

## Recession Proofing your practice - ref255

### Steven Bruce

Good afternoon. Welcome to the Academy of Physical Medicine another lunchtime learning 45 minutes of CPD more business orientated today than many of our shows, of course, but possibly very appropriate given that we've just learned who the new leader of the Conservative Party is shortly to be our prime minister. And of course, we are facing a very uncertain economic future. So I have got the wonderful Julie Woodhouse back in the studio with me today, so that we can talk about how to recession proof your business. Julie, thank you for coming up. My pleasure. Does rush up here from one of your Q and A's this morning, I gather that you brought cupcakes, which was

### Gilly Woodhouse

fantastic. Yes, I'd bring you a treat.

### Steven Bruce

It is very uncertain out there, isn't it at the moment. I mean, people are talking about energy bills trebling, we're talking about prices of virtually every commodity going up. I suspect that there are a lot of practitioners, very uncertain about how they're going to heat their practices little in their homes during the winter period, how they're going to keep patients coming through the door when patients are worried about their finances, and so on. What are we going to do about it?

### Gilly Woodhouse

Well, I think we've got to keep positive, despite all the bad news, which is easier said than done. But you and I have been round the recession block a few times.

### Steven Bruce

And I've been around the block a few times. I'm not sure.

### Gilly Woodhouse

I know. You're younger than me, but. But we know that it's cyclical. And we know that things always get better again.

### Steven Bruce

This is one of the worst we've had. I think, not it's not one of the worst yet. But it's I think people are worried that it'll be one of the worst we've had because it's it's unusual, isn't it? We've got a war going on in Europe, which is seriously affecting so much. And people I think are nervous that this isn't just like any other recession, this is this is going to be slightly worse, which of course could be completely unfounded. It, it could be that we'd all passes off relatively, I want to say unnoticed, but without too much pain.

**Gilly Woodhouse**

Yeah. But I think just trying to keep positive outlook Throughout it all, and keep our eyes on where opportunities are. Because I think in every recession, there's always opportunities for for growth, or for something new. And it's just keeping an eye on that. Listening to what people are talking about, and just thinking what else can we do that would support them?

**Steven Bruce**

So what are what are sort of problems that you think are going to arise that people are worried about? Facing realistically or otherwise?

**Gilly Woodhouse**

Yeah. Well, there is that increasing costs, that is going to be worrying people. And I think that's where we need to start. Now looking at all of our costs in our business, where can we save some money without damaging the business? I think that's, that's the critical bit. I certainly encourage clients to go through their statements every quarter, and say, Is this cost here? Absolutely critical to my business, or can it go and be forensic about going through all of those things,

**Steven Bruce**

too. It's one of those things which it sounds like a statement of the blindingly obvious, but I don't know about other practice. She knows but it's one thing I hate doing is going through bank statements. You know, I just fortunately I've got a very conscientious wife, and a very, very scrupulous bookkeeper. And both of them sort of go through this and asked me what the hell I'm spending money on at the end of every month, not quarter Oh, yeah. But there's some some things here that we can't change on their way we're going to have, we are going to have bigger energy, but it was at the end of the year, and in the next quarter, and so on. Regardless of whether our next prime minister decides to freeze energy prices or not, I think they are going to be higher. And there's not much we can do about that is that so what I mean, you've got you've got a list of things here, which are common recession problems. run us through those, what is it that you're one of these other problems? And how are we going to fix it?

**Gilly Woodhouse**

So not being proactive, so not not being open minded to what's going on and seeing what we can do? Because we can get stuck in a cycle of what we can't do or what, what's bad and what's going wrong? I think if we can try to step above that, and just go where am I opportunities? Where can I make a better difference than I'm already doing? What else can I do? What else do people need? You? You probably

**Steven Bruce**

you deal with? Obviously, I didn't introduce you properly. I just assume everybody knows you. Julie Woodhouse says I mean, you run osteo. Biz, which is designed around helping osteopaths to promote their practice. But of course, you also worked with chiropractors because the business is virtually identical. Yeah. Generally, yeah. But I wouldn't say that you

probably deal with a fairly select audience, don't you? Because you're already dealing with people who want to promote their businesses and make their businesses get better. Do you get a sense that there are people out there who perhaps are saying, Oh, my God, it's all doom and gloom, and they will sit back and let the doom and gloom happen?

**Gilly Woodhouse**

Yeah. Yeah, I think that that's highly likely to be happening. Yeah.

**Steven Bruce**

Because it's easier, easier said than done to be proactive, isn't it? Because they'll be sitting there thinking, Well, what can I do? I can't do anything about the energy prices, you know, and certainly, I suppose you can close the door more often to stop the hot air going out and things like that. But you know, there's a there's a limited amount you can do to save costs on energy. Yeah. And in order to pay the energy bills, you've got to fill your books with with customers. Now, if you if your books already full, I guess, then your choices are limited as well. You can only increase prices. Yeah.

**Gilly Woodhouse**

And that's certainly something that I'm recommending right now. Because I think if you try to raise your prices, in the bottom of a recession, you'll struggle. That's when things you know, potentially going to be biting hardest. So

**Steven Bruce**

how do you sell that to customers? I'm using the word customers, because I'm thinking this is a simple business equation. I know that we have patients, not customers, but how do you sell it to them? Because when they think oh my god, this is really insensitive of you when you know that we're all struggling, that you're now increasing your prices?

**Gilly Woodhouse**

Well, we don't know that they're all struggling. But everyone's going to be paying a bit more act, yes. But equally, it's still difficult to get in to the national health care in this country. And so as long as the marketing's good, and people understand they can get seen and they can get better for probably less than 200 Odd quid, yes, then it's a bargain.

**Steven Bruce**

But that point you just made, I think it's quite important we there's a real tendency for us to assume every regardless of the recession is always a set tendency to assume that if we increase prices, patients, customers are going to resent that and say, Why are you doing this? But of course, every business increases process. And it's not necessarily the case that all our patients are going to say, well, that's rude. That's insensitive, we can do it. And can you make exceptions for some people who are struggling?

**Gilly Woodhouse**

Yes, you can on an individual basis. If you know, Mr. Smith, struggling, you can say, look, it stays the same for you. But you know, I always bring it back to look at the cost of the tattoos on their arms, or the handbag dangling off their arm. And you know, people do still have money, and they're choosing where they spend it. And if they want to get out of pain, then the quickest option is to come and see you guys.

**Steven Bruce**

I think. I'm not sure if it was during the last recession, or sometimes similar to that. But I do remember talking to somebody who analysed your cupcakes and making me cough. You'd analyse people's spending practices, and they'd found that people were still spending on domestic luxuries on things that made them feel better, even though other things perhaps what people might regard as more sensible things were having to bear the brunt of the financial difficulties. And so I suppose you've got to convince them that your health care is as important as your nails or your tattoo or your handbag, or Yeah, I'm trying to think of the male equivalent, always things like that.

**Gilly Woodhouse**

Yeah, it's very true. And I've put up clients prices with obviously with them many, many hundreds of times Now over almost a decade, and no one has ever come back to me and said their patients had a fit. No one, it's always the fear that the patients are going to leave. You know, or they're going to be more expensive than the guy down the road. But actually differentiating your price is the best thing you can do. Because otherwise, what differentiates things perhaps a little bit more than everyone else around you. So someone came to me the other day and said, Everyone around here is charging 40 or 45 quid, so I'm stuck. And I said, well, not necessarily. You don't have to do what they're doing. Because otherwise we have a race to the bottom. And then

**Steven Bruce**

one of your things on here about recession problems is reducing fees, isn't it? Yeah. Trying to be nice to your patients. Yeah. Which might actually be a kick in your own teeth. Exactly.

**Gilly Woodhouse**

You've got to you've got to think you must provide a good income for your family. That's what you're in business for.

**Steven Bruce**

We've had it we've had a couple of comments come in here Carmel has says that. In her practice, they negotiated or renegotiated their utility bills, increased rates by 10%. And I think she means fees. They're invested in an infrared heater, and they buy in bulk from Costco now now for the winter. So clearly thinking ahead. Yeah. Which is good thinking on car mills. Yeah. And is it one example of how perhaps we can try and build a little bit of a cushion in, isn't it? I'd like to know how well he got on with renegotiating their utility bills and how open the companies are to renegotiating but perhaps Perhaps you can come back and give us some more information. Nick says He wonders if more osteopaths or chiropractors Of course, joined forces, it will be a good time or allied healthcare practitioners for that matter. I'm not sure what we gain from it. How can I help Joining Forces? How will that help us with the recession? Do

**Gilly Woodhouse**

you think? Well, it saves on costs because everybody's got, you know, one room to room practice or something? And then there's lots of costs involved. So if you've got a bigger place, and you're all operating out of it, but then, but then who's going to run it? And

**Steven Bruce**

yeah, where do you find the bigger place? Because that means moving away from wherever you are now and finding that bigger place? Yeah. And yeah, so, Nick, I mean, come back in with some ideas. A few more on that. Because, yeah, it's certainly something which is, is an interesting one. And personally, I think as you know, Julie, I'm all over the idea of osteopath,

particularly osteopaths and chiropractors cooperating more closely because I think there are more commonalities, and there are differences between our professions. But okay, so what else we got on here spot new trends. You've got his one of your bullet points on your slide, actually.

**Gilly Woodhouse**

Yeah, well, they've said they're failing to diversify or spot new trends in not listening to what's going on locally. If there's, I don't know if there's a new building project coming along, can you get in there and see about looking after their team you know, just keeping your ear to the ground really and saying, what else is going on? Reminds me

**Steven Bruce**

I took for the first time I haven't used Wellingborough station, which is near is one of the two stations near here for a very long time. But I took a taxi there the other day. And I drove through this enormous enormous housing estate which I had never seen before. And I just thought to myself, well, there's an opportunity there going begging because as these places aren't built, get the get the flyers out to the houses and just introduce yourselves to people. These are people who are buying reasonably expensive houses, they probably got some money to spare they may well be benefit from our services, you know, and it's not like we're trying to milk them with money. We're offering a service which they didn't know about, they won't use that's what he's looking for things like that.

**Gilly Woodhouse**

Yeah, and I'm not generally a fan of leafleting because it tends not to work, but in that kind of case, I think it's worth doing because you're getting through the letterboxes.

**Steven Bruce**

I think leafleting as mixed reviews doesn't do particularly if your leaflet goes out as a big handful of other leaflets that the postman is delivering all at once.

**Gilly Woodhouse**

In a more built up area, like I'm in West London, I just pick up 15 bits of paper off the map, put it straight in the recycling bin, because if I want something I'll go and Google it or ask a friend so I you know, I don't know who these people are on my doormat, but I'm not interested but in smaller communities where I like where I come from in Shropshire. They're very small rural communities where you might only get one leaflet a week, in which case you might say I'll keep it in the drawer, you know, but

**Steven Bruce**

Well, we could we could I think we have done a whole broadcast in the past on just on leafleting and then the science of getting leafleting right, but I certainly as you said there I mean the key is not to be the in the middle of a big pile of leaflets which means paying extra to have them delivered separately. But also there are ways to make your leaflet stand out. But the other key thing is to not make it look like everybody else's leaflet is yeah and you know you're you're offering somebody a solution to a problem. than they need to see that's what the leaflet is about. We, on the other hand in my clinic have also produced a newsletter, which you could call a leaflet because it gets shoved through all their doors, but it's a you call it is a H, a three folded in half. So it's four sides of a4. Is that right? Yeah. Yeah. Yeah, four times before. And it's, it's got comedy in it. It's got articles in it. It's got a bit of a relatively small amount about the clinic. But it's the sort of thing that people will pick up and read because they're stuffing it, which is interesting. Yeah. And yes, it costs a bit more

money, but it's all about the return on the investment. But I'm going down a rabbit hole about leaflets here. But it is one of those things that one can do to identify the trends and so on. What about other forms of marketing? Is it stopping marketing is one of the things you said is a problem for people in recessions? Because they assume they've got no money.

**Gilly Woodhouse**

Yeah. So that people can sort of draw their horns in a bed and not do any marketing.

**Steven Bruce**

Which is an opportunity, isn't it? Because of everyone else's stopping marketing? Yeah. And

**Gilly Woodhouse**

then you keep your foot down, and go for it. Absolutely. And I remember back in the early 90s, recession, I was working in the West End in London in commercial property, and some of the big boys just cut their marketing team out completely. And even back then was a bit younger. I was thinking, why would you do that? That's, that's the lifeblood coming in. And they just cut it out. And then guess what hostile takeover then that was the end of them. Yeah. So when

**Steven Bruce**

it's sometimes hard, I think, for non marketers to appreciate that we all have to do marketing. We tend to assume marketing is an evil word. A bad word. Don't wait. Without marketing. I've seen some form you can't sell. Um, yes, I know, word of mouth is a good one. But there are other ways as well. We had an update from Carmel. She says they renegotiated in May an 18 month contract at fixed rates. And yeah, so that's, that's what Carmel did about her utility bills. And then something here from Nick, Nick was talking about spreading the cost and having co clinic principals etc. To spread stress, which is interesting. Combining to have one super clinic rather than multiple smaller rooms in gyms like he used to have, which what you get is a lot of money. Just a thought help those who are struggling, struggling with smaller clinics wouldn't suit everyone. He says that's fair enough. So some good ideas that are for, for joining forces with other people. And Phil says he put his prices prices higher than everyone else. And his patient numbers increased quicker a guy and has case setting, if you put your prices up and you lose a few patients, you probably don't lose any overall income, you've got more spare time as well. Yeah.

**Gilly Woodhouse**

And they'll they will find somewhere that's cheaper, if that's what they're looking for. I was giving the example of myself and the old boy. If I went into a hairdressers with him, I would pay for the top stylists, because my hair is important to me. And I'm willing to invest in what I perceive with me. Absolutely. I can see you spend a lot of money on that. But I perceive them to be better. I've got no actual evidence if they're any better. But the old boy would be paying five quid to the boy who sweeps up the hair to get back on his five quid. And he's had to get it. He's had a deal. And he likes a bargain. Well, you don't want him as a patient. Frankly, if he's not watching. You don't want him as a patient because he's not willing to invest in his health and in your services,

**Steven Bruce**

rather like those Groupon patients. I mean, Groupon, they're people who are just hunting for a bargain, okay, from practice to practice to practice because they think they're getting a deal, but they're not getting good health care. We're trying to sell. So all one says, putting her prices up significantly this week. And all women would rather be quality over quantity, as

she's tired of attracting shoppers of the best price and kind of what we were just saying, Don't you and if you know this, Dave has asked, is there any information out there about average prices charged by osteopaths and chiropractors obviously, it'd be region specific.

### **Gilly Woodhouse**

I might Yeah, just in my experience it it's often around the 4550 quid mark and I'm always London price or is that general generally all around seems to be around those 4550 people seem to feel that comfortable. I feel it's low. I do like to get them put up and you know, some we don't significantly increase them in one go. We do it in phases, but no one ever leaves and no one ever complains. And often patients say Bout time to you're too cheap.

### **Steven Bruce**

Yeah, yeah. Interesting. I'm just reminded as we're talking about that, I have a patient we had here recently who came in for IDD therapy, which is that spinal decompression thing we Got, and you've come from another practitioner as well, because we're closer. And I had a chat with the other practitioner and I was told this guy is always going to be after a deal. And fair and true enough, he saw two of the machine operators and both of the times it was how much you're going to knock off. And he was arguing for three quid off the price. And what if a petition was almost tempted to say what is the three grade but in the end, they had to say they had no control over our prices. It was it was set by the principal. And if I'd actually met the guy myself, I just had to explain to him, you know, that, you know, we're not an East End Barrow market. This is this is high quality health care, and the price is what the price is we don't do haggling. I hope that I hope there are a lot of practitioners out there who recognise that we're not in the business of haggling. We shouldn't be doing that at all. Because those patients are always gonna be the difficult ones as you right? Yes. Yeah. Yeah. When you said failing to invest on your list here, what is it you're thinking about investing in because I suspect there's an awful lot of people pulling in horns at the moment and saying that I really can't afford new equipment, redecoration, or whatever it might be. Yeah,

### **Gilly Woodhouse**

I think it's still important to invest somewhat if like, if they need help with developing their business, then get help from someone like me. So that it can be done more efficiently. I know what works and what doesn't work. And I can put things in place in no time to change things up for the better. And I think sometimes people will hang fire, or they won't get online booking or something because they think, Oh, it's a cost. But it isn't actually it is an investment. And you know, the payback is huge, but sort of understanding that you still need to be investing in your business, to make sure that continues to grow. Last thing you want it to do, we start shrinking, because as we come out of recession, then you've got to put your foot to the floor to try and catch up. Whereas the other guy who's been investing and been improving his practice and his efficiency and everything else. He's already way ahead. Yeah.

### **Steven Bruce**

It's always the thorny subject, that business of online bookings, online notes, and so on, as it took us a while to go to online bookings in my clinic and longer to go to online notes. But there's more than just the financial saving, there's the saving in your time, and the saving in your stress. And you know, I still, I still have nightmares about all those bloody filing cabinets full of bits of paper and filing phone covers that are falling apart, and so on, and the security of the information and all that sort of stuff. Whereas you know, the online stuff is so much easier. It takes a whole level of stress away.

### **Gilly Woodhouse**

It's unbelievable. And I've got I've got some clients that have 40 years in practice, and have gone, oh, God, why don't really want to do that. And I'm like, Really, it's life changing. And they're like, oh, I don't really want to do it. I don't I'm not very good with tech. And it's like, okay, we can help you with that. We'll show you how it all works. Don't worry, we'll set it all up for you. And then they come back to me and go. Why did I take so long to do this? It's absolutely fantastic.

**Steven Bruce**

And patients love it as well. Yes, they

**Gilly Woodhouse**

do. And my big thing for this is, I'm always worried about Bob at 3am. And if Bob can't get booked on get some help at 3am When he's in agony, and he's on his phone in his bed. You've lost him. Yeah, he needs to be able to book in

**Steven Bruce**

and have that confidence. And he's got an appointment. Yeah. Because he could probably make an appoint just as easily the first thing in the morning, but he wants to know that now because that will help. Yeah, just knowing and that's

**Gilly Woodhouse**

in the moment when he really needs it in the morning. He might say, Oh, well, it's it's a bit better this morning and still not take action. So you've got to catch him strike while the iron is hot.

**Steven Bruce**

Mics come back in about osteopath pricing, and says that the Institute of osteopathy did a comprehensive price guide. I'd have a look at that because I wasn't aware that they've done it and if people are a member of the IO they could look it up but of course I presume it must again must be region specific because there will be variations. Carmel agrees that Groupon and wowcher which I've never heard of are races to the bottom in terms of pricing and probably quality of services. And Elvis Presley is in the room it seems this is someone who their system has named Elvis Presley I imagine one thing we've done in Elvis is practice is to eliminate much of the paper they use no couch roll excellent rubber couch covers advertised on a pm Thank you eliminated the need which are now White between patients and minimise paper hand towels because the price of paper shot up here i i Back him up on that because until COVID struck Of course we had the little fluffy couch covers it had to be washed frequently. And even back then I was thinking how can we really say this is sanitary having a hygienic having these these couch covers on for a day's worth of patients or whatever because no matter how much you put the paper stuff on top it's still what it tears bit and it's still a bit soggy and sweaty and all the rest of it. And these new covers the the clinic armour ones that we're using now. They're just wonderful. They feel okay to the patients. They're easy to clean between patients, and a very sturdy and long lasting. So always thank you for advertising that. Yes,

**Gilly Woodhouse**

I saw that online. They looked marvellous. Yeah. Well,

**Steven Bruce**

there's one on the table over there. We can have a look at the minute if you want to recommend it to anybody. Sophie says they've increased their fees to 65 pounds for new

patients and 55 patients to ongoing patients a month ago. No one's complained. Most people commented I have to do as ever. She has to do this as everything else is going up. And she's based in Surrey. I get reassurance, isn't it? It's okay to increase prices. Yeah. Oh, and he's one of our fliers Carmel says she has printed 10,000 Double Sided flyers well done for doing double sided carmelle. Because so many people leave one side blank, which is a complete waste of the paper. And it doesn't cost any more to do two sides really shared the cost of the local audiologists, 5050 for printing dropped costs. She also has an A frame board outside to increase attention and printed five a three posters and paid local high street shops to put them in their windows. course the key thing Carmel. Could you give us some indication of the response? You've got to those? Are you able to tell us what the return on the investment was? You know, how much do you get back in as a result of them against the costs for the flyers? Because 10,000 flyers, even if you're only paying 50% of the cost is still it's a significant sum of money and Commonwealth pointed out something here which she says you know, plumbers charge 7070 quid an hour plus. Which puts it in perspective, doesn't it? You know, whether you were the one regards oneself as being more important than a plumber or less important than a plumber, it gives you a good indication of how much people pay for

**Gilly Woodhouse**

an amazing skill that you need to pay for because you can't you can't fix those things, those things yourself.

**Steven Bruce**

Yeah, the trouble with what we do, of course, is people say, Well, it's a back pain, it'll go away, I knew I'll put up with it for a bit longer. Whereas if your radiators leaking, you kind of need somebody. Right? So there's an urgency about plumbers, which people sometimes ignore in their own health care. We've gone through your list there and you any more sort of thoughts on how we do this? And what are the cheapest ways for us to market our our services? Always, I suppose I say cost effective cost effective?

**Gilly Woodhouse**

Well, you know, I'm a big fan of social media, which makes most people inwardly wince. And that wouldn't be my good, yes. But it's free. It's free, and it works. And

**Steven Bruce**

there's a lot of people that

**Gilly Woodhouse**

yes, it does. And a lot of people that come to me are like, Oh, no. And then when I go through with them, what we're trying to do and how we do a target people, not just Hello, everybody, I can help anyone with anything that isn't going to work. We target people who, specifically groups, or age groups, or sports or whatever it is. And being consistent and persistent. And listening, I'm always saying listen in clinic, because they're giving you their symptoms, and then they're also giving you complaints. And if you listen to the complaints, they're in as you're marketing, flip that around, speak it back out, can't pick up the grandchildren anymore, had to give up golf.

**Steven Bruce**

I actually wrote a letter to a GP today about one of our patients and and it struck me and it struck me because Gus has just written in saying he's thinking about putting his fees up from 50 to 55 quid for 14 minutes appointment. Well, I was just thinking you shut down these ages

ago guessing this is what you will say and everyone, everyone else will say, because the cost of gas and electricity are going crazy when he finishes his contract, which is fair enough. But the patient I was talking about, she told me that because of the continuing pain she's in which I'll admit we haven't been able to fix. She's had to reduce her working hours by about a day a week. So he's gone from five to four. Well, actually, there are patients out there are people out there who could become patients who will benefit from spending the money on osteopathy and chiropractic and physiotherapy and so on, because it means they can go back to work. And that's probably much more important to them, then the 300 quid or whatever it is, because being able to work, he's going to pay their bills.

**Gilly Woodhouse**

And that's the that's where your marketing is important getting that point across to them because they probably don't understand. Well, number one, they don't understand really what you do anyway. So that's a given. We have to keep banging on about that. But they don't understand that they couldn't be brought back to health in in a few sessions.

**Steven Bruce**

And you talked about picking up grandchildren. What are the other sort of common themes that you use in social media for promoting osteopathy, chiropractic,

**Gilly Woodhouse**

things like mum thinks she's doing it all wrong baby's crying and she's getting no sleep. So talking about that kind of thing.

**Steven Bruce**

It's a tough one though, isn't it? Yeah. Stay within the rules on advertising that

**Gilly Woodhouse**

dance around that one a bit. Um, and

**Steven Bruce**

you know, we should point out something I'm sorry to interrupt you, Julie, but you have a very, very strong connection with cranial sacral therapy or sacral occipital therapy, as chiropractors would call it, don't you because your own son benefited hugely from it. So, yeah, that's, I think that's the basis of your connection with osteoporosis.

**Gilly Woodhouse**

Yes. Where, yeah, where it all started? Yeah, because he was waiting for a heart transplant. And they wanted to try and get him into puberty so that he could take a small woman's heart potentially, because he was very small. And they said, you know, if we can by a few months or a year, that will be amazing before he needs the transplant, if we can keep him stable. So I started taking him to my friend who was an osteo. Owner, she did her her magic on him. And he started cycling to school and back with with severe cardiomyopathy. And

**Steven Bruce**

so I just threw that in, because you were talking about treating babies. And we're very restricted in what we can say about cranial therapies. But one of your one of your things that you're keeping, but

**Gilly Woodhouse**

another one would be sports injuries, that's one of the most common searches on Google. Yeah.

**Steven Bruce**

When people are marketing their services for sports injuries, would you suggest that they just say, worst effective we treat sports injuries? Or would you say, you've got to be much more specific imagery and words that reflect? I don't know, calf strains? Achilles tears?

**Gilly Woodhouse**

Yeah, yeah, you can go more specific like that, or you can tap into their competitive nature, you know, do they want to beat their PBS? Or do they want to win more often at golf, because they're moving more freely, because they can hit the ball further then or, you know, or just saying, Do not, you don't want to get stuck on the benches on a Saturday when your mates are out on the field because of an injury. Let's get you better and back on the field kind of message. So those things, it's it's drip, drip, drip, drip, drip in whatever niche you're talking to, but it gets through to them in something you say one day, will make someone take an action and booking.

**Steven Bruce**

We've been more feedback from Carmel here, which actually, I mean, this is Carmel calm, only helpful today. She's very helpful, but she clearly knows what she's doing as well, which I kind of thought she probably did from from the first message. There's a lot of people could take some messages from some lessons home from this, because she said, The leaflets cost her 220 quid for distribution. Sorry, cost 220 quid distribution was 150 quid, and she got 19 bookings in the first three weeks. And the lifetime value of one client, which is something people don't often think about is maybe 1000 pounds, you know, because that's what you got to think about. For every new patient who comes how long will they stay in the practice? And how much will they bring in overall? Yeah, and it is hard to work out where you can get a good feel from it by looking back over previous records or so on, but 1000 pounds book for clients, so that's 19,000 quid for a 500 quid investment, you know, pretty damn good. Flyers work in that case. Yeah. But the most important thing from that is, is to know those numbers, isn't it? Because you said, you know that flyers don't always work. They work in certain circumstances, but you've got to measure it.

**Gilly Woodhouse**

The amount of people have said to me, I've done flyers, I didn't get a single patient, or I've got 5000 leaflets under my bed.

**Steven Bruce**

I'm not gonna get any patients that way.

**Gilly Woodhouse**

They're not crawling around.

**Steven Bruce**

Yeah, and there are ways to measure the the feedback from fliers because of course, a lot of people will just put them out with their normal clinic number on them. And so how will they know they've come from a flyer? They might ask them, but yeah, there are there are ways to do this tracking numbers and so on. Yeah. And Kelly has Kelly has asked about the frame that was mentioned earlier on, she says, do we need permission to put in a frame outside our practice? What do you think?

**Gilly Woodhouse**

Oh, that's a difficult one, because it probably depends on your local council if sometimes they don't allow them.

**Steven Bruce**

Well, let me put this to you. If you put an A frame outside your practice and the local council doesn't like it, what will happen? They will tell you and what do you do? You take it you take it I say my advice will be bloody we'll do it. And if anyone complains, we'll stop doing it. But then they're not going to strike you off the register they're not going to find you this isn't so you're not allowed to do this without permission say oh my words.

**Gilly Woodhouse**

I've no idea. Yes, yeah, I agree with you. But

**Steven Bruce**

with a phrase with with movable signage unless it's a serious obstacle to people moving on the pavement you probably can get away with Yeah,

**Gilly Woodhouse**

I mean, you would use your common sense where you put it but of course most people are walking with their heads down. So that is the best

**Steven Bruce**

of pavement chalk artists. Sue says I didn't put my prices up last year because I did the year before and we're scared to put them up every year? There's no means I could do putting them up by five quid. Yeah. Is it better to put it up by five foot five quid in one go or go for three pounds and two pounds within a few months between

**Gilly Woodhouse**

five quid or don't muck about a cup of coffee. Yeah. And also, there's also an issue with people thinking they can only put them up once a year. Where's where's that rule written down? If you want to put them up in six months time again, another fiver. Do it. Well, Sue

**Steven Bruce**

was saying she put them up last year. So it's not even that is once a year, isn't it? Which is which is fine.

**Gilly Woodhouse**

I think she said you didn't put them up last year, didn't she? She put

**Steven Bruce**

them up last year. Oh, no, you're right. You're right. She didn't do it last year, because you don't the

**Gilly Woodhouse**

profit margin is is going to be diminishing like that. And we need to get it going back. So yeah, I would say put them up. Now, FiVER, no one will complain at all you're worth it. And then in six months, or even five or six, put them up again. Remember,

**Steven Bruce**

use the scope or mileage or value in putting them up only for new patients? Or does that just complicate things too much?

**Gilly Woodhouse**

I think they both need to go up. And and this is something that I say all the time and pick most people go oh, yeah. New patients don't know what the fee was before. Yeah, so if you put that up 20 quid, sharp intake of breath out there. No one knows what it was before.

**Steven Bruce**

It is that, you know, we we as a professional, I can only speak as an osteopath, of course. But I sense that it's the same with a lot of chiropractors we are. So we undervalue ourselves to such an extent that we're frightened about even even charging the same amount as the local plumber does. Yeah. And what we do is every bit as bad, we will I'm not dismissing plumbers for a moment, but I've seen

**Gilly Woodhouse**

some practitioners charging more for massage than they do for osteopathy. Interesting, like, no, no, no, no.

**Steven Bruce**

Yeah. What's the effect of that? Do you think in the mind of the potential patient?

**Gilly Woodhouse**

Yeah, that it's going to devalue? What what that treatment could do for them. As close it's diagnostic and everything else, not just a nice rubbed down with some sweet smelling oil. Yeah, obviously.

**Steven Bruce**

James says I'm very concerned, he hasn't made a profit in three months. Now we've seen a drop in patient numbers like no other in 15 years with associates and we're short staffed. The price increase has not been as effective. The percentage split model has really come to bite him in the ass. Now he says. Interesting. I'm not I'm not sure why the percentage split would would come to bite him because as income

**Gilly Woodhouse**

gets too high, why are we getting sent to the associate your you've only got a small amount to play with for your costs. But it seems to me that the marketing's missing out. I don't know how much he's doing. But marketing is really vital. Like I'm saying more more marketing more.

**Steven Bruce**

And again, I think a lot of people I don't James I don't know where James is what marketing James does. And I don't know how familiar he is with the normal online marketing tools. But do people feel very nervous about doing Facebook ads or on our Facebook ads? The answer or is it got to be tick tock or whatever the other things

**Gilly Woodhouse**

I don't advocate doing ads? No, I think the methods that I've worked out over the years worked really, really well. People go from not many patients to being fully booked week on

week on week and as soon as they get a bit slack on their marketing. They noticed it dropping and then then they're like sorry Julie, I didn't do any. So

**Steven Bruce**

how do you reach a wide audience don't you we're gonna give away all the secrets of what you do for a living but how do you reach a wider audience if you're not using ADS because presumably you can only send posts to people who are already in your your group like your page and Facebook controls who sees posts a bit these days doesn't it so not everybody will get those posts.

**Gilly Woodhouse**

So what lots of different tactics for that but yeah, you can you can reach into community groups and all sorts of things to get that post in front of more eyes. You know, I've just done a Facebook five day Facebook challenge which I do periodically, just to free thing and it's surprising what one girl up in Anglesey got her post one of her posts in front of 14,000 people. I think there's more sheep than people in Anglesey so I was quite surprised. I'm

**Steven Bruce**

sure it was people not cheaper. So the only treatment Dave says I'm still doing follow ups at 50 quid for 30 minutes and it looks too low. Now He's based in London. Yes. We've read Elvis Presley. Now we've got cliff, Richard. Oh, Cliff, Cliff says, How does Julie feel about asking for deposits at the point of booking either, particularly online, but also on telephone, particularly for new patients?

**Gilly Woodhouse**

I think I wouldn't bother taking a deposit, I would take the whole thing. So the and this is the complete opposite of my advice. BC, before COVID. When I used to say I think it's off putting down to pay up book and pay. But now you can't even get a pizza delivered without booking and paying for it before it's even made made for you. So we've all been retrained in the last couple of years. So book and pay works perfectly.

**Steven Bruce**

And it is one of the marvellous marvellous things about online booking systems, isn't it that there's no human intervention? It's just you gets a bit that says pay? No. And you do okay. It is I can understand people feeling more awkward about it when it's a telephone call, and you're having to say pay, but actually patients don't mind do they expect it?

**Gilly Woodhouse**

Well, it just saves them time when they come into the clinic. So when they're done, and the nice thing is, you know, it's often the bit at the end of the appointment that practitioners find a bit uncomfortable. Well, that takes that away. It's already done.

**Steven Bruce**

Somebody who the system is calling EarthBox says that Google perving, right. He says Google and Facebook bring him 66% of his business. Pretty good. Yeah. Because there will be loose people in the audience who will say no, it's all word of mouth. It's the only thing that matters. But actually any particularly it's free marketing that you can do through the other system that can't detract from your business. And online,

**Gilly Woodhouse**

word of mouth is like high speed, word of mouth, it works even better. You know, that people in the corner shop because there aren't many corner shops anymore. So yeah.

**Steven Bruce**

As you said everyone's walking around, face down. They're all online. Every minute of the day. Carmel says additional reviews. If you've really active today isn't you think you call me up? She's saying additional revenues coming in from infrared laser therapy treatments for sports, infrared and laser therapy treatments for sports injuries. Yeah. So there is a potential investment there. And there are ways even to get subsidies for those. Those types of therapy if you're if you're really switched on. Yeah. I don't know I can go into that because Claire, my wife is far more expert than I am about how you raise money for these things. But the the sometimes you don't have to pay up front or you don't have to pay all of the cost or whatever. And of course, people look for those things, don't they sportsmen are looking sports when as well, for infrared or they're looking for laser because they think that's the answer to what probably

**Gilly Woodhouse**

their mates are talking about. They've had some treatment and it's worked. So yeah, that Yeah, that could work very, very well. And it's great for your hands. Absolutely not doing quite so much hands on Rob Xiang

**Steven Bruce**

speaks, you know, I value very highly as a as a as a osteopathic business advisor in London. He's got a couple of IDD machines in his practice, but he's also got a tech arm machine. And he says he rates that as being even better than any of these other machines for for the healing process. And not least he says, because actually warms you up as well. And people value being able to feel something happening which with laser, you don't always feel so James says as a business owner, I've always found it easiest to get glowing reviews from his patients with a bit of reminding, but I've always struggled to find a way to incentivize associates to get reviews from their patients, any good ideas.

**Gilly Woodhouse**

Make it a competition. Loser buys all the coffee's. Well, whatever it can be. It could be as small as that or it could be. Loser buys dinner.

**Steven Bruce**

A common. A common theme that I've heard from from people in doing this is that they find it very hard to get associates actually involved with the business. Yeah, on the one hand, many principals will say, well, it associates resent paying a commission to their principals. But at the same time, they didn't do anything themselves to bring in any business. And it's a common problem. It is a common problem. Yeah. Angela McCall. Knee right knee winter says she's happy to do social media. But I've never had much inspiration on regular topics. Are there any resources that provide regular subjects and information or texts that we can use on a regular basis? So this doesn't take hours of time? I like questions made for you, Julius. Well, I

**Gilly Woodhouse**

would have to send you to my shop Angela because I've got social EDI solutions. We make it. It's made by an osteopath, all the content for a whole month, tenner a month. Job done post over a month. Yeah, posted out there.

**Steven Bruce**

So if there's anybody worried about their marketing costs and they can't afford a tenner a month, then I know they're committed for a long period of time. I only asked that. And I genuinely don't know the answer to this question. I didn't know the answer. I only ask it because then people will worry about being suckered in and things I don't know. But presumably, there are easy ways to measure whether they're getting more than their tenner back every month. From what they've done with you

**Gilly Woodhouse**

know, with jolly well hope so. is, you know, being created by a very creative osteopath. So the good messages and good for, you know, the general baseline stuff that you've got, I mean, I've got people I've got clients who are will take an hour or so out once a month, and shedule a whole month's worth of content done. And then they say, pops up like mushrooms, they go Oh, of his it post. It's very efficient.

**Steven Bruce**

I just, I suspect people out there a bit like me with a super work, I haven't got an hour to spare. Take an hour out which let's say let's say you're fully booked. So that hour is the cost of one or two patients. So maybe it's cost you 100 150 quid, but actually, if you spend that hour constructively designing or scheduling, scheduling posts, that you paid a tenner for 450 quid plus 10 160 quid a month, even though sheduled, all this stuff, and it brings in one patient with a lifetime value, even 500 quid, it's still a really good use of your time. And if the patient's lifetime value is flat as 1000 pounds, as Carmel has carefully worked out and he was calm, then that's a sum. That's very easy to do, isn't it? Yeah. Yeah. People don't people don't think about ROI, so much. Return on Investment, I should say, for those who are I got, I'm gonna run through these very quickly, because we're nearly out of time. PJ says how do you encourage patients to book online, we find that only a small proportion of patients book online, most want to book through reception?

**Gilly Woodhouse**

When you want to make sure they've got the link, do a QR code, if that makes it easier for them?

**Steven Bruce**

What do you think is the resistance that he might be feeling with this person? And why are they willing to book online

**Gilly Woodhouse**

from external easy is perhaps it's difficult for them to find the link? Yeah. And, and so it's easy. So as one of my esteemed clients says, Train your patients. So tell them you know, it's quicker and easier for you. If you follow this link, email them and give them the link. Make sure it's on your website. Easy. Make sure it's on your Facebook, not a Contact Us, like a call us make it a booking link. So they can find it and tell them where it is. Yeah, is retraining them really. But once they get it, then they're like, oh, great, because how many of us think at 11 o'clock at night are supposed to have rung so and so up to date and I forgot it's too late. And then you forget and you forget tomorrow so

**Steven Bruce**

I'm going to train patients notices when increasing fees. Would you tell clients in advance by email?

**Gilly Woodhouse**

Yeah, give them a month's notice. And so no, pop in before they increase if you need says

**Steven Bruce**

it's a good reason to send up another contact, isn't it? Yeah. Who's seen says any view on bloopers fees, which they pay to osteopaths or chiropractors. It's ridiculously low he's registered with them and they pay 40 quid towards consultation and 30 quid follow up treatment dump them. There's not much we can do about what bloopers

**Gilly Woodhouse**

that they're shocking.

**Steven Bruce**

Cromwell sent in another one, but sorry, Carmel haven't got time for yours because there's one here. This is from Claire and ident. Ignore the one from Claire. A feeling it's the Claire I know very well. She says we've recently done a major push with acupuncture and the practitioner who works with kids with Aspergers just regular posts on Facebook, all three. She has been amazed at the number of new patients we've had booking. I feel a bit silly that I didn't listen to Julie a few years ago when I might be a lot of people out there who should have been. And that gives me Oh, Eric told me it's so Camille commerce is most of our new patient business no comes from Google reviews. To which my practice manager responds personally, I found that people are now careful to research who they choose to treat them.

**Gilly Woodhouse**

Yeah. Yeah, I've just challenged my clients this week to to increase their number of Google reviews because it is important, because it's a decision we don't have to make then if there's 105 star reviews, and for 4.5 reviews, you're gonna go for the other one, you know, it's just we haven't we haven't got to make a decision that lots of people like this place aren't going there. What about this business of responding to reviews? Yeah, I think it's nice to respond. Just to say we're so glad you're here. better or Thanks for leaving? You're such a lovely reviews rapport and yeah, absolutely.

**Steven Bruce**

Last comment. Kelly says, I get reviews from my associates. And I pick it up as a question mark off that for some reason, I pick a few patients each month from each of her associate lists and asks for the reviews. And she doesn't see it as a huge problem to ask on their behalf. If you're a principal, there's every reason you might write to us and say, but I see you've seen one of my associates really pleased to know how they got on. Could you give us a review on Google? And yeah, there's a good reason to do that, from a patient's perspective, but certainly a good view from your business perspective isn't

**Gilly Woodhouse**

and here's a great tip on asking for reviews. Tell them that you want to help more people like them, because they'd be more likely to leave your review them because they know what they went through. Before they found you. If you say I'm trying to build my business, they don't

**Steven Bruce**

quite want to help people.

**Gilly Woodhouse**

Yeah, as we see more likely to get them.

**Steven Bruce**

Terms flashed by Julian's always done. So I've been told, I always get quite excited when you and I are talking here. Because you know, it's, I love these conversations. Yeah. And it's nice to talk about business building once in a while rather than than pure Healthcare Matters. Yeah. But I haven't been told off for interrupting you and talking too much myself. And actually, it was you're the you're the expert in all of this. I'm just trying to show off to you that I do know something. I guess. We have 405 people watching on top. So that's a good number of people watching, we should move this on. And we'll send this out afterwards. Not necessarily all of the slides. But which was not moving, though. Oh, I don't know why that. There we go. So oops, come back. So I will send this out later on. Because it's the link to your website and so on, isn't it? And if people are interested in you helping them out for a tenner, a month, or whatever it might be, I know you do much more in depth programmes and a tenner a month. But yeah, you're there to help them recession proof their businesses. Absolutely.

**Gilly Woodhouse**

Yeah, we're coming up to the last quarter of the year. So I think, a bit of a push now and it's going

**Steven Bruce**

to start getting cold towards the end of the year. So we need to need to think about it. But yeah, thank you, Jamie, thanks for coming in. Because it's very timely that we've got you in as people are getting more and more worried about businesses and

**Gilly Woodhouse**

it's important to do something now before you know it step is more difficult once you get down in there, that recession.

**Steven Bruce**

Certainly I can, I can definitely recommend from all the people I've spoken to about having worked with you and they do work with you. You're not just you know, they'll just paying for something and they get a download or whatever and help people very, yeah. So thank you again for coming in.