High on the list of problems I hear when working with a practice owner is that they are “short of work”. If these are just the ones that have chosen to work with me then it’s reasonable to assume that the problem is widespread and, from what I see, affects all sorts of practices whether full-time NHS or 100 per cent private.

The little phrase “short of work” can cover a multitude of reasons and my first job is to find out what it really means. Being a coach means that I ask questions (lots of questions) and these are some of the answers that I get.

“They (the patients) aren’t interested.”

Really? Or do you just presume that? Scratching the surface I find that because a patient hasn’t been to the practice for five or more years it is presumed that they don’t want to return. Even when a patient is known to have dental problems or needs, they are no exception, is told that it’s not important, is it?

With the words “You only have one chance to make a good impression” ringing in our ears we make sure that every avenue of choice is explored for the new guests in our practice.

But what of the “old” (now there’s a derogatory word if ever I heard one) patients? Familiarity breeds contempt, has to be worked at during every visit; whilst it may be routine for the dental team, it is a very special event for the patient. After all nobody leaps out of bed in the morning and shouts out “Fantastic! Off to the dentist today, I do hope I have a problem that’s a real challenge to them.”

Our traditional attitude of putting the words “just a” before things doesn’t help either. Saying “just a” check-up or “just a” scale and polish for instance, although meant to reassure the patient, can also mean that they can’t carry the value of it out into the wide world of their friends and family don’t you?

Just because the work isn’t appropriate for them doesn’t mean that they can’t carry the value of it out into the wide world of their friends and family don’t you?

“Familiarity breeds contempt and dental practices don’t escape from this; just because you know them clinically through their notes and x-rays, doesn’t mean they know you”

People will only do business with people that they know, like and trust. That needs some training in the communication methods that you are using. Do you and they truly believe that what you are offering is the very best that you can do, is the most appropriate and will truly enhance the patient’s health and quality of life? If not then the patient will know, the team will know and you will end up hating what you are doing.

Avoid discounting, however tempting it might be, it’s a slippery slope that leads to frustration and no practice or individual can stay healthy by trying to offer treatment to patients at a price that doesn’t make a profit - it’s a simple law of nature. A loss leader is still a loss.

Finally are you trying too hard to “sell”? People have an aversion to being sold anything but those same people are eager to buy benefits. They want to buy things that make them happy, in dentistry that might be the knowledge that their teeth will last until they die, that their smile will give them confidence and, in surgery that their mouth is as healthy as the rest of their body. Remember whatever is that it is they buy they will only buy it from people who they know, like and trust.

Not every patient has trouble parting with their money

“People will only do business with people that they know, like and trust. That means that the relationship has to be worked at during every visit”

Talk to your patients to gain their trust