



Turning Rejection Into Opportunity

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A quarter of a century ago, a former colleague of mine who specialized in stress management told me that everyone experiences stress; what matters is how one manages it.

Analogous advice would seem to apply to sales: “Every sales professional experiences rejection. What matters is how they manage that rejection.”

This month’s column features a plan for learning how to live with rejection, and turning it to your advantage.

‘No’ Does Not Always Mean ‘No’

With due respect to the country music classic, *What Don’t You Understand About No?*, we deal with transactions, not romance.

When wearing your “sales professional” hat, it is important to retain some wiggle room, even after a prospect seemingly closes their door. For example, a prospect’s negativity may be short-lived; unanticipated events may occur (e.g., newfound dissatisfaction with the prospect’s current occupational health provider), or they may hear something positive about your program that changes their mind.

Accordingly, your clinic can do several things in the midst of rejection to ease the pain and better position yourself for a future sales encounter:

1. Modify the classic objection response cycle (e.g., pause, empathize, probe, reposition, agree) for use immediately after a failed sales effort:

Pause. Following most rejections, a sales professional is tempted to gloomily move on. In most cases, this is counter-productive.

Try following a conclusive “no go” with a simple

pause. These precious seconds cut the tension that tends to envelop either or both parties at the point of “no” and allows the sales professional time to regroup.

Empathize. The last thing a prospect expects to hear from a sales professional is acknowledgement that the prospect made a reasonable choice in selecting another option. Yet, such a pronouncement tends to endear the sales professional to the prospect and grants greater leverage to renew their sales effort at a later date.

A fair statement such as, “Your provider offers good services; I’m sure you will be happy with them” tends to enhance your credibility and solidify your relationship with the prospect.

Probe. If the rationale for the prospect’s rejection is not perfectly clear, ask why they chose not to work with your clinic. “Please tell me why you prefer not to work with us at this time. Your opinion will help me in future dealings,” is a fair request. This information can provide you with a foundation to refine your sales technique and/or call attention to recurring deficits at the program level.

Reposition. Following a “no,” you should seek an opening to reinitiate contact with the prospect at a later date. You can do this in several ways:

- Set a check-in date. Tell your prospect that you would like to stay in touch and ask if they would mind if you called, say, six months later “just to see how things are going.” Prospects are usually not averse to making such a commitment six months out, and you have now established both a purpose and a timeline for maintaining contact.

Be certain to calendar all such planned contacts.

- Offer a “freebie.” An occupational health sales professional should maintain a bag of “freebies” that can



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There are multiple critical actions during every patient encounter which, if not correctly traversed, will lead to potentially significant negative patient outcomes. Multiply all these critical actions by the 40 or more patients treated every day in the center, and you will understand why harmony is so important in an urgent care.

The Eagles could miss a note or be off an occasional octave and no one will notice or care. Missing the fact that the patient’s pulse on discharge was 120 because the team was not working well together, however, could lead to a catastrophe.

The critical actions in an urgent care center also encompass the interpersonal communications which take place during the encounter. If the team is not getting along or not working well together, it does not take much to communicate dissension to a patient.

A comment like, “Let me retake your vitals because they never get it right” or “I hope you can understand the doctor, because no one else can” harm the patient because they immediately don’t trust the caregivers and may leave thinking “I don’t know if I should follow the advice since they can’t even get their act together or seem like they trust each other.”

One bad actor can completely kill any chance for harmony.

Think of it this way: If I was singing with the Eagles in place of Joe Walsh, the harmony would be completely destroyed. Although I know all the words, I would be off key and sound like a castrated mule.

One person who, for whatever reason, is not in harmony with the rest of the team in the urgent care center can destroy a patient interaction and place the patient and the entire operation at risk.

Here is the take-home point: Screen new team members very well. They have to be more than simply competent. They have to work and play well with others so the entire operation can harmonize.

Although Lady Gaga *“want[s] your psycho,”* the urgent care center should stay far away from hiring them. ■

“The more calls you make, the more prospects you will close.”

be offered at various stages of the sales cycle, including immediately post-rejection. Freebies might include a subscription to a periodical published by your clinic, a complimentary service, or registration to an upcoming seminar.

- Add the individual to your e-mail list. If your clinic sends out periodic e-mail blasts to clients and prospects, you can use the moment of rejection to ensure that you have the prospect’s e-mail address as well as those of other significant players at the company. You want to be first in line if a prospect feels it is time for change.
- Strive for agreement. Whatever your approach (a follow-up call, a freebie, a commitment to being on an email distribution list), try to leave the sales encounter on a positive note. Always find a way to end even the most unsuccessful of sales encounters on an emotional up tick.

2. Companies remain, but the faces change. A typical company experiences 15% to 20% employee turnover every year. Chances are that one out of every five or six decision-makers will have left their company within a year of rejecting your proposal. It behooves the sales professional to maintain a list of rejecters and to call that list periodically (e.g., quarterly) to determine who may have moved on.

With a new decision-maker in place, you have an opportunity to re-initiate the sales process.

3. Change your mindset. Re-orient your mindset regarding rejection. The more readily you view most sales call rejections as opportunities, the more likely you will ultimately turn many rejections around.

Many sales professionals find both the fear of rejection and actual rejection so uncomfortable that it affects their overall performance. Above all, sales is a numbers game; the more calls you make, the more sales prospects you will close, even with a constant “batting average.”

Thus, you must learn to persevere, not take rejection personally, and, whenever possible, view rejection as an opportunity for a successful sales effort down the road. ■