



Using Workplace-based Education as a Marketing Tool

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Offering a key decision-maker a tour of your facility is often helpful in signing a new client. But what about the scores of individuals who work for that company? They're not likely to come traipsing through your clinic en masse, hungry to learn about your services.

Remember what the infamous criminal Willie Sutton said when a reporter asked him why he robbed banks: "That's where the money is." Similarly, if you want to reach the workers who will be treated at your facility, you need to go where they are. Taking your "show" on the road is an excellent branding opportunity for your clinic, allowing you to connect directly with hundreds, if not thousands, of prospective clinic users, often setting up an employer prospect for further sales activity.

Following are some tried-and-true tips for making the most of that opportunity.

Tip #1: Create a finite package of educational offerings. Many clinics create a "one size fits all" presentation that is offered to every comer, thus neglecting the priority needs at individual companies.

Conversely, some clinics create one-time-only talks tailored to every individual company.

We have found that a middle ground works best. Design, say, five different programs and provide the one program that is most relevant to a particular company.

Tip #2: Select a topic of interest that is occupational health-relevant. Many times, the choice of a topic is dependent upon who within your clinic family is willing to

speaking. The pet topic may be a good one, and the speaker may be competent and polished, but if the prospective audience is not interested they will stay away in droves.

Likewise, the goal of a talk should be to create greater awareness of occupational health issues. If you are trying to educate and motivate your publics, why not deal directly with work-related health and safety issues?

Tip #3 Seize the moment. Take full advantage of your exposure. Ask for the name and email address of everyone in the audience. After, send personal, information-oriented emails to individual workers.

At its core, outstanding marketing is basically a numbers game. One workplace lecture a week before just 50 employees would generate (assuming 80% would offer their email address) 2,080 individual email addresses per year. Monthly email advice for 2,080 members of your community provides an excellent opportunity to brand your clinic in a positive light.

Tip #4 Make it fun and add some pizzazz. Veterans of quality sales training programs recognize that the best way to teach something is to create an interactive, fun atmosphere. Ask your audience for their opinion, offer little contests with some type of prize or reward, or do a brief pre-talk and post-talk survey ("Let's see if and how your perspective has changed...").

Tip #5 Talk the talk of the common man. There is usually dissonance between "provider-speak" and "employer-speak" and an even greater gap between provider-speak and rank-and-file worker-speak. Frame your message in simple phrases and concepts that can be understood by everyone.

Tip #6 Learn something from your audience. Education should be a two-way street. Ask your audience to complete a short mini-questionnaire (perhaps three to five multiple-



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choice questions) and supplement the quiz with show-of-hands questions (“How many of you...?”).

Use this information to customize the presentation and provide feedback to your employer client. For example, you might ask everyone to write down “the one thing that your company should do to make your workplace safer and healthier.” Results from such questions can be an eye-opener for the employer and may lead to greater opportunities for your clinic.

Tip #7 Post results on your website. Why not ask the same questions at every worksite and publish the composite results (e.g., “Across 2,000 employees in Gotham City, 23% felt that poor communication with senior management was the number-one deterrent to optimal workplace health and safety”).

After awhile your “N” will be large enough to offer cross-tabulations comparing area companies by size or broad industry classifications.

The more other companies are exposed to such information, the more likely they will want your clinic to speak at their worksite.

Tip #8 Keep a few relief pitchers warmed up in the bullpen. If just one person is your go-to educator, your goal of one onsite presentation per week will quickly dry up. Thus, a goal of 50 programs per year could easily fall to only 10 programs per year, thus rendering your entire onsite education plan just 20% as far-reaching as it could be.

Tip #9 Place your talks in context. Remember Mark Twain’s famous idiom, “Tell ‘em what you’re going to tell ‘em, tell ‘em, and tell ‘em what you told ‘em.” This structure should be central to all talks (and sales encounters, for that matter); place what you are about to say in the clearest of contexts and end every presentation with a brief synopsis of your key points.

Onsite education should be viewed as an outstanding opportunity for your clinic and an obligation to effectively serve your community. An educated and appreciative population will likely view your clinic in a better light, and an informed population is good for both your clinic and the community at large. Onsite education should be part of your clinic’s portfolio and will have the best chance to succeed when it’s offered with both forethought and careful planning. ■

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alyzer records a .09 and .095, which are both above the legal limit.

Your state medical board has explicit rules about self-disclosure, so you call and report your DUI charge. During your board interview, you honestly discuss your “typical alcohol consumption patterns,” which are actually quite conservative. However, during the board’s investigation, they find evidence on different social media sites where someone has tagged you in different pictures. Although these pictures are seemingly benign (vacation, ski trip weekends, birthday parties, etc), you are holding some form of an alcoholic beverage in the majority of them.

Now the board believes not only that you have a problem with alcohol, but also that you were not being honest with them during the investigation, which results in even further board actions.

Please wrap your head around this: *Everything* that makes its way to the worldwide web is discoverable and often admissible if the opposing attorney can make some causal link between your alleged actions or inactions and what you have posted. It may be as simple as making you out to be an uncaring or unsympathetic jerk in front of the jury. Although it may not be directly relevant, if part of the argument is that you did not take the time to follow up with the patient, the jury viewing you as uncaring will not bode well.

In cases where I am deposed as an expert, the opposing counsel often has every article I have ever written laid out on the conference table. I am sure that part of their goal is to intimidate me; however, the other part is to quote sentences out of context to me and see if I agree or disagree. If I disagree, the next phrase out of their mouth is, “Dr. Shufeldt, do you recognize this article? You should, you wrote it.” The only good news in all this is that it makes the Journal’s readership numbers go up. (To date, the only thing I regret is the “Checklist” article where I shared a picture of me holding a goose and wearing a dress at Mardi Gras.)

The final caveat is this: The bar for admitting evidence from social media sites is fairly low. You should not post anything which you would not want shown to a jury, your spouse, your partner providers, or your employer since it will be viewed in the worst possible light and in the worst possible way. ■