

Overcoming No Shows and Cancellations

By Linda Anderson

~ Unlocking the Mystery

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1 *Reason to Come Back*

At the end of every appointment, the clinical team member who is with the patient – whether that is the clinical assistant or the hygienist – needs to set the patient in an upright position and stress to the patient the significance of the next appointment. You want to plant in the patient's mind the benefits of the next appointment and the possible risk of not appointing or of not showing up for that appointment.

No matter how wonderful the person in the business office may be or how wonderful her verbal skills are, she will not have as strong an impact on the patient as the person who has been with the patient clinically. The clinical team member has been in that person's mouth. The patient will be more likely to comply with the clinical person's recommendations than with anyone. The clinical assistants and the hygienists will have a strong effect on whether or not the person schedules and whether or not he/she keeps their next appointment.

Questions a business team should never have to ask on check out

1. Where's the chart?
2. What was completed today?
3. What is needed next?
4. How much time is needed between appointments?
5. How long do you need for the next appointment?
6. How much is the fee today?
7. How much is the fee for the next visit?

3 – 5 Minute Checkout and Confirmation

Clinical Team

1. Sit the patient up.
2. Leave the bib on.
3. Confirm what was done today.
4. Ask if there are any questions about the treatment.
5. State the procedure for the next visit, and how much approximate time it will take.
6. Stress the importance of the next appointment.
7. Stress the benefits of completing treatment.
8. Stress the consequences of non-completion.
9. Escort the patient to the front desk and confirm with the receptionist what is required verbally in front of the patient.

Administrative Role

1. Confirm the treatment today.
2. State how much the investment is.
3. Ask how the patient would like to take care of it?
4. Confirm next visit.

2 *Develop a Clear Cancellation Policy*

Every dental practice needs to have a firm cancellation policy that the patients understand and can respect. The policy needs to include written timeframes that the practice requires for a cancellation of their appointments. The policy needs to be displayed in writing as well as verbally communicated to the patients on a regular basis.

Does the practice give their patients the idea the schedule is wide open by scheduling the short notice cancellation the next day?

What is your cancellation policy?

Do your patients know about it?

How much notice do you request for a change?

When someone cancels how soon before they get another appointment?



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Scheduling Communication Skills

1. Alternative Choice

2. Transfer of Ownership

3. Enter the detail into the schedule

4. Reinforce the name of the procedure

5. Rescheduling

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Classifying Patients

The best way to determine how to handle patient cancellations is to develop a system of classification of your current existing patients. Their classification is based on their appointment history for the past 18 months. The practice needs to choose a target date to begin classifications; they would then take each patient on the day sheet and begin classifying A, B, or C. The practice needs to decide where they will put this classification so that everyone will be able to access the information.

Patient Identification

1. "A" Patient:

- Good patients – always arrives on time; gives proper notice for valid changes.
- High regard for preventive hygiene services.

2. "B" Patient:

- Relatively good patients – sometimes misses an appointment, sick or forgotten.
- Sporadic respect for preventive hygiene visits.
- One to two broken or short notice changes.

3. "C" Patient:

- Three or more broken appointments, either a no-show or short-notice changes.
- If we see them we believe them.
- No respect for hygiene services i.e. emergency only

Verbal skills for a Classifications

Classification "A"

"Mrs. Smith, is every thing OK, you don't usually change with this short notice. **(Listen)** It will be at least two weeks before you can reschedule and the sequence to your treatment is important to having a great result."

***NOTE – Patients are to be scheduled two weeks in advance, no sooner. Ask patients if they want to be put on your short notice list.*

Classification "B"

"Mrs. Smith, I'm sorry that you feel that you are unable to be here today. Is there anything we could do to help you keep your appointment? We would really appreciate any help with this."

"We will reserve another appointment time for you Mrs. Smith. Usually there is a short notice change fee, for you we will waive that fee. Let's make sure that if I am going to reserve another hour of the doctor's time that we pick a time which is convenient for you to be here."

***NOTE – patient is scheduled one month in advance.*

Classification "C"

"Mrs. Smith, it seems our schedule keeps conflicting with yours. This is not the first time this has happened for you. I would like to suggest rather than giving you another specific appointment, we will put you on our short call list. In the event we have a change in our schedule, we will call you to see if you would be able to come in for an appointment."

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Pre-booking and Confirmations

- No patient should leave the office without having a restorative or continuing care appointment scheduled.
- Begin confirming appointments in the morning around 9:00 a.m. Confirm in a very positive manner and always stress the importance of the appointment and the patient's responsibility for the appointment.
- Confirm with the name of the appointment at all times.
- Reinforce the appointment relative to this area of concern. The patient will be more strongly motivated to come to the appointment if you stress the benefits of the appointment and certain risks that might occur if they do not come. In addition, you will be showing your patients that you go the extra mile in providing patient care. In other words, you are not just calling off a list – you are knowledgeable about their particular situation.
- Be sure to ask for a daytime number that for confirmation when you are scheduling the patient in the first place.
- Do not leave a message and think that you have confirmed. A left message is not a confirmation!
- Ask the patient to call you back to confirm directly.

For Example:

"Mr. Bailey, this is Jan from Dr. Smiley's dental office. I'm sorry that I have been unable to reach you personally. Mr. Bailey, I am calling regarding your appointment with Dr. Smiley on Thursday, July 24th at 9:00 a.m. Please call our office by 12:00 tomorrow – that's Tuesday – about that appointment. I'll appreciate your call. Thank you."

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Scheduling Lists

Using the scheduling lists below allows a resource of patients to fill last minute voids.

No Show Lists

This is a list of people that have not called to cancel their appointments and did not arrive for their appointments. These patients are usually “C” patients. These patients need to be rebooked at least one month from their original appointment. If this is a patient who does this recurrently, they should be put on the short call list.

Short Notice List

These are patients that have given you permission to call if you have had a change in the schedule. These patients are booked and called the same day. All patients who come to the office should be asked “If we have a change in our schedule, do we have your permission to call and see if you are available.” This gives a list of people to call to fill openings in the day.

Short Call List

These are usually “C” patients, patients who do not arrive on time or no show or continually cancel appointments. These patients should be kept on this list. These patients are called the same day.

Cancellation Lists

These are patients that have cancelled and have not rescheduled their appointments.



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Reactivation

Reactivation Sequence

First Day of the Month:

First Week of Month:

Second Week of Month:

Third Week of Month:

Fourth Week of Month:

Do not allow the patient to call you back – get permission to call them. Attempt to schedule the patient with a telephone call and an upbeat letter. If no response then the doctor has the option to send a release or choice letter if he or she so desires.

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Make Financial Arrangements Prior to TX

Step I – Set and write the policy:

Step II – Decide, as a team, what financial payment options you are going to make available.

Step III – Financial arrangements must be made before any treatment is provided: Patients like to know how much the treatment will cost before it is done.

Step IV – Designate a specific person on the team to administer financial arrangements.