



Recession Proofing your practice - Ref255

with Gilly Woodhouse

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TRANSCRIPT

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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 Gilly Woodhouse back in the studio with me today, so that we can talk about how to recession proof your business. Gilly, thank you for coming up.

Gilly Woodhouse

My pleasure.

Steven Bruce

You had to rush up here from one of your Q and A's this morning, I gather, so, but you brought cupcakes, which was fantastic.

Gilly Woodhouse

Yes, I thought 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, let alone 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

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

Gilly Woodhouse

I know you're younger than me, 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, 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 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 going to be slightly worse, which of course could be completely unfounded. It could be that it all passes off relatively, I want to say unnoticed, but without too much pain.

Gilly Woodhouse

Yeah. But I think just trying to keep a positive outlook throughout it all, and keep our eyes on where opportunities are. Because I think in every recession, there's always opportunities 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 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 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

It's one of those things which it sounds like a statement of the blindingly obvious, but I don't know about other practitioners, but it's one thing I hate doing is going through bank statements. You know, fortunately I've got a very conscientious wife, and a very, very scrupulous bookkeeper. And both of them sort of go through this and ask me what the hell I'm spending money on at the end of every month, not quarter.

Gilly Woodhouse

Oh wow.

Steven Bruce

But there's some things here that we can't change, aren't there, we are going to have bigger energy bills 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 there, so, you've got a list of things here which are common recession problems. Run us through those, what are these other problems? And how are we going to fix it?

Gilly Woodhouse

So not being proactive, so 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's bad and what's going wrong. I think if we can try to step above that, and just go where are my opportunities? Where can I make a better difference than I'm already doing? What else can I do? What else do people need?

Steven Bruce

You probably deal with, obviously, I didn't introduce you properly, I just assume everybody knows you, Gilly Woodhouse, you run Osteo Biz, which is designed around helping osteopaths to promote their practice. But of course, you also work with chiropractors because the businesses are virtually identical.

Gilly Woodhouse

Yeah, clinics generally.

Steven Bruce

But I would 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's highly likely to be happening.

Steven Bruce

Because it's 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 limited amount you can do to save costs on energy. And in order to pay the energy bills, you've got to fill your books with customers. Now, if your book's already full, I guess, then your choices are limited as well. You can only increase prices, can't you?

Gilly Woodhouse

Yeah. 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 are potentially going to be biting hardest.

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 won't 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, 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, then it's a bargain.

Steven Bruce

But that point you just made, I think it's quite important, there's a real tendency for us to assume, regardless of the recession, there's always a 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 prices. And it's not necessarily the case that all our patients are going to say, well, that's rude. That's insensitive, we can't do it. Can you make exceptions for some people who are struggling?

Gilly Woodhouse

Yes, you can on an individual basis. If you know, Mr. Smith is 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'm not sure if it was during the last recession, or sometimes similar to that. But I do remember talking to somebody who analysed 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, I'm trying to think of the male equivalent, all these things like that.

Gilly Woodhouse

Yeah, it's very true. And I've put up clients' prices, 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, 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.

Steven Bruce

What do you mean by differentiating?

Gilly Woodhouse

Being 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.

Steven Bruce

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

Gilly Woodhouse

Exactly. 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 a couple of comments come in here, Carmel has said that in her practice, they negotiated or renegotiated their utility bills, increased rates by 10%. And I think she means fees there, invested in an infrared heater, and they buy in bulk from Costco now for the winter. So clearly thinking ahead, which is good thinking on Carmel's part. And 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 she got on with renegotiating their utility bills and how open the companies are to renegotiating but 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 would joining forces, how will that help us with the recession, do you think?

Gilly Woodhouse

Well, it saves on costs because everybody's got, you know, one room, two 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 who's going to run it?

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 so, Nick, I mean, come back in with some ideas if you've got some more on that. Because, yeah, it's certainly something which is an interesting one. And personally, I think as you know, Gilly, I'm all over the idea of osteopaths, particularly osteopaths and chiropractors cooperating more closely because I think there are more commonalities than there are differences between our professions. But, so, what else we got on here, spot new trends, you've got this one of your bullet points on your slide, Gilly.

Gilly Woodhouse

Yeah, well, so they're failing to diversify or spot new trends, 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?

Steven Bruce

It reminds me, actually, I took for the first time, I haven't used Wellingborough station, which 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 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 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 if they didn't know about, they won't use. So that's one, is 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 their letterboxes.

Steven Bruce

I think leafleting has mixed reviews, doesn't it, 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 don't know who

these people are on my doormat, but I'm not interested but in smaller communities 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.

Steven Bruce

I think we have done a whole broadcast in the past on just leafleting and then the science of getting leafleting right, but I certainly, as you said there, I mean the key is not to be 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, isn't it. You're offering somebody a solution to a problem and 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, it's A3 folded in half, so it's four sides of A4. Is that right?

Gilly Woodhouse

Yeah.

Steven Bruce

And it's, it's got comedy in it. It's got articles in it. It's got a relatively small amount about the clinic. But it's the sort of thing that people will pick up and read because there's stuff in it which is interesting. 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, 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 people can sort of draw their horns in a bit and not do any marketing.

Steven Bruce

Which is an opportunity, isn't it? Because of everyone else is stopping marketing and you keep on.

Gilly Woodhouse

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, I was a bit younger. I was thinking, why would you do that? 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.

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 we, but actually, without marketing I've seen some form you can't sell. And 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 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 with smaller clinics, wouldn't suit everyone he says, that's fair enough. So some good ideas there for joining forces with other people. And Phil says he put his prices higher than everyone else and his patient numbers increased quicker.

Gilly Woodhouse

There you go.

Steven Bruce

And as we said, 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.

Gilly Woodhouse

And they will find somewhere that's cheaper, if that's what they're looking for. I always give the example of myself and the old boy. If I went into a hairdresser with him, I would pay for the top stylist, because my hair is important to me. And I'm willing to invest in.

Steven Bruce

It's the same with me.

Gilly Woodhouse

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.

Steven Bruce

Just stick it back on.

Gilly Woodhouse

It's five quid. And 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

It's rather like those Groupon patients. I mean, Groupon, they're people who are just hunting for a bargain, they go from practice to practice to practice because they think they're getting a deal, but they're not getting good health care and that's what we're trying to sell. Owen says, putting her prices up significantly this week. And all women would rather be quality over quantity, and she's tired of attracting shoppers of the best price, kind of what we were just saying there. I don't know 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 I imagine.

Gilly Woodhouse

Yeah, just in my experience it's often around the 45, 50 quid mark.

Steven Bruce

Is that a London price or is that...?

Gilly Woodhouse

Generally, all around seems to be around those 45, 50, people seem to feel that's comfortable. I feel it's low. I do like to get them put up and you know, 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, about 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've got, and who'd 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 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 the practitioner was almost tempted to say, well, here's the three quid, but in the end, they had to say they had no control over our prices. It was set by the principal. And if I'd actually met the guy myself, I just had to explain to him, you know, we're not an East End Barrow market. This is high quality health care, and the price is what the price is, we don't do haggling. 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 rightly said there. 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, I really can't afford new equipment, redecoration, or whatever it might be.

Gilly Woodhouse

Yeah. I think it's still important to invest somewhat, 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, is 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.

Steven Bruce

Yeah. It's always a thorny subject, that business of online bookings, online notes, and so on, 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 have nightmares about all those bloody filing cabinets full of bits of paper and filing cupboards 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 some clients that have 40 years in practice, and have gone, oh I 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'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.

Gilly Woodhouse

Yes, they do. And my big thing for this is, I'm always worrying 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.

Gilly Woodhouse

And that's in the moment when he really needs it. In the morning he might say, oh, well, 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

Mike's 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' practice is to eliminate much of the paper they use, no couch roll, excellent rubber couch covers advertised on apm, thank you, he eliminated the need which are now wiped between patients and minimise paper hand towels because the price of paper shot up. I'd back him up on that because until COVID struck, of course we had the little fluffy couch covers that had to be washed frequently. And even back then I was thinking, how can we really say this is sanitary, hygienic having 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 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 are very sturdy and long lasting. So thank you for advertising that.

Gilly Woodhouse

I saw that online, it looked marvelous.

Steven Bruce

Yeah, there's one on the table over there. We can have a look at the minute if you want to, I'd 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 she has to do this as everything else is going up. And she's based in Surrey. I get reassurance, that it's okay to increase prices. Oh, and here's one of our flyers. Carmel says she has printed 10,000 double sided flyers, well done for doing double sided Carmel. 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 with the local audiologists, 50/50 for print and drop costs. She also has an A frame board outside to increase attention and printed five A3 posters and paid local high street shops to put them in their windows. Of 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, it's a significant sum of money. Carmel pointed out something here which, she says you know, plumbers charge 70 quid an hour plus. Which puts it in perspective, doesn't it? You know, whether 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

It's an amazing skill that you need to pay for because you can't fix 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'll put up with it for a bit longer. Whereas if your radiator's leaking, you kind of need someone to do it right now. So there's an urgency about plumbers, which people sometimes ignore in their own health care. We've gone through your list there, any more sort of thoughts on how we do this? And what are the cheapest ways for us to market our services? I suppose I'd say cost effective.

Gilly Woodhouse

Well, you know, I'm a big fan of social media, which makes most people inwardly wince. But it's free. It's free, and it works.

Steven Bruce

Scares a lot of people though.

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 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 it struck me because Gus has just written in saying he's thinking about putting his fees up from 50 to 55 quid for a 40-minutes appointment. Well, I was just thinking you should have done this ages ago, guessing this is what you will say and 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, 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 is going to pay their bills.

Gilly Woodhouse

And 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 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 and so on?

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? You got to stay within the rules on advertising that.

Gilly Woodhouse

Dance around that one a bit.

Steven Bruce

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

Gilly Woodhouse

Yes, 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 buy 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 and she did her magic on him. And he started cycling to school and back with severe cardiomyopathy.

Steven Bruce

Sorry, 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.

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, 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, 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 drip, drip, drip, drip, drip in whatever niche you're talking to, but it gets through to them, something you say one day will make someone take an action and book in.

Steven Bruce

There's been more feedback from Carmel here, which actually, I mean, this is Carmel.

Gilly Woodhouse

She's very helpful today.

Steven Bruce

She's very helpful, but she clearly knows what she's doing as well, which I kind of thought she probably did from the first message. There's a lot of people who could take some messages, 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? And it is hard to work out, but you can get a good feel from it by looking back over previous records or so on, but 1000 pounds per client, so that's 19,000 quid for a 500 quid investment, you know, pretty damn good. Flyers work in that case. 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 who 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

They're not gonna get any patients that way.

Gilly Woodhouse

They're not crawling around under there.

Steven Bruce

Yeah, and there are ways to measure the feedback from flyers 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 ways to do this, tracking numbers and so on. Yeah. And Kelly has asked about the A frame that was mentioned earlier on, she says, do we need permission to put an 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, sometimes they don't allow them.

Steven Bruce

Well, let me put this question to you. If you put an A frame outside your practice and the local council doesn't like it, what will happen?

Gilly Woodhouse

They will tell you.

Steven Bruce

And what do you do? You take it in. I'd say my advice will be bloody we'll do it. And if anyone complains, we'll stop doing it. They're not going to strike you off the register, they're not going to fine you, they're gonna say you're not allowed to do this without permission, oh my word, I've had no idea.

Gilly Woodhouse

Yes, yeah, I agree with you.

Steven Bruce

But with A frames, with movable signage unless it's a serious obstacle to people moving on the pavement you probably can get away with it.

Gilly Woodhouse

I mean, use your common sense where you put it, but of course most people are walking with their heads down.

Steven Bruce

We should get a pavement chalk artist to write things on the floor. 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. This now means I could do with putting them up by five quid. Is it better to put it up by five quid in one go or go for three pounds and two pounds within a few months between?

Gilly Woodhouse

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

Steven Bruce

Well, Sue was saying she put them up last year. So that is once a year, isn't it? Which is fine.

Gilly Woodhouse

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

Steven Bruce

She put them up last year. Oh, no, you're right. You're right. She didn't do it last year, because she'd done it the year before.

Gilly Woodhouse

Her profit margin is going to be diminishing like that. And we need to get it going back. So yeah, I would say put them up now a 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. No one will remember.

Steven Bruce

Is there 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 this is something that I say all the time and most people go, oh, yeah. New patients don't know what the fee was before. 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 sad that, you know, 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 undervalue ourselves to such an extent that we're frightened about even charging the same amount as the local plumber does. And what we do is every bit as valuable, I'm not dismissing plumbers for a moment.

Gilly Woodhouse

I've seen some practitioners charging more for massage than they do for osteopathy. I'm 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, it's going to devalue what that treatment could do for them. Of course, it's diagnostic and everything else, not just a nice rub down with some sweet smelling oil, 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 come to bite him because...

Gilly Woodhouse

Unless it's too high, once we start going over 60% to the associate, 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 marketing.

Steven Bruce

And again, I think a lot of people, 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 are people very nervous about doing Facebook or are Facebook ads the answer or is it got to be tick tock or whatever the other things are?

Gilly Woodhouse

I don't advocate doing ads, no, I think the methods that I've worked out over the years work 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 they're like, sorry Gilly, I didn't do any.

Steven Bruce

So how do you reach a wide, you don't have to 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 group.

Gilly Woodhouse

Like your page.

Steven Bruce

And Facebook controls who sees posts a bit these, doesn't it, so not everybody will get those posts.

Gilly Woodhouse

So I've got lots of different tactics for that but yeah, 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 five-day Facebook challenge which I do periodically, just a free thing and it's surprising, 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.

Steven Bruce

Are you sure it was people not sheep who saw the post? 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.

Gilly Woodhouse

Yes.

Steven Bruce

We've had Elvis Presley. Now we've got Cliff Richard.

Gilly Woodhouse

Oh, Cliff.

Steven Bruce

Cliff says, how does Gilly feel about asking for deposits at the point of booking either and 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. And this is the complete opposite of my advice BC, before COVID. When I used to say I think it's off putting to book and pay. But now you can't even get a pizza delivered without booking and paying for it before it's even 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 marvelous, marvelous things about online booking systems, isn't it, that there's no human intervention here, you get to a bit that says pay now. And you do. 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, 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 and Facebook bring him 66% of his business. Pretty good. Because there will be those people in the audience who will say no, it's all word of mouth. It's the only thing that matters. But actually, particularly if it's free marketing that you can do through the other system that can't detract from your business.

Gilly Woodhouse

And online word of mouth is like high-speed word of mouth, it works even better. You know, they're 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, she's really active today, isn't she, thank you, Carmel. She's saying additional revenues coming in from infrared laser therapy treatments for sports, infrared and laser therapy treatments for sports injuries. So there is a potential investment there. And there are ways even to get subsidies for those types of therapy if you're really switched on. 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 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, sportswomen as well, for infrared or they're looking for laser because they think that's the answer to all their problems.

Gilly Woodhouse

And probably their mates are talking about they've had some treatment and it's worked. So yeah, that could work very, very well. And it's great for your hands. Not doing quite so much hands on.

Steven Bruce

Rob Shanks speaks, who I value very highly as an 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 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 incentivise associates to get reviews from their patients, any good ideas.

Gilly Woodhouse

Make it a competition. Loser buys all the coffees. Well, whatever. It could be as small as that or it could be, loser buys dinner.

Steven Bruce

A common theme that I've heard from people in doing this is that they find it very hard to get associates actually involved with the business. On the one hand, many principals will say, well, associates resent paying a commission to their principals. But at the same time, they don't do anything themselves to bring in any business. And it's a common problem. Angela McCallney 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. That question's made for you, Gilly, isn't it.

Gilly Woodhouse

It is. Well, I would have to send you to my shop, Angela, because I've got social media solutions, we make it. It's made by an osteopath, all the content for a whole month, tenner a month. Job done. Post it out there.

Steven Bruce

So if there's anybody worried about their marketing costs and they can't afford a tenner a month... And are they committed for a long period of time?

Gilly Woodhouse

No.

Steven Bruce

I only ask 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 like that. 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

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

Steven Bruce

I suspect people out there, a bit like me, will say, ooh, I haven't got an hour to spare. Take an hour out, 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 posts, that you paid a tenner for a month, so it's 150 quid plus 10, 160 quid a month, even though scheduled all this stuff, and it brings in one patient with a lifetime value, even at 500 quid, it's still a really good use of your time. And if the patient's lifetime value is 1000 pounds, as Carmel has carefully worked out, I think it was Carmel, then that's a sum that's very easy to do, isn't it? People don't think about ROI, so much. Return on Investment, I should say. 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 his patients? And why are they not willing to book online?

Gilly Woodhouse

Perhaps it's difficult for them to find the link. Yeah. 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, it's 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, ugh, I was supposed to have rung so and so up today and I forgot, it's too late. And then you forget and you forget tomorrow so yeah.

Steven Bruce

So you've got to train patients. Ned when increasing fees, would you tell clients in advance by email?

Gilly Woodhouse

Yeah, give them a month's notice. And so pop in before the increase if you need to see us.

Steven Bruce

It's a good reason to send up another contact, isn't it? Yeah. Hussein says any view on booper's 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.

Gilly Woodhouse

Dump them.

Steven Bruce

There's not much we can do about what Boopers do.

Gilly Woodhouse

They're shocking.

Steven Bruce

Carmel sent in another one, but sorry, Carmel haven't got time for yours because there's one here, this is from Claire and I daren't ignore the one from Claire, I got 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 book in. I feel a bit silly that I didn't listen to Gilly a few years ago. So Carmel says most of her new patient business now 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 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 four 4.5 reviews, you're gonna go for the other one, you know, it's just, we haven't got to make a decision that lots of people like this place aren't going there.

Steven Bruce

What about this business of responding to reviews?

Gilly Woodhouse

Yeah, I think it's nice to respond. Just to say we're so glad you're feeling better or thanks for leaving such a lovely review.

Steven Bruce

Builds a rapport.

Gilly Woodhouse

Yeah, absolutely.

Steven Bruce

Last comment. Kelly says, I get reviews from my associates. 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 write to a patient and say, 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 there?

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 than because they know what they went through before they found you. If you say, I'm trying to build my business, they don't care.

Steven Bruce

They do want to help people.

Gilly Woodhouse

Yeah, so you're more likely to get them.

Steven Bruce

Time has flashed by, Gilly, as it always does. I always get quite excited when you and I are talking here, because you know, I love these conversations and it's nice to talk about business building once in a while rather than pure healthcare matters. I have been told off for interrupting you and talking too much myself when actually, 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. 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. 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 than a tenner a month. But yeah, you're there to help them recession proof their businesses.

Gilly Woodhouse

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

Steven Bruce

And it's going to start getting cold towards the end of the year. So we need to think about it. But yeah, thank you, Gilly, 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.

Gilly Woodhouse

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

Steven Bruce

Certainly, 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, you help people enormously. So thank you again for coming in. That's it for today. I'm sure we'll be seeing more of you in the not-too-distant future. Thank you for joining us. Just a few updates before I go. I'm going to look at the autocue down here today. In two days' time in the evening, we're doing a show on knee grafting. I've got Ian McDermott online, obviously in a studio, similar to a studio broadcast, 90 minutes of CPD, he reckons it's a mess in the UK, join us for that broadcast, if you can. That will be really good clinical stuff in there, stuff to help you understand what's going on in the surgical world, but also to advise patients, of course. Case based discussion next Wednesday, that's the 14th of September. By all means, if you've got a case to share, let us know, send it into us, there's a link on the website or just email us, whatever you prefer to do. Because the great thing is, when you share your cases with us, and we get three or 400 people offering their opinions, well, not all of them, a lot of them offering their opinions on how it might be progressed better or differently. We all learn. And I know that the fear is that when you share a case that you're struggling with, you feel as though perhaps you're incompetent. But we all have those cases. And it's so useful having this aired over the case-based discussions. Tuesday the 27th, getting on towards the end of the month, we've got another evening broadcast. And on this one I've got Dr. Gilian van Hagen in the studio, physically in the studio with me to talk about psychosexual therapy. I mentioned this one before, it's going to be an interesting show, I promise there will be a practical element to it, which is a little bit scary. But Gilian is eager to share the sort of stuff we perhaps don't often consider in our patient consultations, but which is very relevant to the patient's wellbeing. So that's the 27th, that is a Tuesday evening, and that will be 7:30 to nine o'clock. And that gets on to the 29th of September, which is lunchtime broadcast. And we've got Claire Herson coming into the studio. Now Claire is a designer, she's responsible, as well as anything else for the set that you can see behind me, as well as lots of other things that she's done for us. But she's going to be talking about making colours work, which might sound a bit weird. But of course, when you're designing your website, when you're putting together your marketing, when you're putting together your clinic, this could be quite useful. So Claire Herson lunchtime on the 29th of September. That's it for now. Hope you've enjoyed today. I hope you've got some benefit from it. And I hope it's eased your fears about the looming recession if that's what happens. And I look forward to seeing you on one of our future programs. Good afternoon.