

The effective recall system

One of the many concerns in a dental practice today is having an effective recall system. The majority of patients do not respond to the standard reminder postcard used in the passive recall system. An active prebooking system is far more productive and creates a superior recall system that will improve the efficiency of any dental office. Many practices do not develop a recall system that is efficient. Any recall system is only as good as the person responsible for its accomplishments, and that person must monitor it constantly and consistently for the system to be effective.

For a patient to attach as much perceived significance to the recall system as possible, those implementing the system should avoid using the term "recall" for two reasons. The common perception among patients is that a "recall" appointment is not significant. After all it is just for a cleaning, they may think. The dental staff needs to distance itself from the use of the word "recall" when advising patients of their need to return to the office within a specific time because of the term's negative associations. The dentist is not "recalling" the patient back into the practice to check whether the dentistry is defective and in need of replacement. Therefore, the creation of value and importance for that appointment in the minds of patients begins with finding a better term for "recall." Alternative phrases include "continuing care", "preventive care," or "recare." Without the perception of value, patients will be more hesitant to schedule an appointment and will, more often than not, cancel or fail to show. The significance of excellent verbal skills will help to make a continuing care system successful. Prebooking is the most effective system. Practices that are committed to prebooking in the correct manner will experience the benefits.

While a prescheduling system is superior, problems can detract from a successful implementation: poor control of the system and poor verbal skills. The front desk is most often responsible for prescheduling. Without good organization and good verbal skills, patients will not respond well. Too often, the patient declines, it is usually because the appointment coordinator asked a closed ended question: "Would you like to schedule your next visit?" A closed ended question requires only a yes or no answer. Most often, the response to this kind of question is, "I don't know my schedule that far in advance, go ahead and send me a postcard and I'll call you." To maintain control of the conversation and a positive response, the coordinator should inform the patient what is going to be done. For example, "Mrs. Smith, I know that Jeannette, our hygienist, wants to see you in May. She can see you on Tuesday the 1st or Wednesday the 2nd. Which of these would be the most convenient for you?" Most people will not object to this approach. When you have the occasional patient who does object to prebooking, the verbal script should be: "I understand, Mrs. Smith. Don't be concerned. We will mail a postcard to you three to four weeks prior to your scheduled appointment with the day, date, and time of your appointment. Should you find any problem, I will be glad to re-schedule your appointment at that time." Create an image for the patient that conveys that you are doing them a favor. This requires advanced verbal skills, a pleasant personality, and a genuine desire to make everyone happy. Postcards should be filed in a file by month and mailed out three to four weeks ahead of the scheduled appointments. This reminder gives patients sufficient time to reschedule their appointments if necessary and gives the appointment coordinator sufficient time to repair any openings in the schedule.

Along with the reminder cards, a telephone call 24 hours prior to the appointment is still necessary. There are additional ways to help ensure a successful prescheduling continuing care system. The system will be most successful if the dentist or hygienist is actively involved in motivating the patient to return for any needed treatment in addition to the prophylaxis. In many offices, the best way to improve and control the hygiene schedule is for the hygienist to schedule the next appointment while the patient is still in the chair. The perceived value can be enhanced dramatically if the dentist and hygienists participate. It is strongly suggested that the dentist or hygienist create a situation by giving patients reasons to return by telling them that they are expected to return during a specific month. The dentist, hygienist and assistant should be discussing the return visit before the patient arrives at the front desk. If the patient has been seeing the dentist for treatment of dental procedures and is now completed the treatment, the patients next visit will most likely be for recare. At the last treatment appointment, it is important for the dentist

to give the patient a reason to return to see the hygienist. The reason must be more than a prophylaxis. Thus, upon dismissing the patient at the completion of the last treatment, the dentist creates a perception of value and importance in the mind of the patient by saying, for example, "Take care, Mrs. Smith, I'll see you at your continuing care appointment in May. I want to be sure that the tissue around the crown that I seated today remains healthy." The clinical assistant should reinforce this statement so the patient is not surprised when he or she reaches the front desk and the appointment coordinator schedules the next visit. In this way, value has been created.

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