

The Dispensary Gameplan

HOW TECHNICIANS CAN BE OPTICAL QUARTERBACKS

by Donna A. Suter

What makes some optical dispensaries successful and others flounder? Our on-site consulting suggests that successful opticals are “fed” by the certified staff. Too often, ophthalmologists implementing an optical department don’t want to add to the technician’s work-up duties and they opt to not involve them in the strategic planning sessions for the dispensary. Bad move.

As practice management consultants, we think this is a lot like leaving the quarterback out of spring football practice. Just as the quarterback calls the plays and leads the team, a technician controls the patients and can encourage them to fill their prescriptions in the practice’s dispensary.

For this to happen, the technician has to understand the “plays,” so to speak:

1. An ophthalmologist-owned optical should stand behind the lenses and eyewear it sells. Knowing eyewear comes with a written one-year guarantee, for instance, gives the technician the confi-

dence to recommend the practice dispensary. Urge your ophthalmologist to make that commitment.

2. Before the optical opens technicians should refine their refracting skills so remakes (redone prescriptions due to dispensary error) don’t get out of control. The optician and the head or senior technician should also develop a quality assurance/remake strategy and meet monthly to review these numbers. The goal is to keep eyeglass remakes at less than 5 percent.

3. Technicians should expect to hear price objections from patients. Technicians are very compassionate people. This strength can be their Achilles heel in the dispensary. They may begin to judge patients’ pocketbooks instead of helping them see and feel as good as possible.

According to the Jobson Optical Group Database, the average replacement cycle for lenses and frames are 2.08 years and 2.53, respectively. That does not, however, mean patients are unwilling to purchase more frequently or to upgrade from just what their managed care plan covers. In fact, surveys show nearly half of managed vision care patients will upgrade to frames and lens-

es not completely covered by their plan when they understand what they are getting for their money. In other words, they will upgrade when the technician takes the time to suggest specific lens technology may be part of the solution to a visual problem. Once the technician is finished in the exam room, the optician is then in a position to explain the value of products to the patient. This transfer of information doesn’t magically happen. Technicians have to be educated about lens options and understand their value.

4. The history portion of any patient’s work-up should include questions about visual needs. Lifestyle dispensing has been found to generate not only higher average revenue per patient, but also to increase patient satisfaction.

We often observe untrained technicians talking about vision but ignoring the relationship between glasses and comfort. An important element of an exam is education and all exams should include informative statements about vision and eyewear. Mention high-index lenses to people with thick glasses (high plus or minus, atrophics), for instance. These types of comments let the patient know that the practice cares about

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them as people. They can take the place of “weather” comments and be made during small talk with the patient.

5. Technicians should be educated about the value of proper lens technology to persons suffering from macular degeneration and the link between exposure to ultraviolet radiation and eye health.

Consider adding glare-sensitivity testing to the exam. It will differentiate your practice from the competition and educate your patients about the importance of quality eyewear. The byproduct will be an increase in sunwear sales and tints in the practice dispensary. Glasses and sunwear should also be tested for UV coating on the clinic side (some auto-refractors do this).

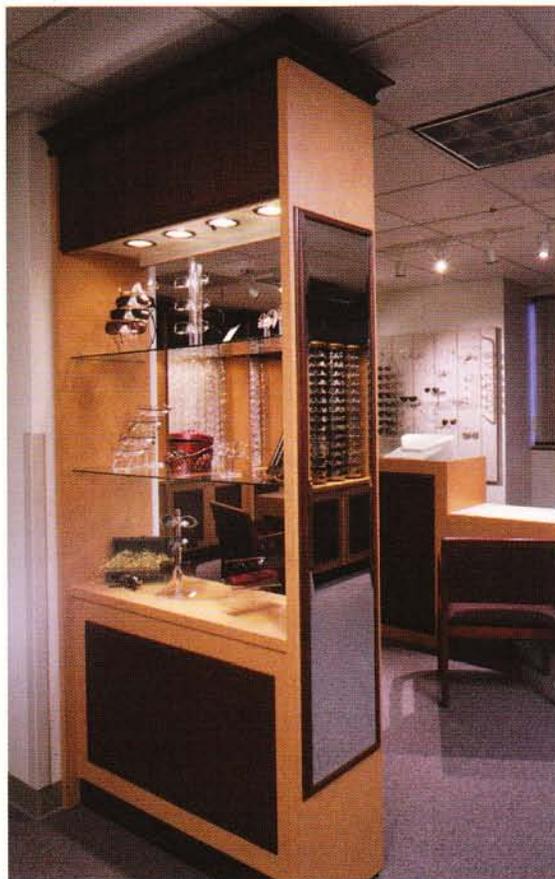
6. Technicians should “huddle” and come up with a list of questions patients will ask regarding their eyewear. The technicians can script their response. It’s one thing to answer the question, “Do I need new glasses?,” with a literal assessment of change in acuity. It’s another to volunteer statements discouraging visits to the practice dispensary to a patient that hasn’t asked about his or her acuity. Here are just some of the comments that shouldn’t be made to patients by doctors or clinic staff:

“Your glasses don’t even need to be changed.”

“You’re happy with your glasses, aren’t you?”

“Did you want new glasses?”

“Now I’m going to check your glasses to make sure there is no change.”



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Technicians may not be eyewear experts, but they can play a vital role in the success of an ophthalmology practice’s dispensary.

“Other than them being too heavy, are you okay with your glasses?”

Most patients, after wearing the same frame for a year or more, want a fresh look on their face, but need a suggestion or perhaps even “permission” from the technician. If a patient asks if they need a new frame, refer them to the optical using the following script:

“Our optician is going to check the condition of your frame and see if it is suitable for another year of full-time wear.”

Then, at the close of the exam, the technician should escort the patient to the dispensary. Now the patient under-

stands the condition of a frame can’t be checked in a dimly lit exam room.

Once the technician puts the visual acuity ball into play, it’s easy for the dispensary to convert the educated patient into a happy optical customer. But, just as the quarterback can’t grandstand and win the game alone, neither can the technician ensure optical success. Patients are psychologically ready to leave after they pay their bill. Ways to overcome this resistance include making the visit to the optical part of the exam process, escorting patients to the optical or presenting a coupon for a free eyeglass cleaning and UV testing to each waiting patient.

The process of dispensing eyewear begins when the appointment is made. The optician can’t examine eyewear to determine if it’s suitable for continued wear unless the patient is reminded to bring their eyewear and sunwear to the appointment. The appointment clerk should remind patients to bring all eyewear for a professional cleaning and evaluation.

Having a successful optical is complicated, much like fielding a successful football team. Without practice and training a football team quickly becomes a group of 11 people who don’t know how to effectively work together toward a common goal. Research involving the service and healthcare industries confirms that time and money invested in employee training pays off with an improved bottom line. □