

BREAKTHROUGH[®] COACHING **Weekly Team Meeting Template**

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|-------|-------|----------------|----------------|-------------|------------------------|
| Date: | Time: | Meeting Leader | Action Tracker | FTA / Timer | Team Members Attending |
|-------|-------|----------------|----------------|-------------|------------------------|

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| 2-Minute Inspiration <i>(BTC Quotes of the Week, short thought, acknowledgement for team members, or mission statement review)(2 min.)</i> |
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| Statistics <i>(Bolded statistics are reported to coach.) (8 min.)</i> | | | | | | | | | | | | | | |
|--|----|-----|-----------------|------------------|-----|--------------------------|----------------------|------------------|--------------------------|-------------------------|--------------------------|---------------|--------------|------------------------|
| OV | NP | ROF | Reacti vated | Missed Apt. % | OVA | Total Scheduled OV | Services Rendered | FD Collect | Total Ins. Collect | Write Offs / Credits | % NP Finance Agree | Passive Units | Passive / OV | Pt. Satis. (509) |
| | | | | | | | | Total Collect | | Accounts Receive % | | Active Units | Active /OV | |
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| Statistic Goals for Next Week | | | | | | | | | | | | | | |
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| New Patient Review <i>(Write in NP names and referral source. Review NP spreadsheet. Review last week, four weeks, eight weeks)(8 min)</i> |
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| Practice Successes this Week <i>(Patient testimonials or successes) (2 min.)</i> | Presenter(s): |
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| Practice Challenges / Team Solution <i>(5 min.)</i> | |
| Problem: | |
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| Solution: | |
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| Foundation Marketing <i>(10 min.)</i> | | | | |
|--|----------------|--|------|------|
| <input type="checkbox"/> Condition of the Week | Topic | | Date | Time |
| <input type="checkbox"/> New Patient Workshop | # Attending | | | |
| <input type="checkbox"/> Professional Lunch | Guest | | | |
| <input type="checkbox"/> Lecture/Screening | Location | | | |
| <input type="checkbox"/> Corporate Health Fair | Location | | | |
| <input type="checkbox"/> e-Newsletter focus | Topic | | | |
| <input type="checkbox"/> MD Marketing Program | # of MDs | | | |
| <input type="checkbox"/> Attorney Fax Briefs | # of Attorneys | | | |
| <input type="checkbox"/> 4-Card Day | Date | | | |
| Quick Review of Upcoming Marketing Events / BTC Marketing Calendar <i>(Refer to 90 Day Rolling Marketing Planner found in the marketing manual for details. Record action items.)</i> | | | | |
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| Practice Short-Range and Long-Range Vision <i>(6 min.) (Refer to goal section for details. Record relevant action items, owners, and dates on the reverse side.)</i> |
| Short Range Goal: |
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| Long Range Goal: |
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| Schedule Departmental Meetings <i>(Once a month minimum)</i> | | | | |
|---|-------|----------------|------------|-----------|
| Insurance | Rehab | Administration | Front Desk | Marketing |
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| Individual Comments / Business / Scheduling / Zone for Week | | | | |
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