Occupational Health Management A monthly advisory for hospital-based occupational health programs

Reader Question

Slow days signal need to change marketing tactics

Ouestion: Despite being established, having a very good marketing person, and being part of a network, our occupational health clinic is just not busy enough 20% of the time. Naturally, there is some variation in the workload so that some days are quite busy, but these slow days are hurting our bottom line. How could we increase business on these slow days?

Answer: First, you need to identify the underlying cause for why you're not busy 20% of the time. That step will make all the difference when you to try to fix the problem, says Georgia Casciato, a health care business development consultant in Downers Grove, IL.

Is the problem cyclical? That is, do you consistently have 20% slow days? Or do the slow days fall into more of a seasonal or daily pattern? Seasonal patterns can be related to the type of employers you serve, and the daily factors such as every Monday being a slow day - can be traced to a number of problems, including poor scheduling by your staff. To look at seasonal patterns, Casciato suggests a review of at least one year and preferably several years of business.

"Some industries are very seasonal, like the construction business, and there isn't much you can do to stop that," she says. "But if you see that there are regular times of year when you can expect business to fall off, that might be a good opportunity to use some of your existing staff for other programs to serve your customers. That's the time to do those things you otherwise don't think you have time to do."

EXECUTIVE SUMMARY

No matter how good you think your marketing staff are, there's something wrong if you have slow days. Consider these factors:

- · exactly when slow times occur;
- whether your marketer is devoting appropriate time to new accounts and existing customers;
- how aggressive your marketer is.

She cautions that customer service is not just a spare time activity. Waiting for patients to come in the door with a broken arm is only part of occupational health; your staff must be working constantly to drum up new business from existing clients. And of course, your sales staff should always be working aggressively to bring in new clients.

"If there's not enough business coming in, you have to ask whether you have enough customers to support your program," Casciato says. "And if you do have enough, you need to ask whether you work your customers well. Do you stay in front of them in the absence of injury care with flu shots, work site health screenings, work site walk-throughs, and other ways you can serve your customers?"

Assuming you have a reasonable number of clients signed onto your program, your best bet for increasing business is to increase utilization of the clinic by your current customers. One tactic is to look for additional decision makers in the organization, besides the contact person you deal with on a regular basis. Don't just go around that contact person, but find out who else is in a position to send business your way. If your contact does not handle work site health promotions and executive physicals, for instance, ask who does. And if the company does not provide executive physicals, suggest that they start.

You also might want to look at the overall goal of your program before solving the problem of slow business, Casciato says. If your goal is to stand alone and make a profit, your solution might be different than if your goal is to break even while bringing in high ticket revenue streams to your parent hospital.

The problem might lie with your sales staff. Even if you think your sales staff are doing a great job, it might be worthwhile to take a closer look. How do you do that? Casciato offers these suggestions:

· Conduct an audit of sales activities.

The audit can be internal, or you can bring in an outside auditor. This would involve taking a close look at the number of sales calls made in a day, whether the person is contacting true decision makers and scheduling appointments instead of just dropping in.

Look at the salesperson's organization.

This step can be telling about how efficient and aggressive an employee is in seeking new clients and servicing existing customers. Take a look at whatever scheduling system the sales staff use.

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See how many appointments are scheduled, and how many things are on the "to do" list.

Check for aggressiveness in making sales calls.

On average, a salesperson can be expected to make four in-person sales calls per day. Lots of factors can offset that, but four per day is realistic. Also, check to see if the person is calling on the right people. Is he or she calling on the best new prospects and the customers who can offer the most business? Or is the salesperson calling on the people who are just easier to deal with and less of a challenge?

 Make sure there is a customer service plan for existing accounts.

A formal system allows the salesperson to continually get in front of the customers to upsell them. The customer service plan is where you will get most of your utilization because getting a customer to commit to your program is only the beginning of the game. "When they commit to you, that gives you permission to play the game. Now you've got to play," Casciato says. "The ones who think the game is done at that point are the ones losing business to other programs."

Remember that health care sales is a specialty profession. Make sure you have someone on board who has the training and experience to do the job, not just someone who got thrown into the position as the occupational health program grew. It also is possible that your program has grown so much that your salesperson is too busy servicing existing customers to aggressively solicit new ones. That's not the case in most programs, but if you find that is the problem, it's time to hire another sales professional.

Remember that the sales staff must be good, but they also must be prolific. Doing an excellent sales job with just a few clients won't do you much good. "Quality is good, but without the quantity balance you're just not going to get enough volume in your clinic," Casciato says.

(Editor's note: Do you have a question you would like to see answered in an upcoming issue? Please use the reader question form enclosed in this issue to send us your questions.) ■