

LEVERAGING TECHNOLOGY CAN OPTIMISE AN ALREADY WELL-PERFORMING PRACTICE

BY HOWARD LARKIN

With nine surgeons and thousands of satisfied cataract, refractive, glaucoma, medical retina, and general ophthalmology patients, Dr Guy Sallet's Eye Institute Aalst, located between Brussels and Ghent in Belgium, was already the high-quality, active, prosperous clinic many ophthalmologists dream of.

So, when marketing guru Rod Solar took on the task of increasing its leads, appointments, and conversions whilst spending no more than €1,000 monthly, it was indeed a challenge—especially given Belgium's restrictions on advertising, patient testimonials, cost comparisons, and actively prospecting website visitors. Nevertheless, strategically deploying technology and training could further improve clinic efficiency and profitability.

Solar and Dr Sallet broke down their efforts to guide the patient value journey from prospect to satisfied patient advocate into three stages: traffic and leads, appointments and patients, and reviewers and referrals.

Building traffic and leads

Building a practice starts with recruiting patients—and assessing how the practice attracts them is an important first step. At Dr Sallet's practice, 90% of refractive patients came for the first time for that specific service, with many from outside the immediate area. Most patients have referrals from friends or family, but the practice also attracts patients through its website. It includes detailed information on procedures, the team, and introductory videos, as well as the address, practice hours, and payment methods.

Referrals also come through patient reviews published on Google and Facebook. Staff are trained to answer questions and help guide patients on the phone, where most appointments

are made. And while Dr Sallet said he had enough patients due to a shortage of providers, he felt he could strengthen his active enrolment with professional help.

Solar suggested adding a chat option to the practice's Google page and homepage. "This helps you capture people who are just wandering by your website but not doing anything." It is particularly effective for attracting younger patients, many of whom are reluctant to make or receive phone calls, he noted.

Linking the chat feature to a practice customer relations management (CRM) system allows staff to respond immediately from their computers. Such a system can also combine with self-tests and other decision-support and appointment booking features. Automatically generated SMS text and email follow-ups reinforce the message.

It works best when the response time is less than five minutes, preferably within one, Solar added. Automating the text response process allows for fast responses even outside staff hours.

Appointments and patients

Once the patient arrives, the goal of every practice is to get the diagnosis, treatment, and outcome right, Dr Sallet said. But preparation and teamwork to ensure every team member knows why patients are there and what exams, diagnostics, and other services they need helps differentiate the practice, improve patient flow, and create a feeling of professionalism and personalised service patients appreciate.

Cross-training staff on both clinical and administrative tasks is vital to success and helps keep staff engaged,

Dr Sallet added. Regular physician-led staff meetings in which employees are encouraged to discuss any issues also help build teamwork and improve practice processes.

In a basic rundown of the cycle, testing and running diagnostics on patients finish in about 15 minutes. Patients then receive education on treatment options and informed consent via PowerPoint and video presentations. So, when the doctor arrives, patients already have an understanding of their treatment options before the clinical examination and final treatment decision. Lastly, staff assists in making surgery and follow-up appointments, providing personalised leaflets, and arranging payment. Dr Sallet noted 75% of complaints stem from non-physician factors, emphasising the need for great service.

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Solar suggested automating these processes and recording each interaction in the patient CRM could further strengthen them. The system should include templates for talking, texting, and emailing patients. Automated appointment reminders and missed appointment follow-ups also help increase efficiency.

Reviews and reviewers

With 90% of refractive patients new to the practice, retaining them for other services, such as oculoplastics, glaucoma, retinal issue, dry eye, or general ophthalmology, helps build it, Dr Sallet noted. He provides videos of surgery and small gifts—such as chocolates and birthday and holiday greetings—to keep in touch. Dr Sallet also encourages patients to promote the practice through referrals with personalised leaflets and reviews on Google, Facebook, and other social media.

Solar recommended automating card generation while hand addressing and signing to add a personal touch. He also suggested using the existing patient database to offer additional services.

Dr Sallet and Mr Solar spoke during the practice management and development programme at the 40th ESCRS Congress in Milan.

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