

Ep #162: Debbie Seidel-Bittke - Driving Your Dental Practice to Its Highest Level of Success



Full Episode Transcript

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Dr. David Phelps

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Ep #162: Debbie Seidel-Bittke - Driving Your Dental Practice to Its Highest Level of Success

Debbie S.B: I think it's really important that patients know you're not just treating their tooth, but that you're treating them as a person and that they don't know how great a clinician you are, they just know how you made them feel.

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David Phelps: Good day, everyone. This is Dr. David Phelps of the Freedom Founders Mastermind community, and the dentist's Freedom Blueprint podcast. Got today with me, someone who I think is gonna be a really fun interview, someone I've been ... I shouldn't say the word stalking because I really don't stalk people. I do like to follow people that I think are really strong in the industry, people who bring, I think, a servant's heart to the place and do different things to help our fellow practitioners.

Today with me, my guest is Debbie Seidel-Bittke. Debbie, how are you doing today?

Debbie S.B: I'm doing very well, thank you so much.

David Phelps: Great to have you, Debbie. As I said, I'm looking forward to doing this because, again, we know each other virtually, but having a chance to actually speak one-on-one, it's fun to do this. So along with our listeners today, I'll be digging in with you and we'll just be pulling out some gems and some of your thoughts about where we are in dentistry and what's going on. But let me give our

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listeners a little bit more of your background so they know who I'm speaking with, who they're listening to today.

So Debbie's been an industry leader since 2000. You've probably heard of Dental Practice Solutions. Debbie started this business after working many years in the dental industry. Her career started in dentistry at the age of 17, so I guess that was like five years ago.

Debbie S.B: Yeah, just five years ago.

David Phelps: You're a babe in the woods still. Okay, I got it.

You started working as a dental assistant with a dentist who started up his own practice. Now, since then, you've worked with other startups during your career as a registered ... and dental hygienist. You graduated from USC with a bachelor's degree in Dental Hygiene. Soon after graduation, worked as a clinical assistant professor in the Hygiene Clinic and co-taught the senior dental students' Practice Management course at USC for quite a number of years. In 2007, Debbie wrote the accreditation for a dental hygiene program in Portland, Oregon, and currently works full-time with full-time dental practices throughout the world.

Over many years of her consulting career, Debbie's created a team of consultants that support dental practices. The entire team works very closely with each client in their team. Dental Practice Solutions takes a holistic approach to customize a success plan for each client that they work with. The team of consultants uses an integrated approach to have the team drive each dental practice to their highest level of success.

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So, focusing, obviously with your area of expertise, in the hygiene department. I mean, that's where ... so let's start there. I practiced private practice for 21 years. Now, I've been out of clinical practice, but I still remember very well what it's like to be a solo practitioner or maybe you have one associate, and you've got a practice with all these moving parts. We think in terms of marketing. So we're always looking for we gotta get new patients in the door. We think about our existing patients and setting up diagnosis and treatment plans and getting patients to buy in, in other words, to accept their treatment plans.

We have a front office, front desk that deals with financial plans, insurance, scheduling. We have a back office with all the dental assistants where the doctor is back working with them to do productive dentistry, and we have this thing called the hygiene department. I'll tell you, Debbie, there was days in my life where it's just "Dadgummit, I can't get anything done because the hygienists are always calling me," and I know other dentists feel the same way, yet the hygiene department is such a critical, I use the word integrative, integrative component of our practices, why is there that ying and yang where it's a love/hate relationship of dentists with their hygienists or hygiene department? Do you ever walk into practices where it seems like it's that way?

Debbie S.B: Yes. I noticed that when I was a clinician. I practiced as a dental hygienist, gosh, for probably 25 years. What I noticed was that we didn't have a specific system, we just went in there and cleaned teeth. So what I've done is create, I called it Down-to-a-Science Time Management formula, and being integrative means that I work with the hygienists in those different ... I've divided that hygiene appointment for perio maintenance patient or a prophylaxis

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patient. It's in four different sections, so I like to take things in bite-sized pieces.

That one section, part number two, is the hygienist setting the patient up to know and understand and want what they need. Then the doctor can come in for a brief period of time and just agree with the hygienist. That's where we have had so much success with our clients, is that the doctor can do their dentistry, and everybody else is driving the practice. It's the hygienist driving that hygiene department, so doctor doesn't have to spend a lot of time treatment planning and getting patients to say, "Yes."

David Phelps: Yeah, exactly. Yeah, you're so right. I mean, in my days in practice, obviously I had an opportunity to work with some really, really great hygienists. I mean, they were, I think, way beyond me in terms of their communication skills, their ability to engage with patients, and that's really the crux of it. Our whole practice of dentistry revolves around relationships. It's all about relationships. Yes, we've gotta get people in the door, but once we get them in the door, then it's all about relationships from the front to the back. But to me, the hygiene department is like the hub of the practice, and everything drives from there. Because regular relationships with patients needing to come back on their recall appointments or whatever, supportive care maintenance, that's the driver.

You're right, the doctor needs to focus on where the doctor's most productive, and that's not spending eons of time or big chunks of time there in the hygiene chair, because they need to be off doing their productivity. That's again, with practices that aren't functioning well, where they don't have this communication, this integrative approach in the practice, there's conflict. The hygienist is

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getting tense because he or hers schedule is getting off because the doctor can't come check the patients, and there's just this, seems like this conflict. What you've obviously done is, when you go into a practice, you break those barriers down and get people working together so it produces... Yeah, so when you go in a practice, and again it's that conflict and you see that, where do you start? How do you and your consultants start with a practice? I just wanna get nuts and bolts of it. Do you go always on-site? Is your management solutions, is it based on a number of months or a year program, or you just really dig in? Tell me about how that works.

Debbie S.B: So we are very custom in what we do. We create solutions that are needed for that individual practice. So we have right now, a startup practice that we're working with. Very young dentist, happens to be USC graduate, go Trojans. I mean, I've been by his office, but he doesn't have a big budget. He didn't take a lot of money out in his loan, and I've been able to help him virtually. We're not doing some credentialing for him. We have a lady on our team that is an expert at insurance negotiation or insurance PPO fees and getting the best fees for you. She's actually doing some credentialing, and she's assessing and analyzed which insurance companies should he be credentialed with. A lot of doctors are startups, and we've come in to practices three to five years after the doctor started up their own practice from scratch, and they contracted with every single PPO. Yeah, you understand. It's a big mess. They're not taking home much. There's no money for them.

So this is what Joanne on our team is very good at analyzing and assessing what are the best ones, and she know these people. They want her business to get

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credentialed, so she can negotiate those fees. So we do something as small as that. We have another doctor that's a startup from five years ago who has no systems in place. Right now, as I've been talking with you, I can see messages between my consultant helping this front office lady. A lot of transition right now within the front office. I have quite a few clients right now who have hired ladies, and I don't know if your listeners have done this before, but people who've worked in retail end up being very good at presenting treatment plans. They're not afraid to ask for money.

So we have some doctors who ironically have hired, and they just happen to be females, it could be a male. We have some doctors that have a male front office manager, actually, but we have two ladies who've been in retail and they're running the front office, but they have no office experience. So Cindy, she's one of our hygiene consultants, but she comes with a background as an office manager. Boy, is she good at helping them. So right now while I'm on this podcast with you, I can see she's helping that woman. She's not even been in the office one month, but Cindy's there guiding her through her day. We were in that office two days last week, but still, Cindy's there to help that lady.

So we have a very holistic approach. We do exactly what the doctor needs. We don't come in with cookie cutter, and we don't just leave you high and dry. I mean, we were there Thursday and Friday, we had a team meeting to regroup yesterday for two hours, and now Cindy's still there holding the hand of that lady at the front. The lady at the front desk is gonna be phenomenal. She's not afraid to ask for money. She's a driver. She's gonna be a good employee.

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David Phelps: Well you and I both know how important the team is, the people that you have on board, and I'm sure you go into many practices where you may have to help that doctor, that owner, with figuring out who's really the right people to maintain in the practice. Or maybe it's a matter of shuffling people around, but I so much am a big believer, as you just mentioned, about bringing people from outside the industry who have skillsets in customer service or sales, communication, that can come in. Too many times in our industry, we think, "Well, I need to hire experience, experience, experience." Well, what is that, really, that experience about? Is it just doing the same thing over and over again?

I think outside eyes, a fresh perspective, can be very energizing for a team. All they need is just the particular specific training for our industry in dentistry. But if they have a skillset, a natural ability, plug in. If they're in the right culture, the right environment where they're able to be, I'd say, inspired and empowered by a leadership that allows them to rise up, versus a dentist who tries to be dentist and also a "manager." I'm diving in to some different things here, but what you said earlier about being help to customize your approach, I think's important.

I like the fact you said you're working with some startups and some younger dentists who don't have a lot of working capital, so how do you help them? Step one, step two, foundationally, get them started? Triaging what PPO plans they should or should not be on, that's key. If you help someone do that right there, that's gonna move the needle, right? So that you can then take next steps and go from there to help them. So how do your initial intake? When a dentist reaches out and says, "Hey Debbie, Hey

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Dental Practice Solutions. I need some help." I'm interested, what's the intake look like, so you can start to customize and help that dentist, owner, whatever they are, today?

Debbie S.B: Well we have a series of questions. I mean, how many days are you open? Who's on your team? Do you have a hygienist? Have you worked with a consultant before? But real important is, what are your three challenges? What do you want to accomplish? We ask, what do you wanna accomplish in the next three months, the next year, three years and five years? So once we are contracted to work with a doctor, we have an overarching goal. Why are you doing this, and what do you wanna accomplish during your career? Then we break it down. Everything I do is breaking it down into bite-size pieces. Where do we wanna be in three months, to get us to the five-year plan?

David Phelps: Mm-hmm (affirmative), yeah. That's good, that's good.

So when dentists work with you, then based on breaking it down into milestones as you said, chunking it out, do they contract with you on those specific chunks, and then like, "Okay, now we got there, now we renew," or try to do more a comprehensive plan that's still broken down in chunks? Just trying to get an idea of how you best like to engage with your clients.

Debbie S.B: So that's a really good question, and we have some doctors ... I mean, a typical client who comes to us needs at least six months of systems and processes and guidance to get to where they wanna be. I can tell you that there's this trend right now, it's been going on for quite a while actually, where doctors, you know, David, doctors are very critical thinkers. They wanna take their

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time. It's unfortunate because a lot of doctors come to us when they are just struggling to the point, it happens more often than not, they can barely make payroll. They've gone through their 401K and they've taken out all their retirement money. That's a terrible situation.

We have so flexible financial arrangements to help those doctors get back on their feet, so there are companies that will actually give them a loan. They know that we're there to help them get back on their feet, so they can give them a certain amount of money so that we can help them. But something like this, which we get called in to consistently, where they can't pay their employees or they're taking money out of their 401K, borrowing money to pay their employees, it's a year to get back on their feet. It's like somebody who needs to lose 100 pounds, it's not gonna happen in six months. It's at least a year to get back to normal weight. Same thing with these doctors. So we customize it and we're willing to take it in bite-size pieces.

Like I told you, the one doctor, he was a startup, he's very young. We took three months with him and helped him build a foundation. Now we're at the next phase.

David Phelps: I think a big problem is that, as professional practice owners, anybody who's gone through level of formal education as all of us have in our respective areas of healthcare and providing the care that we do, I think there's a feeling, because we get no business or leadership training in school. There's not time. There's the clinical aspects and the science we have to learn, so we get out of school and today of course, coming out of school with a lot of debt, in most cases. You deal with that all the time with young docs, or docs who've been in

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practice for a number of years that have either school loan debts still there or capital, practice acquisition or startup costs. All this debt hanging overhead.

I think there's a tendency to think, "Well, you know, I got through school, you know. I'm smart enough, I've got the work ethic to get through school and get license and credential to do what I do. I should be good to go. I should be good to go. Maybe I just need to take a few more CBE courses," which is a good thing to do. I mean, we agree that that's gotta be there, but I think many times, the management side, the business side, gets put off to the side and decades ago, I'm talking back in the 50s, 60s and 70s, even before I started. I was an ancient ... you could get by, you could be a good practitioner and give quality dentistry. You didn't have to be a great business owner, you really didn't. Right?

Debbie S.B: I know, yeah.

David Phelps: There was a bigger margin.

Debbie S.B: Yeah.

David Phelps: Yeah. Today, more than ever, I think everybody, I don't care what business you're in, we're talking about dentistry here, of course, but we all need to be open to the fact that we all need coaches, we need mentors, we need consultants. We need people who have gone down that path, and not look at it as an expense, but instead an investment.

Debbie S.B: An investment, absolutely.

David Phelps: It's an investment to move you ahead.

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So I know what you just mentioned, it's hard for a dentist who is struggling financially, and as you said, going through the 401K, dipping into savings and struggling. I know that's a tough place to be and it would keep you up at night. It would, and yet what's gonna change if you don't take at least a next step to, a little bit of risk, if you will, otherwise, what's gonna change? I mean, nothing will.

So I just got on a roll here because I just believe so much in what people like you do, because we need outside eyes. We all do. We need outside eyes that can come in and lay a fresh perspective on, "What are we doing? What's good? What's good here? What do we have that's going for us, and what are the things that we can shift and change to really move things and make things better?"

Debbie S.B: You know, David, we can't see the forest from the trees, because we're in it. So I always have an advisor to go to, like after this podcast, I meet with my coach. They're executive coaches that I meet with, they're not dental professionals. But they're helping me to see the forest through the trees.

David Phelps: I'm glad you said that, because I often make the notation, just in general when I'm talking to dentists, or it could be on a forum or something, I just always make the note, say, "The person that you're working with, a coach, consultant, mentor, whoever, who mentors them?" Because if they're not continuing their moving forward, they're probably stuck. We all need that, we all need to be around other people, so it's not just somehow "we", because we are consulting or giving advice in an area that we feel like we've got expertise, that we've made it to the top, no. We're always climbing and finding out new

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things that we can do to up our game to then we wanna help. Som really good you brought that up.

So you've been in the industry, you practiced as a registered hygienist for many years. What inspired you to move into consulting?

Debbie S.B: Well, I think, I mean, it's biblically sound, we are all born with gifts. I think teaching is a gift that I have. Always teach at my Sunday school and then I loved being at the University in Southern California, USC is just a fun place to be. I love the vibe. So I wanted to teach there, and I got paid ... I'm gonna tell you. I worked on Fridays, I drove two hours to USC, and as a clinical assistant professor for being there five hours and four hours of driving, I got paid \$80 for that. I was teaching how to give injections. So I love to teach. I teach my clients, the doctors, how to give the Gow-Gates, and they're so excited. I get excited seeing people become successful. It just floats my boat, you know? So it's what makes me tick. I mean, my husband has to remind me that I need to get paid for my services. I decided that I have a lot of knowledge to share.

I wanna tell you something, David. I was out there speaking early on, back like, 2002, and I shared this story when I was speaking because, at that point, I don't know if you remember back in 2002, we were starting to get a lot research on the mouth-body connection. I was talking about that, and I was getting ready to go to Canada to speak, and my mom had just come in. I was her hygienist and I found that she had some perio, and she had a perio-endo abscess.

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What happened was, I was getting ready to speak and I was speaking on the mouth-body connection in Canada. I got a call from a hospital, I could see. We had caller ID back in 2002, it was kind of new, but I could see that there was a local hospital in her area, Riverside, California. I'm like, "Well, that's scary that this hospital near my mom is calling me." They said, "You need to come down here because your mom ...", she actually had a hemorrhagic stroke. Over the next 10 days, by the way, I went to Canada, she was laying there, barely able to speak, but she said, "I know you gotta go. You gotta go. You're looking forward to this speaking event, you gotta go."

When I came back from Canada, she had not only a ... Now it's tooth number 19 where she had a endo and a perio-endo abscess. The tooth was extracted by my colleague and a bridge placed, but she was so, like, with the flu and they kept putting her on antibiotics. Nothing got better. It was actually Mother's Day, around Mother's Day 2002 this happened. It was 16 years ago this was going on.

When I came back from Canada, my sister and brother were there at the hospital with her, and they're like, "Yeah, mom's kidneys are failing and she has endocarditis." So she ended up passing away once I got there. They took her off life support, and David, I just felt like, "Here I am branching out, speaking at all these dumb conferences. I just feel like God gave me this gift to share with the world, that our mouth is connected to our body." Since 2002, I've spoken with thousands of dental professionals so that we can all work together to conquer this disease process, because I believe that it all starts in the mouth. When you talk to cardiologists today, many years later, even the cardiologists, even my naturopather,

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all say ... Naturopaths are telling their patients, "You have high cholesterol. You need to see your hygienist."

I feel like it's such an important ... I'm so passionate, I could talk for an hour on it. I feel like I have this message to share. I mean, at first I just was like, "Oh, I wanna get paid for my expertise." But now I feel like I have a message. I'm in offices and I'm teaching the team members and even the doctors. Some of the doctors that we've worked with in the last year, they didn't believe the connection. They're like, "I don't see the cause and effect." I'm showing them, and now they're embracing this. That's my passion.

David Phelps: Well, it comes through and you obviously have a true-life story. I'm sorry to hear about your mother, but yeah, it gives you that reason why, that strong reason why. It gives you a cause, it gives you a mission that you obviously wanna carry forward, and I think we all get excited when we know that what we do, that we can actually transform, change lives significantly. We know that in so many ways. Until we really feel that or see the evidence of what we're doing or have that maybe shown to us.

As you say, you go into an office and you actually explain, "Look, here's really the impact you're having, or you could be having," and give all the examples. Then the doctors and the hygienists and the clinical assistants in the front office, they become more impassioned about, "Wow, this is really what we do. It's about dentistry and treating the oral cavity, but what it's really about is about overall healthcare and massive prevention of so many other systemic diseases."

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When people understand that, it changes, I think, the whole dynamic, don't you? That's what you're bringing. That's what you're bringing to these practices. It's not just humdrum, here we go again. It's like, "No, no, no. This is a bigger cause. If you wanna grasp it and see it, it's huge."

Debbie S.B: Yes, I think it's really important that patients know you're not just treating their tooth, but that you're treating them as a person, and that they don't know how great a clinician you are, they just know how you made them feel.

So I told you about the four different sections of the hygiene appointment, and that first section is just connecting with your patient and helping them to feel like they're more than a tooth. They're not just there to pay you money, that you're connecting with them on a personal level and that you have some important ... it's just how you're making them feel, that's the very first part of any dental appointment.

David Phelps: Exactly, exactly. Well said.

Once you and your team come in and work with a client for a year, whatever that time frame is based on their needs and their customized plan. They've got things in place and things are running well, what's the glue that holds it together? The reason I ask that, Debbie, is that in my practice career, there were times that we had some great consultants come in to help us with the different aspects of the practice. It seems like, and I know better today what the answer is, but I'm just gonna let you answer it for me, why do sometimes, not always, was there a fallout? In your case, what would be the things that you all do differently that keep the glue there, the

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framework there, so these practices can take what you provided for them, and can continue it on rather than seeing it dissipate months down the road?

Debbie S.B: So David, that's a really great question and very important. I mean, I think that if you're to be a quality consultant, a quality expert leading doctors, you have to be able to influence everyone on the team. I work a lot with the doctor personally. Yesterday we had about a half-hour meeting, myself and another one of our consultants, with the doctor on her mindset.

It's also today, there's still a challenge in that office, and we're working with the doctor again, today, even though we worked on her mindset, it's a process of time. It's the doctor's mindset to being open, to being the leader. I think that there's this trend ... I don't know, I've seen a lot of young doctors. I mean, to me, if you're a business owner and you owe \$1 million from your student loans and maybe you spent 800,000 ... I mean, we see doctors coming out of dental school with \$500,000, \$750,000 in loans and they're spending 800,000 on a dental practice. That's a huge burden, but you have to have a mindset that's open to constantly learning and leaning on an expert who can influence you to be that leader. We're also working with the team, and yesterday I was working with the team to actually trust each other, because if you read that book *The Five Dysfunctions of a Team*.

David Phelps: Yeah. Yeah, yeah. Patrick Lencioni, yeah.

Debbie S.B: We're going through this process and it was amazing. We had a huge breakthrough yesterday in that process of trusting and getting open to trusting each other. So now everybody knows where's the doctor coming from, why

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are they acting and treating us the way they are? I mean, I have to tell you that maybe some of the doctors listening to this don't like touchy-feely, but we actually peeled off a huge layer of the onion yesterday and we got deep into the core by doing this work on trust. I'm working hard with the young doctors to create a mindset of a business owner. It's us as experts to influence our doctors who have gone to school to be a clinician.

Does that make sense?

David Phelps: It makes total sense and you nailed it. My answer, the question I ask, was gonna be the reason why, in the cases where I didn't see longevity of the work that the consultant did in my practice had everything to do with me. I can see that very clearly in retrospect. So you hit the nail on the head, and it tells me a lot about you Debbie, because you're absolutely right. You can take the best processes and systems and everything else into a practice, but if a mindset, particularly of the owner who is either going to embrace, encourage and inspire the actions forward, or they're going to, even subconsciously, self-sabotage the whole system because of what's between their ears.

If that isn't straightened out ... Mindset, in my opinion, that's everything. Yeah, you've gotta have the other components that follow up with it, for sure, but the way we think about who we are, what we do, the vision we have for our life, our team, that is huge and that's where I know that great consultants will run into barriers if that mindset of the owners ... I mean, you could do everything in the world that you just did for practice B down the street that worked awesome and come and do the same thing for practice A with many identical characteristics and have

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totally different results because of the self-limiting beliefs of that owner.

So when you're doing an intake, you're interviewing a potential new client, I wanna know, you've probably don't have the skillsets to see that, but you've probably got questions that help you evaluate that mindset. Are there some clients, because of that, that you decide not to take on or give them another path to take?

Debbie S.B: Yes.

David Phelps: Yeah, I'm curious about that. What does that look like?

Debbie S.B: I just am dealing with this situation right now. We have a doctor who I didn't know it in the beginning, because it wasn't disclosed until the second time they're here in Portland and I went to the office. First, I talked to them over the phone and they, right away, like that, within a half-hour, had that online assessment with the questions completed. I'm like, "Wow, this is awesome." So now we went in to meet the doctor, and I just got to meet him. I said, "Let me create my treatment plan for you."

So I created treatment plan A, B and C, one, two and three, come back and I actually have ... I know a lot of doctors are visual, so I actually have a process that is a visual. We have eight different systems that we can teach the practice to be successful, they're like profit centers, and they were circles. I started with the first one, the oral health, mouth-body connection. Oh, right away, push back from the doctor. He said, "Uh-uh (negative). No way." He said, "I am not gonna have my ..." He cut me off and he said, "Now you're talking about my patients being here for a long time. I'm gonna have people waiting in my waiting room." Listen to this David, what he's saying. So

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he says, like this, "Time out, time out. I got an exam." He had to go do a hygiene exam.

By the time he came back, I was like ... I said, "Doctor, I have to tell you honestly, I cannot help you." He was like, "What do you mean?" He was in shock. I said, "I was showing you what I know is successful in a practice that we work with, but unless you're willing to embrace this, I cannot help you." The next day he had told the team that he was gonna a ... it was a Scientology group that was gonna come in, and the team was just furious.

But I told the office manager, I said, "I just, I cannot help your office because it has to come from the doctor," like we've been talking about. I just ... I cannot help them.

David Phelps: No, you knew where that was gonna go if you even tried. It'd be frustrating for everybody.

Debbie S.B: Yeah, he goes, "Oh, so you can't help me because you don't agree with what I'm saying?" I said, "It's not that I don't agree with you, I just know that this is one area that will create success in your practice, and I need to embrace it and you can't."

David Phelps: Yeah, yeah. Interesting.

Well, my last question for you, and I think you pretty well laid it out during the course of our conversation today, but we talk in terms of dentistry and how today, how important it is that we differentiate our practice, so we're not just another commodity, just another dental practice on the street taking PPO managed care or trying to rise up above the corporate chains. How are we different, right? That's what you help your clients do, obviously, to

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make them different so that their patients appreciate that they get that experience.

If I ask you that question in the realm of practice management consultants in dentistry, what are your differentiators? What's your unique area? As I said, I think you've had bits and pieces all over the place today, but how would you just bring it to a head here? I know you're a very humble person, but let's be truthful. What do you think you really bring to the dentists, clients you work with, Debbie?

Debbie S.B: Well I think that we have a team of experts. I mean, I came and started my business because of the hygiene department and my expertise in that, but I've always, at my core, taken a holistic approach. I never wanted, from day one, wanted to create a profitable hygiene department without seeing the bottom line you can create a lot of profitability in a hygiene department, it's not that difficult, but what's going on behind the scenes so that the doctor is taking home the amount of money they deserve? Where's that?

Over the years, I've handpicked experts who can help me with those different areas of the practice, like the credentialing and not just getting every PPO. Like Cindy, she's an expert with the front office. She's very good at helping the front office. We have a schedule, what happens from the first hour we get there, and we have some of these ladies coming to the office, or me, coming to the office to manage the office an hour before patients because they need downtime, quiet time, and they have A through D to accomplish in that hour.

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So we're very customized, we're very hands-on, and we integrate the entire team so they can drive the practice and allow doctor to come in and do their clinical dentistry.

Does that make sense to you? Do you see where we're different?

David Phelps: Yeah, yeah, I definitely do I just wanted to get it from your words. I think my conversation, my short conversation with you just today in the way you've expressed yourself and some of the different pieces that we've hit on showed me so many different things that you do that I think are very unique. Really, what I see, it comes from your heart.

You talked about your reason why you do what you do. That's where it all has to start. As you said, we all have to be profitable in our businesses, otherwise we can't help people. That has to be there, and I know you bring that as well, but to really be behind what you do and feel like it is such a cause, it's a mission for helping people. Every one of us, in the areas of our lives that we are serving, if that's not there, that's a pretty dismal way to live. So I definitely see that's not you at all. You're the 180-degree counterpart to that.

So I just wanna make sure people know how to get a hold of you. So Debbie Seidel-Bittke, it's dentalpracticesolutions.com. Also, Facebook page, Dental Practice Solutions, you can definitely go. I looked at all your sites, I saw all the activity there, so great places to go just to connect with you and see what's happening with other clients. I saw a lot of great five-star reviews and stuff.

Debbie S.B: Thanks, yeah.

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David Phelps: Yeah, yeah, I think that's part of due diligence. I love that there's lots of great people out there in the world that help business owners, practice owners. There's tons, and I think everybody wants to find somebody that fits for them. So I just encourage a doctor, a dentist, or even a staff member who's listening to this today. If you're in a situation where you're looking for someone to help, definitely go and do due diligence and find someone who fits, but I've really enjoyed this conversation and I feel like you're somebody, if I still had a practice today and I wanted to up my game, no, I'd definitely give you a call because I feel it. I get to see you today; our listeners don't get to see you. I actually get to see you on video, which is a pleasure as well because who you are resonates through very, very well, so I just wanna...

Debbie S.B: Thank you. Thank you. I'm so grateful to have met you and our paths hopefully will cross again.

David Phelps: No doubt that they will. We both love what we do, and we definitely do that.

So Debbie, thank you so much for being with us today. Really appreciate it.

Debbie S.B: Yeah, it's totally my pleasure.

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