Grow Your Specialty: Course Outline

Title: Grow Your Specialty: Get More Patients to Say Yes and Spend More Time Doing What You Love!

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Description: Many practitioners who attempt to add a specialty service fail to make it a meaningful part of their practice. This course will focus on strategies to effectively communicate value, overcome objections, and get more patients to "buy-into" your specialty.

Learning Objectives/Outcomes:

- Understand the science of how patients make decisions
- Learn how to present solutions in ways that inspire action
- Learn how to overcome skepticism and objections

Course Outline:

Intro

- The problem: Patient education often fails to inspire change/action
- Patient education and effective communication are not the same thing
- The role of influence in patient communication
- Warren Buffet story

The Brain Science

- The human brain makes 30K decisions per day
- The reasons information alone is surprisingly ineffective at inspiring change
- A review of how our brain makes efficient decisions
- The human brain: cognitive miser
- The role of emotions in decision-making
- A review of patients with brain trauma and the effect on decision-making

Build Curiosity (make people want to hear it)

- Panera Bread story (personal story highlighting the power of curiosity gaps)
- The science of curiosity
 - Effect of curiosity on brain chemicals
 - The role of the midbrain
 - The role of the hypothalamus
- Data on curiosity
 - 82% of the time we become curious before making a big decision
 - o 2 out of 3 consumers complain that salespeople don't ask enough questions
 - o 64% of patients report they don't feel understood by their physician
- How do YOU build curiosity (audience participation)
- Mirror questions
 - \circ Look inward
 - Create awareness
 - Reshape thinking
- 5 key questions that build curiosity for your products/services/treatments
 - How is this affecting you?
 - Uncover emotional drivers
 - External problems vs. internal frustrations (which is more likely to drive change?)
 - Share personal story
 - Can you relate?

- Storytelling: Share relatable stories of other patients
- Are you aware?
 - Make patients aware of problems they didn't know they had
 - 3 powerful words that get the patient's attention
- Does this concern you?
 - Avoid "assuming" and creating a disconnect
 - Assess for importance and urgency
 - Examples from Helen Ries's Ted Talk
- What if?
 - Help patient visualize the positive effect of change
 - Story of AMD patient
- Why questions can be more influential than statements
- The role of "labeling" to establish understanding

Build Excitement (make people want to have it)

- What needs to be included in a presentation?
- Story of Brant Pinvidic (say less, get more)
- The forgetting curve
 - We forget 90% of new information within 3 days
 - We don't act on things we don't retain in our memory
- What's YOUR pitch (audience participation)
- 4 questions your presentation MUST answer for the consumer
 - What is it?
 - The need for clarity and simplicity
 - Novelty vs. familiarity
 - Story of certified fitness trainers
 - Novelty chunking
 - How is it different?
 - The role of contrast and decision-making
 - Example: Patient refraction
 - Responses to choices that appear similar vs. different
 - How do I know it works?
 - Proof vs. claims
 - 3 ways to demonstrate proof: Data, demo, stories
 - Storytelling: 22X more likely to remember stories vs. facts/data
 - Human brain wired to retain stories
 - Stories influence decisions by connecting with the emotional side of the brain
 - Psychological phenomenon: Narrative transportation
 - Why do I need it?
 - Avoid the product dump
 - Tie solution to what's important to the patient

- Direct enthusiasm at solving the patient's problems, not at your product
- People will always be more passionate about their problems than they will about your products

Build Engagement (make people want to act on it)

- The director vs. the guide
 - The role of motivational interviewing
- Research on patient-centric care
 - o More likely to stick with treatment regimens
 - Less likely to regret decisions
 - Fewer malpractice claims
- When to be assertive, and when to "let the patient have YOUR way"
- Seeking a commitment
 - First make a commitment to the patient
 - Second, ask the patient for their commitment to the treatment plan
 - o Cialdini research on the power of a verbal commitment

Deeper Dive into the Research (Why this works)

- The limitations of information
 - The forgetting curve
 - Obesity studies
 - \circ $\;$ Not an education problem, it's an execution problem
 - NYT article:
 - Calls patient non-compliance an "out of control epidemic"
 - Annals of Internal Medicine: People prescribed medications for chronic disease fail to take meds as prescribed half the time. 20 – 30% of medications never filled in the first place
 - Nonadherence to prescribed therapy in patients with chronic disease accounts for \$100-\$300 billion in avoidable health care costs annually in U.S. alone
- What's a better approach?
- So, what's my opinion?
 - My opinion doesn't matter
 - We hear lot of opinions, let's look at the data
 - data from 1,000 scientific abstracts and more than 250 original science abstract papers
- Research: Compassionate care led to odds of optimal blood sugar control 80 percent higher, and 41 % lower odds of serious diabetes complications.
- Reiss: Effect of compassionate care greater than effect of aspirin for reducing incident of heart attack over 5 years or statins on 5-year risk of adverse cardiovascular event.
- Reasons for noncompliance
 - $\circ \quad \text{Ability to pay} \quad$

- o Side effects
- Lack of understanding about disease
- Complicated instructions
- Doctor doesn't really care does EDUCATION communicate caring?
- What do patients value?
 - Harris Poll:
 - 85%: treat me with dignity and respect
 - 84%: listening carefully and being easy to talk to
 - o 27%: physician being trained at one of best med schools
 - 85% said they would choose compassion over pricing when choosing a doctor, only 31% said cost was very important

Conclusion

- Apply the research
- Do your own personal experimentation (keep what works)
- Story of non-compliant diabetics
 - Research to determine why diabetics don't check their BSL regularly
 - o How this applies to being an effective communicator