

# THE Patient Centered RECIPE



*I love chocolate chip cookies!* Who can resist that amazing aroma of freshly baked, hot out of the oven; melt in your mouth cookies. As a matter of fact I think it's time to go grab my grandma's recipe and whip up a batch right now. And what exactly will that recipe tell me? A recipe is a set of instructions for making or preparing something. And what is the first thing I will do when I have my recipe in front of me? I will check to make sure I have all the ingredients. Do I have flour, sugar, eggs, baking powder, etc.? Why would the recipe for the success of our dental practice be any different?

If I compare the ingredients of my cookie recipe to the recipe of success for the practice, I am going to make sure I have my 2 1/2 cups of communication, 1 1/2 cups of sound financial presentation, 2 effective handoffs, 3 cups effective scheduling, and 2 tablespoons of meetings. It's not until I know I have all the proper ingredients that I can put it in the bowl and mix it up to create our four patient experiences: The New Patient Experience, The Existing Patient Experience, The Restorative Patient Experience, and The Emergency Patient Experience. I must also know who the cook is, or which team member is responsible for each of these patient experiences and do we all have the same recipe?

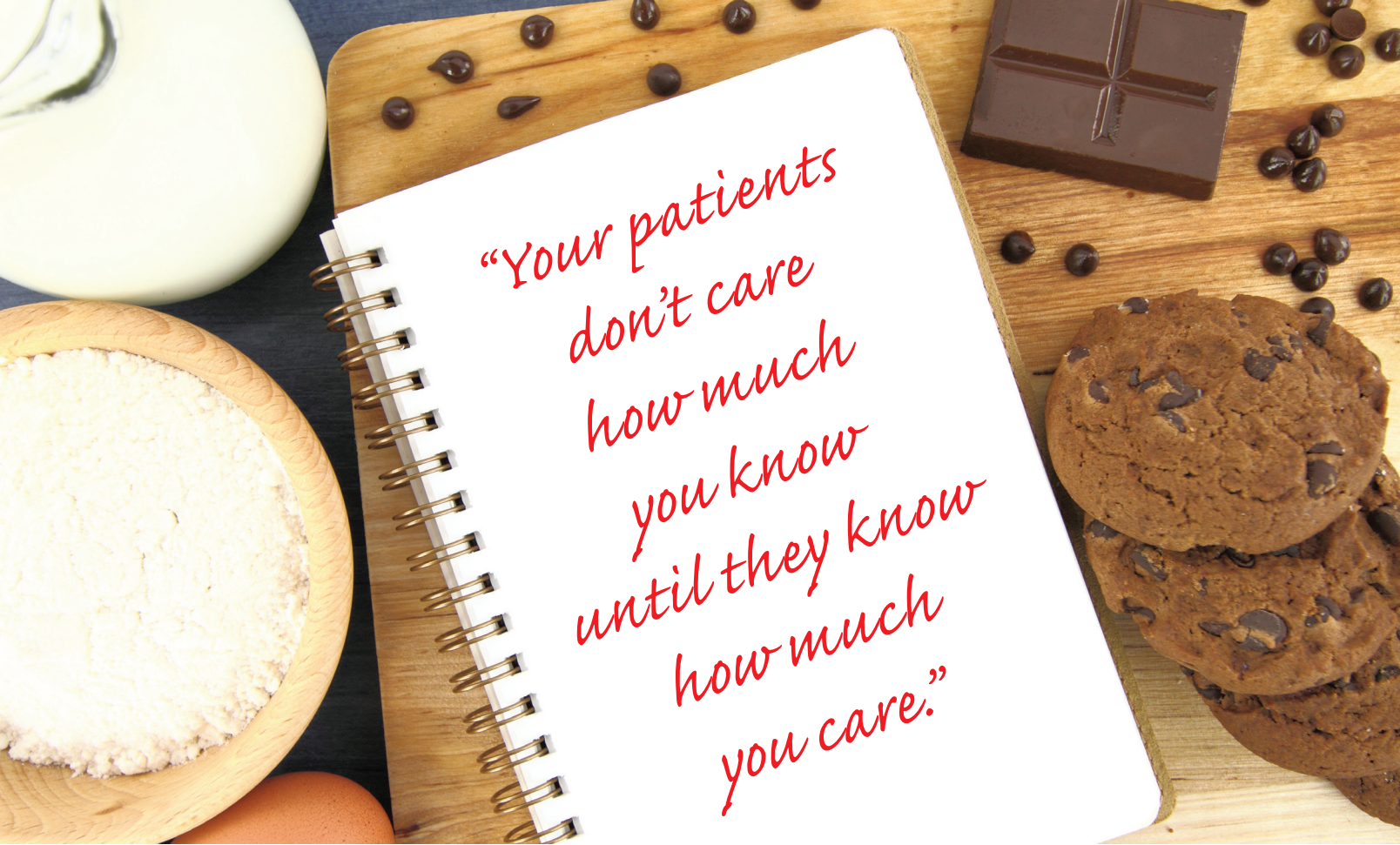
A good first step is to simply evaluate your ingredients:

✓ *Patient Communication* - we routinely role play utilizing our communication tools. We identify our patients communication style (DISC) and are able to communicate with them in the best way for that patient. We co-diagnose with our patients by asking the right questions which allows our patient to come up with their own problem BEFORE we give them a solution rather than giving them a solution to a problem they don't believe they have (which sometimes appears as selling). Our Doctor never enters an operatory unless there is a photo of the patient's mouth on the screen in front of the patient because we understand that a picture is worth a thousand words.

✓ *Sound financial presentation* - Each team member understands their role in

the financial presentation and knows that the presentation starts with what is discussed in the "back" and that the financial form itself is simply the last step in this presentation. All team members understand not only the business of collections but that the number one reason that a patient will become angry is that you were not clear on their financial obligation. Therefore no patient will be scheduled for restorative treatment without a written, signed, financial agreement so that the trust and relationship will remain intact.

✓ *Handoffs - transfer of power* - The Doctor receives a formal handoff every time they walk into an operatory from either the assistant (restorative or emergency patient experience)



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or the hygienist (existing patient experience). This is a moment of truth where trust is built because now the patient knows that the left hand knows what the right hand said and did. When applicable the clinical team member will handoff to the administrator. We understand that this is part of a process of treatment acceptance.

✓ **Scheduling** - We run on time 99-100% of the time knowing that we will chip away at the relationship if we do not respect a patient's time. We have a pre-blocked schedule that not only allows us to meet our daily production goal, but we also meet that goal stress free. We all understand and honor the blocks.

✓ **Team meetings** - We block a weekly business meeting where we utilize an agenda and an action plan to make our meeting productive. We never view this

meeting as a waste of time. We conduct a Patient Care Meeting (as opposed to a morning huddle where we do "the reading of the schedule") utilizing patient prep worksheets (checklist) so that we know the patients past history, that we are prepared for today, and the patients next step. However, more importantly than those three items, we know something personal about each patient, their likes and dislikes, because your patients don't care how much you know until they know how much you care.

Now that you know that you have all the ingredients you can put it in the bowl and mix it up to create the checklist for the four patient experiences and you are ready to put it in the oven. The most important thing when baking is consistency. You can't bake it at 350° for 15 minutes one time and then the next time 425°

for 20 minutes. You have to bake it at the same temperature for the same amount of time each and every time. Consistency is related to success and they can't just hang out every once and a while!

If you have come up short with your ingredients and want a new recipe, go to the right kitchen. The perfect recipe is presented at the Patient Centered Systems Course at the Las Vegas Institute for Advanced Dentistry or in your own kitchen for customizing the recipe through in-office training. Call today and inquire and get to baking up some success!

Upcoming  
Patient Centered Systems Course  
April 8-10, 2015



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