

Sandy Roth's

Communique!

Unique and Challenging Concepts from ProSynergy Dental Communications

#178: *The Case for Facilitators*

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The Case for Facilitators

I've been thinking about two questions lately as I have visited with several new clients in their practices. One is almost always on my mind. The other is rarely on my mind. See if you can guess which is which.

What would help this practice be more successful?

What would lead to this practice becoming more profitable?

As it turns out, the answer to both questions is the same: a facilitator.

Most practices are still organized around a structure that divides staff between the "front" and the "back." (Note, I put certain words in quotation marks when they reflect current, yet what I consider outmoded thinking.) The "front staff," as they are generally labeled, are responsible for a seemingly endless and equally wide array of tasks:

*greeting patients as they enter either on foot or over the phone

* engaging in social interactions with patients either upon entry or at departure

*all things related to the schedule including making appointments as well as confirming and "filling holes"

*exercising the wisdom of Solomon in determining where to put "emergencies"

*making financial arrangements and collecting overdue account balances

* collecting fees"over the counter"

* processing insurance submissions and followup

*billing and responding to patients billing inquiries

* data entry, reports, daysheets, deposits, filing, computer management, handling patient complaints, and on and on and on.

The clinical staff, on the other hand are responsible for seeing that the practice's clinical procedures flow smoothly, that patients are

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treated promptly and well, that instruments are clean and ready, that the facility is managed within appropriate OSHA guidelines, that the dentist is supported properly in delivering care, that supplies are ordered and stocked, that equipment is maintained, and on and on and on.

Without question, there are many tasks to be done in a dental office. Historically, employees and their work have been organized primarily around the tasks that appear to be all-important in making the practice work. While these tasks are very important, the emphasis on performing routine tasks begins to block the view. The trees loom large and the beauty of the forest is lost.

Let's remember why most of these tasks are being done in the first place: **to deliver dental care to patients who have employed you to perform these services.** The style in which you do this is a matter of individual purpose, the culture you choose, your community expectations and standards, your style and preferences and other variables unique to your practice. But even given these differences, most practices are operated by people who are so focused on the task that they lose site of the goal: **to help more of your patients choose better dentistry sooner.**

I see the implications of this in every practice I visit. Patients and their issues simply get in the way of the daily work. I think one

of the reasons is that while many tasks and jobs are considered absolutely essential to the functioning of the dental practice, facilitation has not yet been given that distinction. It takes a back seat to the more routine obligations of running the business, managing the systems, moving the papers and instruments and maintaining the physical plant.

Typically, I see a group of employees that fall into the following categories: front desk, assistant, hygienist. When the practice grows or gets busy, additional staff are added. Most often, an additional assistant or front desk person is brought on board. Usually, the front desk staff is divided into two roles: scheduler and financial arrangements. And sometimes there is a "floater" in the back to handle instruments and clean up or help when things get busy or a hygiene assistant to review medical history, take blood pressure and x-rays, chart and turn the room. Sometimes in larger practices there is an office manager or an insurance clerk.

But I have never made a first visit to a practice to discover a person dedicated to patient facilitation in the way an assistant is primarily dedicated to assisting or a hygienist is primarily dedicated to providing hygiene services.

In most cases, facilitation or patient care coordination (or whatever it may be called) is blended with other jobs and not singled

out as an area of **primary** focus for anyone. When blended, it almost always gets second string status. The assisting comes first; facilitation when there is time. Hygiene and OHI come first; facilitation if the next patient is late. Filling the schedule, confirming appointments, opening the mail, entering the payments and filing come first; facilitation only if the day's tasks are complete (When are they ever complete?)

Why is this the case? Because adding a facilitator increases the staff size, realigns working assignments of existing staff, perhaps but not always raises the payroll, requires a private physical location, changes the systems, refocuses the energy and requires new skills and different strategies. And while this sound like a lot, there is an enormous amount to be gained. If nothing else, I put it to you that a facilitator is a significant producer for your practice. That's right...producer.

While a dentist and hygienist (and in some states an assistant) may actually perform the dental procedures for which a fee is charged, the facilitator is majorly responsible for what happens prior to the patient being seated in the chair for dental care. While many patients, of course, will get there on their own, facilitators ensure that more people get there sooner for more complete and better care. This is a major advantage to every practice whether it is out of control busy or slow. I would go so far as

to suggest that for most practices this position is as essential as any other, not just a niceity to be added when all the other things are working well. There are very few practices where an effective facilitator would not directly have a positive impact on the amount of dental care selected, the timing of that care, the way accounts are handled and the promptness of payments, the likelihood that patients would actually show up for appointments they had made, and ensuring that opportunities are not missed or delayed.

A facilitator spends her (or his) day focusing not on paper or instruments or the schedule or charts or documents or insurance but rather on the patients who are coming to, are present or have been in the practice for care. The facilitator is always asking important questions that ensure that patients are really heard, understood, related to, and responded to. The facilitator is responsible for creating a safe environment in the practice so that patients will tell you the truth rather than withhold important information or feel forced into dishonesty. While the facilitator may have a private office and a desk, she (or he) doesn't have a chair affixed to the floor - that is, she roams around listening, checking in, observing, reviewing, and strategizing.

The facilitator is an essential role in modern day dentistry, and in subsequent issues I'll talk more about this role and what it could mean for your practice.