

**PRACTICE ORGANISATION**

# Ask the right questions...

GETTING PATIENTS TO  
ACCEPT TREATMENT  
IS ALL ABOUT  
COMMUNICATION,  
WRITES ASHLEY  
LATTER

The two questions I get asked the most from the dental profession are the following:

1. What are the biggest mistakes dentists make when presenting a treatment case to a patient?
2. What is the most important skill you can develop?

I can answer both these questions in this article, because in my opinion it is the same thing.

Firstly let me answer question one. In my opinion the biggest mistake dentists make, is not spending enough quality time building relationships with the patients and not spending time asking them questions about what they want and needs are. In fact, I believe it is a common mistake right across all industries whereby sales people start selling products and services without first finding

out what the customer requires.

The most important skill you can have is the ability to build relationships, ask questions and really listen to what the patients requires so you can truly understand what they want from the relationship.

What are the advantages of spending time with your patient and asking those questions?

There are many:

- You can find out what the patients goals are
- What is important to them
- It is the best way to influence a patient is by asking the right questions. The idea becomes there's and you don't sound pushy and trying to sell something

- You can also find out about the patient's budget

- Most decisions are made on emotion and you can find out what the emotional reason are and why people buy.

From delivering the Ethical Sales and

Communication Programme to over 1,000 dentists and their teams, here is a list of key questions that have worked very successfully in the surgery:

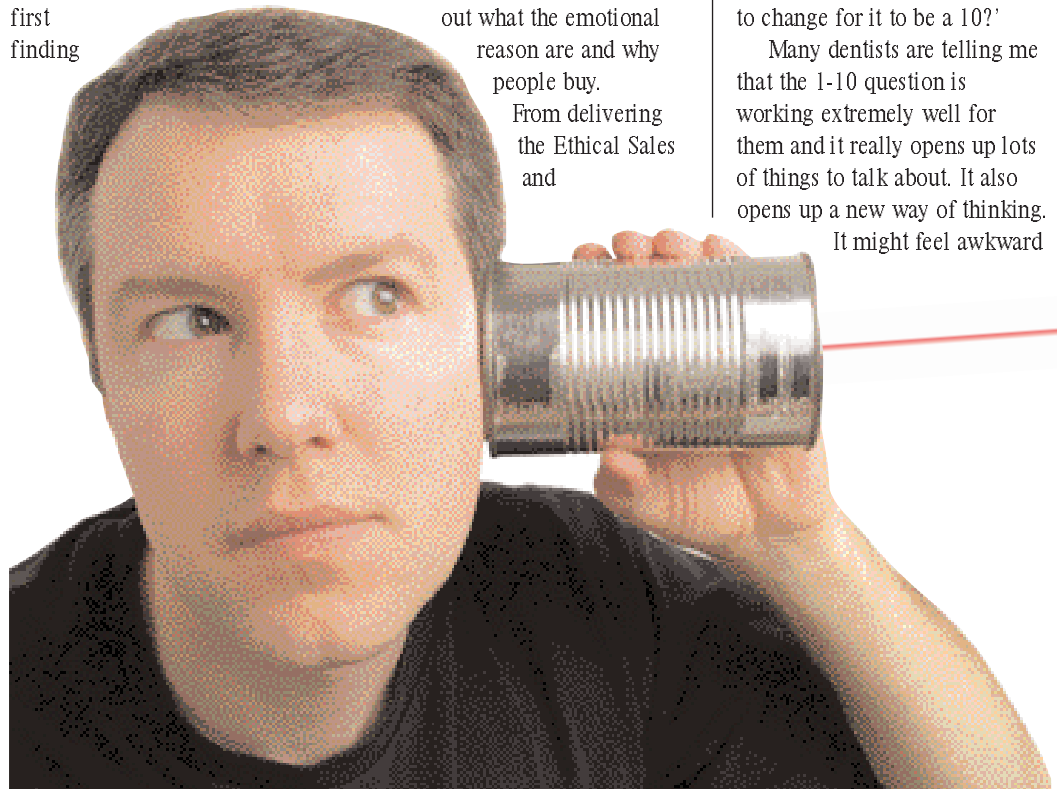
- 'How long since you have visited the dentist?'
- 'How have you heard about us?'
- 'Are you happy with your appearance at the moment?'
- 'What changes would you like to make?'
- 'If there were a magic wand, what would you like your appearance to look like?'
- 'What image would you like to project?'
- 'If you could rate your appearance 1-10 what would it be? 1 being 'I hate my smile/appearance' and 10 being 'I love them what score would it be?'
- 'If it is a 5, what would have to change for it to be a 10?'

Many dentists are telling me that the 1-10 question is working extremely well for them and it really opens up lots of things to talk about. It also opens up a new way of thinking.

It might feel awkward



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at first, but after a while, it becomes part of the language.

At this moment you have some very useful information. You know where the patient is at, what their goals are and also what is important to them.

If you have had situation where patients don't take up their treatment plan, then it might be for several reasons. One of them could be because they are not in enough pain to do something about it. That is not physical pain, but mental pain.

For example, if someone has stained teeth and they show an interest in tooth whitening but it doesn't really bother them too much or impact their work or appearance, then chances are they will not make an investment of over £250.

However, on the other side of the coin, let's take a look at a situation where it does bother someone. This is a real life story from a dentist called Neal Sampson.

'A woman came to visit me. She was having a check up and after questioning her, she told me that was not happy with a gap she had between her front two teeth. Her daughter was getting married shortly and she

had spoken to a few friends about it and they had turned her against the idea of getting it fixed. However, after deep questioning, she went onto say that she would not feel happy at her daughter's wedding and that she would feel awkward about having photographs taken. Through questioning and really listening, she convinced herself it was important to get her front teeth sorted and she went ahead with the treatment. In the past, she probably would have walked out of my practice, without having the treatment done.'

In this instance the gap was bothering her and therefore she wanted to do something about it. It was her daughter's wedding and she wanted to look good on the pictures.

So some of the questions you could ask are:

- 'Mrs Patient, why is it important that you want to do something about the gap?'
- 'What impact is that having on you?'
- 'How does it make you feel?'

These are just a few basic questions to find out what

issues the patient is having by not having the treatment done. The last question you could ask then is

- 'So if we could make the necessary changes, what would it mean to you?'

The patient will then give the benefits they will get by taking up your treatment offer and then of course they will then talk themselves into it. It becomes their idea and not yours. They have sold the idea to themselves.

The key to asking the right questions is to really listen attentively and on their agenda. For example, when we are listening to a patient, do we really listen, or are we thinking about what to say back to the patient.

You must be genuinely interested and be really keen to listen and understand. We need to listen to understand. Please ask a few people you

know and trust and ask them how they rate you as a listener. You may not like the answers, but at least you can then do something about it.

#### IN SUMMARY

- Give yourself plenty of time to ask questions
- Listen to their agenda and not yours. Listen attentively
- Ask open questions. Get the other person talking to himself or herself
- Become genuinely interested
- Either you, or your nurse should write some notes
- Let them talk for 80% of the time. The more you listen the more you learn
- Ask lots of questions and you can, through effective listening, influence a patient. ■

