

IMPLANT PRACTICE SUCCESS REPORT

from Thommen Medical and Levin Group



Welcome to Issue #13 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 team building and referral marketing.

How To Build The Right Team

By Roger P. Levin, DDS

Many people believe that the only way to have a great team is to hire great people, terminate those that don't make it, and continue hiring until you get it right. Unfortunately, this is a very misinformed management concept. It is very difficult to hire great people. In fact, there is a shortage of dental staff available for all types of practices at the current time.

So, what is the solution to building a team that can meet all the practice goals and objectives?

We could start by talking about leadership, but that is not the point of this article. The point is that you will probably never have a team of all great performers and it's not actually necessary. Levin Group recommends a concept called 40:40:20. The 40:40:20 concept is that you want 40% of your team members to be great performers, 40% to be good performers and 20% to be satisfactory performers. At first this may seem like you're giving up or not trying hard enough. However, if you build a 40:40:20 team, you will have outstanding performance in your practice and be able to continue to increase production, profit, and referrals.

The reason the 40:40:20 concept works in dental practices is because you do not actually need all great staff members. Great staff members will perform at the highest level, continue to learn and grow, and continue to improve. Good staff members will do their jobs extremely well every day and satisfactory team members will do the very best they can each day. The great team members are likely to make the best decisions, use their intuition and decision-making capabilities to keep the office moving, and take pressure off the doctors. The good performers will get the job done and they will often take the time to figure out what to do on their own if there are challenges. The satisfactory performers will need direction, but they can often get it by talking to the great and good performers. Every business needs some people who will simply try hard to do the job but need occasional direction. The longer they are with the practice, the better they will be able to move through their days with less and less direction.

The 40:40:20 approach is also logical. In the face of a staff shortage, simply terminating people and replacing them because you might get a better performer is not an easy path. Instead, if you are fortunate enough to have committed and dedicated people, try to determine if they fit into the great, good or satisfactory category. Then give the great performers opportunities to grow, the good performers opportunities to become great, and the satisfactory performers the direction that they need. Develop the philosophy that you're lucky to have dedicated and committed people even if they need direction.

Keep in mind that a 40:40:20 approach creates a powerful team that can demonstrate high levels of achievement working together. If you have 40% or 60% satisfactory performers, then the practice performance is going to slow down. If you have 40% great performers and 60% satisfactory performers, you're going to have conflict and tension between the two groups. With 40:40:20 team, each group acts as an excellent buffer to the next between great, good, and satisfactory. Building a team with this model will almost always lead to a strong team that is able to continue to grow, improve, and move forward as specialty practice challenges continue to emerge.

We believe that the 40:40:20 concept is the best model for practices given that you cannot simply hire all great performers. Instead, you must develop them.

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

visit www.levingroup.com
or email rlevin@levingroup.com.

A Very Powerful Marketing Message

By Roger P. Levin, DDS

Referral marketing is a complex, scientific approach to building relationships and creating a strong stream of referrals. There are techniques such as hiring and training a part-time or full-time Professional Relations Coordinator (PRC), designing an annual marketing calendar with a minimum of 15 strategies focused on referring doctors and their teams, and segmenting referring doctor practices into A, B, C, and D offices. There is data and science behind results in referral marketing that has been established after 37 years at Levin Group.

While simple things can be powerful, they are often overlooked. You can do all the major marketing, such as annual seminars or parties for referring doctors, regular contests for dental teams and launching and managing study clubs, but those alone will not necessarily guarantee more referrals. They are all wonderful ideas and can fit into certain referral marketing programs, but they are not the entire program.

One of those powerful, simple ideas, which can act as part of a foundation for relationship building and increasing referrals, is to let every referring practice know that you're available to help them with any case that they send. When it comes to basic dentistry, referring practices are highly competent and can provide excellent care. When it comes to dental implants, as the cases become larger and more complex, many dentists don't have the background or experience to be completely comfortable restoring that case. However, they don't necessarily want to refer the patient elsewhere as that would be a loss of revenue and possibly a patient. They have the belief that they can complete the case, but there is a learning curve that they must go through.

The powerful message is that you can be part of the learning curve. As the specialty practice, you can help them with the design and restorative approach to the implant case and there are numerous options. Perhaps the specialist has enough restorative knowledge to walk the referring doctor through the completion of the restorative case. One of the best ideas is to also involve the implant representative. They are highly educated and trained and can almost always identify options in completing and restoring a clinical case. There's also the dental laboratory. The lab can and will work in coordination with the specialist and restorative doctor. Labs don't want failures because it eats profit and wastes time. As you know, labs rarely charge the doctor when cases must be redone so they will go out of their way to try to get the case right from the start.

The specialist should try to anticipate which cases might be a challenge for the referring doctor when the patient is sent back for the restorative phase of dental implants. Let the restorative practices know that the specialty practice will be right there with them on any cases that have complexity, difficulty, or unusual situations that need to be worked out to provide excellence in the restorative phase.

One of the additional benefits of this approach is that you are simultaneously building more powerful relationships with your referring doctors. You'll be appreciated for your commitment and support. You'll be respected for your knowledge and coordinating with an implant representative or dental laboratory. Most importantly, you will become the practice of choice.

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.