

DURING THE RECENT PRACTICE PLAN WORKSHOP TOUR - THE ULTIMATE DENTAL PRACTICE...ROOM BY ROOM - LAURA HORTON AND MICHAEL BENTLEY DISCUSSED DIARY ZONING FOR THE DENTISTS. THIS ASPECT OF PRACTICE LIFE GENERATED LOTS OF QUESTIONS AT EVERY EVENT. IN THIS ARTICLE. LAURA HORTON DISCUSSES DIARY ZONING AND PROVIDES HINTS AND TIPS TO HELP YOU START TO PLAN YOUR DIARIES.

I first 'zoned' a diary over 15 years ago. The Vocational Trainer (VT) that I was supporting was doing nothing but examinations, and he and I were both bored senseless. He needed to actually treat patients to gain experience and his patients needing treatment were waiting months as his diary was full with examinations from 9.00 – 5.00 everyday. The plan was quite simple – less exams, more treatment. So, I placed zones in for only six examinations a day, the rest was blocked for treatment only. It worked a treat.

When I began my last employment in 2004, my employer had a few goals for me. The number one being to help him sort out his diary. He was working all hours, running late, paying out heaps of overtime and never seeing his wife and daughter. With another baby on the way, enough was enough.

We were a private practice, which makes life easier with zoning as you are not restricted with your NHS contract. In this article, I am going to share with you the principles of diary zoning to help you begin this process.

Where to start

- You must work out your treatment mix figures as a percentage of your clinical time. This allows you to see the real picture. Confirming that you spend 65% of your time doing examinations might frighten you, but the facts do not lie.
- Targets for profit must be set.
- You need to confirm the gap of income from existing patients each month to confirm how many new patients you need each month.
- Conversion rates you need to know how many New Patients (NPs) you need a month per dentist based on the average NP spend and conversion rate percentage.
- You must have your hourly rates set correctly do not pluck figures out of thin air. If you do that, your fees are not correct either. Your fees must be 100% accurate.

CLINICAL DECISIONS:

- Protocols, methods for communication of patient risk factors must be created between the dentists and the hygienists for recall periods. Review the NICE guidelines - not all patients need to see a dentist every six months.
- If you move patients on to twelve-monthly examinations, review your membership – all membership must be prescribed. Be flexible with your plans, not rigid with only two options. You need a launch date for the updated memberships for patients.

If you have multiple dentists, I would start by zoning one dentist for a period of one month, then integrate everyone else into the same system. Please note: on average it takes six months for a plan to come to fruition.

I am against moving patients around and if the dentists do not tell the patient where they want them to be, it will not work.

Medium value includes exams even if they are members. Zero value are appointments that have no invoice amount such as a review; suture removal and fits should also apply to this.

The figures below are examples only:

YELLOW SLOTS - high-value appointments worth £500 or more

RED - medium-value appointments worth £1 - £499

GREEN - zero-value appointments worth £0

BLUE - emergencies

PINK - new patients

Patients that have multiple fillings in one quadrant may fall into the high-value zone, which is great as it is a longer appointment, so should go into the high-value zone.

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Decide on the colours for the zones. I use the same colours in each practice as it is then much easier for me to manage!

BLUE - EMERGENCY SLOTS

GREEN - ZERO-VALUE TREATMENTS

RED - MEDIUM-VALUE TREATMENTS

PINK – NEW PATIENTS

There are additional colours in practices for different reasons, however I am a fan of keeping it simple and am going do so in this article!

Diary rules

The patient is placed into the slot based on the invoice amount for the appointment. Patients are provided with two appointment options only and never asked 'when would you like to come in?' They are then booked at the start or end of the zone, not in the middle.

Setting the fee for each zone

The fee is based on membership prices only. I would suggest you start with the fee for a molar root canal treatment (RCT) and a porcelain bonded crown (PBC) for the high-value appointments. Dentists always have conversations regarding their own clinical opinions with RCT whether it is one or two stages. Decide on the clinical systems for the practice and set the fees so the patient will fall into the correct zone. You will also need to decide which denture appointments fit into which sections. First impressions should be in a red zone, the fit in green, but some dentists prefer to put the bite appointment into high value.

Create a plan so the dentists can hit 75-80% of their hourly rate by lunch time, this means less patient footfall in the morning. The day may start with:

8.30AM - 9.00AM : RED FOR RECALL EXAMS

9.00AM - 1.00PM: YELLOW

2.00PM - 2.15PM : BLUE

2.15PM - 3.15PM : GREEN

3.15PM - 4.15PM : RED

4.15PM - 5.00PM : PINK

Every afternoon should be a mixture of the colours, the morning should always be the same. Any late nights or weekend diaries should also be zoned. ->

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YOU ARE GOING TO HAVE TO WORK ON SOME OFTEN DIFFICULT SITUATIONS IN PRACTICE, SUCH AS NOT ALLOWING ANY DOUBLE BOOKINGS AND CONFIRMING A FULL EMERGENCY SYSTEM 55

Here are some more facts about diary zoning

- Dentists are fresh in the morning, so it's an ideal time to complete the more complex treatments no matter how much you love them.
- The front desk is crazy in the morning the phones do not stop ringing and having a patient in every 15 minutes only makes the situation worse.
- Your patient experience is worse when you do not zone your diary, the hustle and bustle of a busy practice is not attractive
- Your patients currently have control of your income if you do not zone - how crazy is that?
- Your patients have control of your business full stop if you are asking them when they would like to come in.
- You have to be prepared to do the figures up front to successfully zone your diary - guesswork is fail work.

- The dentists must lead this you have the power to get the patient in the diary where you want them, no-one else has.
- Hitting an hourly rate is hard and causes stress. Having a daily target and hitting 75-80% of this by lunch time each day is stress-less
- You have to plan ahead and train your team.
- You will have to invoice the full fee for a crown at the prep
- You are going to have to work on some often difficult situations in practice, such as not allowing any double bookings and confirming a full emergency system.
- You must learn to handle the patients that want an exam and hygienist appointment at the same time when it's no longer possible for every patient - moving patients' recall period for the dentist, where clinically necessary, is vital for this to work.

Other diaries to be zoned

If you have a treatment coordinator, their diary should be zoned to ensure they are available for every new patient that comes into the practice. It is ideal if they are available for recall examinations too.

This means if they are holding free consultations, you can then have those around the above slots.

The hygienist diary should also be zoned if you are proactive with your hygienist centre and the hygienists are treatment planning and seeing new patients for longer periods of time.

Diary zoning is hard work to get right, and for it to be successful you need to review the zones every month. Most practices find a tweak in the afternoons is needed in time. With careful planning you can optimise the success and consistency of the business so that the

dentists are hitting their hourly rates over the course of a day, every day and practices are in control of their income, patient experience and dentists' productivity.

Laura Horton is a Dental Consultant who loves business and team development.

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