



Feel Like Giving Up and Getting Out ... From Beneath the Mid-career Squeeze?

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ABSTRACT Mid-career provides different opportunities and challenges for different dentists. Some are hitting their stride and enjoying success. Others are facing financial worries and multiple concerns. While many of the issues that mid-career practices experience can be addressed effectively, doing so requires looking closely at those areas that tend to be the most troublesome, including patient retention, staff hiring and training, and patient satisfaction. If practices take measurable steps to address those areas, they make great strides in overcoming the mid-career slump.

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Mid-career, midlife, mid-term. You've reached the middle, the halfway point. It can be a time of great prosperity and satisfaction, or one of significant anxiety. For some dentists, it means they are hitting their stride and are right in the middle of the excitement, the challenge, and the thrill of their chosen profession. They are on top of their game, enjoying the fruits of their labors, and looking forward to what the future holds. For others, mid-career feels more like being stuck in midstream, floundering somewhere in between the beginning and the end. It's too late to turn back, but there's not much promise in what lies ahead.

Behind them is the first 15 to 20 years of their dental career. They've invested a fortune in time and money in both dental and continuing education. They

should be reaping the rewards, but they're not. They are burdened by the monetary pressures. The lean months are growing more frequent, and it feels as if the financial tightrope they are tiptoeing across could snap at any time. They are the leader of their team, yet the personnel struggles, the revolving door, the sheer challenge of just keeping a group of people together, let alone building a team, is wearing them down. Is it any wonder they find themselves asking, "Is this all there is?" Where's the excitement, the enthusiasm, the career satisfaction?

Consider your position on this mid-career path. Are you enjoying the view from the pinnacle of success? Or are you frozen in place, trapped somewhere between merely average and truly excellent? If you're stuck, are you willing to take the necessary steps to move your practice forward? Look at it this way, if the roof were leaking, you would have it repaired.

If your car weren't running properly, you would take it to the mechanic. It stands to reason that if the area of your life that has the greatest impact on your personal and professional happiness and satisfaction isn't delivering what you expect, you wouldn't hesitate to fix it. Right? The question then becomes where to start?

Look at those areas most likely to be sending your practice, and consequently you, into a midterm slump: patient retention, staff recruitment and hiring, lack of training, and poor customer service.

Patient Retention — The Deception of Perception

This is the common scenario in mid-career practices: everyone is busy. The schedule appears to be bursting at the seams. Hygiene is typically booked out six months. A couple thousand patient records are on file. Therefore, the doctor is convinced that patient retention is perfectly fine. However, "busy" is one of those great illusions of the dental practice, a perception that is not only deceiving but also costly. In fact, most dental teams are stunned to learn that 80 percent of dental practices are losing more patients than they are bringing in new (McKenzie Management client surveys 2003-2006). But upon hearing such statistics, the crew will simply turn and tell each other they must be in that select 20 percent group because, well, you know, they are crazy with work. Just how crazy? Find out. You don't know if you fall into the 80th percentile or the 20th percentile until you ask the questions and run the numbers.

How many inactive patient records are taking up space in your files or are stored away? Have you increased the number of hygiene days per week in the last year? Is your hygienist's salary more than 33 percent of what she/he produces? Finally, have you converted

85 percent of your emergency patients to comprehensive exams?

If the number of inactive records is enough to open a second practice, you have patient retention problems. If you have not increased hygiene days, you have patient retention concerns. If your hygienist's salary is more than a third of what they produce, and if you haven't converted 85 percent of your emergency patients to loyal patients, you have more patients leaving your practice than you have new patients coming in.

While misery loves company, it doesn't require that you hang around this pity party indefinitely. Practices facing a mid-career slump are experiencing undetected patient attrition that is very frequently the result of a weak recall system. It is the first system that a practice should examine when experiencing the mid-career pinch because offices that put recall to work, put patients in the chair, plain and simple. Follow the steps below.

First, generate a report from your computer of all patients past due for recall appointments in the last 12 months. Your objective is to reconnect with these patients using a defined strategy that will enable you to set goals and track the results of your efforts. Next, assign recall responsibilities to a member of the business team, these will include the following:

- Contact a certain number of past due patients each day. The coordinator should use a specific script as a guide in making the calls. In addition, she/he should check the patient records to identify a treatment concern noted in the patient's chart that she/he could reference in the phone call.

- Everyone needs goals, and beyond just making calls. The coordinator should be expected to schedule a specific number of appointments and follow-up with patients to ensure a specific num-

ber of patients complete treatment.

- The coordinator also assists the hygienist in meeting production objectives by scheduling the hygienist to achieve daily or monthly goals, as well as managing a specific number of unscheduled time units in the hygiene schedule per day.

- Finally, the patient coordinator monitors and reports on recall monthly at the staff meeting.

This process will reveal many patients who are more than willing to schedule an appointment. They do so because you've demonstrated to them you value this patient relationship and want them to return. Mid-career practices can jumpstart their patient rolls, just by making the effort to reconnect with them.

The Art and Science of Hiring

Hiring and personnel issues are a recurrent nightmare for many dental practices, particularly those in the throes of a mid-career slump. A seemingly perpetual string of employee headaches burdens these dentists. Based on a survey conducted by Dental Practice Report in 2002, 67.7 percent of doctors surveyed lost one to three staff in the past two years. On average, practices must hire and train new staff about every 18 months. While turnover is influenced by many factors, taking steps to ensure that the new hire has the potential to succeed in the position would be fundamental to curbing this perennial problem.

Typically, when that "two weeks notice" is delivered, panic sets in. Unfortunately, many practices don't have a recruitment or hiring strategy. Consequently, a pending vacancy sends the office into crisis mode. The focus is on filling the void as quickly as possible, regardless of the consequences. The result: dentists often hire the first person they can. They hope she/he is comfortable discussing

financial arrangements with patients, or managing a complicated practice schedule, or capable of quickly establishing rapport with others. But they don't really know, so they cross their fingers, rub their lucky rabbit's foot, and pray things work out.

No practice can leave hiring decisions to chance, least of all the struggling mid-career practice. Make certain your next hire is the right fit for your practice. Establish an ongoing employee recruitment program. First, you may not be hiring, but you should always be looking. When you experience exceptional service, give that person your business card and invite them to send a resume, which you will keep on file. Create a "Join Our Team" section on your Web site that tells prospective employees about what sets your practice apart.

Second, use your connections -- friends, colleagues, patients, local dental societies, vendors, and others whose opinions you respect; ask for employee referrals. Contact area business schools, hygiene programs, and assisting programs, and ask faculty to refer those candidates who best represent their programs.

Third, when you're ready to fill a position, don't hire until you test. Make use of computerized testing tools now available that enable you to assess if the individuals you are considering would actually be a good fit for the position and the team. In many cases, the doctor may be ready to hire a candidate who looks good on paper, interviews well, and appears to have the right demeanor for the practice. But if this person secretly hates asking people for money, she/he is not going to succeed as your collections coordinator. And you likely won't discover this until you're facing a financial problem, or she/he quits in frustration.

Internet tests specifically designed for dental practices enable the doctor to know

within minutes if the candidate they are considering would be a good match for the position. It's a straightforward and accurate barometer that enables the doctor to hire based on real data, not gut feelings or good luck. The Institute of Personality and Ability Testing partnered with McKenzie Management in 2005 to identify



peak performers in dentistry. The result of this study was an online testing tool developed exclusively for dentistry that strictly adheres to legal guidelines for pre-employment testing and helps dentists to more accurately match qualified candidates to dental practice positions. While other generic employment tests are on the market, this is the only one that is specific to the dental profession: <http://www.mckenziemgmt.com/employeeetesting.htm>.

No Train, No Gain

Nothing will stampede over a struggling mid-career practice and pound it into further turmoil than lack of training. Training is not sharing bits and pieces of information among the staff, e.g., "Alison told Megan how to do a few things, then she passed some of that on to Jill who then told Hillary." That is NOT training.

The pet store down the street invests more time and energy training the minimum wage high school student how to

sell fish than most dental practices spend training employees who are responsible for handling hundreds of thousands of dollars in practice revenues. Consequently, the single, biggest contributor to practice inefficiency, mismanagement, and lost revenues -- all indicators of a struggling mid-career practice -- is a poorly trained team. Ironically, the one who suffers most is the dentist. Still, many doctors are reluctant to invest in instruction.

What's the problem? Money. Dentists commonly believe they will plunk down a fortune in training costs then the employee will up and leave. Too often dentists can't see past the fears to realize that training is a significant contributor to employee loyalty and the investment should pay for itself in improved staff efficiency. Today, however, in this technology-driven new economy, a cost-effective solution is "cybertraining."

Dentists, like many other employers, can send their employees to school in cyberspace at www.dentalcareerdevelop.com, saving considerable time and reducing the cost of employee instruction some 70 percent to 80 percent. In roughly 30 minutes, a front desk employee can point and click through a tutorial on the causes and remedies of broken appointments. They can review a course on reducing accounts receivables. The hygienists can click their way through a lesson on patient tracking. Online courses like these and others, such as those offered through www.Docere.com, [CareCredit](http://www.CareCredit.com), etc., enable staff, as well as the dentist, to receive much-needed training at their own pace without ever leaving the office and without gutting the bottom line.

Be Our Guest, Not Just Our Patient

In his book, "The Loyalty Effect" (Harvard Business School Press, 1996), Frederick F. Reichheld noted that 65 percent

to 85 percent of people who leave one business for another do so even though they are satisfied. What does that mean for dentists? Many of your patients stay with your practice only until they find a reason to leave. Most dental teams are often more than a little surprised by some of those reasons, such as: “The practice hours are not convenient.” “There’s no place to park.” “The doctor hurts me.” “I don’t understand the bills.” “They don’t accept my insurance.” “They changed a practice policy.” “They don’t answer the phone.” “I can’t leave a message.” “They charged me for a missed appointment.” “They are always trying to sell me something.” “The fees are too high.” “They can’t keep staff.” “They told me I have to go to a specialist.” “They don’t listen to me.” “I never hear from them in between appointments.” And the list goes on. What dental teams might consider to be insignificant issues or minor patient problems are costing mid-career practices a fortune in lost loyalty. Obviously, it doesn’t take much to motivate patients to take their dental needs and wants elsewhere.

So how do you turn patients waiting for a reason to go somewhere else into long-term loyal partners? Take a close look at systems and service. A survey conducted by CustomerThink Corporation, an independent customer relationship management research and publishing firm, revealed that 70 percent of customers cite service as the No. 1 reason they defect. Patients are customers yet too often; employees view managing patient service as a distraction from what they consider to be more important tasks, such as ensuring the schedule is full, collecting from the insurance companies, confirming appointments, etc. Ironically, the success of each of these goes hand in hand with providing excellent service.

First, find out what your patients think. Survey patients to assess if seem-

ingly minor concerns raised by a few patients are a bigger problem than you may have realized. Invest in a statistically valid survey instrument that is designed to ask questions that will elicit the most valuable and revealing information: www.doctordemographics.com.

Next, engage in “action listening,” which is different from active listening. With action listening, the dental team commits to bring concerns and issues voiced by patients to the staff meetings for discussion and action. For example, if patients are commenting the practice hours are inconvenient, the team develops a plan to address the issue, such as adjusting the practice hours for 60 days, marketing the change, and monitoring patient reaction and subsequent patient retention. The team can then assess if the change should be made permanent.

Look at practice systems and evaluate if they are best serving the patients thereby best serving the practice. If the schedule is booked out weeks for the doctor and months for hygiene, if patients are routinely declining treatment, if collections are low and holes in the schedule are frequent, these are all system indicators that patient service is deficient.

It’s also a good idea to pay attention to the obvious:

- Welcome each “guest.” Treat each patient as the most important person in your office from the moment she/he walks in the door until they leave the parking lot.

- Have the answers. Patients expect immediate answers to basic questions.

Track the common questions patients ask. Take steps to ensure every member of the team is prepared to answer them.

- No pretending. Under no circumstances should a patient be ignored when they come to the counter. Regardless of what dental team members are doing at

the time, acknowledge the patient’s presence immediately. It takes five seconds to look over at the patient and let them know you will be right with them. If one pretends they are not there, that is like telling the patient they are an annoyance and unworthy of the dental team’s time.

Providing excellent service means building a strong emotional connection with the patient — not just running on time and delivering good dentistry. It means every member of the team makes it clear they care about that specific patient, is willing to listen to them, and shows genuine interest and concern for them.

Conclusion

In conclusion, every mid-career practice has room to grow and improve. But wanting to grow and wanting to improve are not enough. You have to be willing to take action, to measure the effectiveness of your patient retention and take steps to address shortfalls if necessary. You have to look closely at the quality of your team and at the options available, both in hiring and training, to enhance their abilities. You have to be willing to explore well beyond the superficial indicators of patient service to determine if your practice is delivering the product and services that not only ensure satisfaction but also loyalty. And, finally, you must continue to measure and refine every practice system that will enable you to achieve your individual and practice goals and dreams. Only you can decide to take the mid-career slump and turn it into a mid-career stride, but the resources are readily available to help you do so. ■■■■

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