

405 – Piggyback Marketing

With Steven Bruce and Gilly Woodhouse

Please note: this is an edited transcript, but might still contain errors. Please let us know if you spot any mistakes so that we can correct them. Timestamps are approximate.

Steven Bruce 00:13

We're actually very lucky that my guest could make it at all today. She was struck down by norovirus last week, but she's nonetheless very bravely agreed to come into the studio and share it with us. She's Gilly Woodhouse. I'm sure you're familiar with her service Osteobiz. She's a proper expert in marketing, especially through social media, and she's a bit of a genius in coming up with novel ideas to reach your target audience. So welcome back, Gilly. We're going to talk about piggyback marketing and lots of other stuff as well, but I wonder if it's worth us talking about the basics of marketing before we go down that route. In terms of people. Think it's obvious what we're trying to achieve. But what should we be thinking about?

Gilly Woodhouse 02:04

Yeah, I think the number one thing is to think about who it is you want to bring more of into your clinic, because a lot of people just go, Hello, everyone out there. We could help anyone with anything, and it doesn't land, because we're all scrolling at high speed, and images and words and things have got to really connect with us. So if someone's presenting me with a picture of a runner and saying, you know, come and see us for your running injuries, I'm heading straight past it. I don't do running. So you'd need to target, a slightly older lady, maybe in my case, with a few aches and pains, and get into your target audiences mind. Work out what sort of problem they've got. From your experience in clinic, you know what it is, how it's affecting them, what's it's causing to happen in their life? What's it stopping them from doing? Yeah, so they might not be able to go to the gym anymore.

Steven Bruce 03:10

That's not to say that you can't target the runner as well.

Gilly Woodhouse 03:14

No, no, it doesn't. You can. You will. You'll still get your bread and butter. Bad backs hobbling in even if you niche your audience a bit. So in my example, I generally focus on osteopaths, but I work with Chiro's, of course, and physios, acupuncturists, even the lady owner of a pink garage I've worked with

Steven Bruce 03:40

The lady, owner of a pink garage? What does she sell in her pink garage?

Gilly Woodhouse Servicing for cars

Steven Bruce

Oh, I see I had, in my mind, a pink door on a garage and inside certain services were taking place,

Gilly Woodhouse 03:59

Sometimes the owner of the clinic is not even a practitioner at all. So, you know, I work with any of those, but I keep my marketing pretty much targeted.

Steven Bruce 04:12

Yeah, well, I've taken you to task on this before, because you call yourself Osteobiz, and that clearly pisses off loads of chiropractors who have exactly the same needs as osteopaths in terms of their marketing.

Gilly Woodhouse

They still come.

Steven Bruce

We've recommended you to lots of chiropractors, because what you do is really, really, really good. Okay, so turning this around and thinking about it from the practitioner's point of view. What are the problems that you've come across in trying to help people with their marketing, no names, no pack drill, obviously,

Gilly Woodhouse 04:51

I think, I think some people get scared that they're only going to see sporty people and nobody else, and they'll get no variety. Which isn't true. It's just that the marketing actually works, instead of chucking random stuff out there and going, well, this social media lark doesn't work.

Steven Bruce 05:10

But you were telling me about somebody earlier on, again, no names, no pack fill, and about their ability to see things from the patient's point of view. You were saying that that perhaps was a challenge. Is a challenge for some people.

Gilly Woodhouse 05:23

Yeah, it was a serious problem, actually, in that they couldn't see or feel, or perhaps even have empathy for what that type of patient was feeling or going through. Were they sleeping? Were they you know, was that the problem that this pain was causing them not to sleep. They kicked the cat. They're grouchy at work. They keep falling out with their wife.

Steven Bruce 05:50

I can see myself using that as a line! Do you kick your cat? Come and see me!

Gilly Woodhouse 05:55

No, but it's just getting that full picture of, Bob as I call him, how down he's feeling because of the problem. He perhaps he can't go to the gym anymore. He's not playing football with his mates at the weekend now, so he's starting to feel a bit lonely and maybe thinking this is

never going to get sorted out. This is just going to get worse. It's just my age. So all those things, we've got to turn them around and feed them right back out again.

Steven Bruce 06:28

Do you think that there is a perhaps misguided idea that we need to get all of our marketing into one single paid-for piece of advertising, rather than do six different pieces of advertising, because that's six times the cost, surely and by condensing it and making it cheaper, actually it's so much less effective.

Gilly Woodhouse 06:48

Well, I don't even advocate doing adverts. I just think just posts work really well.

Steven Bruce 06:56

Then it's six times the effort to get these things.

Gilly Woodhouse 06:59

I usually say, stick with something. Whoever you've chosen. You'd like more mums and babies, for instance. Stick with that for a while. Get those numbers, get people to start noticing, then seeing another post, because they're not going to come in one post probably, unless that message really does smack in between the eyes. It's normally going to take 4, 5, 6, 10 or 20, times. I often say when I'm teaching this, how many years were you watching me before you actually came and got the help? Now patients won't, won't wait that long, but it reminds them that they looked at me, looked at me, looked at me, and then when the pain's really bad, they haven't got any patients, they've gone, all right, I better go and talk to her now.

Steven Bruce 07:51

Yeah, it is too late in the journey, too, as well. When, when you've got no patients, you should be doing this when you're reasonably full to make sure the books stay full. I think.

Gilly Woodhouse

Exactly and grow.

Steven Bruce

my other half, Claire, who you know well, my boss, she is very fond of talking about avatars, and she will talk long and hard about the need to identify who your avatars are, the mum with the babies, or the sporting athlete or the older population, whoever it might be, and try to give them a name, give them characteristics, and think about what's going through their mind, so that that thing that you put on social media resonates with them the minute they see it, and they think, I need to know more about that. And I'm just wondering there's another one of those avatars, which is probably the person who doesn't have any problems at all, but they know of someone who does, and usually in a household, that's likely to be the mum, isn't it? They tend to be the healthcare providers. Is there a good way of targeting that particular avatar?

Gilly Woodhouse 08:53

Same again, you could just be talking about, you know, Is your husband or is your partner becoming more grumpy and more isolated because he's not playing golf at the moment because his knees are killing him.

Steven Bruce 09:06

Steven Bruce

Do you want your husband out of the house more? Yes, send him for me.

Gilly Woodhouse

That would work for me. I'll be booking him in.

Steven Bruce

Okay, what's this business of piggyback marketing?

Gilly Woodhouse 09:17

Well, it's got a couple of facets to it. One is, and I've got an example, if you watch, "I'm a celebrity, get me out of here". I know - you've no idea what I'm talking about! But I spotted this the other night when I was watching in the ad break. A chap from Tesco wheeled on, in a bush setting, a trolley with the usual dome on the top that they take off and show some hideous piece of animal thing underneath that's got to be eaten. So he just brought it in. And I can't remember the words now, because I cannot find it online, which is annoying, so I wanted to show you today, but it's all part of the Tesco gingerbread man Christmas campaign, but they've piggybacked on "I'm a Celebrity"

Steven Bruce 10:14

so how do we do that? How does your average chiropractor or osteopath, with 15 minutes in the day to spare between patients and an iPhone at his or her disposal managed to replicate, "I'm a celebrity. Get me out of here"?

Gilly Woodhouse 10:26

Oh, goodness knows, that might be more difficult.

Steven Bruce 10:31

You could do it in your garden, couldn't you? Yeah? There are trees there

Gilly Woodhouse 10:35

but I'm thinking more of if you looked locally, what's going on locally? Is there a Christmas fair, or a Panto, or anything else going on that the local community is going to know about and then piggyback on that?

Steven Bruce 10:55

Yeah, so we did something in my own clinic recently. We've done it every year for three or four years now, and we'll continue to do it. I'm sure. We do a thing called Santa Paws, where to raise money for medical detection dogs. I dress up as Father Christmas, and people pay to have their dogs photographed, taken sitting on my lap. we dress up one of the clinic rooms to look all Christmas, grottoey and Paul, who's one of the staff here, and who is a professional photographer, comes in and takes some brilliant shots of these animals and the

same animals come in year after year with their owners, and they don't look vastly different to me, and the backdrop must look pretty much the same, but they come in all time. But of course, this is promoted by the local council, and it is publicized in various places. We can get it on local radio and things like that.

And we had an additional bit of piggybacking this year because we've made good friends with the social media people down at Waitrose, and, I don't if you know, they've had this campaign, Who stole the Christmas pudding or whatever. And all their staff were going around with T shirts in the shop saying, I think it was Steven. I think it was Samira I think it was Uncle Neil or something like that. And so during the Santa Paws thing, the lady from Waitrose came into the clinic with, I don't know if she brought her dog in or not, but she came in and I lifted up my Santa suit to reveal a tee shirt saying "I think it was Samira". Now, I'm not seeing whether they use that or not, but hopefully they did, because I would say that someone like Waitrose is a really good market to get into. Clearly, people using Waitrose have got money to spend, because they could be going to Lidl and I suspect a lot of them are the healthcare providers of the family, because although it sounds sexist, a lot of them are going to be the housewife, the woman of the family, aren't they? Yeah, so I went on for a long time there, but I mean, how do we how do people get into the pockets of people like Tesco or Waitrose, who are very conscious of their power?

Gilly Woodhouse 12:55

Yeah, not saying that's easy. I think you did really well to do that. But you can always go and talk to the branch manager and see if there's any anything to be done. You never know, because if you don't ask, you don't get

Steven Bruce 13:08

Claire, my missus is the instrument behind all of this stuff, and she's made a point of liking all their posts. So the clinic has liked all their posts. She's made a point when she's around, of going in there and talking to them, and she's had me film her getting advice from the lady at the meat counter on how to do stuff. And Brian the wine man and Cyan and the meat and fish counter lady. They know us very, very well, yeah. And although all of our stuff where we promote them has to go through their approval process, actually, they're happy with it. So great. Anyway. Sorry, that's one other bit of piggyback marketing. You said there were two facets

Gilly Woodhouse 13:46

Well, that was it really. It was piggybacking like that, and then looking out into community and saying, what's going on? What are other people doing? Or who? What are the other local small businesses doing? Could we tie up at all and work together on something? And that can help, because then there's two of you doing that, bringing you know, might you might do that with a local private gym, the owner there might want to hook up with you, work with each other to get more awareness.

Steven Bruce 14:19

Do you think it's advantageous not to go in looking for a marketing opportunity, but to go in and offer something to them and let that relationship develop.

Gilly Woodhouse 14:27

Yes, actually, something I often advise is, if you go in and introduce yourself and talk to them with a view to giving them referrals, yes, they're going to be much more open to that, yeah, and what goes around, comes around. I do believe that. So I think that can help very, very much.

Steven Bruce 14:49

Let's say it's a gym, a local gym. How would you structure that process?

Gilly Woodhouse 14:57

I think I'd just go in and, you know, just try and shake hands with the person who owns it, or, if they're not there, try and make an arrangement then to meet up with them for perhaps for a coffee or something.

Steven Bruce 15:10

Would you make it one single gym? Or would you go to all the gyms in your local area and offer the same thing?

Gilly Woodhouse 15:13

Oh, good question. There's not often lots of small gyms, I don't think. But if there's two or three, yeah,

Steven Bruce 15:21

there's certainly three or four in this area, that I know of. That means there will be more of them, but they like exclusivity, don't they, so I think they'd be more inclined to support you if they thought that they were going to be your sole source of referrals, or they were going to be,

Gilly Woodhouse 15:38

Certainly it'd be a good place to start, and especially what happens if you allude to you know, I was going to talk to the other gyms, but I thought I'd speak to you first.

Steven Bruce 15:46

And that's quite attractive for a lot of chiropractic or osteopathic practices, because I would go there and check that I did like the gym, and I'd say, Look, we need people who can do the rehab. We need somewhere where can people can go and do the exercises that we're recommending that they do.

And I'd have thought that they would be receptive to that more so than, say, Waitrose or Tesco, who know the power of their audience, rather like mumsnet and people like that, they know the power of their brand now, so they're much more cautious.

So what are the other flaws that you see in the marketing process that's being adopted or not adopted by your would-be clients,

Gilly Woodhouse 16:30

Boom and bust is a big one. So they'll be quiet, so they'll think, well, I better do some marketing. They do some marketing. They get really busy, and they haven't got any time left, and so the numbers drop off again because they're not marketing. Yeah, that's a big one. And I'm always banging on about put it in your diary every week. Schedule your posts.

Steven Bruce 16:51

How many posts you do a week? What do you recommend they do a week?

Gilly Woodhouse 16:55

My rule of thumb is, if you're not busy enough then every day, and when you are busy enough, two or three times a week, just keep those new patients coming in.

Steven Bruce 17:05

So what do you put in them? That's an awful lot. They've got to think of something new to say every day of the week for a what, a one or two minute post?

Gilly Woodhouse 17:14

Yes, very short. I mean, videos are going to be best, yes. So, you know, share some things to get us through winter. I see some clients have been doing the walk like a penguin, teaching people how to walk on ice in case we get ice. Others are talking about how to feed ourselves well at this time of year, turmeric, lemon, ginger, honey and all those things

Steven Bruce 18:03

Is the quality of the post more important than the frequency?

Gilly Woodhouse 18:09

Not really, because you've got Canva, where you can get fantastic images at no cost, yeah, rather than a monthly fee, about 10 quid.

Steven Bruce 18:18

So I'm thinking, you know, you've mentioned talking about nutrition there. Well, most of us would think, Oh, Christ. I mean, they're gonna have to do some work and research it. And they mustn't say anything that isn't backed up by evidence and research.

Gilly Woodhouse 18:27

Bother doing anything like that. I think just, you know, common sense things. So after I saw that post about the the turmeric and everything, I was about to make some parsnip soup. So I thought, Oh, I'll stick a load of turmeric in my parsnip soup. It was delicious. I thought, that's one way to get it in me quickly.

Steven Bruce 18:50

Is now a good time to be marketing, when everybody's focus is on Christmas and all the money they've got to shell out for presents and trips away.

Gilly Woodhouse 19:00

Actually, I just the other day had a bright idea to do an advent calendar. And because I've made hundreds of videos over the years, just educational - educating and informing are the big thing that we need to be doing on our marketing - I thought I could have a little advent calendar, when behind every bauble there's a video. And so I put them all up.

Steven Bruce 19:32

I'm sorry, I need to get my head around this. What do you mean? You put up an event calendar.

Gilly Woodhouse 19:40

It's a virtual advent calendar. So what's happening now is from the first of December, all those that signed up to it get an email from me every morning saying, Come and get your next gift from your advent calendar. And they click through to that date and they can watch the video. And if they like it, then they can go and download it. And then I thought, I know, sometimes you can find it difficult to find the words to put with a post. So I thought, I'll write the words as well. So all you got to do is cut and paste. Yeah, yeah, stick it on your page. So I've made Christmas marketing super, super easy. And there's, I think nigh on 200 people have signed up for that, and they're popping those out every day. I'm getting loads of emails in saying, This is so helpful.

And then I had someone from Australia message me yesterday, saying, Oh, your video, so lovely. There's a little girl, Evie, who saying she's been to the Osteopath and she's feeling better, but I'd use the word Safe, safe for your little ones. And she said, we're not allowed to say that osteopathy is safe in Australia. Good Lord. So I went in, tweaked my video, downloaded "Aussie Evie", and sent it to her, so she's got that.

Steven Bruce 21:01

Where did you get Evie from? Is that stock video from somewhere?

Gilly Woodhouse

Stock video, yeah, yeah.

So it's just a generic child looking happy.

21:07

She's just looking happy, and she keeps putting her thumb up, and so on my text, I'm asking her little questions, have you been to see the Osteopath today, Evie? And she's like thumbs up, was your treatment nice and comfortable? And she's like, yes thumbs up. So are you ready to get back to your ballet, running and trampolining or whatever? I put dancing, it was dancing, and she's like, thumbs up so it just kind of all marries up nicely.

Steven Bruce

Is it voiceover, or is that captioned?

Gilly Woodhouse

No, I've just done captions on it with a little bit of music,

Steven Bruce 21:39

Stock music, royalty free?

Gilly Woodhouse

Yeah,

Steven Bruce

this will be terrifying a lot of people. Where do I get the video? Where do I get the music? Am I going to full foul of the PRS, the Performing Rights society? Am I going to say something which will full final advertising standards?

Gilly Woodhouse 21:56

you can do stuff like that on Canva, I use something called wave dot video, which is bit more expensive. Or you can see on my Facebook page the link: it's just a bitly link Gilly Advent, and I can sign up and get all the videos.

Steven Bruce 22:17

So your web page is what?

Gilly Woodhouse 22:21

No, it's not on my website. It's on Facebook. Osteo biz with Gilly Woodhouse.

Steven Bruce 22:27

Osteo biz with Gilly Woodhouse, right. Okay, so let's see. Let's see if a lot of people can catch up with your advent calendar as well.

Gilly Woodhouse 22:33

Yeah, because they're not just winter ones there. I've just got a selection of them, but it does involve a dog at some point,

Steven Bruce 22:42

Good. We're all over dogs. We like dogs. One of the challenges that you're going to have, though, and I don't know how much you charge your clients, and maybe there's lots of different options, and we don't want to go into them all here, but there is an instinctive resistance isn't there on the part of people to spend money on things like what you offer. When you tell us it, it's blindingly obvious that this is a good idea. But if I have to think about it every week, every day, every whatever it is, then it's bloody difficult, because I'm busy. How do people calculate whether you're worth the money or not. And this isn't named at you. It could be Google ads, Facebook ads. It could be any other marketing company or whatever.

Gilly Woodhouse 23:27

I usually say to them, calculate the you know you you're seeing 20 patients a week at the moment, and you want 30. We'll calculate what that's worth to you per week, times 48 weeks, let's give you a holiday. Yeah. And then that annual increase in income, is that worth paying me a bit? Is

Steven Bruce 23:51

Is there any way to work out whether the increased number of patients came as a result of your marketing, or is it just they have to take that at face value? "We've got more patients. It must be Gilly"

Gilly Woodhouse 24:04

When I work one to one, they have an actual strategic plan right from the get go. So I agree every step of it with them. And then we have a little team that backs them up with tech. Because I know usually Tech is a problem, and we crank up the marketing. We improve systems and operations within the clinic anyway, so the whole thing works better, and they just get busier. I just see it day in, day out. You know? It's so it's, I do hope it's me, because they, they're often coming to me in quite a state. You know, things are pretty bad. And someone said to me this week, they had a sizable clinic., it looks like I might actually go into profit this month. And I was like, Oh, my God. Oh, my God, that's tough.

Steven Bruce 24:56

Okay? So Sarah says, I think a social media post saying, Are you so fed up you're ready to kick the cat would be quite eye catching. Actually, it would, wouldn't it? And I'm sure you could find some sort of stock video somewhere o, a cat looking cat going like that. And cats are very popular on social media, aren't they little, fluffy kittens?

Gilly Woodhouse 25:41

Yeah, animals will always bring in more patients than anything clever you've got to say.

Steven Bruce 25:46

Matt says, interesting point to keep on one topic for a while. I tend to spread the posts about babies or shoulders over a few months, which is perhaps less effective. Useful tip, thank you. And Vladimir says, Could I ask you, Julie, do you think we should raise our prices? It's a bit of an bit of an impish question, but it would be nice if we could spend a few seconds discussing. So Vlad and price increases.

Gilly Woodhouse 26:12

Oh,absolutely. My biggest bugbear is osteopathy and chiro probably is too cheap, I think, compared to what people are spending on other things that aren't necessary and treatment's necessary if they're in pain, and given the waiting times we've got, you know, for less than a new tattoo or a snazzy handbag, they can get probably out of pain and back to Health and get cracking on with their life again. It's just the people don't know, but I recommend to my new clients put up prices 99% of the time. I highly recommend that they put them up. And do you know what happens? They get busier.

Steven Bruce 27:09

Yeah, I have talked to you in the past about my frustration with the way, I can only really speak for osteopaths, but it's possibly true of some chiropractors, we position ourselves. We almost seem embarrassed about what we do, and we talk about the, you know, the Osteopath who sets a clinic up in the back room of a nail bar or something like that, where you wouldn't find an orthopedic consultant doing that. And I think that's the level we should be positioning ourselves at. I'm not saying we are orthopedic consultants. They've got lots of other skills that we don't have, and lots of knowledge, probably that we don't have, but also we can do things they can't, and people are coming to us for similar problems, hopefully so they can avoid the orthopedic consultant. And I don't think it, it sells us well if we don't make everything about ourselves, our practice and even our pricing structure, look like we are the professionals that we genuinely are.

Gilly Woodhouse 28:01

Yeah, you're highly skilled. That's the thing. And for me the biggest thing you bring is your ability to make a diagnosis. Yes, and you know, most other professions can't do that.

Steven Bruce 28:16

No, you're quite right. And also, I do like to think that most of us spend time with our patients. We are empathetic, yeah, and for all their huge skills, you know, the average doctor doesn't have time to spend with his patients, and that's distracts from his or her quality of service.

Gilly Woodhouse 28:34

That's the feedback that I hear a lot from clients, their patients say, you took the time to listen to me. I feel heard that's really important, really important, particularly if they've been round and round the hamster wheel and got nowhere and, you know, don't know why they're in pain or what to do about it.

Steven Bruce 28:56

Going back to Vlad's question about raising prices, I've been just chewing this one over in my mind while you were talking there. Surely the starting point is, well, what are your prices now? If you're charging 200 quid for a half hour appointment, you probably don't need to increase your prices. I don't know if that would work.

Gilly Woodhouse 29:12

Well, I did put someone's up in central London who had no patients, no marketing, no booking system, right? We're talking nothing, but well established. Numbers had dropped off to nothing, practically, and it was a bit of an emergency. So as part of the plan, we got to the pricing bit. And I said £120 ? I think you're very capable of getting £180 with your experience and where you are and everything else. So actually, most people go, Oh no, and they're very, very fearful. And I have to talk about how much people pay for a silly hair hairdo. But you know what we will spend our money on? And then this is, this is a very professional experience

Steven Bruce 30:11

I can see that, because some people will probably be thinking, Well, that's all very well, then the really rich people can afford my services. So I'm charging 180 pounds for an appointment, but lots of people who need my services who don't drive Ferraris, they can't afford it. But actually, those people are going to nail bars, and they're spending their money on all sorts of other things which are less important than their health.

Somebody who isn't named here has asked a very pertinent question, though, because they're saying, Ah, yeah. Julie's advice seems fine here in terms of posting frequently, but it seems one step removed from the problem, which is, how do you suggest getting eyeballs on the posts? Having a good shop window, so to speak, on social media is good. But how do you a plan to get the eyeballs on the Facebook or the Instagram account, and how do you measure the success of those posts in terms of metrics, use of KPIs with the clinics that you work with. So you know what efforts are paying the dividends. That's fair. So how do you get people to look at it? How do you measure the results?

Gilly Woodhouse 31:15

You can look in the back end of Facebook and see what your numbers are and that they're going and this post got in front of three people, including your mother.

Steven Bruce 31:26

Isn't that still irrelevant, though? Because we're only interested in conversions,

Gilly Woodhouse 31:31

exactly. So I don't really look at that. I look at patient numbers going up, then this is working. Let's keep doing it. Don't stop. That's what people do is stop, and then it drops off the cliff again, and then they've got to try and crank it all up again. So that's one half of it, and the other half is get into your local buy and sell group and then share your post into there.

Steven Bruce

What's a buy and sell group? Every area has got a buy and sell group. It's usually got 10, 30, 50, 70,000, people in it. Job done.

Steven Bruce 32:19

Okay, simple. This is a Facebook thing, right?

This is used not just by people trying to sell their products. It's also popular with those trying to buy?

Gilly Woodhouse 32:26

Yeah, they're in there having a look what's for sale,

Steven Bruce 32:30

I'm portraying my utter ignorance of social media. I have people to do it for me!

Gilly Woodhouse 32:36

Yes, you do. It might be somebody selling a pram or selling hedge cutting or, or anything but, but I like to share, you know, a post like talking about what happens at a first appointment. No one knows what that what that entails, or why are you so flipping nosy about my medical history? I've come with a finger problem, you know, why are you asking me?

In fact, my husband went to a different osteo because we were away and he hurt himself, and he said she didn't half chat a lot at the beginning, didn't she? He had no idea that she was questioning him. It was really funny his interpretation.

Steven Bruce 33:16

We could do a long case study on your old man, couldn't we?

Gilly Woodhouse 33:26

We could, yeah, we'd need more time than this.

Steven Bruce 33:33

Pat says, is it worth working with an influencer?

Gilly Woodhouse 33:37

If you've got one, yes, if you've got someone local, I've got a client I've been working with who has treated a high achieving, High Rocks person. I don't know, I don't understand all that, but she's getting in with them, taking photographs. They're happy to endorse her. And yes, get that on your social they'll share it on there.

Steven Bruce 34:05

If you get the opportunity to do that, you got to snap it up. Because celebrities of any sort of work, but they're very well aware of their value,

Gilly Woodhouse 34:12

even small local celebs, definitely.

Steven Bruce 34:16

Yeah. Well, we've, we've done that with one of our local radio DJs here, which is a shame, because his is not a particularly well known face because he's on radio but he's a well known voice.

Sarah says, I know you provide posts for people to use for social media. Do you recommend that they're personalized? And is it worth doing that?

Gilly Woodhouse 34:38

Yes. So we've got a monthly Calendar of posts and a couple of blogs, both created by two of my team. So the blogs can be tweaked and changed a bit, but at least you're not looking at an empty page thinking, What shall I write about? There it is - September. Remember she did one on advising parents how to choose the right backpack for their kids going back to school. So that's just topical and helpful.

Steven Bruce 35:08

Do you recommend that they're personalized?

Gilly Woodhouse 35:11

So then add your own text to that when you're posting it. So we do some little videos, but we do quite a lot of memes with the image with the writing on. So take that topping and just write a couple of sentences about it, and then add your booking link.

We've got to make it easy for people to book from that post, because they're not coming to your page. They're seeing a long stream of stuff and they just happen to go, "what's that dog dancing around for?"

Steven Bruce 35:41

images are important, though. The image is going to get people to look at the words

Gilly Woodhouse 35:47

Yeah, and making them stop the scroll. That's what we've got to do. So if it's a boring...I've seen some with, like, a whole book written on one square meme, and you're like, even if I stretch my phone, I can't read it.

Steven Bruce 36:00

Would you with some of your clients at the outset, have to give them a bit of a slap and say, Stop trying to write this as though it's a research paper? Write it as though it's a conversation with your avatar, with your member of the public, because some posts can be so bloody boring about facts, figures and stuff like that. But I just want to know whether I should eat corn flakes in the morning or not.

Gilly Woodhouse 36:18

Yes, keep it simple. Remember, you're talking to someone without your experience and knowledge. You've now got the curse of knowledge. So all those posts are saying, we treat MSK problems, what are you talking about?

Steven Bruce 36:40

We don't even if they knew what MSK meant. It's still too general, isn't it?

Gilly Woodhouse 36:44

Yes, and what's musculoskeletal anyway, I've got a knee problem. Talk about my knee problem and a picture on a knee or my crunchy shoulder. You know the words you hear in clinic? This is how I talk about it. They're giving you their symptoms, but they're also moaning. What are they complaining about? So now I can't play golf with my mates on Saturday. So now I can't pick up the grandchildren and that if you can jot those bits down, or, Oh, it's a crunchy shoulder, which you would never describe it as that. But if that is something your patients, are you those words they're using, feed them back out, yeah. And then they'll more people like them and will come. They'll go, Yeah, my shoulder feels crunchy!

Steven Bruce 37:32

But the other thing you said was the business about making it easy for the patient as well. I despair of the number of occasions when some people will write a post like this, and it'll say go and visit me at something, and you've actually got to physically write it down and enter it into something. Make it a clickable link, because people just don't like taking action, do they? And every hurdle just makes it less likely that they're going to take action.

Gilly Woodhouse 37:59

Yeah, yeah, exactly that. It's got to be seamless. You know, some people send people to the website, but that's another step you've made. And then you have to find the pages. Where do I book? What's going on.

Steven Bruce 38:11

People know that from their own shopping, don't they? When you click on something about, I don't know, you're looking for blue teapot covers, and it takes you to the whole haberdashery department or home furnishings or whatever. So make it easy for the patients. Somebody anonymous says, How do we build into our marketing the fact that we listen and hear what the patient has to say? Have you got any ideas about that?

Gilly Woodhouse 38:38

Yeah, you could talk about the feedback you get from your patients. Most patients tell us that they were relieved to be finally listened to and heard. Both those phrases are really important

Steven Bruce 38:57

Apart from your old man, who says she didn't have chatter a lot. But that's not listening, that's chatting, but it was important chatting,

Gilly Woodhouse 39:05

At the end, when there's no more money in this for her, she's done the emergency job for him, she said, Now, David, what I want you to do is this, when you get home tomorrow, I want you to contact your own osteopath, and I want you to book in five or six more treatments. He's thinking, "how much? Oh my God!" And she goes, "because we want to save your knees and your game of golf, don't we?" And he went, "Okay"

Steven Bruce 39:49

she deserves a chuck up. Let me know who she is. I'm going to send her an email after this and say she got a very good chuck up on here

Gilly Woodhouse 39:57

It was great, because she got him on side to help him back to health, even though she was handing him back to his own osteo which I thought was exemplary.

Steven Bruce 40:07

And I'm going to get some stick for calling David your old man, but it's only because you keep calling him the old boy. It is acceptable in your eyes, not his probably.

Alan says, I'm glad you say you don't look at the likes. Presumably, that's a Facebook thing. We have about five to 13 likes on our posts. But since posting video every day, everyone in the clinic is super busy.

There's a simple lesson there isn't there.

Gilly Woodhouse 40:33

Well, they've been going down a storm, and people are writing back saying it's really getting some traction. So it's moving images, one thing. So people are more likely to stop and watch very short, sometimes a 20 seconds to about a minute or something. But they're educational, a lot of them. So it's like Edna dancing with the youth down the town. It's the evening. It's like she's been told it's just her age, and now she's hanging out with the kids, kind of thing.

Steven Bruce 41:09

Mark says some of our practitioners are very nervous about saying something on social media that someone might disagree with or that might not have 100% accurate research behind it. Do you think it matters?

Gilly Woodhouse 41:21

No, no, I don't. People do worry about the ASA and things like that. I'm going to phrase this correctly. They don't watchover and police social media and what people are saying. But if

someone narky reports a post for saying, “we can cure colic”, then the ASA are going to have to respond to that and say, Please take that post down, that's not true. Then you have to just do that and comply, and it goes away so you don't have to worry about that. And if it look, if it's stodgy and research stuff, no one's going to read it anyway. So it is social media, so it needs to be friendly and warm and help people to understand why they would come.

Steven Bruce 42:16

Yes, and you know, we, in the past, we've done a number of shows about advertising standards and marketing, and anyone watching can look into the library of our broadcasts, and they can find the Advertising Standards material that would tell them what you are allowed to say and what you're not allowed to say in terms of what we can treat as osteopaths and chiropractors. Now, like you, I've always said, if it's not on either of those lists, and you believe you've got evidence to say it, then you can say it. And as you said, if someone complained, you take it down and apologize. There is a slight caveat on that, because the general chiropractic Council in its I'll use the word Wisdom does take complaints a bit more seriously. The osteopathic Council will say, this is an this is a ICO matter, an Information Commissioner's Office matter. It's over to them if it's an advertising issue, unless you fail to follow their direction. The GCC is a little bit more finicky about it, and they possibly do look into the marketing.

So it's not that difficult, though, is it? There's a list of what you can and can't say, and within that, there's lots and lots of scope.

Gilly Woodhouse 43:17

And I think sometimes you've got to generalize your language a little bit rather than talking about conditions. I mean, especially with children and babies, I say looking after your little ones, or keeping your little ones pain free, or something a little softer, bit fluffier, but you're not mentioning colic or reflux or anything like that. But you know, any parent will go “what? they're more comfortable? they're sleeping?”.

Most mums report the baby sleeps like a baby after treatment.

Steven Bruce 43:50

Yeah, that's a good line to use. It can't possibly not be true, can it!

Gilly Woodhouse 43:53

No, I mean, I've taken mine and, you know, they've just conked out afterwards. And I'm like, “good! Done!”

Steven Bruce 44:04

Dave G says, respectfully to Gilly's answer about not looking at likes, but looking at how busy you are. That's not a measure, if you don't know where they're coming from. Yeah. Now this is, this is all about measuring your return on investment, so your investment in time or money in putting these Facebook posts up, and we have touched on this. How do you know that the increase in patients is coming from the social media posts, or potentially the money they spent on Gilly producing those posts for you?

Gilly Woodhouse 44:35

Yeah, for me, it's good enough that you're busy. You've been marketing where before you weren't marketing, or you weren't marketing very well, or it was up and down, and so your numbers fluctuated. In my experience of 11 years doing this, once that marketing is sorted and repeated - rinse and repeat, rinse and repeat - the numbers stay up. If you notice a little dip, you just post a little bit more. And patient numbers come back round again.

Steven Bruce 45:02

There is an option, isn't there? It depends on the systems that people are using to measure these things, but can you track click throughs from posts on Facebook?

Gilly Woodhouse 45:16

Not really.

Steven Bruce 45:18

Could you send them to a page where you could monitor the follow up on that page? If you're going to an automatic booking system, you can't really do that, can you?

So the answer is, you try it, and if your bookings go up, and it would seem reasonable that the advertising is what's led to it, if you stop doing it and they go down, yeah, that's pretty much confirmation.

Gilly Woodhouse 45:35

Usually, the main issue that people come to me with is that their marketing is not good enough or non-existent, so it's not working.

Steven Bruce 45:45

Jay here says, I'm sorry, but osteopaths do a heartfelt, amazing job. As a practice, owner or manager, I increase prices every January to cover increasing costs. We shouldn't be embarrassed. Hairdressers do it. If you offer an amazing, comprehensive service and treatment patients should be charged. We've never had a problem, which is exactly what you were saying. And I don't think that Jay was apologizing for doing that at the beginning. It was just the way it was written.

Yes, I mean, that whole business of pricing realistically is very important. And I think getting over that reluctance that we all have to charge properly is important.

Gilly Woodhouse

Yeah, I think it's a very British thing.

Steven Bruce

Every time you read in the press that cost of living has gone up, inflation has gone up, whatever else, we will feel more guilty about putting our prices.

Gilly Woodhouse 46:33

This is what I say to clients. Prices, your costs, have gone up, but your fees have stayed the same, so your profit goes down.

Steven Bruce 46:43

Yeah, and we don't like that word though. We don't like that word profit, no, because we're not in it for profit. But we have to make a living.

Gilly Woodhouse 46:50

Yeah, exactly. And I'll often say it's not about you, it's about your kids, university fees or support, if, if it's a younger family, you know, it's your pension. There's too many people with no pension.

Steven Bruce 47:05

Yeah, and it's perfectly okay to be a practitioner, in my opinion, who doesn't want to make a lot of money and say, I just want to treat lots of people, and I'll treat 50% of them free of charge, or whatever you decide to do. I know I'm never going to make a lot of money. But it's equally okay to say doctors don't work free of charge. Orthopedic consultants don't work free of charge. And actually they charge a fortune for their service. It's ok for us to do it.

Gilly Woodhouse 47:28

Yeah, you won't see anyone like that for less than 250 quid.

Steven Bruce 47:32

No. And the only reason you're going to fall foul of anything is if you're unreasonably trying to convince people to take up more treatment than they need. Yeah, that isn't to say you can't have maintenance treatments, because they're very important. I agree.

Dave G says that you can measure clicks through posts. I didn't realize you could. I thought was only Facebook ads that you could measure clicks through from?

Gilly Woodhouse 47:53

I don't know of that at all.

Steven Bruce 47:57

Claire says, Should we do a live avatar session sometime next year, take everyone through the process together and either with you or without you. But would that be a useful exercise for people? Do you think?

Gilly Woodhouse 48:09

yes, I do. I do do a sort of social media training every now and again where that's exactly what we do. Everyone feeds back to me who their avatar is, and then they go, "Ah, I get it now." And so I'd be happy to do that. I've got a little workbook that goes with it.

Steven Bruce 48:29

Okay, well, maybe we could do that, but we are running out of time, so we're probably not, we're probably not going to do it today. No, no, we will certainly talk about that. I think it's a useful exercise. We've had 300 people watching. I've had lots of questions. So that's again, I'm not going to hard sell your services, Gilly. I think people should be pretty well aware of the fact that you make this whole process easy.

I'm sure there are other people they could go to, but we wouldn't have you on the show if we didn't think you were the best in the business. So thank you for coming into the studio.

