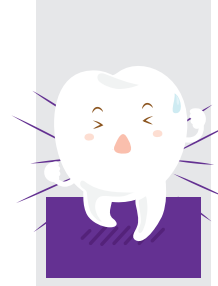


## CASE STUDY #9



### Are You Running Your Practice or is it Running You? The Benefits of Increasing Your Leadership Skills

*Julie Weir & Associates is recognized as the premier consulting firm specializing in pediatric dentistry since 1996.*

#### PRACTICE PROFILE

- A one doctor pediatric dental practice open for 18 months. Doctor previously worked as associate for 12 years.
- Doctor works 4 patient days per week and 1-2 hospital days per month.
- 5 Chairs: 3 restorative, 2 recare.
- Team: 1 doctor, 1.5 hygienists, 3 assistants, 2 front office team members.
- In-network with PPO insurances, Delta Premier, and managed care dental plans.
- Average monthly production as of 2014: \$73,941.
- Average monthly collection as of 2014: \$50,873.
- Collection ratio 68.8 percent.
- Average monthly new patients: 75.

#### DOCTOR CONCERNS

- Doctor was frustrated with employees' performance and did not know how to address these issues with them.
- Low doctor income; overhead was 81 percent.
- Low daily hygiene production due to cancellations and no shows.
- Not using block scheduling; the daily schedule was stressful and they would get behind.
- Poor treatment plan presentation and acceptance.
- Tracking current patients to make sure they were in the recare system and that unfinished treatment plans were completed.
- Doctor feeling the need for team members to be incentivized.

#### DOCTOR GOALS

- Work smarter, not harder.
- Increase collections and doctor income.
- Transition to new location in 3 years.
- Eventually build a larger practice and add an associate.
- Hold team members accountable and teach them to be accountable for themselves.
- Avoid increasing participation with dental insurances.
- Increase daily hygiene production.
- Minimize no-shows/cancellations.
- Work recare and unfinished treatment plan reports regularly.
- Develop successful treatment plan presentations.
- Learn to discuss practice goals with the team without making it seem like it is all about the money.
- Create bonus systems for the team.

#### FINDINGS

##### Leadership

- Strong leadership is greatly lacking, especially from the doctor. There is no real office manager or lead position for the front office and clinical team.
- Doctor is conflict-avoidant and lacks confidence when coaching team members concerning their performance. Doctor does not verbalize what she wants and needs from her team because she doesn't think they will listen. This makes her feel very uncomfortable which leads to frustration and lack of team accountability.
- As no officially designated office manager, a front desk team member acted as an office manager due to the lack of leadership. However, this person would not follow the doctor's directives and had a harsh communication style with the doctor and the other employees.
- Doctor did not clearly convey her desires to the team so the team had a hard time knowing how to please her.
- The practice had a mission statement, but the team did not understand doctor's vision because it had not been clearly shared with them.
- Doctor did not have a business plan.
- Team was unaware of practice production goals
- Practice goals were not monitored.
- Job descriptions were not clear.
- Doctor tried to hold monthly team meetings, but often the schedule ran late and into the lunch hour, so the team meeting was not held or was rescheduled.
- Doctor does not give regular performance reviews to team members because she doesn't see the value.

##### Team Dynamics

- Low team morale due to the team being unaware of who the leader was since the doctor lacked leadership skills and was conflict averse.

##### Facility/Presentation

- Modern, up to date facility.
- Great design and beautiful décor.
- Very clean and organized.
- Nice reception area for parents and play area for kids.

##### Front Desk Efficiency

- Set-up for 2 team members
- Small consultation room next to front desk is used to present hospital treatment plans to parents.
- Patients not held accountable for missing appointments or last minute cancellations.



## Scheduling/Production

- Schedule ran behind due to poor scheduling and congestion during check in/out.
- Not scheduling to daily provider goals (doctor, recare, hospital or sedation) for scheduling accountability.
- Had a block scheduling template; however, it was not being followed.
- Behavior management patients were scheduled next to each other since parents were allowed to dictate the time they wanted their child's appointment.
- Poor follow through with tracking unscheduled treatment; many families left without scheduling their restorative appointment.
- Held unproductive morning meetings due to a lack of a proper agenda.

## Marketing

- Excellent logo, branding.
- Good internal and external marketing programs.
- Good understanding of the strengths of the practice and presenting this to the community.
- Utilization of direct mail, radio advertising, community events and school presentations.
- Active on social media.
- Good website and search engine optimization.
- Inconsistent tracking of referrals and new patients.

## RECOMMENDATIONS

### Leadership Recommendations

- Coach an employee to have a more effective leadership style. If she grew in this position, she would be appointed as an official office manager.
- Leadership training for the doctor on how to effectively hold team accountable for their job performance and to stop being manipulated by them.
- Appoint a clinical coordinator to help the doctor with patient flow and hold the clinical team members accountable so appointments are completed in a timely manner.
- Doctor shares her vision for the practice with the team.
- New practice and team mission statements created.
- Team Dynamics training utilizing the Professional Dynametric Programs (PDP) trait profiling of each team member's strengths and communication style to help team members better understand and appreciate each other's differences and unique abilities.
- Create a practice business plan that defines:
  - o Break-even point to identify the collection level required to support overhead expenses, doctor income and retirement savings.
  - o Practice goals to support the break-even collection total:
    - Average number of doctor, recare, hospital and sedation work days/month.
    - Average daily production for doctor, recare, hospital and sedation.
    - Collection ratio.
    - Average number of new patients/month.

- o Increase fees to a competitive level.
- o Create overhead budget and monthly budget amounts for team members that order front office and dental supplies.

- Monitor practice vital signs and goals.
- Hold annual performance reviews.
- Hold productive morning meetings, monthly team and quarterly department (clinical, front office, leaders and marketing) using an action plan form so follow-up on the changes discussed is tracked and implemented.

### Team Dynamics Recommendations

- Coach how to hold effective morning meetings and team meetings.
- Establish specific roles and duties for each team member to assign accountability.
- Speak with employees as soon as their performance needs to be addressed.
- Team members and doctor express appreciation daily to each other and take time for a quarterly team bonding event.
- Conflict resolution training with team.

### Front Office Recommendations

- Teach proper systems and verbal skills to new team members.
- Train front desk team:
  - o Proper setup of insurance plans, coverage tables and payment tables in the dental software so patient portion estimates are accurate.
  - o Proper billing of patients.
  - o Accounts receivable management.
  - o More thorough utilization of the dental software.
- Create an effective appointment agreement and train the front office team on proper verbiage to minimize no-show or short notice cancellations.

### Scheduling/Production Recommendations

- Create a customized block scheduling template to meet provider goals, give a good flow to the day and minimize running late with appointments.
- Use proper verbal skills to control where patients are scheduled.
- One front office team member assigned to the operative schedule and another to the recare schedule for accountability in keeping it full and meeting goals.
- Clinical team enters full treatment plan into the patient's record in the computer to keep track of diagnosed treatment not completed.
- Assign specific team members to work the past due recare and unfinished treatment plan reports weekly. Create uninterrupted work time specifically for them to complete this task.
- Assistants and hygienists review operative and recare patient charts the day before for medical alerts and needed radiographs as well as any unscheduled treatment.

### Marketing Recommendations

- Begin having theme days and post to social media
- Take more pictures of kids enjoying their visits to use on social media with the parent's permission.

- Make patients birthdays an event.
- Train team on verbal skills to let parents know the practice is always accepting new patients.
- Train team on the verbal skills of the value of each procedure so they can better instill to the parent the importance of keeping their child's appointment.
- Consistent tracking of referrals and new patients on a monthly basis.

#### POST COACHING RESULTS

- Person being trained and considered for future management role, deselected herself. Hired someone new who was eventually developed into the office manager position.
- Doctor took her leaders to a leadership training course and the leadership team grew in their confidence to be able to handle the employees and practice challenges.
- Doctor and new office manager began addressing practice issues in a timely manner and held employees accountable to meet defined job descriptions and practice goals.
- The team's morale increased. They felt more effective in their roles when they understood the doctor's vision and had goals and new skills to work with.
- Production and collection increased at the front desk with the utilization of the block scheduling and the dental software.
- No-shows and cancellations decreased.
- Practice business plan and goals were created and followed.

- The team began monitoring production and collection numbers vs. goal numbers effectively and reviewing goals at team meetings.
- Production increased 103 percent by an additional \$75,856/month to \$149,797/month by 2017.
- Collections increased 126 percent by an additional \$63,939/month to \$114,812/month by 2017.
- Collection ratio increased by 7.84 percent to 76.64 percent.
- New patients increased from 75/month to a total of 141 new patients per month.

#### WHAT YOU SHOULD LEARN FROM THIS

- Poor doctor leadership that does not address practice problems and poor performers will hold back production and collections while increasing team stress. These problems must be addressed. They do not fix themselves or go away and they only continue to decline.
- Strong leadership skills reveal untapped production potential by increasing team unity and effective communication. People want to be led, not managed.
- Run your practice like a business with a business plan that defines and monitors goals.
- Communicate practice goals to the team.
- Hold employees accountable in a timely manner for proper job performance.
- Give team members the time, tools and training they need to contribute fully to the practice.
- Create excellent customer service experiences that parents love to share on social media.

*Published four times a year, Practice Management and Marketing News is a featured column in Pediatric Dentistry Today.*

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