

From Clinician to Executive: The Playbook for Scaling Dental Practices

Emmet Scott: Ep #554



Emmet Scott

Entrepreneurship, as much as you're following your intuition, you're also constantly getting hijacked by dopamine. What I see people caught up in is they're building a red car and then they stop it and then they're like, never mind, we need to focus on the blue truck. Never mind, yellow motorcycle. They're all good, but doing a little bit here and there and not fully executing on any of them, I don't get any return.

Dr. David Phelps

Decades ago, I hustled to grow my dental practice and real estate empire. Society patted me on the back and every new deal and patient reinforced the success they said I had. Then my daughter Jenna was diagnosed with leukemia. Nine years, several intense chemo treatments and years of epileptic seizures, my daughter was given one more miracle, a life-saving liver transplant. In that hospital, I realized I wasn't successful. I had money, I had real estate assets and a business, but the only thing that mattered was time with my daughter.

In that hospital room, I decided to sell my business, leave active income and sustain my lifestyle with my real estate assets. Now, Jenna is healthy and all grown up and me, I am teaching others to do what I did. And I continue to uncover the principles, strategies and lessons we can apply in business and investing to create ultimate freedom for what matters most to each of us. Welcome to the Freedom Founders podcast.

Dentistry isn't just about clinical excellence. It's about building sustainable, scalable, and profitable businesses that give owners freedom and impact. Today I speak with Emmett Scott, a dental entrepreneur, business strategist, and thought leader in the DSO space. He's the founder of the DSO Secrets podcast, author of the book by the same name, and co-leader of the Dentist Entrepreneur Organization, DEO.

which coaches over 460 dental organizations representing \$3 billion in revenue and 1,700 locations. Emmett is passionate about helping clinicians transition to entrepreneurs, then executives by mastering profitability, scaling, and leadership. In this episode, Emmett Scott reveals the frameworks that he uses to help practice owners move from burnout to business mastery, from single location struggles to multi-location success, and ultimately,

passive profits. Please welcome Mr. Emmett Scott. Emmett, it's always so good to have a chance to catch up with you. It's been a little while, but knowing what you're about and what you do in the deal industry, I really wanted to have a conversation with you and share it with a lot of our audience because I think with the a lot of changes that we've seen in the industry, you can say the last half dozen years, last several years coming out of COVID, ■ things have exploded. We've got technology and just so many things changing in

The industry that you and I and many of the people that we love have been a part of for many, many years. The change can be frightening to many, as we know, at Challenge, but it can also provide a lot of opportunities. And I think that's where I'm gonna go with our conversation. But before we do that, I gotta ask you for our listeners' benefit, you've got really kind of a unique entree to dentistry. Could you take us back and tell the audience a little bit about how you entered the dental arena?

Emmett Scott

Yeah, I actually graduated in accounting, did financial planning, CFP for 10 years. So my world started on the investment side and I had a weird question that kept haunting me, which was why were people giving me money and not scaling their own business? So I had a radio show called the entrepreneur life. started helping entrepreneurs move over to what I call like the second chasm, which is executive level. So if you think about it in dentistry, clinical to entrepreneur.

but then how do you move from entrepreneur to executive and how do you scale? And I was doing this across a lot of different industries. My best friend from the age of two, dentist says, hey, can you help me open a practice? I didn't know what a DSO was or anything. Helped him open a practice. Long story short, we did 70 locations. I was CEO of that, grew to 150 million revenue, 1300 employees.

Ended up doing a podcast called DSO secrets during that time, cause I was trying to learn what a DSO was and I heard it was really evil and I just wanted to understand the model. And then I ended up writing a book called DSO secrets. I was president of ADSO for three years. So kind of got to hang out with the billion dollar groups and that association right during COVID. I got elected as president, got to do that for three years, built a lot of bridges with ADA during that time, which was fabulous.

And so 15 years in the industry last year, I had been working with the dentist entrepreneur organization, which is a coaching group. And last year, but half the company, Jake pool, my partner said, Hey, you've done the CEO thing. UV CEO of this. We've grown tremendously. We've, we've doubled this last year. have 460. Dentist organizations, you know, from about a hundred or just single practice guys who are trying to figure out how to scale and grow.

and then all the way up to a hundred, \$300 million groups who are also trying to figure out how to scale and grow along the way. So yeah, we're coaching about 3 billion in revenue,

know, 1700 locations. I say all of that to just say for your listeners, it gives me a nice broad range of the marketplace, right? And what's happening all the way from single practices to larger groups.

And at the end of the day, expertise is about pattern recognition, right? The reason clinicians are so good can do it in their sleep because they've done the 10,000 hours. And we just have with our coaches and in my experience, a lot of pattern recognition of like this works, this doesn't.

Dr. David Phelps

Yeah, fabulous background. Thanks for that. You mentioned, which is so true, the clinician. That's how we come out of school. We are the clinicians and we're taught to continue to elevate those skill sets, which is obviously important. We want to. Most, all, but I think the preponderance of dentists, doctors that learn a real high level skill set really want to practice that. Some don't. Some actually want to go into the business part, but let's just say the preponderance want to and use those skill sets.

The thing that hits, I think, new graduate, whether you came of age when I did many years ago, you come of age today, is you come out with these skill sets and you're excited to get going in practice life, whatever that means, and you kind of hit this wall, particularly as you're starting to think about, well, I'd like to have some control over my future and therefore I would like to acquire practice. Maybe I do a startup. Maybe I go in with another doctor as an associate, maybe buy in there. Maybe I have to work as an associate for a while someplace.

Still for a good number, there's a desire to own that practice. And that's where the entrepreneurial aspect comes from, right? I mean, go to commission now, entrepreneur, I'd like to control my own destiny. That comes with a lot of baggage that we don't know coming out of school that we have to learn on the fly. And then you get somebody who's built a decent sized practice. Maybe they've acquired or started a secondary call with the satellite practice. And that comes with its own discomfort in many, many ways to do that. But they're trying to get to that

next level that executive, the CEO role, just in your experience. know the experience is wide ranging because every person, every doctor who comes to you has got a different personality and different abilities and ambitions. But if you could kind of give some frameworks as to what that pathway looks like and maybe a little bit about, you know, who who are the right candidates to to move that direction all the way to CEO and who maybe should reflect back on who they are. Maybe that's not the right thing. I know it's hard to say to people, but

I'm sure you have to do that with some of your coaching with some that, well, hey, maybe that's not the thing for you.

Emmet Scott

Yeah, so let's just start with individual practice because I think everything starts with the individual practice. Even if someone has 70 locations, there are all 70 individual practices that need to be performing well. I will say that there's a good majority right now of members who come in, dentists who come in that are owners that feel burned out. And one of the things I know about being burned out is what's happening is they're not even making as much as if

they were an associate in their own practice.

Now, how does that happen? The way it happens is exactly what you said is they are focused on being a great clinician and our weaknesses are the overuse of our strengths. So they've been doing the CE, they've been taking care of patients, they've been really focusing, frankly, from an accounting perspective on the top line. How do I get more revenue, more revenue, more revenue? And something that's a little deceptive is that they're an S-Corp, usually. The accountant, rightfully so, has said, hey,

pay yourself a minimal amount, do the rest as distributions, nothing wrong with that. But the only problem is, is they don't really know how well the business is doing. So someone will come to me and say, Emmett, you say that my practice should be doing 20 % net profit. I'm doing better than that. I'm doing 35 % net profit. And then I'll say to them, okay, well, let's back into a few things. If you were paying yourself as an associate,

how much profit would you have? And they go, none, right? Or even worse, they're like, hey, I'm at the 20%. And I was like, if you paid yourself as an associate at 30, 35%, oh, I'm actually negative. What's happened is that labor costs, some of those other expenses, especially post COVID have really crept up on them. And they've just been trying to take care of patients, produce, take care of patients and produce. And they really haven't been able to manage effectively the cost portion.

optimization of the practice. So one of the framework, number one is we use what's called the profitability cycle, which starts with financial clarity. How do you get your chart of accounts in your P and L organized in a way that you can clearly understand what your gross profit is, what your net operating income is, and then what your net income is. And, you know, we can go into that if you want, but those are critical.

Most people don't talk through that with the business owner. The CPA is not interested in doing that because they just need the tax return done. Even if they're doing the books, they're just not done well to run a million or multimillion dollar practice. So that's where we start as the foundation. The other thing that we help our members understand is everything starts with launching profits, i.e. I'm not making any money. I've got this new idea. I got this new practice. I want to add ortho, whatever it is.

Then they need to move into optimizing profits. That is, how do I get my practice to a 20 % profitability at the net operating income level after associate equivalent pay is pulled out? Then they move to the stage of duplicating profits. Now, duplicating is not new locations, that is duplicating themselves. So we have a saying at DEO that two doctors makes more money than two locations. From an accounting perspective, two locations is two sets of overhead.

two doctors is two sets of revenue, right? So one little trick I'll throw out there is let's say you're a doctor producing 100,000 a month, you're crushing it, and you're like, man, I can't find a good associate that can produce more than 40,000 a month. Well, 40,000 with a 50 % gross profit, IE after I paid doctor hygiene supplies and lab, is actually an extra quarter million dollars of profit, right? So.

Two doctors better than two locations. Now, once you figure out duplicating, and for a lot right now, finding an associate, finding a hygienist, that's a big challenge, place that we help. But then you move into scaling. Now, scaling is, I wanna have another location. That means I've

maximized out this facility, I do need to set up another set of overhead. The trick here you gotta be careful of is, it needs to be copy and paste. If you built in and out burger, don't go do pizza, all right?

So when someone comes says, Emmett, I got four locations, one's Perio, one's General, one's Artha. What I say to them is, so you got four launching profit activities and I bet you're not making any money. And it's like, yeah, that's true. So it's kind of fun to pound your chest on locations, but locations is not profitability. So we're very intense on like, hey, we really want you to, you know, our bias is like profitability helps a lot of things. It actually helps culture a lot, right?

You show up better when you're making money. You take people to lunch when you're making money. So if we can help get profitability right, then a lot of other... And then ultimately where people want to get the fifth level is passive profits. It doesn't necessarily mean you're sitting on the beach doing nothing, but it does mean you retire from the things you don't want to do. When someone wants to get out of the chair, right? If you've done a good job on having your associate equivalent pay tracked out,

you can figure out, if I bring an associate in, I can live off of this passive profit part. And we helped them build that up over time. So I think those models could be helpful for the listeners to start thinking about.

Dr. David Phelps

Yeah, those are great models and very understandable as well, Emmett. So I'm just kind of thinking out loud here with this conversation. If I wanted to get to the level of passive profits, is there a baseline number of scaled locations once we get the duplication down, right? And then we go to scale locations. Is there a minimum number that we need to have to get to a passive profits place or is that the wrong question?

Emmett Scott

Yeah, I think it's maybe a revenue to passive profit. Like I'd actually rather have a five, \$10 million practice than I'd like to have five \$1 million practices, right? Because now I've got five sets of overhead, five office managers, five sets of revenue. yeah, what we're really focused on that passive profits is really about that bottom line with that associated equivalent taken out. And how do we

systematically bring in additional associates. And as much as people say, I don't wanna be a DSO, if you look at the name, dental support organization, i.e. associate support organization, that really is what everyone does need to become is, how do I take care of more patients, have more impact on patients? That'll ultimately build the equity of a practice.

is the ability that multiple people are working there driving profit and that additional profit stream. You if you think about it this way, first dentist covers overhead, second dentist gets paid with supplies, lab and hygiene. The rest 50 % typically falls right to the bottom line. So what does third dentist do? Those kind of things is more where you want to play the game than number of locations. Now there's nothing wrong with having five profitable locations too.

And we're going to look at that bottom line profitability. Ultimately, if I don't have to work in the practice, but I can still maintain my lifestyle, I'm set. Like one of the questions I'll get is, hey,

Emmett, I want to exit for a large amount, or I just want a lifestyle. I don't ever want to sell the private equity or DSO. What would I do different? And the answer is it's the exact same business, right? Like you just want to build a great business, either one where

you can step back and it's self-managing. And by the way, if you want the largest exit, be able to step back and have it. Now, the challenge is when you move from clinician to entrepreneur, it's a lot of risk taking, it's a lot of intuition, it's a lot of dopamine, it's a lot of anxiety. And so once you cross that chasm and then you're on the entrepreneur side, it's cool. You're running things, but it's

The next step is the harder step, which is moving from entrepreneur to executive. And I think it's hard because it's a lot more boring. Entrepreneurship does, as much as you're following your intuition, you're also constantly getting hijacked by dopamine and by anxiety. Your projects are, what happened on Tuesday really frustrated me, we got to fix that. And if you think about this from a manufacturing place, what I see people caught up in is,

they're building a red car and then they stop it and then they're like, nevermind, we need to focus on the blue truck. Nevermind yellow motorcycle. If we were a manufacturing company, we'd see a whole like storage unit of supplies and, and pieces, but instead what's really happening is our poor office manager, a regional is working on something, then it's getting junk, then there's working on something, and we're just burning labor costs with our lack of focus. So we use a model called iDope.

Every idea needs to be documented, organized, prioritized, and then executed on. And we just use these models to help move from entrepreneur. Entrepreneurship's very hub and spoke. I'm the smartest one in the room. I'm conducting things. I'm following my dopamine and anxiety. To executive, very formalized. Here's the P &L.; Here's what will make us the most money. Here's the things with the highest return on investment. Let's stay focused and then we'll execute on those things.

It's almost like, am I going to invest in Bitcoin, Tesla, Google? What has the highest return? This real estate deal. I only have so many dollars. I only have so much time. They're all good, but doing a little bit here and there and not fully executing on any of them, I don't get any return.

Dr. David Phelps

You built the practice, you hit the income goals. But if you're honest, you still feel trapped, prisoner of your own success. You didn't get into dentistry to grind forever, chained to the chair, hoping a 401k will eventually set you free. It's time to stop working for your practice and start building a life funded and protected by it. At the Real Wealth Conference, you'll learn how to optimize your practice to run without owning your schedule, replace your income with real cash flowing,

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investments. Exit your practice on your terms without selling your soul to a DSO. This is not another C.E. Seminole. It's the blueprint to real freedom built for dentists who refuse to die in the chair. This October 23rd to the 25th in Dallas, Texas, go to realwealthconference.com to purchase your ticket. That's realwealthconference.com.

Get out of the chair, get into the room. It's your move. So I've got to ask you this then with your experience. I totally understand the dopamine hits that we get as the entrepreneur because there's a level where we thrive on that. And so when you're in, someone really wants to move beyond the entrepreneurial stage and move to the scaling or to the passive profit stage. How many times do you have to, mean, coaching is inherently important for anybody who's trying to move to a different level of anything, whether it's sports or hobbies or.

business, we know that that's why we have coaches because we're going to go fall back into old habits very quickly. I want this, you know what? I'm comfortable over here. And so as I'm trying to move to that next level, my tendency is going to be, but I need that dopamine hit. So I'm going to get back into it and mess things up again because I have to get involved. Talk a little bit about that. I mean, how often does that happen? all the personality types and I know I'm getting in here in here.

Emmet Scott

before the conference.

Dr. David Phelps

This is the cool stuff here, so tell me about that.

Emmet Scott

It's a constant fight. is the fight for, know, because where's the biggest enemy? It's the one within. So, you know, one of the things, Emmett, I know what you're going to say, but I found this practice. It's a good deal. It's a good deal. Right. I hear that all the time. What do you mean? That's a good deal. I mean, it's doing 400,000. They got to offload it for \$100,000. Like, wouldn't this be great? Well, do you have a business model that you think you can scale this up?

And by the way, you have these other practices that aren't quite as profitable as you need them to be. Wouldn't it be better to focus on those? By the way, is it a good deal when you look at the operating cost the day after you buy it and you have to fire all those staff because those staff are in a dysfunctional relationship right now? So it's really tough because yeah, we see all these opportunities around us and it doesn't go away because as you get more successful,

there's bigger opportunities that you have to say no to. mean, I think about this. If Elon Musk is presented with a \$500 million opportunity, he's like, yeah, it's just not worth it. You know, I only go after trillion dollar businesses. You know what I mean? Like the discipline it takes for that level of focus of what does he really want to sell?

Dr. David Phelps

Exactly.

Emmet Scott

If you've been successful with one location, you're getting presented a certain level of opportunities. If you've done two, if you've done 10, if you've done 70, or if you've done 100, and the ability to constantly organize and say, which one gives me the highest return on

investment for my time? One thing that does help David is as we get older, we stop going, this is just fun. And we're like, no, I actually want to do stuff that has exactly

Dr. David Phelps

Yes. Yeah. No, so true. So true. Yeah. The evolution of the clinician entrepreneur to the executive. It's definitely a pathway that has twists and turns and switchbacks and resets along the way, but it's a fun journey. Let's I mean, I know you love it. I know the people you get to coach through it. It's fun. It's fun to see the breakthroughs with our breakthroughs and there are breakthroughs, right? And when you see one man, everybody's just like, excited to see what happened. You mentioned

Earlier in our discussion, which I want to jump back to, in passing, you mentioned the difficulty today, not just in dentistry, but across the culture of the nation's society. ■ A lot of it happened coming out of COVID and the great resignation, but staffing. Staffing, so I'd like, know, I have a great location and a great opportunity, right, to build out and duplicate myself. But man, I just can't find, know, the associates can do the job, the associates, I mean.

A of it comes back to, I know lot of processes and filters, but certainly, I know you talk a lot about culture and leadership, how important that is. I threw a lot at you there, but kind of take some of that and parse it out the way you would be talking to someone like me, like, yeah, I want to do this, Emmett, but man, I've tried this associate thing, or I can't keep enough hygienists, and man, I'm just swirling around. How am I ever going to move to the next level?

Emmet Scott

couple buckets there. One is we've always said dentistry is recession proof, but we never said it was inflation proof. And I think we're proving that it wasn't and that it takes real strategic leadership to manage through inflation. You've got for many of us, we've got a fixed revenue on a PPO or Medicaid insurance, you know, and even fee for service only has so much they can move that top line. But we have labor moving very quickly.

And sadly, I don't think that's going to slow down at all. If you know monetary policy, we're printing money like crazy, and that's going to lead to natural inflation of costs. And people are going to ask for more money, not because they're selfish, but because they're trying to pay rent. And if we've got a fixed income and they're asking for more and more and they need it and other industries are willing to pay it, we have to be able to compete with that. So that's a challenge.

We've got the challenge that dental schools require typically one faculty per 20 dentists, sometimes 30 or 40, and hygiene schools require one faculty per five hygienists. Why is that? That makes no sense to me, but it is how it's structured, which means one fourth of number of hygienists can graduate for every dentist that's graduating, but we need twice as many hygienists as we need dentists.

So now we've got a labor issue there that's going to have to get solved. between the costs plus, you know, we've got this immigration thing that's getting cut off. We've got this birth rate that's falling down. If anyone's like, man, hopefully this labor thing gets better. I just want to give you bad news. It's not getting better. It's getting worse. So what is the solution here? We have to look for automations and technology. And I'm actually really excited. It's funny, but

pre-COVID, had you tried to bring in some kind of technology, AI, automation, your staff would have been like, is this gonna take my job? Today they're like, hey, they can have my job. I didn't wanna do that task. I don't wanna call the insurance companies anyway. I don't wanna do that level of detail. Everybody wants to work at a higher level of their license, so to speak. And frankly, for what we're paying, we need them to work at the highest level.

And so I think the dental practices of the future are going to have a lot of technology automation. Let's be honest, as a customer, I don't want to talk to people either. I just want things automated and processed and so forth. And so the good news is we're right at this inflection point. You know, when you come to our events, we'll have 80 different sponsors, innovation partners there. And now

half of them are some kind of technology, which are fabulous. They're at the beginning stages. Some of are better than others. But every year they're going to be tax better. So we have dental groups with multiple locations and no front desk at this point doing really well. And the patients love it too. It's just all automated as far as experience. Well, that gives them a competitive advantage because now they can pay more for the back office because they don't have the front office piece. So any of those pieces

I think are gonna have to be thought through for the future. I don't think that the day of hanging up your shingle and being a great clinician is enough. The sad thing is as ■ a patient, I just expect you to be good. You know, I'm not like, you're a good dentist and that's so great because he's a crappy, I don't know enough as a patient. So sadly, being a great clinician is kind of like a given, it's like commoditized.

Dr. David Phelps

Exactly.

Emmet Scott

Now everything else is where do I bring the value on convenience, on simplicity, and then on the cost side for myself, how do I automate as much as I can?

Dr. David Phelps

Here's the truth. Most investors don't lose money because of bad luck. They lose it because they missed something. One line in the PPM that they didn't read closely enough, an assumption that sounded conservative until it wasn't. An operator who knew exactly how to sell the dream. It happens all the time and if you think you're too smart for it, you're already at risk. That's why we created the LP's capital preservation checklist

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33 questions to ask before you invest in funds and syndications. Inside you'll find hidden red flags in deal structures and marketing language. Stress test scenarios that reveal how a deal holds up under pressure. A no fluff checklist to separate real deals from real trouble. Don't wire a dollar until you've been through this. Get your free copy now at freedomfounders.com/slash-capital-preservation-checklist.

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or tap the link in the show notes. That's freedomfounders.com slash capital preservation checklist or tap the link in the show notes. So that brings me to my, I guess my final point today, which we're both huge fans of the leverage collaborative aspects of communities you've built in part of several communities. I've done the same thing. I've been built and then participation in other communities.

Let's just talk about that for a minute because in the world today, I just mentioned being a soloist, really, really difficult. And we mentioned a lot of reasons, but just not only the leverage of what a group can do, a group buying power, negotiating power, and leveraging efficiencies of infrastructure. there's so many pieces there. But what I also just heard you say, and this is what I want people to understand is that, really anything today, we're just choosing dentistry because that's where we...

have the blessing to work is you have to have a vision. Where do you get a vision in life? Where do you get a vision about what's possible for your life? I mean, certainly today we've got information at our fingertips. We can go to our smartphone, we can listen to podcasts and YouTube and it's all there, but there's nothing like rubbing shoulders with real people who are like me in many ways, in this case, a dentist who went to school like I did and is in different positions on the pathway to whatever their next is and.

If I get to rub shoulders with those people and then I get to be in a room where the visionaries and the sponsors are showing the way to the future, then my eyes, figuratively, also literally, can see what's possible and then I get to, instead having a binary choice, well, either I stay solo or I need to do this, it's like, no, there's multiple choices to take here. It's almost like, well, which one feels good? Then where do I get the coaching to say, does this fit me?

and build a structure there. There's so many possibilities of what I'm alluding to. We talked about the constraints, know, in labor costs and inflation costs. And we know with with PPO's and insurance reimbursements, we talk about all the negatives all day long. They're just going to be there. But how do we overcome those? And that's where I think the positive aspects of community. So I'm obviously talking about your organization, your primary one today, know, entrepreneur organization. I've been to your meetings and the vision there is super strong. And I just, you know, I can't over promote, you know, dentist wherever you are.

in your spectrum of what your life and your future you think it may be, just open the doors. Open the doors and just rub shoulders with other people and see what's possible. I just stole all your thunder, but go ahead take it from there.

Emmet Scott

Yeah, well, thank you. appreciate the promo of being in the community. Being on your own just sucks. And there's so hard to figure things out. To be able to be with another entrepreneur who's at your same level, a little bit ahead, to see what they've done and decide, I don't like that. I do like that is invaluable. The thing I'd say is a competitive advantage for DEO is we have a bunch of ambitious people who are also vulnerable. So we're like, Hey, here's where I'm crushing it. And here's where I'm getting crushed.

And when you have that kind of group, it's not about, hopefully you get this impression, it's not about how many locations or this, that, and the other. It's like, what do I want for me? Because at the end of the day, like I die. So I really need to just build a great life, a great community,

have impact on people. So to be with 470 different entrepreneurs who are all playing at different levels, for them to be

vulnerable and be like, hey, I use that vendor. Here's where they worked. Here's where they didn't. Hey, I tried that path you're trying. It works really well here, but not here. I mean, it just saves you years of time. Yes. I will say the way that we've structured DEO, it's month to month. Like there's no, you know, people can come try it for 90 days and then say, this isn't for me. So we've done everything we can to make it something that's not like locked in. You're stuck here.

Every one of those members is choosing every month to be like, yeah, I still want to be here. You are right to when you are coaching three billion in revenue, you can go to some of the vendors and say, we want a better price. And so I sometimes feel like Trump negotiating tariffs, you know, like, hey, this is is a new record.

But also these vendors know that these aren't doctors who are just about price, they're about return. They're giving back to the vendors. We're very open, like this is where your product works, here's where it doesn't, go build this for us. I see them as my innovation partner, because I don't have enough money to build all the technology that I need in my practices. So if each of them makes those investments, I'm actually super thankful for them. And I think that's the level of partnership that we're working with at the

We have our own app, so our members are able to kind of privately chat with each other. Their office managers are able to go in there and chat with each other and share. We've got a list of all the vendors in the marketplace so people can quickly get there. We've got tons of courses and training. So, I mean, it's a huge leverage point if you're like, I just want to make my practice better, or I'm already at four, I'm already at 10, and like, I need to be with people who are playing at another level.

Dr. David Phelps

Well said, well said. Well, Emmett, I appreciate your time today. I'm looking forward to including you with some of the major thought leaders and brain trust at our Freedom Founders October meeting in Dallas. Just appreciate your wisdom, your insights today, but as always, you're great giver and collaborator. Thank you for your time.

Emmett Scott

Thank you so much, David.

Dr. David Phelps

My own journey from clinical entrepreneur in my own practice to becoming the executive and then later transitioning out of practice was not one that I had a vision for, not one that I had put on the vision board, not one that I had put out a model to entertain. It came as a compilation of my curiosity in studying business, marketing.

leadership, all the things that we don't learn in school when we're learning our trade, our skills, our technical skills, which are first and foremost the most important when we are in that stage of learning. But we find out once we become licensed and go out to the real world that we're missing a lot of skillsets that weren't taught in the technical skills. Well, you can't do it. Not

blaming the institutions, just saying there's only so much they can teach in the amount of time they have us. The rest is up to us. My curiosity is really what prompted me to

I've learned so much from them over the years, but I wasn't prepared for the turning point that came about for me, ■ a little over 20 some years ago when I was still in clinical practice, but my daughter Jenna, who had gone through health crises such as high risk leukemia, epilepsy, and then a liver transplant by age 12, I was faced with a dilemma.

How long do I keep doing what I'm doing being a financially responsible father, parent, husband, but also missing out on being there with a child who had gone through some horrific health challenges and I didn't know whether or not there would be more time left for me and with her to spend that time that every parent wants with their young children. So I had to make a decision. The decision I made was to leave my practice, but it didn't happen all at once. Just the fact that I was forced

by my desire to be with my daughter out of my practice for significant periods of time, week, week and a half where I would leave the practice completely to be in the transplant hospital where she went through the transplant and was recovering. This recovery period went on for some three months. And it was during this three month period where I was in and out of the practice that I realized what was missing from my move to becoming an executive. The problem is when we are,

the senior doctor, the one, the founder, the one who has driven whatever success we've had is we feel responsibility, which I think we should have, but also an obligation to be there and be what I call the answer man or answer woman to everybody who has needs. And that's a formula for failure. Why? Because as visionaries, as one who wants to become an executive, we have to rise above

the day-to-day operations and that's not easy to let go. But by being forced out of the practice to be with my daughter, it forced my hand. What I found was that other people in my practice, including associate doctors, including staff, hygienists, front office, back office, everybody stepped up and realized that Dr. Phelps is out of practice for this next week, week and a half. We are the ones that have to make it happen. He's not there in his office to answer every little question. We have to make some decisions.

And they did, we all learned. I learned that I don't need to be the one making all the decisions and micromanaging every little piece like I typically would do. They learned that they also have the ability and I empower them to make decisions even if they're not always the exact right decisions or even the same decisions that I would make, it's better that they make decisions. And building a culture based on outcomes and experience is something you can drive toward and you can achieve a high level of experience.

through your team, staff, associates, but you've got to put the time in on it. Well, this is my big, big change. And when I found out, when I found out about how this practice could run without me being there 100 % of the time, I started pulling back. In fact, I pulled back so far that I went ahead and sold the practice to another doctor, an associate doctor within the next year. Because the freedom I found of being able to leave that particular position behind, even though was a great,

a great run for me in private practice. The margin, the freedom, the optionality it gave me to do my next thing, to evolve into my next phase of life was critical. Now, I could have stayed as an executive and if I hadn't had other focus points, I probably would have. So my point to you is, it doesn't matter what your next steps are gonna be. You've got to take a first step. It isn't about starting, it's about letting go. And I had to learn a little bit the hard way, but also in a good way, how I could better let go.

You can do the same thing. I promise you.

Well, I'm pleased to say that Emmett Scott will be at our Rural Wealth Conference in Dallas in October. He'll be right there sharing some of his frameworks and expanding on some of those that we had in the here in the podcast. Emmett's top shelf. I really find that Emmett has many years of experience and he has helped lead the pathway for many clinicians in their operational and clinical roles in their practice.

to that executive role, whatever that means for them. Whether that means coming back a couple days a week and still doing some dentistry or leaving that all behind. But building into profitability through systems and culture and leadership is what Emmett's all about. So you gotta come and hear Emmett because he is again a great resource, somebody you wanna mix up with and talk to and maybe have him onboard as a resource for you. Overall, the Real Wealth Conference is going to expand into many areas of building freedom because it's all about freedom. Wealth is no good if you don't have freedom.

And so I take the word wealth in this conference. We're going to build that out and say, well, what is wealth? How much wealth do I need to accomplish what I really want in life? And for most of us, that's more discretionary time. I'll say it again. It's more discretionary time. I would rather trade dollars today to have more time in my life. And you can do the same thing, even if you're younger in practice, to a degree, you can build freedom and buy back time, even when you're relatively new in practice, midstream in career. And certainly by the time you're looking to make an exit or transition to your next

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You really want to know exactly how are you gonna convert your wealth that you built into income streams that are sustainable, which is the key to having financial freedom and freedom in your life overall. Hope to see you at the conference. You can register at realwealthconference.com. That's realwealthconference.com. Just click the link below. Love to see you there. You're not gonna wanna miss this one. It's gonna be top shelf in every capacity.