The Practice Recovery Workshop

Based on the works of
L. Ron Hubbard

Section I:
Overview

What You're Facing

Things have changed! Since returning to work, you're facing,

1. A business that has been closed/limited to Emergency treatment for 1-2+ months.

2. Backlogged treatment, including routine preventative care.

3. Increased costs,

4. Modified/reduced schedule capacity to accommodate safety/prevention, new processes and potentially lack of adequate personnel,

What You're Facing

5. Unemployment running at 15% nationally in the US, potentially affecting some of your patient's coverage and ability to pay and

6. Staffing issues relating the recent crisis. In some cases, offices more or less dismantled by losing key personnel short-term, or permanently!

Where Do We Start?

Confronting all of this in one "gulp" can become overwhelming.

In what follows, Mr. Hubbard lays out the general steps to reviving a contracting organization…

The Best Organization

By L. Ron Hubbard

"The best organization is one which has a responsible person over it, methods of working out its problems, basic actions and a good desirable product."

The Best Organization

By L. Ron Hubbard

"It adapts itself to its environment or surroundings or conditions of operation so as to expand to greater or lesser degree."

The Best Organization
By L. Ron Hubbard

"Such an organization must have a clear-cut purpose and fill a definite need in order to survive.

Its services must be more valuable than what it costs to produce or furnish those services."

The Best Organization

By L. Ron Hubbard

"It must, to remain healthy, obtain more potential than it spends. For "potential" can be ready money or power or even strength.

Where an organization violates these very fundamental things, it sickens and will eventually perish."

The Best Organization
By L. Ron Hubbard

"Thus when you see an organization begin to contract, if it is to be salvaged, it must be:

1. Stripped back to basics quickly,

2. Its form simplified,

3. Its purpose clarified and"

The Best Organization

By L. Ron Hubbard

4. "The important services it can render greatly intensified and

5. The cost of rendering them greatly reduced.

This formula intelligently applied even to a dead government could revive it."

The Basics

By L. Ron Hubbard

"Thus we find the flaw in all our actions to be the failure to separate out the truly basic important actions and instead engaging upon trivial complexities."

The Basics – A Dental Practice

1. Sells & Delivers High-Quality Dentistry

2. For growth (or even to maintain itself), needs new people (patients) to sell and deliver to,

3. All with the object of contributing to increased oral (and overall) health, function and aesthetics.

4. To achieve these objectives, has a well-attended Hygiene program to both monitor and maintain a patient's oral health and to contribute to maintaining their overall health.

The Basics – A Dental Practice

5.   Has an active, competent management to ensure 1-4 above done well, cost-effectively and in such a way as to retain its customer base and promote sustained growth.

What We're Covering

1. **<u>POLICY:</u>** Developing and implementing needed policy,

2. **<u>SCHEDULE:</u>** Refilling your schedule and maintaining is productively with necessary modifications,

3. **<u>CASE ACCEPTANCE:</u>** Increasing case acceptance and collections,

4. **<u>NEW PATIENTS:</u>** Immediate actions to acquire new patients,

What We're Covering

5. **<u>REACTIVATION:</u>** Reactivating your patient base,

6. **<u>OVERHEAD:</u>** Eliminating waste from your overhead,

7. **<u>STAFF:</u>** Addressing immediate staff related issues, and

8. **<u>MANAGEMENT:</u>** Management actions to take while rebuilding your office.

Purpose

"**PURPOSE:** The reason for doing something, why something is created or exists."

Organization & Purposes

By L. Ron Hubbard

"The word "management" implies there is something and some someones to manage.

A business or company or organization implies others present and are engaged in a similar activity. It is a *team*.

Any organization, no matter how complex, is bound together by common purposes."

Clarifying Your Purpose

With all that has transpired the past two months, and its resultant confusion, it's critical to align your team with the office PURPOSE as the guiding factor!

Purposes, Examples

Purpose(s):
a. To help our patients live longer with a higher quality of life by providing top-tier dental treatment and home care instruction…
b. To restore and maintain the health, function and aesthetic of our patient base so they can live healthier and higher quality lives..

Drill:

If you haven't done so already, determine or clarify the primary PURPOSE (or PURPOSES) of your practice. Note this down to cover with your team.

When finished, type "purpose" in the chat.

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Section II:
New Policies & Procedures

Policy

By L. Ron Hubbard

"**POLICY:** *Policy* consists of the operational rules or guides for the organization which are not subject to change."

The Problems?

1. Implementing tons of new, added steps – all at once,
2. Can be overwhelming and if no guidance all appear to be of equal importance,
3. Takes effort and correction to establish, drill in new processes.

Drills

By L. Ron Hubbard

"Alteration and poor results do not really come from not-know. They come from can't-apply."

Drills

By L. Ron Hubbard

"Drills, drills, drills and the continual repetition of the *important* data handle this condition of can't -apply. If you drill people hard and repeat often enough basic facts of their position, they eventually disentangle themselves and begin to do a job of application."

Checklists

Checklists can be of great assistance in familiarizing a person with a new position, or new procedures.

These can be simple or more involved, but in any event, should provide a guideline and structure for repetitive, important actions.

Checklist Sample

SAMPLE (NOT FOR ACTUAL USE)
PHONE APPOINTMENT CHECKLIST

1. Ensure patient has been asked the "in the last 14 days questions" if being schedule today or in the next week.

2. If all questions are answered no, proceed to schedule patient for appointment.

3. Send the patient a link to the intake protocol video or flyer you've created so Patient knows what to expect when he/she arrives.

4. Make sure to include the text or phone number they are to contact when they have arrived at the office for their appointment.

5. Conditional: if patient has answered yes to any of the questions, ask additionally if they have seen a medical provider and if they were diagnosed for anything? Let them know you will be getting with the Office Manager and doctor to discuss setting their future appointment.

Dummy Run

By L. Ron Hubbard

"You just go through the organization's public lines one way or the other, and try to get hired or something like this, or try to take advantage of this new free offer, and go into the proper point and just try to get it.

You take a whole bunch of questions which the public would be prone to ask."

Responsibility

By L. Ron Hubbard

"Unless one can fix responsibility for actions there is no responsibility anywhere and the whole show goes to pot."

Drill:

1. List out the specific new processes you've introduced into the practice that should be drilled by your team.
2. Now list out which of these should be "dummy run,"
3. And now, work out which of these should have checklists made.

Action Items

1. Meet with your team and discuss/clarify the purpose of your office. Get them on board with achieving it and ensure they can see its importance above all else.

Action Items

2. Get policies written and instituted on all subjects related to new processes. Some of which may include: (this is a big list but by no means complete…as the doctor, you would have to judge what is needed). The ADA also has templates for these.

- Modifications to appointment process (i.e. pre-screening, checking for change in address of benefits)

- COVID-19 screening policy for both patients and staff

- PPE policy

- Financial policy modifications (how payment is made)

- Office cleaning/turnover and sterilization policy

- Updated consent forms

Action Items

- Possibly some type of staff acknowledgement and waiver,

- At-risk patients, potentially ill patients

- Intake, registration & Check out policies

- Clinical & Procedural changes

- Staff and Office Protection

- Employee illness and general prevention guidance (e.g. handwashing & prevention)

- Seating, scheduling and managing patients in the office.

Action Items

3. Determine the key procedures from these policies that you need to drill.
4. Work out which procedures should be dummy run.
5. Build time into the schedule to drill and dummy run these new procedures.

Action Items

6.   Make simple checklists for any important, repetitive, multi-step processes that you've recently instituted and get these to the appropriate team members.

7.   Drill and dummy run regularly until your team can do these steps **cold** – without thinking – especially important as you're adding new team members

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Section III:
Re-Filling and Managing the Schedule

Time to Get Busy!

1. Schedule guidance should be published,
2. Determine if you are extending hours (and when this ends).
3. Patients need to know you're open!
4. You need to confirm what you have, and re-fill the rest productively,
5. You have to monitor 1-4 above on a frequent basis.

Schedule Guidance

Determine the exact changes you'll be making to your schedule, e.g.

1. Adding time to each doctor or hygiene visit, or between patients,
2. Any changes to hygiene checks, delivery or secondary treatment time,
3. How your schedule will work now if down one or more assistants,

Schedule Guidance

Determine the exact changes
you'll be making to your schedule, e.g.

4. Any adjustments to appointment times to account for added intake steps,
5. Reiterate what **stays the same.**
6. **Discuss, and answer questions.**

Extending Hours

If you're extending hours to catch up the "backlog," make sure this has an "end date, and includes any procedural specifications.

And of course, make sure this is completely understood by your team.

On Promotion

By L. Ron Hubbard

"When financial slumps are in view or forecast, always promote first and fast, ignoring the lines and organizations, and straighten up comm lines and organizations afterwards."

On Promotion

By L. Ron Hubbard

"If you know this and do it, you won't ever have a complete financial disaster."

You're Open!

This needs to be promoted. **Heavily.**

1. Letters, emails, texts, to patients (3-5 times),
2. Re-Opening video (with weekly updates), on YouTube, Facebook & if possible, your website,
3. "All hands" calls to your patient base.

Letters, Emails, Texts

Should let them know you're back and,

1. Open for routine care,
2. Accepting new patients,
3. Any adjustment to hours,
4. Any new steps your taking to protect them (keep this simple),
5. To schedule an appointment if they don't already have one.

Should go to ALL charts – unless truly "inactive."

Follow up with similar letters and updates, weekly or bi-weekly.

Videos

Again, should let them know you're back and,

1. Open for routine care,
2. Any changes to intake & check-out procedures, a tour, including explanation of pre-screening is helpful.
3. Any adjustment to hours,
4. Any new steps your taking to protect them (keep this simple), can show them as you tour.
5. Fun, should reflect practice culture.

Videos

5. To schedule an appointment if they don't already have one.
6. Follow up with weekly video updates. (could cover services, specials, community involvement, etc.)
7. Publish (at least) on FB, YouTube. Possibly your website (share YouTube videos on Facebook as well).

"All-Hands" Scheduling

1. Again, someone must be "in-charge," and responsible for this effort,
2. Should include targeted objectives.
3. Designate additional team members to assist (including when they would do this and who they would call, e.g. recall, doctor schedule, delivery appointments, etc.). May include those tele-working from home if HIPAA compliant cloud software.

"All-Hands" Scheduling

4. Make sure to follow up all of your emergency new patients from the shutdown period to get them in for initial exam, X-rays, etc.

5. Monitor progress and issues *daily*.

Action Items

1. Immediately outflow to your patient base via email, letters, texts that you're back in the office and ready to see them again. Do this weekly at least 3-5 times. These messages can be varied – but we want this as a repetitive communication
2. Make a "welcome back" video for your patients. Put it on your Facebook page, and YouTube, possibly your website.
3. Do video updates weekly (if you can).

Action Items

1. If not done already, assign someone to be responsible for refilling the schedule.
2. Work out an "all-hands" approach to getting the schedule repopulated. Might include stay teleworking from home, or staff on other positions.
3. Immediately follow up with any new patient emergencies you saw during the shutdown and get them in for a New Patient Exam

Action Items

1. Goals/objectives should be set daily and monitored to ensure they are met.

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Section III:
Case Acceptance

Improving Case Acceptance

Case acceptance is obviously **the** key component to populating the doctor's schedule with productive procedures!

It's primarily dependent on:

1. The doctor's ability to "sell" i.e. effectively present treatment and
2. The organizational side of sales within the office.

An Organization's Income Ceiling

By L. Ron Hubbard

"The ceiling of income in the organization is placed by the sales line*."

Line: A fixed pattern of positions (jobs in an organization) who originate and receive or receive and relay orders and information in an organization.

The Sales Line
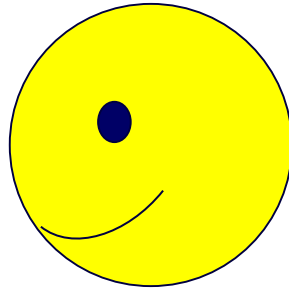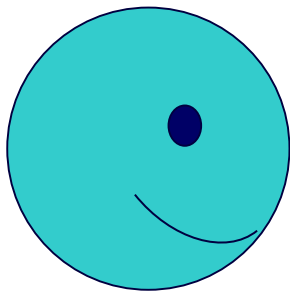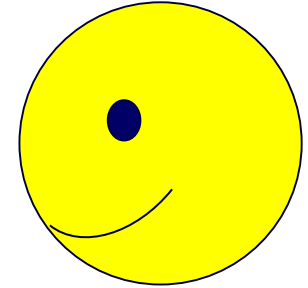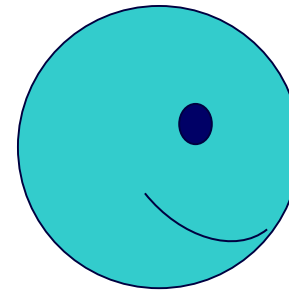
New Patient

Step 1

New Patient → Receptionist

New Patient Calls In

Step 2

New Patient → Scheduler

Call routed to Scheduler who appoints patient
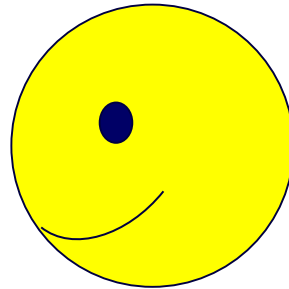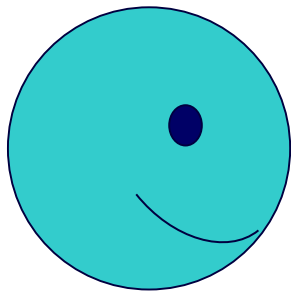
New Patient → Doctor

Initial Exam and TXP worked up

Step 3

STEP 3: Exam

1. Doctor's call on whether NPs seen in Hygiene (X-Rays, periodontal probing, etc.) or by doctor. Obviously, doctor would need to do an exam.

2. Run good positive control. Don't leave the patient by themselves, or unnecessarily waiting.

3. Avoid using terminology that the patient would not understand (or define terms you do use).

4. If possible, when doing the exam and charting for diagnosis, avoid using specific procedural terms. Save that for the treatment presentation.

STEP 3: Exam, Continued

5. Obviously, ensure you have a good handle on and address their chief complaint.

6. If you are going to use abbreviations while charting, let the patient know.

7. During the examination, assess what the patient's frame of mind is with regards to dental treatment and what they hope to achieve.
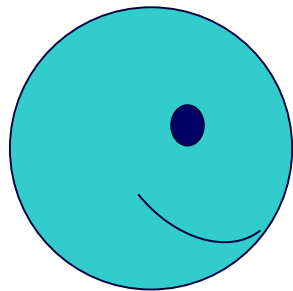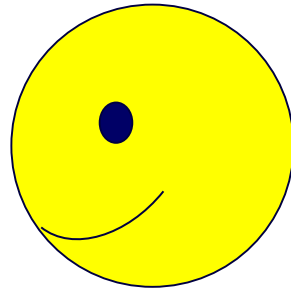
The Sales Line
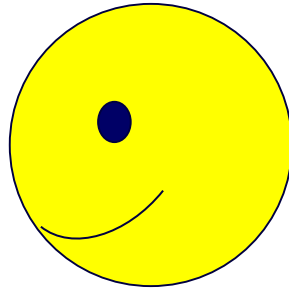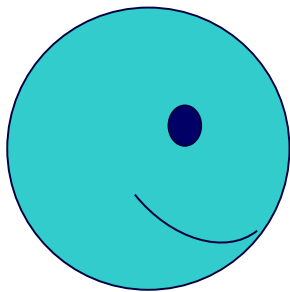
New Patient

Step 1

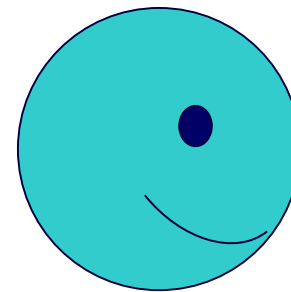New Patient → Receptionist

New Patient Calls In

Step 2

New Patient → Scheduler

Call routed to Scheduler who appoints patient

Step 3

New Patient → Doctor

Initial Exam and TXP worked up
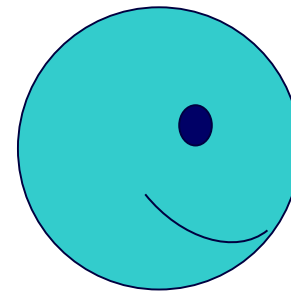
Step 4

New Patient → Doctor

Treatment plan presented and accepted
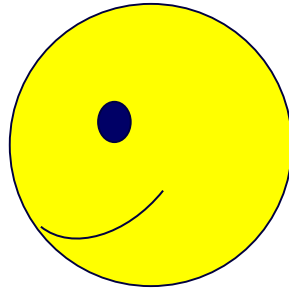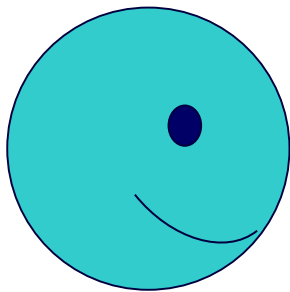
Consult Needed? Now? Later?

Whether or not to schedule a consult, and how long you would schedule it for might depend on five things:

1. The **size** of the treatment plan.
2. Whether this is a **new patient or patient of record.**
3. The patient's **tone** level.
4. How much **time you have** today.
5. How much **time the patient has** today.

The Sales Line

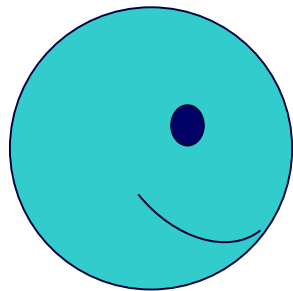*New Patient*

Step 1

New Patient → Receptionist

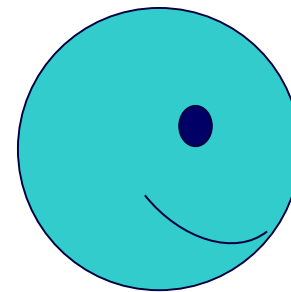**New Patient Calls In**
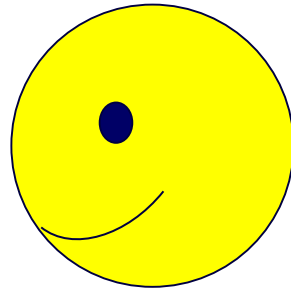
Step 2

New Patient → Scheduler

Call routed to Scheduler who appoints patient

New Patient → Doctor

Initial Exam and TXP worked up
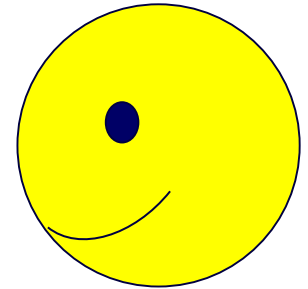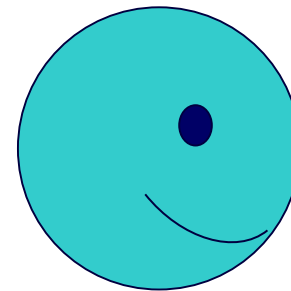
New Patient → Doctor

Treatment plan presented and accepted

Step 3

Step 4

Step 4: Consult

1. Ensure you have all decision makers present (if possible).

2. Avoid (or define) heavy medical terminology. Make the treatment plan and why they need it **real** to the patient.

3. Handle any originations or indicators. Ensure the patient understands.

4. Obviously, address chief complaint.

Step 4: Consult

5. **(Ideal):** Once patient fully understands treatment, doctor would review financial options and patient would settle on how they are going to pay prior to doctor leaving consult and turning over to a staff member handling financial arrangements. (TX Coord., Fin. Coord., etc.). **(Minimum):** Doctor should discuss fee prior to full pass.

6. **(TX Coord):** If financing treatment plan, have all financial arrangements made prior to the patient leaving.

Step 4: Consult

7. **(TX Coord):** If patient attempts to change treatment arrangement, changes their mind about doing any treatment, etc., the doctor should be asked to come and talk to them.

8. If possible, doctor to assist in affirming the schedule, i.e., morning appointments, etc.

9. Lastly (and more importantly), same degree of control and speed used on the sales line is used to get the patient IN for treatment.

The Sales Line
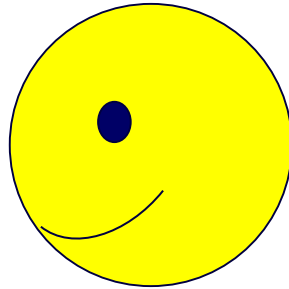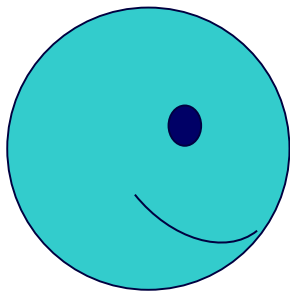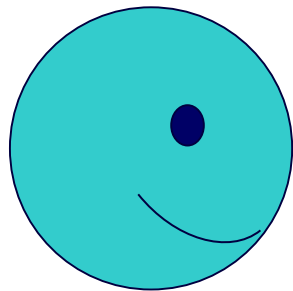
New Patient

Step 1

New Patient → Receptionist

New Patient Calls In
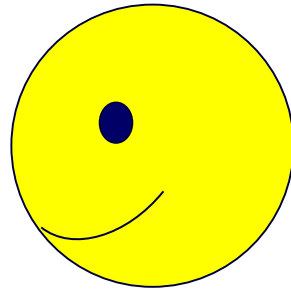
Step 2

New Patient → Scheduler

Call routed to Scheduler who appoints patient

Step 3

New Patient → Doctor

Initial Exam and TXP worked up
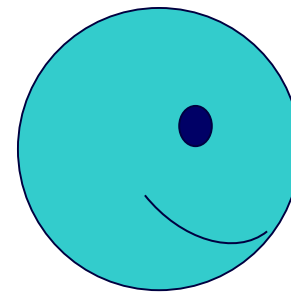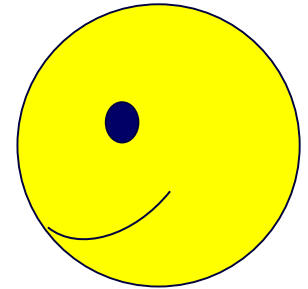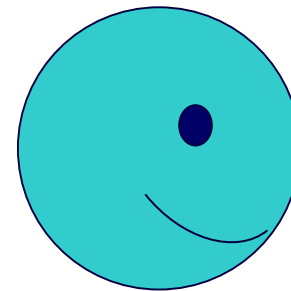
Step 4

New Patient → Doctor

Treatment plan presented and accepted

The Sales Line

New Patient

Step 5
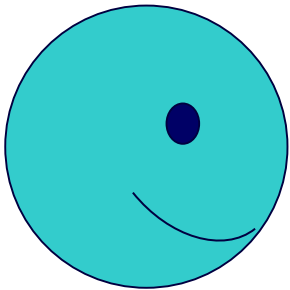
New Patient → Fin. Secretary

Financial Arrangements Done

Step 6
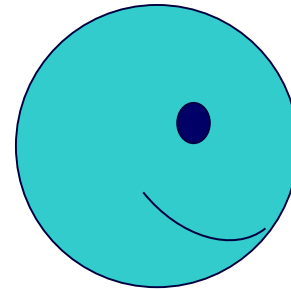
New Patient → Scheduler

Patient scheduled for TX
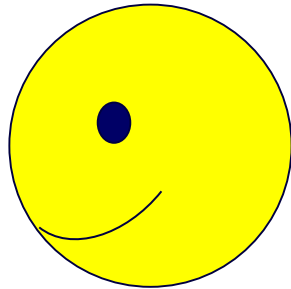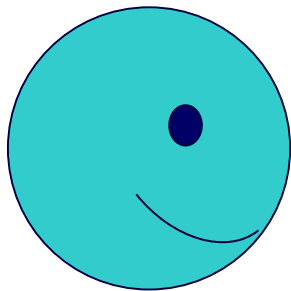
New Patient → Doctor

TX done
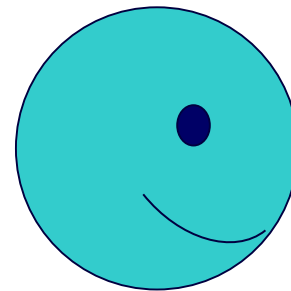
New Patient → Scheduler

Patient appointed into recall system and/or for appropriate follow up

Step 7

Step 8

The Sales Line

Patient of record

Step 1
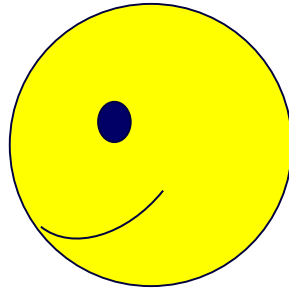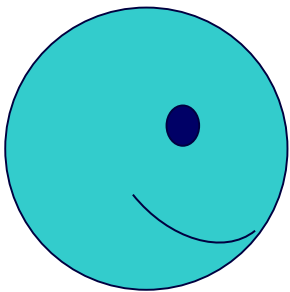
Patient → Hygienist

Patient in for normal hygiene appointment

Step 2
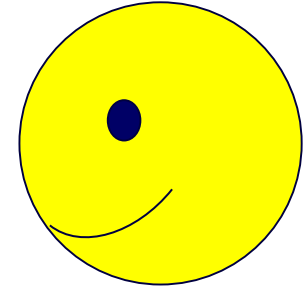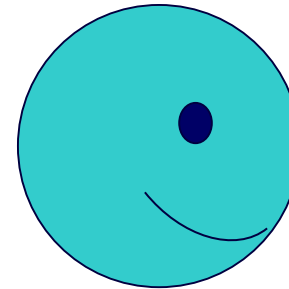
Patient → Doctor

Doctor does exam and TXP
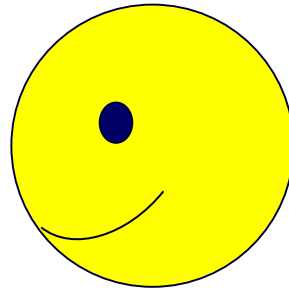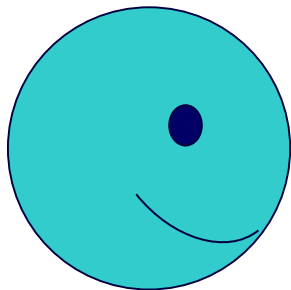
Step 3

Patient → Doctor

If time to present TXP does so or reschedules

Step 4

Patient → Doctor

Treatment plan presented and accepted

Drill:

1. Review the steps of the sales line with relation to your practice.
2. Considering what we've just covered, note the steps you would need to take to fix or improve your Sales Line.
3. When done, type "Sales" in the chat.

Action Items

1. Review the material on the Sales Line and work out how to implement it in your practice.
2. Meet with your team and discuss the steps (and their roles) on the Sales Line.
3. Dummy run the steps on the Sales Line. Have one of your staff act as the patient. Note where things bog down and take appropriate action to fix it.

Action Items

4. Doctor and team to review the Morning Production Meetings handout. A copy can be found in the Checklists & Resources Booklet.

5. Ensure everyone understands their role in the meeting.

6. For follow up and better understanding, have the team watch the DDS Success Teambuilding Session "Morning Production Meetings."

Action Items

7. Schedule when your Morning Production Meetings would occur. Start having them daily! OM to follow up on targets set during the meeting.

MARKETING ACTIONS

COMMUNICATE!!!

WEBSITE

Give updated COVID-19 pop-up
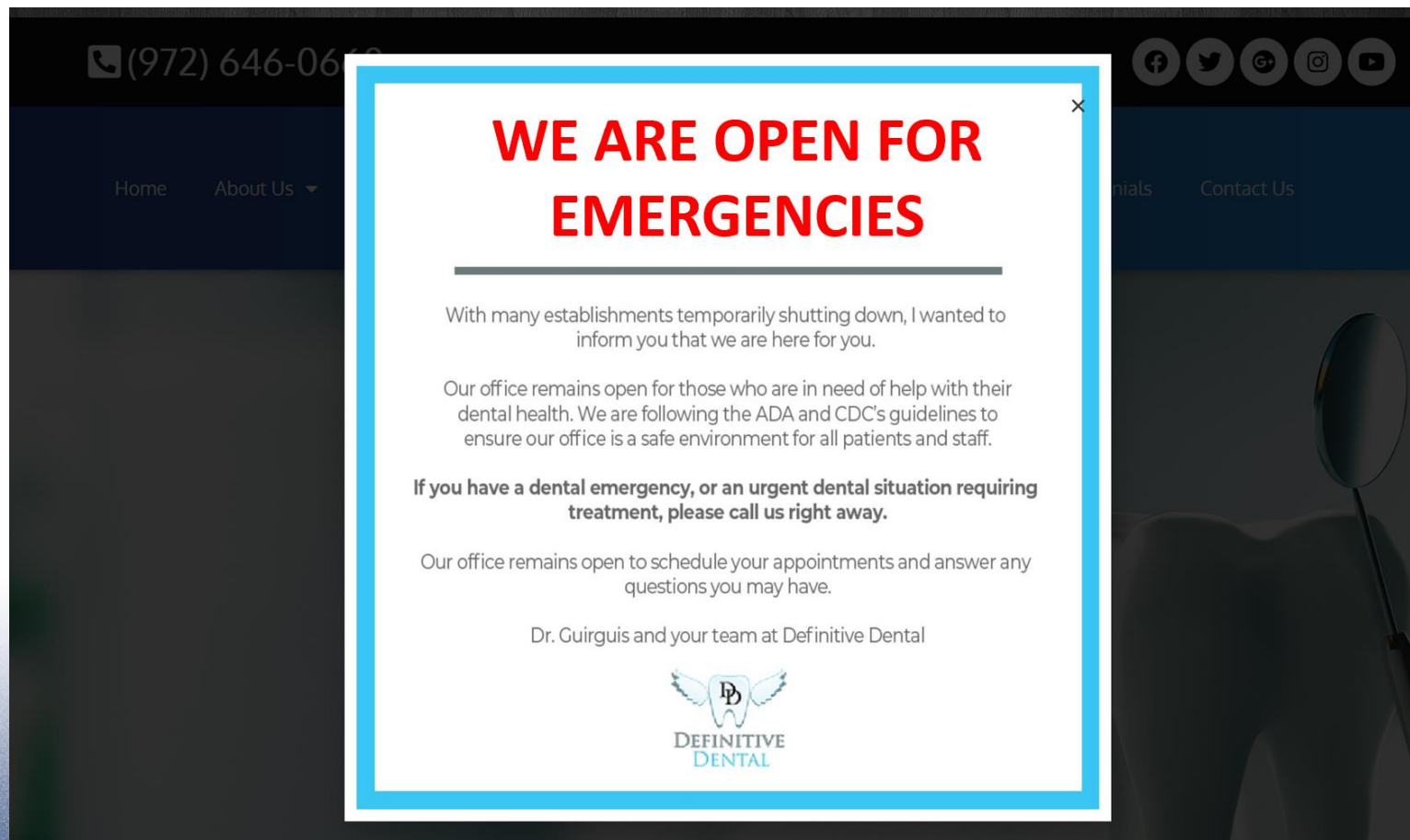
Gross Income Senior Datum

By L. Ron Hubbard

"THE SIZE NOT THE QUALITY OF AN ORGANIZATION'S MAILING LIST AND THE NUMBER OF MAILINGS AND LETTERS TO IT DETERMINES THE GROSS INCOME OF AN ORGANIZATION."

WHAT TO DO?

Google Ads	Facebook Ads	Facebook Posts	Bulk Texts
Bulk Emails	Social Media	Bulk Mailings (physical)	SEO
Personalized Texts	Personalized Emails	Personalized Letters	Post cards

Google Facebook Ads & SEO

Google Ads	**Facebook Ads**	**Facebook Posts**	**Bulk Texts**
Bulk Emails	**Social Media**	**Bulk Mailings (physical)**	**SEO**
Personalized Texts	**Personalized Emails**	**Personalized Letters**	**Post cards**

Google | dentist los angeles

All   Maps   News   Shopping   Images   More ▾   Search tools

About 39,400,000 results (0.60 seconds)

Free Dental Implants - Cosmetic Dentistry Grants. No Fee
Ad www.cosmeticdentistrygrants.org/ ▾
Must Be Employed. Apply Now.
Eligible Procedures - Apply Now - Contact Us - About Us & Our Mission

Top Dentist Los Angeles - topdentistinla.com
Ad www.topdentistinla.com/ ▾   (310) 860-9312
Top Beverly Hills Cosmetic **Dentist** Award Winning Cosmetic & General
Dental Implants - Porcelain Veneer
📍 241 S Beverly Dr, Beverly Hills, CA - Closed now · Hours ▾

◀ **PAID Ads ("PAY-PER-CLICK" or "PPC")**

◀ **LOCAL SEARCH RESULTS**

Dr. Shervin M. Louie, DDS
5.0 ★★★★★ (37) · Dentist
Larchmont Medical Building
37.0 mi · 321 N Larchmont Blvd #1010 · (323) 682-0674
Open until 7:00 PM
🌐 Website   Y Directions

Calm Dental
4.7 ★★★★★ (37) · Cosmetic Dentist
32.8 mi · 525 S Olive St · (213) 624-3333
🌐 Website   Y Directions

Google Facebook Ads & SEO

- Very quiet right now
- Most of your competition has stopped
- Inexpensive compared to the past
- Exact targeting
  - Geographic
  - Income
  - Anything you can imagine
- Allows you to reach people RIGHT NOW in volume

Google Facebook Ads & SEO

- What to advertise:
  - ► Emergencies
  - ► New Patient Special
  - ► Wisdom Teeth
  - ► Root Canals
  - ► Whatever else you want more of

Google Facebook Ads & SEO

- Who to target:
  - ► Desired target geographical areas
  - ► Desired combined household income levels
  - ► YOUR desired demographics, which are all available to you

Google Facebook Ads & SEO

What is "SEO"?

SEO stands for Search Engine Optimization, which is the practice of increasing the *quantity* and *quality* of traffic to your website through *organic search engine results*.

- REF: https://moz.com/learn/seo/what-is-seo

Google dentist los angeles

All   Maps   News   Shopping   Images   More ▼   Search tools

About 39,400,000 results (0.60 seconds)

Free Dental Implants - Cosmetic Dentistry Grants. No Fee
Ad www.cosmetic**dentistry**grants.org/ ▼
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32.8 mi · 525 S Olive St · (213) 624-3333   Website   Directions

ONLINE VISIBILITY

1,000 Searches:

1. **340 visits**
2. **190 visits**
3. **140 visits**
4. **90 visits**
5. **60 visits**
6. **40 visits**
7. **20 visits**

ONLINE VISIBILITY

ACTIONS TO TAKE:

▶ **Find a computer you don't use or a phone not yours that doesn't frequent the practice**

▶ **Search the following phrases in locations near your office**

- ▶ "Dentist Near Me"
- ▶ "Emergency Dentist Near Me"
- ▶ "Cosmetic Dentist Near Me"
- ▶ (other such phrases you want to rank in)

ONLINE VISIBILITY

ACTIONS TO TAKE:

► Note how many dental offices are advertising on Google.

► Note your ORGANIC positions on each search.

► Hire a proven Google / Facebook Ads Specialist

► Hire a proven SEO specialist.

FACEBOOK POSTS

Google Ads	Facebook Ads	Facebook Posts	Bulk Texts
Bulk Emails	Social Media	Bulk Mailings (physical)	SEO
Personalized Texts	Personalized Emails	Personalized Letters	Post cards

FACEBOOK POSTS

Salvatore Dental
May 4 at 12:04 PM · 🌐

Doc Senior and Dr. Rich are helping emergency patients today!!! They are scrubbed up in the new apparel 😊🦷✌️

Salvatore Dental
May 13 at 6:50 PM · 🌐

Dr. Rich going over the dental implant process!!!

DR. RICH
DENTAL IMPLANTS

0:02 / 3:21

👍❤️😮 Sumbul Naqvi, Jaime Estrella and 24 others

FACEBOOK POSTS

- What to post:

  - ► VIDEO: New Office Procedures / Process
  - ► VIDEO: Back to Fun
  - ► Updates
  - ► Culture Photos with Staff & Patients

TEXTING

Google Ads	Facebook Ads	Facebook Posts	Bulk Texts
Bulk Emails	Social Media	Bulk Mailings (physical)	SEO
Personalized Texts	Personalized Emails	Personalized Letters	Post cards

TEXTING

91%

of adults keep their mobile phone within arm's reach 24/7

98%

of text messages reach the end user

90%

of messages are read within the first 3 minutes of receiving them

- ► **Text messages get read**

- ► **Helps build a relationship with your patients**

- ► **Text marketing is easier for your patients**

- ► **Better customer service**

TEXTING

- 2-way texting platform for 1-on-1
  - Weave
  - Lighthouse360
  - SolutionReach

- Bulk texting
  - Do NOT use your 2-way texting platform
  - Use a HIPAA compliant platform, such as Blumberg Digital

2-WAY TEXTING

- What to text:

  - ► Appointment Reminders
  - ► Always text after reactivation call where you had to leave a message
  - ► Any time you want to quickly get a response (better than email or a phone call)

BULK TEXTING

- What to text:

  - ► Reactivation (not active since 7+ months)
  - ► COVID-19 office updates
  - ► Specials

LETTERS & EMAILS

Google Ads	Facebook Ads	Facebook Posts	Bulk Texts
Bulk Emails	Social Media	Bulk Mailings (physical)	SEO
Personalized Texts	Personalized Emails	Personalized Letters	Post cards

PERSONAL LETTERS & EMAILS

By L. Ron Hubbard

"THE SIZE NOT THE QUALITY OF AN ORGANIZATION'S MAILING LIST AND THE NUMBER OF MAILINGS AND LETTERS TO IT DETERMINES THE GROSS INCOME OF AN ORGANIZATION."

PERSONAL LETTERS & EMAILS

- What to send:
  - ▶ Per MGE Reactivation Program
  - ▶ Personalized letters to patients from ANY staff available
  - ▶ Reminder cards
  - ▶ Birthday cards
  - ▶ "We miss you" cards
  - ▶ Follow-up letters / cards

BULK LETTERS & EMAILS

Google Ads	Facebook Ads	Facebook Posts	Bulk Texts
Bulk Emails	Social Media	Bulk Mailings (physical)	SEO
Personalized Texts	Personalized Emails	Personalized Letters	Post cards

BULK LETTERS & EMAILS

By L. Ron Hubbard

"THE SIZE NOT THE QUALITY OF AN ORGANIZATION'S MAILING LIST AND THE NUMBER OF MAILINGS AND LETTERS TO IT DETERMINES THE GROSS INCOME OF AN ORGANIZATION."

BULK LETTERS & EMAILS

- What to send:
  - ► Practice Updates (email)
  - ► That you are open (email & physical mail)
  - ► Post cards (physical mail)
  - ► Newsletters (ideally monthly, and minimally quarterly – email & physical mail)
  - ► New patient mailings if proven for your area

POST CARD SAMPLE

EMERGENCY DENTIST

WE ARE OPEN! Given the situation at hand, we are reaching out to let you know that we ARE in the office.

We have learned that many dental offices have closed – and therefore presented problems for patients with dental concerns and even dental emergencies.

Further, we understand that hospitals and clinics are not able to deal with dental concerns – and have shut down completely for such care.

Please know that we ARE available to you for over-the-phone consultations for any dental concerns – and also attend to any dental emergencies during this time.

So, feel free to spread the word to any family or friends who may need dental assistance – and call us at (000) 000-0000.

YOUR PRACTICE NAME

10th St. & Constitution Ave. NW
Washington, D.C. 20560

(000) 000-0000 | www.ABC.com

POST CARD SAMPLE

WORRIED about your CRACKED, MISSING or PAINFUL teeth?

RONALD A. MURPHY, DMD
General & Cosmetic Dentistry
1605 W Wilson Street #114 • Batavia, IL 60510
MurphyDentistry.com • (630) 425-2707

Drill:

1. Work out what ways your practice is going to apply GROSS INCOME SENIOR DATUM:

2. When done, type "Marketing" in the chat.

Action Items

1. **Do the following with your website:**

   ▪ Get your website COVID-19 pop-up to reflect if you are open, open for emergencies only, etc.

   ▪ Review the following great examples to ensure <u>your</u> website is truly an updated marketing site:

   www.mathesondentistry.com

   www.drjohnsondds.com

   www.marksdilldds.com

   www.dentalgroupofwestchester.com/about/our-team/

Action Items

2. Ensure you have a simple new patient special that you are happy with.

3. Continue to post in your Social Media, covering points such as updates, videos, and practice culture.

4. Ensure the person answering the phone is TOP NOTCH at handling patients and getting appointments scheduled.

Action Items

5. Ensure you have availability on your schedule for new patients – regardless of how busy you are. New patients should be seen within 24-48 hours.

6. Get in past marketing actions. If you paused or stopped, get it turned back on <u>right now</u>. These would include:

- SEO

- Paid Online Ads (Google / Facebook)

- Direct mail promotion that worked in the recent past.

Action Items

7. Contact Dan Brown (danb@mgeonline.com) to have your online presence reviewed. Have the following checked:

- Online Visibility (SEO)
- Opportunity for Google Adwords
- Opportunity for Facebook Adwords
- Opportunity for Digital Reactivation (bulk texting)

Action Items

8. Use your most powerful marketing channel - existing patients. Do this by:

- **Asking patients for referrals.** All outgoing calls to confirm or schedule should include asking if anyone in that patient's household needs a dentist (you could even do this with new patient calls). Then schedule their family member/friend using your new patient special.

Action Items

- Reimplementing your CARE TO SHARE program

- Getting patients to leave online reviews.

- Getting happy patients with great work to do video testimonials.

The Practice Recovery Workshop

Based on the works of
L. Ron Hubbard

Section V:
Reactivating Your Patient Base

MGE management experts

Your Hygiene Department

1. Your Hygiene Department should be continuously growing. This is a weak spot for most dentists.

2. It's a measure of patient retention and should be the source of at least half or more of the treatment on the doctor's schedule (not including New Patients).

3. A practice with a Hygiene Department that isn't expanding is losing patients.

Your Hygiene Department

4. Building an effective Hygiene Department is a function of a) Determining the health of your Hygiene Department, b) Implementing procedures to stop losing patients and c) Reactivating patients that have gone "inactive."

Patient Retention:
The Hygiene Formula

A. List out total charts for at least last five years.

B. Multiply by 2 (for 2 recalls/year).

C. Subtract 40% from this number to account for attrition. This would equal potential recall appointments per year.

D. Divide "C" by the number of weeks you normally work in a year. This will give you your potential weekly recall appointment number.

E. <u>POTENTIAL HYGIENE DAYS:</u> Divide figure from "D" by 8. This will tell you how many days of hygiene you potentially should have in a given week—from just recall appointments.

The Hygiene Formula

F. <u>COMPLIANCE PERCENTAGE:</u>

i. Total up the average weekly recall appointments that your office has seen for the past four months. Simple way: get the total recall patients seen for the past four months and then multiply by 3 (for a 12 month year) and then divide by the weeks you work in a year (e.g. 50).

ii. Now, divide "i" above by "D" above. This will give you your compliance percentage in your Recall/Hygiene program.

The Hygiene Formula, Example

A. **List out total charts for at least last five years.** **4,000**

B. **Multiply by 2 (for 2 recalls/year).** **8,000**

C. **Subtract 40% from this number to account for attrition. This would equal potential recall appointments per year.** **4,800**

D. **Divide "C" by the number of weeks you normally work in a year. This will give you your potential weekly recall appointment number.** **4800/50 = 96**

The Hygiene Formula, Example

E. __POTENTIAL HYGIENE DAYS:__ Divide figure from "D" by 8. This will tell you how many days of hygiene you potentially should have in a given week—from just recall appointments.

96/8 = 12 Days of Hygiene/wk

The Hygiene Formula

F. <u>COMPLIANCE PERCENTAGE:</u>

i. **Total up the average weekly recall appointments that your office has seen for the past four months. Simple way: get the total recall patients seen for the past four months and then multiply by 3 (for a 12 month year) and then divide by the weeks you work in a year (e.g. 50).**

Total recalls in 4 months 500 X 3 = 1,500/50 weeks equals 30 recall appointments per week.

The Hygiene Formula

ii. Now, divide "i" above by "D" above. This will give you your compliance percentage in your Recall/Hygiene program.

i. = 30 recalls week divided by "D" which was 96, equals 32.2% compliance percentage.

Common Recall Problems

1. No one responsible.
2. Person doing it has difficulty handling people.
3. No follow up.
4. Not made important by the office.
5. No pre-schedule.
6. Lack of capacity (Can also cause NP problems).

Action Items

1. Do the Hygiene Formula for your office. A spreadsheet version can be found **here.**

2. If your compliance is poor, you'll need to start doing reactivation.

3. If reactivating, use the MGE Reactivation Program as a guide, a copy can be found **here.**

4. Read the Reactivation Program.

Action Items

5. Assign someone to be responsible for reactivation.

6. If the numbers are not too great, you could do "all-hands" reactivation with current employees working on it part time, assuming you are not terribly understaffed.

7. If the number of patients that need to be reactivated is high, and you would not be able to effectively communicate to this list with a part time effort, you will need to hire someone.

Action Items

8. If hiring someone for reactivation, train them on how to do reactivation. Additional training, including how to handle cancellations & no shows, schedule hygiene appointments and add hygiene days, may be found on **DDS Success**, in the **Schedule Coordinator Training Course.**

9. Ensure that your reactivation efforts are regularly monitored and productive. Targets, goals, and so on should be set and met.

The Practice Recovery Workshop

MGE management experts

Based on the works of
L. Ron Hubbard

Section VI:
Overhead/Expense

Financial Planning

By L. Ron Hubbard

"There is definitely a maxim with regard to money and it is:

THE LESS AMOUNT OF INCOME AN ORGANIZATION OR AN INDIVIDUAL HAS, THE MORE CAREFULLY AND WISELY FINANCIAL PLANNING MUST BE DONE."

Managing Finances

Finances at times like this need intense oversight. This would include:

1. **OVERHEAD:** Establishing your actual overhead.
2. **NEED vs. WANT:** Eliminating unneeded expenses and controlling outgo:
   a. Credit card expenses,
   b. Expense account monitoring/authorizations and budgets.
   c. Ensure full team utilization.
   d. Maximizing your marketing dollars.

Spending
By L. Ron Hubbard

1. "An organization will try to spend more than it makes.

2. Economy is aimed at preventing it from spending more than it makes."

Managing Finances

3. **CREDIT:** Credit standing must be maintained, while servicing payables,

3. **INCOME:** Focus on increasing income (at a reasonable cost).

Income Potential

By L. Ron Hubbard

"The income potential of any usual group is established by the demand for income, not by any other important factor."

Income Potential

By L. Ron Hubbard

"While it is *reasonable* to suppose that income will occur for other reasons and can be achieved in other ways, the actual fact is that only demand by the group produces any income at all."

Managing Finances

3. **CREDIT:** Credit standing must be maintained, while servicing payables,

4. **INCOME:** Focus on increasing income (at a reasonable cost).

5. **RESERVES:** Ensure that your overhead includes at a set-aside for reserves – at least 5% if not more. This should be **built in** to your overhead.

Creating a Surplus

By L. Ron Hubbard

1. An organization's expenditures are *not* regulated by what the organization needs in order to do business but by what an organization thinks it has available for expenditure.

2. To achieve a surplus it must be masked as a "necessary expenditure."

Action Items

1. Completely fill out an overhead sheet for your practice. If you run into trouble or have any questions, contact your Power Client Manager or the Director of Practical, Chris Menkhaus (chrism@mgeonline.com). A copy of the Overhead Sheet can be found in the Checklists and Resources Booklet.

Action Items

2. Compare your figures to the Overhead Percentage by category Handout also found in the Checklists and Resources Booklet. If any of your percentages are too high, investigate why and determine what needs to happen to fix it. Again, If you run into trouble or have any questions, contact your Power Client Manager or the Director of Practical, Chris Menkhaus.

Action Items

3. Review the last four months of credit card statements and your checkbook register. Look for any unneeded expenses and work out how to eliminate them in the future.

4. Set hard budgets for items associated with an expense account (e.g. dental and office supplies). If more funds are needed.

5. Work out setting aside something for reserves. Minimum of 5%, 10% is better.

Action Items

6. Add up what your overhead, monthly reserves set aside and adequate doctor salary/compensation amount to. This figure would be your "overhead" figure when discussed with your team or for bonus purposes. Bonus levels would not begin until this figure is exceeded.

7. Your monthly collections goal should exceed the amount in #6 above.

The Practice Recovery Workshop

Based on the works of
L. Ron Hubbard

Section VII:
Your Team

Staffing Issues

Your team is one of your greatest assets. And with that in mind, you may have issues where:

1. Some of your employees may not be able to come back to work right now.

2. You may have employees that don't want to come back to work for whatever reason,

3. Depending on circumstances, you may need to replace one or more of your employees,

Staffing Issues

4. Which means you may find yourself having to **immediately** hire, train and apprentice one (or several) new employee(s)!

Employees That Are Not Back at Work

1. This is not a "one-size fits all" issue. Every situation is different.

2. In handling these situations, ensure you have good legal counsel at the ready.

Hiring

1. You'll need to advertise – don't act like times are normal – be proactive, don't "wait for it to come to you."

2. You can advertise in the usual places, i.e. Indeed, Glassdoor, Craigslist (works in some areas).

Hiring

3. You should also use "unconventional" sources
   a. Ask your employees who they know,
   b. Post it on Facebook,
   c. Ask your patients, supply rep, etc.
   d. Advertise in local, specialized circulars,
   e. For clinical staff, call colleagues in your area.

Hiring

4. You can also use dental specific employment services such as:

- **ihiredental.com**

- **dentalpost.net**

Or for temporary help:

- **www.clouddentistry.com**

Interviews

1. Don't sit on resumes. Act FAST. Review incoming resumes ASAP and set up interview. You might use video conferencing as needed to do a preliminary interview and set up a face-to-face for potential hires.

2. If finances allow and you have more than one good applicant, (especially for administrative positions), hire both!

3. Don't forget to check references!

Onboarding

Hat your new employees immediately on:

1. Anything you have written on the purpose/mission of the practice,

2. The COVID-19 safety procedures (the ones they need to know to BE in the office),

3. Then get them through whatever basic orientation you have in place (checklist, manuals, etc.). You could use **MGE's New Staff Orientation Checklist** as basis to create your own.

Onboarding

4. If new to dentistry, have the "Dental Glossary," on hand and available from DDS Success.

5. Once you've trained the employee on the basics, get them helping/apprenticing in the area of the practice they are designated to work in. Use any policy or manuals on hand to train, DDS Success positional training and be sure to include the COVID-19 procedures they will need to know for their area.

Onboarding

6. Be sure to have someone available (OM, senior over the area) to apprentice the new person onto post.

Phases of Production

By L. Ron Hubbard

"PHASE I—BEGINNING A NEW ACTIVITY

AN EXECUTIVE SINGLE–HANDS WHILE HE TRAINS HIS STAFF.

When he has people producing, functioning well and hatted, he then enters the next phase:"

Phases of Production

By L. Ron Hubbard

"PHASE II—RUNNING AN ESTABLISHED ACTIVITY

AN EXECUTIVE GETS PEOPLE TO GET THE WORK DONE."

Mistakes

By L. Ron Hubbard

"He who cannot be hatted will not learn by mistakes."

Mistakes

By L. Ron Hubbard

"It isn't making mistakes that is actionable; it is failing to learn from them and repeating them."

Mistakes

By L. Ron Hubbard

"A failed student is apparently somebody who can't be hatted either and they are detected by somebody who makes the same mistake over and over and doesn't correct themselves.

Thus it's possible to detect a failed student by somebody who makes the same mistake."

Mistakes

By L. Ron Hubbard

"We are not unduly concerned with somebody who is unhatted. We are only concerned with people who cannot be hatted and these are easiest to detect by observing when they make the same mistakes without correcting themselves.

This person is not only dangerous on lines but also frankly can't be utilized."

Mistakes

By L. Ron Hubbard

"Where you have someone who does not learn from his mistakes and cannot be hatted, it is better to replace the person rather than just hope."

Drill

1. If you need to hire, write an ad for the position you most urgently need to fill. Use the sample ads in the Checklists & Resources Booklet as a guide.
2. When done, type "Hired" in the chat.

Action Items

1. Determine what is happening with any of your staff who are not yet back to work – i.e. can't come back, don't want to come back.

2. Work out how each individual case is going to be handled, e.g. telework until childcare or summer camp is open, and so on.

3. If need to hire, write ads for each of the positions you need to fill. To get started, examples provided by MGE can be found in the Checklist and Resources Booklet.

Action Items

4. Place your ads using the venue that works best in your area, i.e. Indeed, Craigslist, Newspaper, etc.

5. You could also look for personnel in "unconventional" places as well – ask your team who they know, your patients who they know (or them), post it on Facebook, ask your supply rep, and for clinical staff, contact colleagues in your area. You could also use any of the various dental employment agencies for harder to fill positions.

Action Items

6. When receiving resumes, act fast! Do not "sit" on them. Get anyone you might potentially hire contacted and scheduled for an interview immediately. You might also do a video preliminary interview and move it into an in-person interview if the person seems to be a workable candidate.

7. Do not forget to check references!

Action Items

8. If more than one good candidate is available for one job (you would hire either of them), you may wish to hire both, finances allowing. Especially with administrative staff.

9. When onboarding, hat the new person on the COVID-19 procedures they need to know to BE in the office ASAP. Follow this up with an understanding of the practice purpose.

10. If you have not done so already, create an Orientation Checklist for new staff. A sample can be found here.

Action Items

11. After your staff have been through the orientation checklist, get them trained on and working in the area they were hired for. Ensure they are trained on the COVID-19 specific policies that relate to their job. You'll also have to train them for their position! Use whatever manuals or policies you have on hand. You can also use the positional training on **DDS Success** for administrative staff. Ensure they are properly apprenticed to be able to get the job done.

Action Items

12. Ensure that whoever is supervising them pays close attention to ensure they can get the expected products in an acceptable volume.

13. Keep an eye out for the same mistakes being repeated over and over.

The Practice Recovery Workshop

Based on the works of
L. Ron Hubbard

Section VIII:
Management

The Test of a Manager
By L. Ron Hubbard

"Financial volume and solvency are the final test of any manager of an organization or area, large or small."

The Test of a Manager

By L. Ron Hubbard

"Of course, you can sell your organization short, grab a lot of money for no service and have an apparent solvency.

But I have found that this takes about six months to catch up with an organization, at which time it starts to go broke in earnest in a soured community. So all solvency is measured by yearly averages, not sudden spurts."

Financial Volume & Solvency

"To have high financial volume and to be solvent, a manager need only:

a. follow established patterns,

b. see that there are competent people on staff and that they are doing their work,

c. that service gets rendered on a highly personal basis,"

Keys to Financial Volume & Solvency

By L. Ron Hubbard

d. "that there isn't a lot of bad news and natter coming from disaffected staff members and hangers-on,

e. that people aren't driven downtone by the "dangerous environment," and"

Keys to Financial Volume & Solvency
By L. Ron Hubbard

f. "that there are lots of bodies* moving through the shop.

Given just these things, success is certain.

Given one or more of these poorly done or badly out and failure starts to creep in; given several out and there's no organization, much less no manager."

Meetings & Management

Daily:

1. Morning Production meeting, and stat collection,
2. Clinical meeting with providers as needed,
3. Quick coordination between doctor and OM,
4. Regular, brief meetings with employees over Scheduling, Finance, Marketing and Treatment Coordinator to ensure they are on track,
5. Quick end of day coordination to follow up.

Definition of "TARGET"

By L. Ron Hubbard

"An objective one intends to accomplish within a given period of time."

Definition of "QUOTA"
By L. Ron Hubbard

"1. A production assignment. It would be the number assigned to whatever is produced. As an example, the Director of Training is given the quota of 45 letters to produce per day.

2. A quota is a future expectancy. The way one sets a quota is quite important. If it is too impossible, a quota gets overwhelm not stats. Too low a quota is no challenge at all and gets no quota."

Targets vs. Quotas

Quotas

- Production to be $5,000 each day.

- We are to get 25 new patients this week.

- We need to get 50,000 pieces of promo out.

- Collections quota is $150,000 this month.

Targets

- Mrs. Jones is to see the doctor at 4PM to present her case.

- Have the hygiene patient moved to my room to get her treatment started.

- Get the financing completed with Mr. Smith so we can begin treatment.

Targets and Quotas

Quotas can be met by assigning the necessary targets to be done that would make the quota a reality.

For Example: Collections quota for the day is $10,000. All patients coming in that day are reviewed to see who needs to pay what, insurance is estimated, etc.

The products and sub-products are "lined up," and who is doing what when is figured out and times assigned, etc. If the "line-up" will not meet the quota, one would have to look for an additional means to pull off the quota (additional targets).

Meetings & Management

Weekly.

- Executive Meeting

Weekly Executive Meeting

This agenda is slightly modified taking current circumstances into account. All areas would be reviewed, and plans made for any immediate adjustments or actions. Doctor, OM and Execs would attend.

Subjects covered would include:

a. Practice Statistics

b. Adjustment to overhead/expenditures,

c. The upcoming months schedule,

d. Your staffing situation.

e. Marketing/Outflow.

f. Progress towards monthly, quarterly goals.

Executive Meeting

Weekly.

- Executive Meeting

- Staff meeting. You may need to set aside additional staff training and drilling time to ensure adjustments to any of the new policies or procedures are grooved in.

- Financial Planning/Review

Action Items

1. Determine when you are going to hold your meetings. Specifically:

DAILY:

- Morning Production meeting, and stat collection,

- Clinical meeting with providers as needed,

- Quick coordination between doctor and OM,

- End of day coordination and follow up meeting to ensure any changes or adjustments to operations can be made quickly.

Action Items

WEEKLY

- Executive Meeting (doctor, OM and any Executives).

- Staff meeting.

- Additional staff training time (if needed) to include drilling time.

- Financial Planning/Review

Action Items

2. Set monthly, weekly and daily quotas or "goals" for key office statistics – i.e. production, collections, new patients. Use your monthly goal to determine your weekly and daily goals.

3. If a statistic is not on track to reach its goal, troubleshoot it early in the month to ensure you pull it off.

4. To that end, the OM to ensure that daily targets set at the Morning Production Meeting are done throughout the day to ensure the daily goal is met (hence moving toward any weekly or monthly goals).

Action Items

5. Lastly, ensure that the team members in the areas that oversee the major practice statistics (e.g. Schedule Coordinator, Financial Coordinator, PR Officer), understand that they are *accountable* for these statistics. They are not just "reporting" them. They are responsible for managing their areas to make their goal.

The Practice Recovery Workshop

Based on the works of
L. Ron Hubbard

THE END