. We would have to work around the clock for many months to catch up if all our patients suddenly moved forward with treatment. The same is true with hygiene.

I remember one particular exceptionally patient-focused team. When I suggested that they didn't have enough available hygiene appointments, they bristled at the idea and resisted. They told me they wanted 80% of active patients regular in hygiene and so I made that our starting point. When we calculated how many appointments would be required, we discovered they only provided 46% of the appointments that were needed. They objected. We calculated again. When I left at the end of the day they were beginning to admit that some of their patients may not be receiving the care they need. A couple weeks later, the Practice Administrator phoned me to say she had run the numbers more carefully. My hypothesis was right. She had calculated 51%, still almost 1/3 short of what they stated as their own standard of care. Why didn't they know it? Because their schedule was full. What if Jesus were not available for us every third day when we showed up for our quiet time? Thankfully, His schedule is never full.

The story is the same with operative treatment you have diagnosed and presented. In more prosperous times when schedules are relatively full, we lose track of the fact that much of the dentally necessary treatment we have prescribed has fallen through the cracks. Some patients haven't been seen in many months. We may not see them again until they have an emergency. In these leaner economic times I'm hearing from more practices with increased cancellations in hygiene and lower or slower rates of treatment acceptance. What I want to propose is this: Trying to drive more prospective patients to the practice with our focus being the schedule rather than patient care will only aggravate the situation in the end. But if we make patient care the focus with existing and prospective patients, the schedule will take care of itself. And in the next section, I want to begin to tell you how.

1 Peter 1:7 says, "*Cast all your cares upon Him, because He cares for you.*" The very reason we can take all our needs to Christ is because His care for us is both comprehensive and eternal. The more we acknowledge how much He cares, the more readily we go to Him without

hesitation, even when we suspect the answer might be something our human natures would rather not hear.

None of us will come close to attaining to the level of caring for others as does Jesus. Yet, He is the example and His Spirit can facilitate miraculous growth in this aspect of our ministry, and our dentistry.

So now, let's get on to how we can practically implement this philosophy in our practice.

Step 2: Prioritize Hygiene from this Point Forward

As three couples enjoyed food and conversation one lady commanded the attention of the entire dining area, complaining loudly about her dentist's office by name. She went on about why someone only needed one hygiene appointment each year. And then she related a recent conversation with a team member in her dentist's office. The team member expressed concern that Perio Patti (name unknown) had not been seen in hygiene for more than a year. They were concerned and wanted to get her in for an appointment, if possible. However, Patti concluded that the team member had an ulterior motive: *"Who are they kidding? They're not concerned about me - the economy is down and they need the business!"* As I had no option but to listen in to Patti's theories along with all the other diners, I asked myself a question: How I could better equip practices to make such care calls in the context of our present economic climate.

The practice may have intended to demonstrate concern by phoning the patient. But the show of concern was interpreted as self-serving and mercenary. Should we be surprised? In 1 Samuel 16:7, God said to Samuel,

"...the Lord sees not as man sees: man looks on the outward appearance, but the Lord looks on the heart."

What does this scripture have to do with encouraging patients to make appointments they need? Simply put, this verse teaches two truths: Most importantly, God sees what is real and knows

what drives us. Of lesser eternal consequence but equally true down here below is this reality: *People typically view us and our actions only by the most superficial observations.* Knowing that our heart is in the right place when trying to get patients to commit to the treatment they need is one thing. Communicating our motives such that patients move forward with treatment is quite another. In this article and the next, let's consider how to communicate a genuine concern for patients and, by doing so, to promote a more productive schedule. What are some keys to making this a reality?

We've already established that many active patients have not received a hygiene care call because we simply didn't have room for all of them before this economic downturn began. Those who resisted one or two calls may have disappeared into the black hole of hygiene. If those patients haven't heard from your practice in months or maybe years, calling to express your concern for their oral health may receive the same review that Perio Patti gave her dentist. So what are we to do?

In twenty years of pastoral ministry I can't possibly recount the times when someone I've counseled kept avoiding the present because of the past. Human nature seems to want to make up for all the wrong of the past. And at times, people focus on making up for the past to the point that they never really get on with the present. The result is less than satisfying, typically very frustrating. It's not a lot different when we consider the omissions of our practice in the past in letting patients fall through the cracks. While we can't edit the past, we can certainly rewrite a better future.

Discuss hygiene retention with your team and clarify your goals for the percentage of patients who should be keeping routine hygiene appointments. Then, assign a team member to track each new patient entering the practice and every two weeks report on the percentage who have booked hygiene appointments. Follow up on new patients who have not booked a hygiene

appointment by making a phone call to encourage them to get started with re-care appointments. In monthly team meetings, report the percentage of new patients who have made appointments with the hygienist(s).

. You may currently have 60% of your patients active in hygiene or even 75%. Regardless where you stand today, tracking these numbers will help you to know the level of success your team has helping your new patients receive the preventive care they need. Track them until it becomes a part of the fabric of your practice. You might remember how as a new Believer you used a Bible Reading chart and checked off your daily reading each day. Years later, you're still reading the Bible every day but you don't need a chart. Your team needs to make a habit of staying on top of that 80% number (or whatever your philosophy of care dictates). Use whatever charts or lists you need to help them develop the habit of maximizing the percentage of patients who are active in hygiene.

Next time we'll discuss the operative schedule, treatment plans and dealing with voids in the schedule. And then in Part 3 we'll tackle the question of how to increase the flow of patients into the practice. For now, think through your philosophy of care and commit to providing that care in the very best way possible. Discuss a new commitment to hygiene with your team that begins with the very next new patient who walks through your doors. And begin articulating your direction for the practice from a basis that begins and ends with patient care. My experience tells me you'll be glad you did.

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