

## Patients That "Stay, Pay, and Refer"

Recently, I was asked: "Do you think it's necessary to have a regular class for new patients? I've tried them and no one shows up after the first week or two."

There is absolutely no doubt in my mind that the key to having long-term patients (besides good results) is educating them. You can do it one-on-one, or you can do it in groups. Both work. It really depends on how disciplined and committed the doctor is willing to be.

For instance, if the doctor routinely follows a planned program of one-on-one education for every new patient for a period of at least a month, then a separate class may not be necessary. If he/she covers common health problems, basic health information, and family health concerns, and includes a strong referral consciousness, the doctor probably has covered everything. A practice of patients who are routinely and consistently educated like this probably will "stay, pay and refer."<sup>1</sup>

Few doctors I know are that disciplined. They talk too much, talk about things that have nothing to do with the patient's care, problem or condition, and generally have no focus or "message for today's visit." If you don't have a plan, a way of educating for each visit, you may lose the patient prematurely. If the patient's problem disappears and/or someone they know develops one, you may have lost new business as well!

A few of the most effective doctors I've seen have no apparent planned program, however, their entire encounter with the patient is spent explaining what they find on palpation, and what could happen if the problem goes uncorrected. The time spent between the small talk is a focused lesson in neurology, neurophysiology, philosophy, and motivation. The doctors who follow a patient/problem focused plan for each visit may not need much more. Are you this type of doctor?

A "class" may be of use to you (and your patients) if it is interesting, educational and motivational. The content must be organized, topical and well presented. You can get great tips, practice, and constructive criticism from groups like Toastmasters right in your own area.

If your previous classes were not a success, you'll need to look at several things. Were you motivational, educational, and interesting? Ask several people who attended what they found useful and what they think you could have skipped. This may be tough on your ego. Was the place and time convenient for most patients? And finally, did you mean business? Did you inform, schedule, and remind everyone you wanted to attend?

Oh yes, were you committed enough to the importance of the class to hold it even if only a few attended? Only you know the answers. To see patients stay, pay and refer, you have to educate, motivate and deliver results. You'll probably need to spend some time with your stats. Carefully reviewing the number of new patients, your retention and referrals will give you clues and indications of your strengths and weaknesses.

Last, but not least, would you attend your patient class? Brutally review your class for negatives. Do you explain the terminology? Remember, your patients aren't doctors. Do you say "uh" a thousand times? Do you talk too long? Remember, if you are committed to having these classes,

and you let your patients know why they must come, they will come.

Before going, I'd like to address some of my readers. To my Australian readers, thanks for the "stuff" you sent. And to the Alabama DC who wrote me -- you forgot a stamped, self-addressed envelope. Since there was no return address on the envelope, there was no reply from me. Keep sending me your questions, comments, and column ideas.

### *Reference*

1. Stay, pay and refer is a description of a good patient I got from Mary Quarnstrom, DC.

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