Understanding and Managing Capacity



Dori Bingham, Director
Dr. Mark Doherty, Executive Director
Andrea Dickhaut, RDH, BSDH, MHA, Program
Manager/Senior Consultant
D4 Practice Solutions



Access = Capacity

- Finite
- Resource-based
- Differs from medical
- Step 1: Determine potential capacity
- Step 2: Manage to that capacity





Structure = Capacity

- Operatories
- Hours
- Staff
- Benchmarks





Benchmark Guide

Duovidos Tymo	Number of	Number of Dental Assistants	Visite /Clinical Hour
Provider Type	Operatories ₁		Visits/Clinical Hour
General Dentist, 1 Op	1	1-2	T
General Dentist, 2 Ops	2	1	1
General Dentist, 2+ Ops	2+	1.5-2	1.7
General Dentist w/ EFDA	3+	3	2.5-3
Unassisted Hygienist	1	0	1-1.2
Assisted Hygienist	2	1	1.5
4th Year Dental Student	1	0-1	0.5
GPR Resident, Q1	1	1	1
GPR Resident, Q2	2	1.5-2	1.2
GPR Resident, Q3	2	1.5-2	1.5
GPR Resident, Q4	2	1.5-2	1.7





Determine Potential Daily Visit Capacity, Example for Dentists

	# of Dentists	x Benchmark	x # of Chairside Hours	Potential Visit Capacity
Mon.	1	1.7	8	14
Tues.	2	1.7	15	<mark>26</mark>
Wed.	4	1*	30	<mark>30</mark>
Thurs.	4	1.7	30	<mark>51</mark>
Fri.	2	1*	15	<mark>15</mark>
Total			98	136

^{*}Only one assistant per dentist

Weekly potential capacity = 136 (162 with more assistants) Annual potential capacity = $136 \times 46 = 6,256$ visits (7,452)



Dentist Benchmark

- Could range from 1 visit per hour to 2 or more
- Dentist variables (experience, specialty)
- Support variables (number and type of DAs per dentist)
- Number of operatories
- General dentist with two operatories and two conventional assistants = 1.7 visits/hour



Benchmark Guide

Provider Type	Number of Operatories	Number of Dental Assistants	Visits/Clinical Hour
General Dentist, 1 Op	1	1-2	1
General Dentist, 2 Ops	2	1	1
General Dentist, 2+ Ops	2+	1.5-2	1.7
General Dentist w/ EFDA	3+	3	2.5-3
Unassisted Hygienist	1	0	1-1.2
Assisted Hygienist	2	1	1.5
4th Year Dental Student	1	0-1	0.5
GPR Resident, Q1	1	1	1
GPR Resident, Q2	2	1.5-2	1.2
GPR Resident, Q3	2	1.5-2	1.5
GPR Resident, Q4	2	1.5-2	1.7





Determine Potential Daily Visit Capacity, Example for Hygienists

	# of Providers	x Benchmark	x # of Chairside Hours	Potential Visit Capacity
Mon.	2	1.2	15	18
Tues.	2	1.2	15	18
Wed.	2	1.2	15	18
Thurs.	2	1.2	15	18
Fri.	1	1.2	7.5	9
Total			67.5	81

Weekly potential capacity = 81 Annual potential capacity = 81 x 46 = 3,726



Hygienist Benchmark

- Could range from 1 visit per hour to 2 or more
- Hygienist variables (experience, assisted vs. non-assisted, dentist to hygienist ratio, age of patients)



Capacity Determines Visit Goals

- Weekly = 136 dentist + 81 hygienist = 217 visits
- 217 visits/week x 46 weeks = 9,982 annual visits

THIS is what we shoot for, not more and not less



Number of Unduplicated Patients

- Our STRUCTURE gives us 9,982 annual visits
- 9,982 annual visits ÷ 2.6 visits/patient (2019
 UDS) = 3,839 unduplicated patients

THIS is what we shoot for, not more and not less



Number of New Patients

- Depends on new vs. established practice
- Balance of new vs. existing patients is critical

Tracking completed treatments tells us how many new patients we can bring in

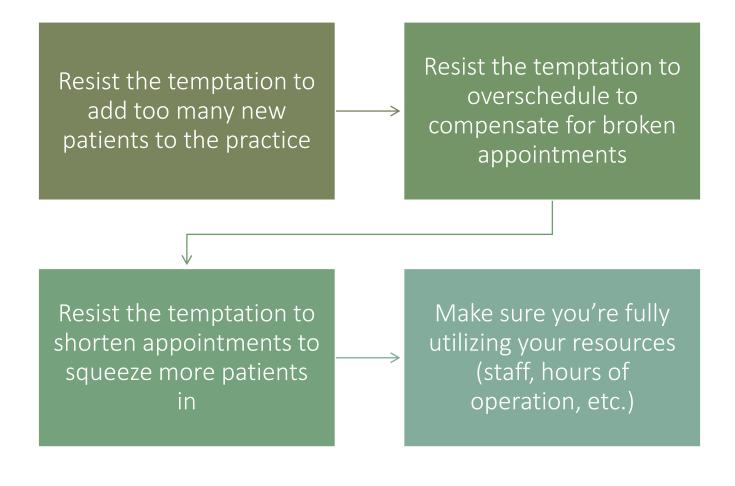


Completed Treatments

- Phase I
- Designate code (e.g., TxCOMP)
- Utilize consistently
- Track
- Every TxCOMP = new patient
- Goal is <12 months from exam to Phase I completion
- Nice quality outcome measure!



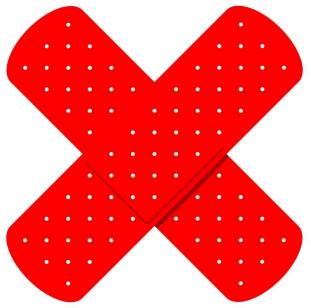
Managing to Capacity





What Happens if We Don't Manage Capacity?

- Schedule becomes clogged
- Long waits for appointments
- Diagnosing but not treating
- Unhappy patients
- Unhappy staff





Common Factors Impacting Access and Capacity

- Broken Appointments
- Scheduling
- DAs
- Goals/Accountability
- Personal Stuff
- Instruments, supplies
- Equipment issues
- EDR issues





Best Practices for Improving Productivity and Access

Decrease	Broken Appointments
Improve	Scheduling
Hire	More Dental Assistants (if necessary to meet benchmark)
Share	Goals and Provide Feedback
Consider	An Incentive Program
Resolve	Instruments, Supplies, Equipment Barriers
Train	Staff on EDR



D4 Practice Solutions

- Individualized Assessments of Oral Health Programs
- Expert Guidance and Planning for New Dental Programs
- Practical and Achievable Strategies for Success
- National Experts on Oral Health Program Access, Outcomes, Quality and Financial Viability

Dr. Mark J. Doherty
Dori Bingham
Andrea Dickhaut, RDH, BSDH,
MHA
D4 Practice Solutions
c. (508) 776-1826 (Dori)
c. (508) 958-0959 (Mark)
c. (978) 870-9024 (Andrea)
doribingham@d4dimension.com
markjdoherty@d4dimension.com
andreadickhaut@d4dimension.com

www.d4practicesolutions.com

