

YOUR PRACTICE / BUSINESS

Stop New Patient "Backslide" in Your Office

Kiki Herfert brings over 30 years of worldwide chiropractic experience to her columns, convention presentations, and management work.

"I want to increase the number of patients I see in the clinic. It seems like I get to a certain point and then slide backward to where I started from. It's frustrating for me. Do you have any ideas for me?" -- a chiropractor in Dearborn, Michigan

I don't want to discourage anyone from "just doing it," because, some people can "just do it." But it seems safe to say you're not one of those people. Have you tried to figure out what, exactly, happens when you start to "slide backwards" on getting new patients? Does it happen because you, your staff, or less likely, your layout, can't physically handle increased numbers? Do your bad habits, like too much talking, force you to rush with some patients so they feel shortchanged and you get so behind schedule and patients get mad and leave!? Does your staff sink under the paperwork generated by new patients? Do unresolved financial questions caused by poorly designed and/or explained financial policies create bad feelings, large unpaid balances and angry patients? You need to review your failures and see if you can see a pattern to what happens.

Where and how does your staff fall apart when your practice begins to grow? You mention that you want to see more people. It will have to be a team effort for you to get to a higher patient load and stay there. Your staff has to understand your goals and agree with them. If they don't want to see you get to where you want to be, you probably won't get there! Do they become burned out and overworked? You will needs to correct the situation, once you find the cause. If anyone has the attitude "I hired on here and we were seeing 25 patients (or 250) a day, and I get paid \$XX a week and that's what I want to do." You'll have to replace them if they can't agree with your need to be busier.

Patients, satisfied or dissatisfied, have the final word in your success or failure. Do they become disillusioned because once they see the tapes, get a report and give their insurance information no one pays any attention to them? Do they fail to "get it" because your Report of Findings is too technical or too simplistic? Do you and your staff speak and act as though the patients' health problems are important? Do you bowl them over with facts but fail to connect with their emotions? Or worst of all, do you leave the distinct impression that the referrals the patient can give you are more important than the patients themselves? Only you can figure out the answers to these and other questions you should be asking yourself. You need to resolve these issues to move forward successfully.

If you decide "I want to double my numbers by next month," just wanting it doesn't make it happen. You need to have a plan, a "roadmap" to get you where you want to be. Actually write out a plan including what you, personally, and your staff will have to do, and keep doing, in order to be busier? Include necessary changes like: * I will arrive at the office in time to have everything prepared for the morning or afternoon before I start for the day.

- I will arrive at work ready to work.
- I will stop wasting time talking about unimportant things in the adjusting rooms.
- I will create and follow a planned program of things I want to tell my current as well as new

patients.

- I will decide what absolutely must be done on each routine visit and I will do it, no more or no less each and every visit.
- I will create time for new patients, etc., etc.

Staff needs your help in order to be busier. Just as you have to make a plan for yourself to streamline everything you do, they must do the same. You will probably need to help them understand what's truly important and what isn't in terms of office procedures. They will have to work with you in prioritizing what they do. Some people won't ask for help until the whole waiting room is in revolt. They're trying to do everything, either because there's no one to help them or because they don't know how to prioritize. Lack of clear procedures and policies can leave problems unsolved until they explode at the desk, etc.

They may have to change habits that work contrary to your plans, such as "Well, we all like going to lunch together." They may need to stagger lunch hours or arrive early ready to work to increase efficiency in using computer terminals for posting payments, printing forms or statements, calling on unpaid claims, making recalls etc., while the office is closed, and/or you aren't seeing patients and they have undisturbed time to work. Staff may spend a lot of their time "helping" each other because their work duties/priorities aren't clearly defined. Besides, it's more interesting than what they are supposed to be doing.

Start working on your plan. You don't have to have all the details. You can figure out some of it as you go along. You do need to have the next few steps written down. For instance, ask yourself, "Where will these new patients come from?" Will you start doing a weekly patient lecture? If so, what will you say? Will you advertise? Where, how long, and what exactly will you do when the phone starts to ring? Are you and your staff ready for new business? What appointment times will you have available that will have minimum adverse affect on your present patients? Have you, your staff, and your patients all got block/cluster appointment booking in place and working well? Are you willing to come in early and stay late, if necessary? What about your staff?

You can use trial and error, but it saves a lot of time to have a plan. Formulate your plan, use it consistently, evaluate it and change it as needed, but work your plan.

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