

Kids Behave – Why Can't Parents? Managing Parent Issues in Reception

Late arrivals, schedule complaints, cell phones and unreasonable requests make managing the reception area a true challenge for your front office team. Unlike other dental specialties, parents spend more time in the reception area than anywhere else. Further, parents use what happens there to make judgments about other aspects of your practice – including their perceptions of quality care. If parents are happy in the reception area, they tend to be happy with the rest of the practice. If they are unhappy, they tend to judge the clinical team more harshly. Since a positive reception experience is important, this issue of *PMM News* discusses managing challenging parent issues in the reception area.

Scheduling

Schedule Delays. Let's face it your practice runs late on occasion. Some parents understand but some do not. Since the average waiting time in U.S. dental offices is eight minutes, this is the standard by which you are measured in terms of parent expectations. When you are behind schedule by more than ten minutes, reception staff should inform the parents of the delay *before* they come up to the desk and ask about it. If the team gives a reason for the delay, these should be referred to as "an emergency patient" or a "special situation with a patient," instead of a "difficult case" or a "problem with a patient." (Stating that you find cases difficult or have problems with patients does not enhance your practice image.) For example, the appointment coordinator might say, "Mrs. Gonzales, a dental emergency with one of our patients has put the doctor's schedule about 20 minutes behind. Would you like to use our phone to call someone about this unexpected delay? We are sorry about the inconvenience."

Late Arrivals. Parents who arrive late for an appointment often expect their children to be seen regardless. If this is not feasible, your receptionist could say, "We were getting a bit worried about you and Alex. We wish we could still see him today, but we reserved that special time just for him. Since we no longer have that time, we can't give him the quality care he deserves. Let's schedule another appointment." If the parent insists on an immediate visit, the receptionist might respond with, "I'm going to let the doctor know you are here and see what we can do." The receptionist might offer such options as giving the child the time slot allotted for emergency visits, providing a portion of the treatment that day, or rescheduling to have all the treatment completed in one visit on another day. If the parent states, "But you saw him the last time we were late," the receptionist could gently respond, "Sometimes we're able to do that. In fact, we try our best to see patients whenever we can in this situation. But today we will not be able to."

Appointment Complaints. Some parents can be very particular about the appointment times they want for their children. Others get frustrated when they cannot get an appointment as promptly as they would like. An effective method for handling these situations is to say, "It is certainly frustrating when the times you want are already taken. (Or: It is frustrating not to be able to have an appointment as promptly as you would like.) We appreciate parents like you who are dedicated about going ahead with the care their children need. Let's schedule your son so he has an appointed time. And may I put you on our special call list if an earlier appointment opens up?"

Behavior Concerns

Cell Phones. Although loud conversations on cell phones in reception are bothersome to other parents as well as staff, a far more critical issue is a parent who converses on a cell phone in the treatment area or during a case consultation. Post a professional-looking sign near the treatment area entrance stating, "Please turn off cell phones when entering the clinical treatment area." Then, when parents leave their phones turned on and proceed to take calls anyway, politely invite them to step into the reception area to finish their call – or offer them the use of an empty consultation or conference room.

Snacks and Drinks. As one pediatric dental team stated, "It wasn't juice spilled on the carpet or bananas smashed in the chairs that finally did us in. It was the family who brought in a bucket of chicken and used our reception room as a picnic area." Some offices post an attractive sign in reception stating, "To protect the comfort of our patients, please do not bring food or drinks into the dental office," or "Please leave your food and drinks outside the dental office. Thank you for your cooperation." If a parent or child starts eating or drinking in the office, the reception staff has several messages to choose from. For example, "I'm sorry, we ask our parents not to bring food and drinks into the office. We find this keeps our reception area looking nicer and helps protect patients from passing germs back and forth." Or, "I'm sorry, but we have patients who aren't allowed to eat or drink anything the day of treatment. It's hard on them to see people having something when they're hungry. That's why we ask all our families to leave food and drinks out of the office." Or, "Sorry, the doctor asks that no food or drinks be brought into the office. If you want to finish that outside, I'll be glad to come and get you if your child needs anything."

Parents in Treatment Areas

What about the parents who insist on going back into the treatment area with their child? According to surveys, about ten percent of pediatric dentists always allow parents into treatment, ten percent refuse under all circumstances, and the remaining eighty percent admit parents in selective

cases. Thus, most pediatric practices need a combination of methods that discourage – but don't prohibit – parents in treatment areas.

Advance Materials. If you prefer parents to remain in the reception area, you must tell them in advance of the visit. (Parents who have promised to stay with their children at all times would rather upset your office staff than break their word.) Mention your policy on the phone when parents make the appointment, then mail parent education materials before the visit on how to prepare children for dental treatment. This will prevent parents from giving negative reassurance (“I won't let the doctor hurt you”) or making threats (“If you don't brush, I'm going to tell the dentist”). In addition, you could suggest that if parents will be coming into treatment, they should not bring other children with them to the appointment.

Reception Signs. Signage to encourage parents to remain in the reception area will support your reception staff. For example, your sign might state, “We invite parents to relax in our reception area so we can devote full attention to your child during the dental appointment. We welcome parent questions before and after the visit.” Another possible sign is, “Children come first in our office! So that we can devote 100 percent of our attention to your child, we respectfully ask parents to wait in our reception area during dental visits.”

Office Strategies. Advance materials and office signs help, but additional strategies make the separation process easier. One pediatric office states, “We've learned to keep parents busy. We offer parents a tour of our office or ask them to review materials during the visit.” Another office encourages child patients to go to the back on their own to make the parent a “surprise,” such as a button with the child's photo on it. Some offices restrict all parents from the open bay treatment area. Parents who choose to accompany their children during treatment are asked to schedule a private treatment room.

Positive Messages. A few receptionists encourage parents to remain in the reception area with the honest but negative message of “Children behave better when their parents aren't there.” Here are more positive choices:

- “If you feel very strongly about it, we would be honored to have you. Let me tell you your options, and what seems to work best for most children. We all want a great visit for Andy. We find if we work with your child directly, we focus more on him and make it his special time. We are able to build a positive relationship with him right away, and help him feel comfortable and confident about dental treatment.”

- “We can't compete with you, and we wouldn't try. When a parent is present, children concentrate on the parent, not on us. This makes it more difficult to communicate effectively with the child. Clinical research clearly shows that children respond best to dental care when they bond with the dental assistant, hygienist and pediatric dentist.”
- “We find when a child is in an unfamiliar setting, they look to the parent for rescue. If they are not rescued, they become upset with the parent, and then with us. We wouldn't want to see that happen with you and Sarah.”
- “Do you know what research shows is one of the biggest differences between adults who have good dental health and adults who don't? Whether that adult had a good relationship with a dentist as a child. That's why building rapport with your child as quickly as possible is so important.”

Parents Who Come Back Regardless. Some parents come back into the treatment area *no matter what*. In addition, some pediatric practices routinely welcome parents in treatment, knowing that parents will be impressed by the skills of the doctor and team. Whatever the reason parents are present in treatment, the following strategies will help improve parent behavior.

1. Gently educate parents in their role. Let them know what is (and isn't) helpful to their child. For example, you might say, “Children know their parents very well. They are quick to become concerned at even the slightest amount of tension you may show during the visit. That's why we ask you not to touch or hold hands with your child.” You might also say, “Please try not to comment on the treatment. Such statements as ‘That didn't hurt, did it?’ or ‘Does it taste funny?’ can create anxiety for children during an unfamiliar procedure.”
2. Arrange the room to discourage parent interference. Place the parent's chair out of the child's line of vision and as far away from the action as possible. Or, don't provide a chair and invite the parent to watch from the doorway. Bring some of the interesting magazines from reception into the treatment room to give parents something to read during procedures.

Strong messages, smart office policies, and attractive support materials will assist your front office team at managing the most challenging visitors to your practice – parents. And when you create a positive reception environment, parents will recognize the quality of your care and be more likely to accept treatment for their children.

PMMNews

PRACTICE MANAGEMENT AND MARKETING NEWS IN PEDIATRIC DENTISTRY

Published six times a year as a direct membership benefit by the American Academy of Pediatric Dentistry, 211 E. Chicago Avenue—Suite 700, Chicago IL 60611–2663, (312) 337-2169. Copyright©2004 by the American Academy of Pediatric Dentistry. All rights reserved. ISSN 1064-1203. aapdinfo@aapd.org, www.aapd.org

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