Attracting More Patients?

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ATTRACTING MORE PATIENTS

One of the motivations for writing this discussion paper was that there is so little written about the common problem of having insufficient patients in optometry practices – largely because there are simply no easy “quick fix” answers. However, there are things that can be done to improve the situation; they just require some effort on the part of everyone in the practice.

In an under utilised optometry practice we often ask ourselves “How can we attract more patients?”. It is a simple fact that a practice *needs* to be successful. Without this economic reality the practice cannot continue as a business. If that were the case, then the service would no longer be available for our patients and the employment would no longer be available for our staff.

So we all have a stake in ensuring that the practice is successful – this means that it is mutually beneficial for the community, the patients, the staff and the owners.

As optometrists we work so hard to become qualified; we create beautiful practices; we have modern high-technology equipment; and we offer the best service for our patients. Why would we go through all this to then sit around without enough patients? We have something to offer and we want to reach as many people as possible, so the purpose of this paper is to specifically look at how we could attract more people to become our patients.

Word Of Mouth

The best way to build a successful practice is through “word of mouth” referrals: Satisfied loyal patients who recommend us to their friends. These are patients who market our practice for us.

However, word of mouth recommendations don’t just happen. They are based entirely upon what our existing patients experience when they come in to our practice. It’s as simple as this: We have to thoroughly impress each patient so that they have compelling reasons to talk about us. This isn’t just having the latest instruments, it’s really about excellent patient service and how we all treat people.

Word of mouth is very powerful. When a consumer has a positive experience in a business they actually WANT to tell their friends about it. So it can work fairly quickly and we need to make sure that it is working for us.

We need to communicate that we care about our patients, that we have empathy for them and that they can trust us. All of these things are already the reality in our practices, but we also need to ensure that they are the perception too. Patient service is critical for word of mouth referrals. It can be in the staff attitude; the way we do business with honesty and integrity; or in the level of interest and caring by the optometrist.

It may sound obvious, but excellent patient service needs to happen with each patient: For example . .

- Optometrist and all support staff smile a lot.
- Exhibit excellent manners to all patients and other staff – “please”, “thank you”.
- Call patients by name.
- Demonstrate that we care about people on a personal level.
- Explain what we are doing.
- Listen to patients while maintaining eye contact. Nod along in acknowledgement.
• Stay on schedule. If extra testing is required, schedule a subsequent visit.

• We already recommend the solutions that are genuinely the best for our patients – but make sure that it is done with confidence.

• Do not sell products or procedures, present solutions. For example, don’t sell an anti-reflection coating, talk about how our recommendation will be a solution for them.

Advertising

Advertising is really the standard way to attract new patients with the least amount of effort, but probably the least successful. It can be effective, but usually the cost is so great that it exceeds the actual net income from the business it generated.

Advertising is popular with a lot of people because it is seen as a “quick fix” that requires a lot less effort than the more proven ways to attract new patients. It’s attractive because we think that we have done “something” and this view is strongly reinforced and supported by the person who is selling the advertising.

Display Advertising

Features like “Back to School” supplements are not cost effective for us. The response rates are insignificant when compared to the cost.

Awareness advertising

This is useful so that our practice is at least one that new patients will consider, but this will be most cost-effective when it can be shared amongst more than one practice with the same brand name (like a marketing group).

Directional advertising

This category has the specific benefit that it will be viewed by people who are seeking to make an eyecare decision. It is therefore far more relevant than awareness advertising. Examples include Yellow Pages and internet search engines.

Newsletters

These need to be done at least twice a year and can be really successful. Response improves when the content is specific to the practice rather than generic articles. Photos taken of staff in the practice also improve the level of interest and the articles are best kept short.

Newsletters are not usually expected to create immediate phone calls for appointments; rather they are intended to create awareness of the practice as an option for eyecare.

News Releases

Sending out a news release about an eye related topic is potentially free advertising. It also carries the authority of editorial content, rather than being seen as a paid ad. The difficulty is to get the information published and this will really be decided on the basis of how newsworthy it is.

Discounting

Discounts are another example of an “easy” thing to do, but they are most likely to reduce profits rather than increase them. There are tables that show the impact of discounts depending on the mark-up for the particular product. As an example, if a 20% discount is given when the net margin is 33%, sales will need to more than double (2.5x) just to break even.
It is the case that many discounts, like pensioner discounts, don’t actually increase sales – they just reduce profits on sales that would have occurred anyway.

If a practice really needs a boost in volume and is willing to accept that there is unlikely to be an increase in profits, a discount might be justified. In this case a discount certificate could be distributed in a direct mail program. However, consumers are known to respond better to a set dollar amount rather than a percentage. This is because many consumers find percentages confusing and a set dollar value is more easily communicated. For example, some groups have used campaigns like “$100 Off All Frames”.

**Printed Materials**

It is relatively easy to design and write some excellent brochures and patient information. These can be powerful tools to build a practice, but they are totally useless if they simply gather dust. They must be distributed to have any impact.

Any potential benefit will also be enhanced if the brochure can be personalised for the specific patient receiving it. This can be done with a highlight pen to alert the patient to the specific section that is of relevance to them.

However, the most important issue is that they must be used and the best way to achieve that is to use them in a routine way. For example, a general purpose brochure that is handed to EVERY patient at the conclusion of EVERY consultation. A booklet like “Understanding Your Vision” is good for this and topics that can be highlighted to suit each case.

**Relationship Marketing**

This type of marketing involves building a relationship with patients, referral sources and the community. This usually involves more effort than running paid advertisements, but it can be far more enjoyable and is certainly more effective and satisfying.
A strong focus on relationship marketing also helps to differentiate us from the competition – particularly since our positioning is focussed on eye health and high quality eyecare.

For existing patients, we need to be contacting them within 3 months so that they don’t forget us, why they chose us and why they should be recommending us. It is an easy trap to just assume that people know who we are and where we are located.

For future patients, preparing sample bags can be worthwhile. These can include some relevant brochures, magnet, pen, cloth, etc and be distributed to the local businesses with a message of ‘our practice has it’s books open to new patients, so just give us a call’.

**Referral Sources**

Who are the people that refer patients to us and how can we encourage this to happen? Local doctors are the most important group because of their perceived authority in the community. Others include chemists and teachers.

While this is one of the best ways to promote the practice, it also costs the least – other than time; and since the issue is attracting new patients for quiet practices, we can assume that time is available.

Calling on doctors to cultivate referrals is exactly what doctors do with one another. When a new ophthalmologist moves to an area, they visit all of the local GP’s to introduce themselves. As optometrists we are recognised as primary health care practitioners and we can offer a real service for the local GP and their patients. As a professional colleague they will be pleased to meet you.

One simple suggestion is to take some business cards and just drop in unannounced during office hours. Smile and introduce yourself to the receptionist and say that you’d like to speak to the doctor for a couple of minutes. If you get to see them then just tell them that you wanted to call in and introduce yourself. Tell them about the services we provide – diabetic assessments, glaucoma testing, etc; that we will always try to fit an urgent case in on the same day; and that we will always copy them on any ophthalmology referrals for their patients. You could also ask how detailed they would like our reports to be (most prefer a summary format). You will have made a valuable future contact. If the receptionist rejects you (a quite likely result), simply thank them anyway and ask them to let the doctor know you called in as a courtesy and be sure to leave a couple of your cards.

The other important issue with doctors (GP’s) is to keep them informed about mutual patients. This shows them that we are different and that we communicate. If they know that they get reports from us, but not from our competition, then we will get most of their referrals.

In the past we have developed a computer program to make this easy to do with what we called “Auto GP Letters”. Unfortunately, even in the quiet practices, these were seldom used. This is really a case of adopting self-discipline and getting these done routinely.

**Ask Patients to Recommend Their Friends**

The vast majority of our patients are happy with the service they have received and would be happy to recommend their friends, if they were reminded to do so. For example, this can be done at the time of
the spectacles delivery . . .

“Our books are open for new patients; so if you have any friends that you would like to recommend us to, they will be very welcome”.

Another option is to routinely include a card with the other items given to every patient at the time of dispensing (cloth, spray, etc). This invites referrals and makes it easy for the patient to pass along our details to a friend.

**Host An Event**

An event is good way to get publicity and attract new patients. This could by a Style Show with a new designer frame range, or a special guest stylist, or a colour consultant?

It could also be something in support of an eye related charity, thus combining community service and media coverage.

Note that the success of a Style Show is not the result of how much advertising is done. It is totally dependent on the patients invited, the atmosphere on the day and the general hype surrounding the event. It’s also about the confidence of the staff in persuading people to come and then carry through with a purchase. The list of invitees also needs to be an ongoing project, developing the whole year round - not just in the weeks beforehand.

**Community Involvement**

People tend to support businesses and people that are supporting them. If we support the local stationers and they get to know us, they are more likely to come to us for their eyecare. Some people call this “networking” and it is a widely recognised way of building a business in a community.

- **Chamber of Commerce** – The optometrist could get to know other people involved in businesses by simply attending monthly Chamber meetings.

- **Interest Groups** – Join things that are already of interest. If a female optometrist joined a women’s
organisation they will make new friends, develop an interest outside work and also receive support in return – both in direct visits to the practice by other members and also by the referrals of these people.

- **Talks About Eyecare** – We can offer to give talks to community groups like service clubs. A lot of optometrists are nervous to do this, but it is actually a lot easier than they think. Essentially people are going to ask the same questions that patients ask every day in the practice. Make a few introductory remarks about macular degeneration, glaucoma and the effects of poor vision on learning; then open it up for questions.

Perhaps the practice could assist with the direct costs of becoming more involved in the local community?

**Direct Mail to the Patient Base**

Direct mail is not really about “attracting new patients”, but more about re-activating old ones. On this basis we will discuss it briefly.

In order to be able to find the patients that we want to contact, they must be categorized in our database. Practice Management Software (PMS) has excellent facilities for doing this type of marketing, but it is totally dependent upon us recording things like occupation, hobbies, the patient’s GP, eye health, etc. For example, we could then send a mailing about polarized lenses to people who like to go fishing? (The details of how this is done are described in PMS notes).

Contacting the inactive data base of past patients could include a lot of different projects and most of them would generally be effective. For example, send something to contact lens patients about new options; or to presbyopes about new progressive lenses. They will naturally work best when they are targeted to the relevant patients based upon age, lens prescription, occupation, past purchases, etc. In addition to conventional mail, this also works well by email so it is important to always collect email addresses from patients.

The second recall is also a form of “direct mail”. These patients who have not responded to the first recall letter should receive an “Overdue” correspondence that is more intended to re-activate them as patients.

**Conclusion**

If a practice is not currently successful, the most likely reason is that it does not have enough patients. Unfortunately there are no “quick fix” answers and some of the solutions require some effort, but we all need to be looking for ways to increase the number of people who want our services.

**More Resources**

The books “What Patients Want” and “The Optometry Team” ([www.hanksresources.com.au](http://www.hanksresources.com.au)) contain resources for attracting new patients. In particular, see the following downloads from “What Patients Want”:

- Download 28 - Plan for Attracting New Patients
- Download 31 - Growth Plan Worksheet.

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