

How to Chase a New Patient Away in 60 Minutes or Less, Part 2

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In [part 1 of this article \[July 29 issue\]](#), I discussed some of the warning signs that your practice may actually be discouraging new patients from coming to your office. For most chiropractors, this is an alarming thought due to the fact that precious few DCs arrive at the point that they no longer can or will accept new patients. So, for the rest of the "normal" chiropractors who don't have a super-sized, magnetic, Web 92.0, set-it-and-forget-it, make-money-while-you-sleep solution that fulfills your every new-patient dream, what are you to do to prevent yourself from chasing new patients away? Here are a few things to consider.

To Attract New Patients, Stop Obsessing About It

The first step to fixing your new-patient problem is to stop obsessing about external methods to acquire new patients. This may sound a bit counterintuitive. In reality, it may be due to the simple fact that new patients may not really be your problem. Most DCs don't want to hear this and the marketing gurus will definitely not bring up one important point: If you have significant challenges internally, the external solution of adding more new patients won't solve the problem.

This is a difficult concept for many chiropractors to accept. Two out of every three ads in chiropractic revolve around the concept of getting more new patients, and every DC you talk to brings it up as a primary goal. An outsider observing the chiropractic profession at large could easily conclude that the primary problem in chiropractic, and the chief contributor to a lack of success, is new patients (or lack thereof).

Yet with all of this focus on new patients, why have no tangible improvements been made in the profession's status? In other words, if we've pinpointed the problem, we should be seeing some progress by now. On the contrary; salary surveys, satisfaction surveys and other measures of happiness and success all seem to indicate that the profession of chiropractic is worse off in 2010 than it was years or even decades ago.

Are We Focusing on the Wrong Problem?

This leads me to ask one difficult question: Could it be that we are focusing on the wrong problem? I know this may border on sacrilege for some who insist that new patients are the solution to every practice woe. Again, logic and the cold, hard reality of the health care marketplace dictate that this certainly cannot be the cure-all that solves all practice ailments.

As I mentioned in part 1 of this article, most chiropractors who have been in practice for just a couple of years will have to face the fact that patients leave. If patients never left, in a few short years, most chiropractors would be at maximum capacity with no need to advertise. With perfect retention, you don't need to add any new patients after a certain point. You only need to replace patients who die off or move, because no one ever leaves your office.

Do you know of such a practice? I have yet to meet a perfect practice with perfect retention. The

answer, therefore, to your practice problems does not lie in the acquisition of new patients. Part of the answer, however, does rest in your ability to *retain* the patients who do enter your practice. In reality, this is only part of the answer, because if you lack the ability to get adequately or profitably paid for those patients, even retention doesn't solve all the problems. (This is another problem for another article!)

Three Vital Systems Solutions

Once you appreciate that the acquisition of new patients is not the major challenge in this arena, but rather that the *retention* of new patients represents the crux of the issue, you can begin to take tangible steps to improve your situation. In my experience, systems are the major reason for the problem. In this respect, the strategic application of systems at critical milestones can help you achieve viable solutions to your new-patient challenges. While it's difficult to recommend foolproof systems that work for every office, every technique and every chiropractor, here are three key ingredients to analyzing or developing concrete systems in your own office to develop better new-patient acquisition and retention:

1. Positioning Problems: Some new patients are doomed to fail before they even enter your office, mainly due to errors or problems with the positioning of your practice. For example, if your desire is to run a higher-end, lower-volume boutique practice, then advertising in the local penny-pincher newspaper for free exam and X-ray specials may bring in patients. However, they will likely be a poor fit for your style of practice. Similarly, an office that wants to bolster its cash-based business may not choose to become a provider on every insurance panel, as the patients who come into the office after finding you in their insurance book typically want to use their insurance.

In short, make sure that all of your marketing is geared toward attracting your ideal patient and avoid shortcuts that will simply put bodies through your doors. In the end, those patients won't stay, won't pay or won't refer because they are a poor fit for your practice.

2. First-Step Fumbles: Another potential sabotage that can occur before the patient steps foot in your office is due to phone fumbling. Since the vast majority of new-patient encounters start with a phone call, rigorously training your staff is an absolute necessity for a high percentage of new-patient conversions. I have yet to see a highly successful office that has poor phone technique. Unfortunately, most mediocre offices either spend little time training their staff on exactly what to say, role-playing potentially tricky situations, or monitoring the quality of phone interactions. The lack of training either causes the patient to avoid coming in altogether or sets them up for failure and poor retention because of bad communication about finances, procedures and office protocols. On the other hand, the offices with enviable conversion rates do all three and avoid fumbling the first encounter the new patient has with your office.

3. Procedural Protocols: Many DCs fear structure or protocols because it sounds like everything in the office needs to be scripted, robotic and a static one-size-fits-all system. In truth, a well-structured office with defined procedural protocols has a solid framework through which the doctor(s) and staff can operate with both consistency and flexibility. In other words, if you know what the "normal" routine is, then you have the ability to be adaptable when the need arises.

Unfortunately, most chiropractic offices don't seem to have a "normal" setting and lack any sort of strategic structure in the way they go about taking care of their patients, educating them or even being paid. Most offices routinely "wing it" with few protocols or start strong and after the second or third visit, it all turns to mush. Similarly, they have no identifiable plan for teaching their patients about chiropractic or how to care for themselves, but instead dispense advice piecemeal at random intervals when they think about it. Finally, their back-office systems also lack cohesive or

intelligently designed systems that enable the doctor to be paid efficiently and profitably. The result of all of this is usually a disconnect or series of communication failures which eventually chase the new patient away, leaving them feeling neglected, confused or taken advantage of.

For offices that frequently commit these offenses and lack these key ingredients, the worst news is not that the new patient leaves or fails to stay for the duration of their care. Rather, problems in each of these three areas will not only eliminate the new patient, but also close the door on any potential referrals from that source.

After all, if a patient is confused about your care plan or treatment methods, how can they effectively refer their friends, family or co-workers? They're not even sure what you're doing for them, so they definitely don't know what you can do for others. Similarly, why would a patient who feels neglected or thinks they have "fallen through the cracks" of your poorly constructed chiropractic framework refer someone else to go through the same negative experience? Finally, what damage to your reputation is done by poorly matched marketing or botched phone calls that result either in a disconnect before the patient comes in, or a patient who enters your office under one pretense and feels part of a bait-and-switch routine once they arrive?

The Keys Are Within Your Reach

I am well-aware that there are umpteen ways to garner new patients; some good, some not so good. Some are even good for certain doctors, but not others. However, all methods will fail - either immediately or eventually - if these three key ingredients are not in place. Eventually the lack of one of these systems will produce a hole in your new-patient bucket, out of which all of your retention will inevitably leak.

While you may be tempted to try some new approach toward new-patient acquisition, my encouragement would be to plug these leaks in your bucket first and, along with the ideas discussed in part 1 of this article, create a practice that is referral-ready, properly positioned and able to retain the vast majority of patients who find their way to your office. Do that and you will no longer chase patients away; nor will you have the need to constantly generate new methods for finding more new patients. [The ones you keep will happily stay, pay and refer.](#)

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