

38TH Annual
BUFFALO NIAGARA
DENTAL MEETING

***“ATTRACTING AND RETAINING PATIENTS”
A TEAM EVENT***

Presented by:

Debra
ENGELHARDT-NASH

Charlotte, NC

“CHALLENGE MEDIOCRITY AND CONSTANTLY LOOK FOR WAYS TO PERSONALLY CONTRIBUTE TO AN EXCEPTIONAL EXPERIENCE FOR YOUR PATIENTS – BEFORE, DURING AND AFTER THEIR CARE IN OUR OFFICE.

TO ALWAYS ASK THE QUESTION: What more can I do?”

“You only need a 1% edge. Olympics are won by tenths of a second.”

debra@debraengelhardtnash.com
www.DebraEngelhardtNash.com

704 895-7660 office

704 904 3459 cell

A letter to every employee...

Dear Every Employee,

For now, I have chosen to be your patient. And no matter what part of the organization you're in – no matter what job you perform – you are part of my customer service experience. YOU determine whether or not I'll be back.

When I come into your practice – or when I call you – I expect to be treated well by the people who serve me. But I judge your business a lot more than just how I'm dealt with by the "customer service people". I look at everything. I look, and I ask questions: Is the facility clean and well maintained? Is the product or service of good quality? Was the payment processing handled efficiently and correctly? Were the operatories well stocked and organized? Was my treatment scheduled appropriately? Are written communications and processes clear and easy to understand? Is the Team adequately scheduled and trained?

My list of questions goes on and on, and eventually touches the area that you're responsible for personally. You see, you are in the customer service business. And whether it is directly or indirectly, you touch me.

Chances are, you may never know me personally. In fact, depending on your job, you may never see me. But you probably ought to appreciate the heck out of me. I am, after all, the reason your business exists. I am the reason you have a job. Do your part to make my experience a good one, and I'll be back to give you my hard-earned money again and again. Let your part of the bargain slip because you think customer service is someone else's responsibility, and I (and my money) will go somewhere else. The choice is yours... and mine!

Signed,

Your patient


ENGELHARDT-NASH

Is your practice on target?



Generic behavior

Expected behavior

Augmented behavior

Potential behavior

Where is your practice? _____



Contact

In today's world
More than 80% of American populations choose their healthcare provider after Internet research.

SOCIAL MEDIA

65% of women over 50 using Facebook.

Web presence / Social media is critical.

*"Innovation needs to be part of your culture.
Consumers are transforming faster than we are, and
if we don't catch up, we're in trouble."*

- Ian Schafer, Deep Focus

What does that mean? Good news!



THEY ALREADY CHOSE YOUR OFFICE.

YOUR INVESTMENT:

4-8%

What should you expect to get out of it?

5 to 1 Return on Investment

HOW / WHERE DO YOUR PATIENTS FIND YOU?

CREATING AN IMPACT

“FIRST IMPRESSIONS MATTER. EXPERTS SAY WE SIZE UP NEW PEOPLE IN SOMEWHERE BETWEEN 30 SECONDS AND TWO MINUTES.” ELLIOTT ABRAMS

“EXPERTS SAY THE PATIENT MAKES A DECISION TO ACCEPT TREATMENT WITHIN THE FIRST TEN MINUTES OF ARRIVING TO THE PRACTICE.”

TWO QUESTIONS TO ASK TO DETERMINE IF YOU’RE DOING THE RIGHT THING:

1. IS IT GOOD FOR THE PATIENT?
2. IS IT GOOD FOR THE PRACTICE?

 Debra
ENGELHARDT-NASH

QUALITY SERVICE CUES

- ❖ MAKE A MEMORABLE FIRST IMPRESSION.
- ❖ SPEAK A SERVICE LANGUAGE; WEAR A SERVICE WARDROBE.
- ❖ HOSPITALITY FIRST. COMMUNICATE THE HEART AND SOUL OF THE ORGANIZATION.
- ❖ LISTEN TO UNDERSTAND.
- ❖ CREATE THE PERCEPTION OF QUALITY.
- ❖ MATCH WHAT THE PATIENT WANTS WITH WHAT YOU CAN DO.
- ❖ ENDORSE THE DOCTOR.
- ❖ DESCRIBE HOW YOUR OFFICE SYSTEMS ENHANCE RESULTS.
- ❖ ESTABLISH A SET OF PRACTICE PERFORMANCE TIPS.
- ❖ BUILD A PERFORMANCE CULTURE THAT DIFFERENTIATES THE PRACTICE.

**“YOUR CUSTOMER MAY NOT ALWAYS BE RIGHT BUT THEY ARE ALWAYS YOUR CUSTOMER.”
DEBRA ENGELHARDT-NASH**

Debra
ENGELHARDT-NASH

PATIENTS ENTERING THE PRACTICE

EXTERNAL PRACTICE AWARENESS



PHONE CALL



OFFICE LITERATURE



RECEPTION



TEAM



DR. INTRODUCTION / CONSULTATION



EXAM DIAGNOSIS



TREATMENT PRESENTATION



FINANCIAL ARRANGEMENTS



COMMUNICATIONS

HOW DO WE COMMUNICATE?

VISUALLY

VERBALLY

IN WRITING

“GET IN TOUCH WITH THE WAY THE OTHER PERSON FEELS. FEELINGS ARE 55% BODY LANGUAGE, 38% TONE AND 7% WORDS.”

EVERY TEAM MEMBER IS RESPONSIBLE FOR REINFORCING A CLEAR AND CONSISTENT PRACTICE MESSAGE.

WORDS TO USE

WORDS TO AVOID

HOW WOULD YOU DESCRIBE YOUR QUALITY OF CARE?

YOUR ELEVATOR SPEECH

“YOUR PRESENT CIRCUMSTANCES DON’T DETERMINE WHERE YOU CAN GO; THEY MERELY DETERMINE WHERE YOU START.” NIDO QUBEIN



Where should we focus?

WHAT IS YOUR GOAL?

WHERE DOES YOUR PRODUCTIVITY COME FROM?

CUSTOMIZE YOUR GROWTH PLAN

“PEOPLE OFTEN SAY MOTIVATION DOESN’T LAST. NEITHER DOES BATHING – THAT’S WHY WE RECOMMEND IT DAILY.” ZIG ZIGLAR

NEW PATIENTS ACCEPTING TREATMENT

REVENUE FROM CONTINUING CARE

PATIENTS OF RECORD ACCEPTING TREATMENT

ACTIVE PATIENTS

PRODUCTION GENERATED FROM CONTINUING CARE

AVERAGE TREATMENT PLAN ACCEPTED

WHAT GETS MEASURED GETS DONE.

OUR FOCUS FOR 2016 SHOULD BE: _____

 Debra
ENGELHARDT-NASH

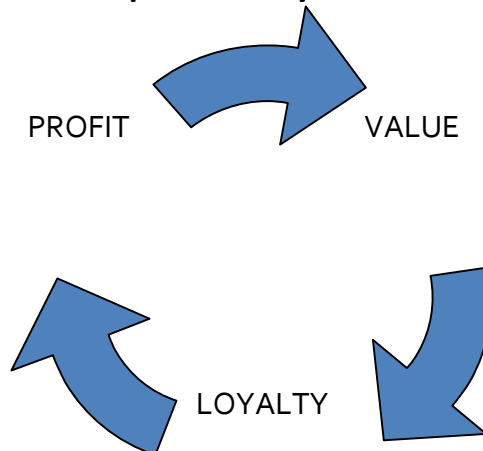
“Most of us understand that innovation is enormously important. It's the only insurance against irrelevance. It's the only guarantee of long-term customer loyalty. It's the only strategy for out-performing a dismal economy.”

Gary Hamel, American Businessman

Patient Retention

Are you getting what you want? Are you keeping who you want?

LOYALTY = PROFIT
Retaining 5% more “customers”
can boost profitability as much as 95%



An increase in patient loyalty of 2% is equivalent to a 10% reduction in costs.
An increase of 5% in patient loyalty can deliver 95% greater profitability over the lifetime of the patient.

- ✓ Retaining patients is not only less expensive, but existing loyal patients are ready to accept treatment more readily.

- ✓ They generate positive word of mouth and referrals and are less likely to defect for “discounts”.
- ✓ Increased customer loyalty is the single most important drive of long-term profitability.

PATIENTS OF RECORD AND RECALL RETURN RATE

NUMBERS TO TRACK:

DAILY PRODUCTIVITY.

LOST HYGIENE APPOINTMENTS.

ONE LOST HYGIENE APPOINTMENT PER DAY
(BASED ON AVERAGE APPOINTMENT CHARGE \$245.00)
IF THERE ARE 200 HYGIENE DAYS IN THE PRACTICE – $245.00 \times 200 \text{ DAYS} =$
\$49,000.00 ANNUAL LOSS

ADDITIONAL TREATMENT DIAGNOSED FROM RECARE PATIENTS.

ADDITIONAL TREATMENT ACCEPTED FROM RECARE PATIENTS.

MAJOR SOURCE OF ADDITIONAL TREATMENT REVENUE FOR THE PRACTICE.

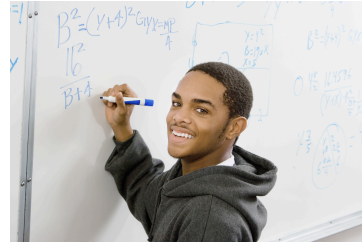
RECALL RETURN RATE.

WHAT PERCENTAGE OF ACTIVE PATIENTS ARE RETURNING FOR CARE?

“A satisfied customer is the best business strategy of all.”
Michael LeBoeuf

 Debra
ENGELHARDT-NASH

LET'S DO THE MATH!



EXAMPLE (YOU CAN DO THIS AT HOME)

# ACTIVE PATIENTS (SEEN WITHIN THE LAST 18-24 MONTHS) EXPECTED OR DESIRED RECALL RETURN RATE 85%	2000
# PATIENTS RETURNING FOR CARE	1700
AVERAGE NUMBER OF PATIENT VISITS PER YEAR	2.5
# VISITS REQUIRED TO SEE 85% OF PATIENTS 2.5 TIMES PER YEAR	4250
4250 divided by average number of patients seen per day (8) Number of days required to treat 85% of patient base	531.25

2.5 Hygienists required to maintain this level of continuing care.

Notes:

Or...

Note the number of hygiene days currently scheduled.
Determine average number of patients seen per day.
Establish average number of hygiene appointments available per year.
Divide by 85% of Active Patient Base.

Example:

2 hygienists working 4 days per week=8 days per week x 50 weeks = 400 days
8 patients per day x 400 days = 3200
3200 appointments. / 2.5 visits per patient=
1280 patients / 2000 active patients =
64% Recall Return Rate – too low!

If 1700 patients appointed and only 10% appointed for additional dentistry averaging
800.00 \$136,000.00 additional treatment production from hygiene!

Trouble shooting. If the office is not maintaining 80-85% of patients returning for Recare:

Not enough hygiene days available to meet practice needs

Too much unfilled hygiene time

Transient demographics

Lack of Recare system

Poor scheduling

Poor patient tracking

Ineffective patient communication skills.

 Debra
ENGELHARDT-NASH

Recall Renewal

3-5 YEARS SINCE NEW PATIENT EXAM

RENEW PRACTICE PHILOSOPHY – what new treatment modalities have you incorporated?

RENEW RECORDS – RENEW ENTHUSIASM

Be careful – familiarity may breed apathy –or perceived lack of interest.

THANK PATIENT FOR THEIR LOYALTY.

“WHAT HAS PREVENTED YOU FROM COMPLETING TREATMENT?”

“LET ME SHOW YOU SOME OF SOME EXAMPLES OF WHAT WE HAVE DONE FOR OUR PATIENTS.”

TIMING IS EVERYTHING!

AT BEGINNING OF APPOINTMENT – NOT AT THE END.

QUALITY TIME

SCHEDULE APPROPRIATE TIME TO PROVIDE THE CLINICAL INFORMATION TO YOUR PATIENTS.

“Our greatest weakness lies in giving up. The most certain way to succeed is always to try just one more time.”
Thomas A. Edison

 Debra
ENGELHARDT-NASH

NOW WHAT?

What are we doing well that we should keep on doing?

What are we not doing well that we should stop doing?

What should we start doing that we aren't doing now?



CHANGE

Stage 1: First it will seem impossible.

Stage 2: Then it will become difficult.

Stage 3. Finally, with persistence, it will get done.

Stage 4. With creativity and enthusiasm it will be effective!

“By changing nothing, nothing changes.” -Tony Robbins

Debra
ENGELHARDT-NASH

12 TRAINING PRINCIPLES

“THE BEST TRAINING PROGRAM IN THE WORLD IS ABSOLUTELY WORTHLESS WITHOUT THE WILL TO EXECUTE IT PROPERLY, CONSISTENTLY AND WITH INTENSITY.”

JOHN ROMANIELLO

1. PATIENTS DON'T TALK TO THE PRACTICE. THEY TALK TO YOU.
2. GREAT SERVICE STARTS WITH A GREAT ATTITUDE. (WOULD YOU WANT TO TALK TO YOU?)
3. THERE IS ONLY ONE JUDGE OF GREAT SERVICE. THE PATIENT.
4. PATIENTS DON'T THINK OF THEMSELVES AS PATIENTS. THEY THINK OF THEMSELVES AS PEOPLE WHO NEED OUR HELP. ENJOY HELPING PEOPLE AND YOU'LL DO A BETTER JOB.
5. THERE IS NO RIGHT WAY TO TALK TO PATIENTS. EVERY PROBLEM IS DIFFERENT SO EVERY CONVERSATION IS DIFFERENT.
6. DON'T JUST TALK TO PATIENTS. TALK TO THE TEAM. EVERYONE IS THE VOICE OF THE PRACTICE.
7. IT'S NOT ENOUGH TO TAKE CARE OF PATIENTS. YOU HAVE TO CARE ABOUT THEM. (GREAT SERVICE IS NOT JUST A TRANSACTION. IT'S A BOND.)
8. DON'T JUST SOLVE PROBLEMS – CREATE OPPORTUNITIES TO ELIMINATE OR MINIMIZE PROBLEMS. (VIEW PROBLEMS AS AN OPPORTUNITY TO GROW.)
9. DON'T JUST LISTEN – LEARN. ACTING ON SMALL COMPLAINTS CAN GENERATE BIG IMPROVEMENTS.
10. LEARN TO ANTICIPATE.
11. EVERY PATIENT IS A JUDGEMENT CALL. THE DEEPER YOUR KNOWLEDGE, THE BETTER YOUR JUDGEMENT.
12. IF YOU REALLY WANT TO HELP PATIENTS, DON'T BE AFRAID TO ASK FOR HELP.

 Debra
ENGELHARDT-NASH