

# Dr. Dean C. Bellavia's A~D~D~I~C~T your SCHEDULING Systems

## **Create your Ideal Scheduling System**

System's Responsible Persons: Doctor, Scheduling Design Coordinator (SDC) (name) System's Analysis Person (who collects statistics): (name) Realistic Analysis Time Frame: 2 weeks to collect all design statistics Realistic Decision Time Frame: 2 weeks for DR & SDC to analyze the statistics and view the kit video or read Chapter-9 Realistic Design Time Frame: 2 months for SDC (with DR's & Team's input) to complete the Excel design Realistic Implementation Time Frame: 1 week to build schedule on computer and set future Tx days Realistic Critique Time Frame: 1 week at the end of each month for three months Realistic Tweaking Time Frame: 2 weeks to modify and implement any scheduling design changes Analyze: □ Whether your present schedule is either too hectic or boring and not as productive as it should be. □ Whether you are wasting doctor time and the assistants are not properly utilized □ You will also need 12 MONTHS of the following statistics: □ Your chosen minutes per appointment unit: □5 □10 □15 □20 □ Typical number of Days/Week treating patients: \_\_\_\_\_ □ Total number of Patient Tx Days: \_\_\_\_\_ □ Total number of Patients seen (treated): \_\_\_\_\_ □ Total number of *New* Patient Exams: \_\_\_\_\_ □ Total number of Tx Consults: \_\_\_\_\_ □ Total number of Recall patients: \_\_\_\_\_ Total 1-unit \_\_\_\_\_ 2-unit \_\_\_\_\_ 3-unit \_\_\_\_\_ SOS/Emergency appointments □ Total Full + Ph-II DeBands □ Total number of Full/Ph-II comprehensive starts: □ Total number of Ph-I, Limited starts: \_\_\_\_\_ Total number of Invisalign starts: □ Average hours/day treating patients (7.5, 8.0, etc.):

- □ You will also need Yearly amounts of the following types of appointments: (to act as a guide and proof against your final schedule design)
  - Total 1-unit \_\_\_\_\_ 2-unit \_\_\_\_\_ 3-unit \_\_\_\_\_ Archwire appointments/year
  - Total 1-unit \_\_\_\_\_ 2-unit \_\_\_\_\_ 3-unit \_\_\_\_\_ Active Check appointments/year
  - Total 1-unit \_\_\_\_\_ 2-unit \_\_\_\_\_ 3-unit \_\_\_\_\_ Retention Check appointments/year

## Decide:

- $\hfill\square$  Who will be in charge of your schedule design
- $\hfill\square$  Who will be responsible for collecting the statistics and when to collect them
- □ If using the "Scheduling Design & Tx Quality Control Kit" the doctor and responsible person need to view the Scheduling Design Video and decide in your Video Workbook, what to use and what not to use.



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#### Design:

- □ Use the "Scheduling Design & Tx Quality Control Kit", books, your consultant, or your own experiences to *design* your scheduling system.
- Document your Tx Mechanotherapy
- Document your appointments to provide that Tx Mechanotherapy
- □ Create your "composite" appointments to reduce the number of same type appointments (i.e., 2B, etc.)
- □ Create your "substitution" appointments for infrequently used appointments
- □ Calculate your appointment and staffing needs
- □ Create your schedule using the numbers of appointments you calculated
- □ Create your Appointment Code Reference Sheet to schedule patients to your appointments

#### Implement:

- □ Build your appointment codes and daily schedule design on your computer
- □ Choose a starting date to work with your schedule (4-8 weeks into the future)
- □ Use a Rotation Schedule and Vertical Calendar to maximize office utilization and availability

## Critique:

□ If using the Scheduling Design Kit, use your "Video Design Workbook" to make sure your design criteria are implemented.

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Has your schedule been properly installed on your computer?	□Yes, □No:
Are the TC and clinical team asking for the correct Appt. codes?	□Yes, □No:
Is the receptionist scheduling the Pt's in the proper time slots?	□Yes, □No:
Are there specific appointment codes you keep running out of?	□Yes, □No:
Are there specific appointment codes you have too many of?	□Yes, □No:
Are there other appointment codes you need, but don't exist?	□Yes, □No:
Are your "staffing combinations" (TC/RT, etc.) working out?	□Yes, □No:
Are your "composite" appointments working out?  UYes, UNo:	
Are your "substitution" appointments working out?  UYes, UNo:	
Are you getting out on time for lunch and the end of the day?	Yes, □No:
Are you adequately staffed in each position (TC, DA, etc.)?	
What else goes wrong and why?	

## Tweak:

- □ Order the correct appointment codes using the appointment codes reference sheet
- $\hfill\square$  Increase or decrease the number of various appointments per day
- □ Expand or combine appointments; expand or combine staff positions
- $\hfill\square$  Clean up any of the problems noted in your critique above.

# To better *control* your new schedule refer to the following pearls:

- SCH Pearl: Staying on Schedule: http://www.thebioengineeringco.com/index.php?option=com\_k2&view=item&id=167:staying-on-schedule&Itemid=766
- SCH Pearl: Optimizing Your Daily Pt. Flow: http://www.thebioengineeringco.com/index.php?option=com\_k2&view=item&id=170:optimizingyour-daily-patient-flow&Itemid=766
- SCH Pearl: Maximizing Your Market Availability: http://www.thebioengineeringco.com/index.php?option=com\_k2&view=item&id=210:maximizing-your-patient-availability&Itemid=766

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