

IMPLANT PRACTICE SUCCESS REPORT

from Thommen Medical and Levin Group



Welcome to Issue #21 of ***The Implant Practice Success Report***, a monthly newsletter on implant practice success. Levin Group and Thommen Medical are very pleased to provide business education to you and your team. Each month, ***The Implant Practice Success Report*** will feature leading edge education for managing, marketing, and maintaining a robust and successful implant practice.

In this issue we focus on what's needed to build a great practice as well as the biggest enemy to referral marketing success.

Do You Have a Great Surgical Practice?

By Roger P. Levin, DDS

What is the definition of a great practice? Is it high production? A steady stream of referrals? Excellent clinical care? These are all crucial factors in the success of your practice today; however, the definition of a great practice often comes down to one key question:

How would your practice perform if you, as the doctor, had to be replaced?

We believe that to have a great practice, the doctor or doctors must be able to be replaceable without harming the practice. Here is a quick checklist of key factors that will give you an indication of where your practice stands on the pathway toward long-term greatness:

Documented, proven, step-by-step design systems in place. With excellent systems, your team will be able to conduct all day-to-day operations whether you come into the office or not.

A referral marketing program that can function on auto pilot. The creative strategies may need to change, but you have the quantity and quality of strategies to maintain strong relationships with referring doctors.

Customer service has been designed as a system. Patients should leave your practice feeling that they have received excellent attention, appreciation, and clinical care. This does not happen by accident. It must be built into the daily activities on a patient-by-patient basis and conducted by the staff and the surgeon.

A steady stream of excellent reviews. We have now proven that a practice can increase reviews by 200–400 in just a few years simply by implementing excellent customer service and a scripted technique of properly asking for patient feedback. This is the responsibility of the front desk and would continue even if a specific surgeon were no longer with the practice.

Excellent communication with referring doctors regarding clinical treatment. Referring doctors come at all levels regarding specific services such as dental implants and will need support, education, and guidance with the surgical practice acting as the mentor. If a new surgeon joins the practice and replaces an existing surgeon, would the programming to support referring doctors continue at a high-level to maintain excellence in both referrals and interdisciplinary clinical treatment?

We have seen many practices over the years that deteriorate when a new surgeon takes over a practice. If it's a group practice, the odds are better that success will be maintained, but we have still seen letdowns in the areas described above that result in a decline in overall practice performance.

The solution? Look at the factors above and be sure they are incorporated in your practice. Furthermore, work on systems, referral marketing, customer service, reviews, clinical communication, and interdisciplinary care. If these areas are covered, it's likely that the next time you're asked the question as to whether you have a great practice, you will be able to answer with confidence that you do.

ROGER P. LEVIN, DDS

Roger P. Levin, DDS is the CEO and Founder of Levin Group, a leading practice management consulting firm that has worked with over 30,000 practices to increase production. A recognized expert on dental practice management and marketing, he has written 67 books and over 4,000 articles and regularly presents seminars in the U.S. and around the world.

Inconsistency is The Enemy of Referral Marketing

By Roger P. Levin, DDS

What is the number one factor in the failure of a referral marketing program other than simply not having one? That's simple. It's inconsistency.

In a recent symposium with specialists, I was asked for my opinion on what makes or breaks a referral marketing program. What "makes" referral is having a consistent set of at least fifteen strategies focused on referring doctors and always remembering that referring doctors are the primary customers. I also explained that we often think of the customer as whoever is in front of us; however, while patients deserve excellent customer service and clinical care, referring doctors are without question the primary customer in terms of practice success. In fact, without referring doctors, referrals suffer and the practice declines.

I then went on to address some of the factors that create successful referral marketing programs. These include strategies in various categories such as education, relationship building, staff relations, communication, and interdisciplinary care. Next, I answered a question about what "breaks" referrals in a referral marketing program for specialists and the answer was inconsistency.

Inconsistency sends a message that the practice does not have a comprehensive level of focus, caring, and interest in referring doctors. Further, inconsistency breaks down relationships even after they have been built up and can also lead to negative relations between front desk staff if customer service is not maintained. So, you're probably wondering: what is the best way to avoid inconsistency?

We recommend that you hire a part-time or full-time patient relations coordinator (PRC) and make it their sole job to conduct the marketing program. Keep in

mind that if this person doesn't have a minimum of 16 to 20 hours a week or is not supported by the rest of the team, the program is highly likely to become inconsistent and fail.

To avoid this, the PRC must design an annual marketing calendar that designates the strategies and dates they are to be conducted. Remember that some strategies are ongoing and repeated regularly and others are annual or one-time events. For example, the surgical practice might sponsor an annual presentation on dental implant education, but carry out regular texting communication on a daily and weekly basis. One concept to keep in mind is to analyze how many touchpoints the practice gets with referring doctors. If they are inconsistent, then overall referrals will most likely slow down or decline. The good news is that consistency can overcome many other missteps in a referral marketing program.

To contact Dr. Levin or to join the 40,000 dental professionals who receive his Practice Production Tip of the Day,

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