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Best in Class Approach to Delivering Excellent Patient Care

Presenter: Katherine Cardona

Good morning, everybody. Hopefully you can hear me. Okay. So today's course is the best in class approach to delivering excellent patient care. So my name is Katie Cardona.

I'm a clinical trainer for Phonak based in Georgia and I work very closely with all of the other trainers across the country.

So after this course you'll be able to explain the impact of best in class practices on key performance metrics, identify clinical activities that affect hearing aid adoption rates, and then list key activities that can be implemented to provide excellent patient care. As Anna stated, if you have any questions, please put it in the Q and A. I will try to look at them as we're going, but I may keep them to the very end.

So we all know that the decision to treat hearing loss is rarely made the day that someone is diagnosed. So From Market Track 2022, we've seen that the time from patient first self reporting hearing loss or noticing that they have hearing loss to actually getting their first set of hearing aids has decreased from six years to four years. Now, while that's a great step in the right direction, there's still that four year gap where we're waiting for those patients to make that decision. And you know, when they waited that long, they are expecting so much when they get to that point. So we're going to go through that patient journey.

So simply providing excellent clinical care is not enough anymore. The definition of care now includes every touch point with your office, from the initial phone call to the invoices, follow up care and everything in between.

So when it comes to hearing healthcare, patients today have access to an abundance of information. They have multiple options for treating their hearing loss, and they really expect an exceptional patient experience. So I've been an audiologist for many years and I've never met a provider who claims

they've provided terrible patient care care. But I'm sure in your clinical practice I know I can, that you can think of at least one person who has come to you because they had a negative experience somewhere else. So our Phonak Audiology Research center, also known as PARC, did a focus group in 2018.

And that focus group showed that nine out of 12 patients had a negative experience with their hearing healthcare providers. So while each individual's experience was varied, they clearly fell into two different categories. The first one was their provider took a one size fits all approach. So the patients felt that their provider did not take the time to get to know them or understand their unique challenges and that the recommendation wasn't really just based on their needs. It was just whatever worked.

The second one was that their provider recommended expensive premium technology. Now, as an audiologist and working for a hearing aid manufacturer, I can say I would love to have everybody in the top of the line technology, but we know that's not always the case. So these patients felt that the level of patient care and the patient experience attached to that care did not justify spending the amount of money, not because of the technology, but because the care and their experience just didn't really match. So let's start by talking about what a patient, both a potential patient and existing patients expect when it comes to their healthcare experience.

So we are all healthcare consumers, so we all go to the doctor. We are somebody's patient. So understanding what your patients expect when they come into your office shouldn't differ than what you expect when you go into your own doctor's office. So as we said in the beginning, simply providing excellent clinical care isn't enough. Patients today are looking for a few things.

They're looking for convenience, they're looking for minimal wait times, they're looking for transparent communication. And most importantly, they want personalized interactions and to feel like they're heard and understood.

They don't want to feel like they are just another patient or just a number in an office.

So as consumers, we all go through the stages in our decision making process or a buying process.

With hearing aids, we know that it is a buying process, there is some money exchanged. So your patients are no different. The stages of the patient journey begin with awareness. How do patients find your practice?

What is your brand? How are you going to promote that brand? Once the patient finds that practice, finds your practice, they begin evaluating your practice and whether they, whether or not they want to receive care from you or not. If you've wowed them in their initial experience, then they'll enter the purchase decision stage. What is their experience during the evaluation and consultation?

How is your practice presenting different technology? What options are provided when discussing price? And as you all know, the relationship doesn't end with the fitting. Patient retention and patient advocacy are the final stages of the patient journey and in many ways the most important. And if the goal is to retain patients and create advocates, one can argue that a better representation of the journey may look like this.

So if you think about it, the journey is better represented as a cycle where the patient and their family members continue to move throughout the stages to provide an enhanced patient experience at each step in the journey. We need to get more granular, more in depth. There are multiple points within each of these Stages that can influence the patient's perception of, of their experience. So take a minute, think about your clinic, Think about a patient who's new to your clinic. What does their journey look like?

Where along that journey do you have an opportunity to create an exceptional patient experience? And how many touch points can you think of? So how's their front desk experience, how's their check in

process, how's their scheduling process? Think about all of these things and we're going to go more in depth to each of these.

So these are the touch points that we've identified. So there's a lot which is great because it gives each little step a chance where we can make an impression for our patients. So we've color coded them to match the corresponding stage of the patient journey. So we have awareness, we have evaluation, where the patients are evaluating your clinic. That's from the initial phone contact, the location, the waiting room, the reception.

Then we move on to the purchase decision stage. We have the exam room, the diagnostics. What's your recommendation? How's the checkout process, patient retention, that follow up and then coming back for appointments and then finally patient advocacy. So what we're going to do today is we are going to take a patient through the touch points of this patient journey.

So here's our patient. This is Jeff and his lovely wife Susan. Jeff has been thinking about five or so years, he's kind of noticed a change in his hearing and we know that's pretty typical. So average four years used to be six years. He's kind of right there.

And we want to see how Jeff's experience is. So let's start with awareness.

So thinking about awareness, we know that patients are finding our information somewhere. So these are some questions to think about. What are you doing to promote your brand? How are you attracting, attracting new patients? Are you marketing?

Are you doing health fairs? How are you keeping existing patients aware of new technology? I know from my days in clinic I had a few patients that I can vividly remember every time they came in for a follow up. Hey, is there anything new yet? Hey, is there anything new yet?

How are we keeping those patients up to date? Essentially the bottom line, how are you standing out and getting noticed? What makes you different from another clinic? So the first step for our patient Jeff is also awareness. So he's become aware of the increasing difficulty he's had and he wants to do something about it.

Fantastic. And like more than 60 seniors, 60% of seniors in America, Jeff's going to go online to look at his healthcare information. This is that trend that we're now seeing with baby boomers who are looking for their health information online. And just a little fun fact. Did you know that 80%, 87% of shoppers begin their product searches online?

So chances are our patient Jeff is going to Google things like hearing test, audiologist, or hearing aids near me.

Now, just a little fun question. Type in the chat. How many searches do you think Google processes daily? I'm going to take a quick sip of water while I'm waiting for people to write that in the Q and A or the chat.

No one, no one's guessed yet.

Well, if you can imagine, because I was kind of blown away by how often this is. Oh, I got 1.5 billion close. Google processes approximately 8.5 billion searches daily. So 5 billion was pretty close.

So if you kind of average that out, we're doing 99,000 searches per second. That's a lot. And, and so that's going to account for about 92% of the global search engine market. So I know we all talk about, we use Google as kind of a verb now. So, hey, just Google it.

Well, that's what people are doing. They are going to Google and they are searching for this information. So let's jump back to Jeff. He's googled hearing aids near him. Think about your own practice.

How robust is your digital presence? If he's in your area, is he going to find your practice by Googling? If he does, will you show up in the top search results?

So according to some data analyzed by FirstPage pagesage.com that's a tongue twister. The top three organic search results, not the paid advertisements. So the paid advertisements are the top two Organic. At the next one, those receive more than two thirds of all of the clicks on the Google search page. So that is awesome.

We want to get you in that top three if you really want to take it a little step further. If you're googling a business like hearing aids near me. The Google local business results display the top three locations with the option to show more. These top three receive almost half of the clicks. So using that Google business is a way to take your clinic a little bit further.

So if your practice isn't ranking in the top three, here are some things to consider so you can set up a Google business profile. It was formerly known as Google My Business. It is free and it's easy to manage. It's one of the first things that people see about your practice even before they've clicked on your website. If you don't have an entry on Google business profile.

You can't rank locally, which means prospective patients Google hearing aids near me, you won't show up. Once it's set up, be sure to encourage your patients to write a review. Positive reviews can influence purchase decisions and attract new customers to small businesses. 93% of consumers read online reviews to determine the quality of a local business. I know I do.

When you're trying a new restaurant, don't you read the reviews about it? I know I do. I don't want to go someplace that has horrible service. I do the same thing when it comes to doctors. I want to see what people are having to say.

Responding to your reviews, especially the negative ones, is important. Not only does it improve your online presence, but it also can have a positive impact on customer perception and responding to those negative reviews with I want to make this right, I hope we can make things better for you. We want to make sure we're not attacking people who are leaving us negative reviews either. Now let's look at keywords to help customer find what they're looking for. So think about yourself as a potential patient who has decided to do something about their hearing loss and think about what you would want to enter into a search engine to get what you need.

Maybe you live in Seattle, so we want to make sure you're ranking high locally. So as your keywords we want to put hearing aids Seattle as opposed to just hearing aids.

And then finally to your website. So getting past all of that initial search, let's get to your website. We want to optimize your content on your website. We want to include quality content that uses your keywords naturally and make sure your website is optimized for mobile devices. I didn't know this stat before today, but 63% of Google searches occur on mobile devices now.

I'm not surprised. I use my phone for Google searches all the time. But have you ever opened a website and it's not mobile friendly? It's very difficult to read and sometimes you get frustrated and you close it out. It could be the best thing in the world, but if it's not optimized for mobile viewing, it's probably going to get closed.

So let's talk more about your website. So we have Jeff. He's now found you with his Google search. Now he's going to look at your website. What does your website say about you?

Your practice's website is one of the first criteria prospective patients utilize when making their decision.

How does it differ from other practices? Does it Express the value that you offer. You know, there are a handful of companies that do audiology websites, and there's also a lot of content and images that are used on multiple websites. One way to differentiate yourself is to have pictures of you and your staff done professionally. And we want to also show the practice, not just a headshot, so when your patients walk into the room, they can say, oh, this looks like just like what I saw on the website.

It's not a stock image of a booth.

So we know that 93% of consumers read those online reviews, but did you know that 88% of consumers trust the online reviews as much as personal recommendations? So we don't want to limit our reviews to just Google. Make sure you take those and highlight them on your website as well. You can have positive testimonials, success stories, all of those things. It's wonderful to keep that on your website.

It's good to also have educational content, but it should be engaging. Videos attract more attention than written content, but we want to make sure they're short and sweet, not an hour long video. There are services that can provide educational videos for you, or you can create your own featuring you and your staff.

Now, I cannot stress number three enough. Update, update, update. Just like the magazines in your waiting room, we want to make sure that the content on there is fresh and not outdated. Same thing with social media. So connect all of your social media platforms and keep those updates updated as well.

I cannot tell you how many times I walk into a clinic and the posters they have on the wall are from a hearing aid that's five or six generations old. Now, granted, it may still be a great hearing aid, but that's not current. Let's talk about current things. And then finally, do you have a clear call to action? Do you have a hearing screener on your website?

Do you have an opportunity for patients or potential patients to book appointments? What is going to make them move forward after they visit your website?

All right, Jeff's found your website. He enters the evaluation stage of the patient journey. So either he's going to pick up the phone and call your office or book an appointment on your website.

First impressions matter. I know that's a phrase that people hear a lot, but it really does. So 89% of patients decide whether or not to book an appointment based on their initial phone interaction. And as you most likely heard from back in the 80s, there was an old head and shoulders commercial where they said you never get a second chance to make a first impression. And that's True.

So, things to consider with these touch points.

When Jeff or his wife Susan calls your office, what's their first impression going to be? Who's answering the phone? How well is your front staff? Front office staff trained in answering questions, handling objections, converting calls to appointments? Are they able to engage potential patients and understand their reasons for calling?

Do they start building a relationship and guide them to booking an appointment, or do they simply just give a price of hearing aids when they're asked? Do they routinely request a friend or family member to attend the appointment with the patient? When was the last time you listened to these recorded calls and coached your front office staff? Remember, today's patients expect convenience and minimal wait

times, including on the phone. They want to make sure that they are heard, understood, and have strong relationships with their providers.

What if Jeff booked an appointment on your website? Do you have a seamless process in place to follow up on digital appointments or digital leads? Is your schedule set up to ensure that your front office staff can successfully meet the patient's expectations? Ideally within a week. We Learned from our 2024 benchmark survey that when prospective patients are booked out more than one week, cancellation no show and tested not treated, rates increase.

Do you offer appointments outside of traditional working hours for convenience? And I know that can be a controversial topic, but sometimes it needs to be done. Once an appointment is booked, do you have a process in place to begin building that relationship with the patient? Many patients are anxious about audiology appointments, which I laugh because we're the most painless appointment people can go to. We want to make sure we're clearly communicating what will happen with their upcoming visits and help them plan accordingly, alleviating any of those worries.

So I love this graph. This just shows that tested not treated rate and the cancellation and no show rate between greater than one week scheduling time, that's the blue, and less than one week green. So as you can see, getting patients in quickly, very important.

So the first impression doesn't end when the appointment's scheduled. So when they get to your practice, is parking going to be available? Is it easy to find your office? Are there obstacles? Is there construction?

Blocking a sidewalk? If you're in an office building, is it easy to find your office? Once you're in the office building? These are all things that can make an impact on people's decisions, whether or not to get care from you. As someone who travels to offices every single day, I can tell you there are some that

are very easy to find, some that are very difficult to find, and the ones that make it so easy with explicit directions.

Go down this escalator, take the elevator to the fifth floor. Those are the ones that I enjoy going to see a lot more. And that's not even me being a patient.

Once inside your office, how are they greeted? I'm sure we've all had at least one experience at a medical office where the reception receptionist doesn't make eye contact with the patient because they were on the phone, working on their computer, or even socializing with coworker.

What's your waiting room setup like? The waiting room is a major contributing factor to your patient's perception of care. Today's waiting rooms are designed to not only be more engaging and more comfortable, but but also act as a starting point for crafting this ideal patient experience. Believe it or not, your waiting room may impact patient satisfaction scores, increase closure rates and generate more referrals. We want to make sure that we keep our waiting room clean and organized more than just dust free.

But for instance, a waiting room with a clean, modern and coherent design can make patients feel comfortable and relaxed. On the other hand, if things are dated, they may feel suffocating and unwelcoming. Place amenities that can provide information or entertainment or both, like updated magazines, information on hearing loss, your staff services you provide. If you have a TV, consider a service of provide service that provides educational content. 93% of patients will come into appointment ready to learn more when when they've seen educational videos in the waiting room.

So we'll go into the next area of the patient journey. So this is all before patients even met you. This is all before that step. So now let's get to the part where you as the HCP have a chance to make a lot of first impressions. We're looking at the exam room, what diagnostics you're doing, the recommendation,

the counseling and the checkout.

So before we do that, let's take a break, check in with you as a provider, there's a couple of things that you just want to keep in the back of your head. We're talking about the patient, but where's your mindset? Firstly, let's talk about the patient centered care.

So patient centered care increases patient satisfaction. So what you're looking at here is a study where they looked at net promoter score. A net promoter score is a patient satisfaction rating. So basically the question is how likely is it that you would recommend an organization, a product, a service, an HCP to a friend or colleague? I know we all get those surveys, but that's what we're looking at.

And what this study looked at is the patient satisfaction with different interventions when it comes to family. So without any discussion about family, the net promoter score was a 22. That's, that's pretty low. When it was asked that a family member come in to attend the appointments, and that was talked about in the phone calls and reminder confirmations, that net promoter score increased to 54%.

However, when the provider not only had the front desk staff remind patients to bring them in, but then the provider implemented other things like setting up the room to include the family and talking to the significant other, that net promoter score increased to 83. That's pretty drastic than just that measly 22 that you got without including family.

So one of the things you can do to include family, like I said, set up the room, make sure the patient is there and the family member is also right there to be included in the conversation. Think about setting that agenda and asking the patient's spouse or family member specific questions. What are you noticing as an outside person?

So this is something that Phonak does every year. We do our benchmarking survey that also include that when patients or when individuals practice patient centered care or family centered care, included a demonstration and talked about the patient's overall well being, included cognitive well being. We got these results. We were looking at these three different things. So including family centered care, doing a demo in office and talking about cognitive well being, how this affected their average selling price or asp.

As you can see, when someone offered all three, the average selling price increased, which is what we want. We want people to be able to sell products for a higher price. Chances are when you're including all three, you will also get patients that are more apt to purchase higher levels of technology.

So you want to think and practice family centered care. So now let's talk about time of day, because this actually does play a role. So there was a study that came out with many patients as an N and looking at what times of day people were more likely to purchase hearing aids. So what they found was that at noon and 4, so here and here, there was more people who were less likely to to purchase hearing aids.

And why is it that it's risky to purchase a hearing aid? So this risk aversion theory, purchasing a hearing aid is risky. People are less likely to take a risk when they're hungry. So think about noon, people are usually getting hungry around that time. Is it because of the clinician behavior?

So at certain times, HCPs could exhibit behaviors that could influence patient decisions. Middle of the day right before lunch, end of the day, clinicians may be tired, hungry, in a hurry or is this pre existing differences? So younger patients are less likely to purchase devices? So think about it, there's all of these different things that could play a role. How can we change those?

This is where we come back to us as the hcp. So check in with yourself before the appointment. Am I ready for today's appointment? Am I in the good in a good mindset to move through this patient's hearing journey? Are you ready to demo in the office?

Are you ready to answer questions? Yes, it might be right before lunch. Yes, you may be starving for you. They may be just one patient throughout the day, but for these patients it's very important and we want to give our best throughout the day.

There is an increase in conversion rate when demos are included. This allows patients to make an informed decision.

The benefits of demoing show the potential value of features. Patients may have a negative taste in their mouth about, oh, my grandfather had hearing aids and all they did was squeal. Well, the feedback management systems are a lot better nowadays than they used to be. You're also gaining buy in from that companion. So you can see the patient's significant other or family member.

Just like, oh my gosh, they can hear you. What is this? They wouldn't be able to hear you otherwise. And then this patient now has the experience of, oh, this actually does benefit me. That will lead them to making that decision.

Okay, so we've checked in with ourselves, so we're good. We're ready for this appointment. We know that the family is important. We want to make sure our room is set up.

Let's go ahead. Bring those patients into the room. So when you enter your room, take a look around. What does this room say about me and my day to day practice? Do I have papers everywhere?

Is it being overrun by hearing aid supplies, impression boxes sitting and waiting? Are you giving off the wrong impression? Is your room set up to include a family member like we talked about?

So set up the physical environment so that the family are comfortably included in the consultation rather than being relegated into a back corner. Because that definitely makes a difference. That significant other needs to be an active member in the conversation. They're dealing with a third person disability, so they need your care as well. You also are going to be talking about communication strategies and we don't want to say oh hey in the background.

We want them to be part of that conversation.

So not only is the office set up something that can make a Good impression, but also having an agenda of what you're doing with that appointment, especially if the patient's never been to this type of appointment before. Start the appointment by letting the patient and the family member know that input will be sought from both of them. Patient first, then the family member. The clinician could say, we're going to do a lot today. For the next few minutes, I want to find out about your hearing and communication, directing that to the patient.

And then I want to find out about this from your perspective directed towards the significant other. The goal is to listen so as to attain an integrated understanding of the patient's family and their own physical, social and emotional needs. This will help you move along in the appointment and manage any objections as they come up.

Once you've uncovered their needs, you'll move on to that testing phase. This is a great chance to make a first impression. What does your equipment look like? Do you have dust laying on top of your real ear equipment? Does your equate equipment look like this?

Is it super old or this? What's going to look better? Are you still using paper audiograms? The patient experience and sometimes the value they perceive is based on technology. Do you have multiple screens that you can include the significant other?

Oops, let me go back now. We're also looking at measures. What questionnaires are you looking at? Are you looking at things like the HHI or hhi? Are we looking at cozies?

What are those things that we're going to measure the patient's progress by and then doing meaningful diagnostic tests? So you're doing a complete diagnostic battery that's appropriate and you know, a patient is going to come in and say, you know, nobody's ever done this test for me when, you know, it's an important part of the battery like speech or word recognition. If your patient is reporting difficulty in noise, do a hearing and noise test. You are going to have so much more discussion and so much more value just by doing a few small changes.

So during the diagnostics, this is a great time to have your patient's family members available because I'm sure you've all seen this look before. We've all been in the office with these two people, so where one's mad, the other is kind of ignoring them. And when the significant other is part of your diagnostic test, they get to hear the things that the patient is missing or hearing an error, so they get to be validated on their feelings. They also get to see that you are providing a comprehensive test. So they also can say, hey, like Dr.

Smith did all of these tests for you.

So think about the impact of hearing loss on family. That's psychosocial stress, embarrassment. Maybe you're not going out as much because your spouse isn't hearing as well. There's changes in relationships, changes in roles and responsibilities. All of these things that aren't just affecting the patient, they're affecting their family member as well.

But we see when the family is involved, hearing aid adoption rates go up, especially for mild losses. People will be more apt to purchase a binaural set of hearing aids versus a monorail device. I know we've all heard that. Can I just get one? And then overall the rate of hearing aid return decreases.

So having everybody aligned during the diagnostics is a great way to keep the ball rolling.

So now we've done this testing, we're going to be counseling and making a strong recommendation. So think about Jeff and Susan. You've already talked to them about their needs. You've done your measures, you've done your diagnostic test testing. Phonak has some great resources to help discuss patient goals and needs and then what products might be appropriate for them.

So on the screen we do have our counseling guide which is a two sided page where we can write out the patient's goals. We can quickly mark an audiogram on there and it helps us push them into different levels of technology beyond the purchase decision or around the purchase decision. Let's talk about trial period. So this is Jeff's fitting. He has to be comfortable with what he's doing.

We also want to make sure that we are verifying, validating and making sure that we are using our best practices to make sure that the hearing instruments are providing amplification like they need. So maybe you can do a same day fit and you want to do this right then.

And we want to use these outcome measures to validate that you've succeeded meeting their goals. You may want to talk about what that follow up process is going to look like. Hey, you have a trial period. I'm going to see you back in a couple of weeks. Because this is an adjustment making that patient feel comfortable and knowing what's coming up, not just throwing a set of hearing lights on them and by see you when you see you when we see you.

So think about the patients where you don't do a same day fit. We're going to do a demo, aren't we? So in order to get set up, let's make sure we are keeping everything very simple in terms of demoing. In terms of explaining products, I'm wondering in the Q and A, how many people demo is. Do you demo on everybody?

Do you demo on new patients? Do you demo on nobody?

Leave that open for just a minute.

The easiest thing when we are, when we are setting up patients for success, are making sure that we are doing a few things, keeping it simple, target for personalized needs and planning for success.

So we want to look at what are your patients priorities. So when they come in, these are features that you can demo. So Jeff and Susan spend a lot of time with their grandkids. Hearing soft voices is super important to them. This is where Speech Enhancer is going to come in.

We can demo Speech Enhancer in our software. Hearing at a distance, in meetings. Speech enhancer, great feature. Also looking at Roger technology. If someone talks about hearing and noise, let's look at spheric speech clarity.

If someone talks about taking phone calls, let's show them Bluetooth streaming. By keeping it simple and focusing exactly on what they are reporting to you, you can demo specific features which does a few things. Number one, it builds the rapport with your patients of hey, they actually listened to what I had to say. And two, you can sit there and say, I have a hearing aid that has this specific feature that's going to work for you. And then you're not overwhelming your patients with all of the technology.

And we know hearing aids have a lot of technology nowadays.

We have a lot of resources that will guide you through demonstrating technology. So here you can see the printouts of demoing Infinio technology and demonstrating Roger technology.

This is a really good time. They can gain agreement and they have hearing loss. A hearing aid will help them. They can also hear what they've been missing. You can get the excitement, you can get their spouse's excitement and you can point out the change in body language when they're actually hearing better.

Both of these are available on phonak.com so what are some of the next steps to consider along the patient journey?

So up to this point, we've talked about family centered care, patient centered care. They've both been included in the consultation. You've demoed. You've made specific recommendations. Well, 56% of tested not treated patients report a financial reason for not moving forward.

Providing a flexible payment option for your patients can help a patient fit better hearing into their budget and allow them to purchase the best technology without breaking the bank. Based on our 2024 benchmark survey, the average selling price reported by practices that had greater than 26% of their patients finance hearing aids was almost \$300 higher per device than those who did not offer financing. Additionally, financing can enhance the patient experience and garner patient loyalty.

So think about that. That's probably the number one thing that we get pushback wise. In terms of hearing aids, why are they so expensive? And that's where that demo comes into play. Yeah, we can do this lower level of technology.

But you mentioned hearing your grandkids with soft voices is important. The feature that will do this is only in this higher level of technology. So tying all of that together will really help the patient.

So that final step is the checkout process, which is just as important as the first intro walking into the office. A poor experience here could result in the patients rethinking their purchase decision. In addition to collecting any payment, signing any documents, scheduling follow up appointments, this is an opportunity for your staff to answer any questions they may have and reassure them that they will continue to receive excellent care with you, your providers and your practice. And finally, biggest thing, we don't want to forget to thank our patients. We know patients have a choice of where to go.

They have a choice of who to see and where to go next time and who to refer their friends to. A simple thank you may just make the difference between you and your competition.

So that was just the patient journey from initial finding info to getting hearing aids with a few openings in between. We know that process is not that simple. It's much more complex. But what about follow up and retention? So when your patient leaves the office, whether it's a new patient or an existing patient, what are you going to do to provide an exceptional patient experience between appointments?

Are appointment confirmations a routine part of your practice? Maybe your front office is making those calls. Maybe you're using an automatic feature. Either way, those are important touch points. For me, I would probably forget about appointments if I did not get reminders.

What are some other things that you're doing to go above and beyond? I know my last practice we used to send birthday cards and I had patients who came back and they're like, I loved the birthday card I got. It wasn't anything extravagant. It just said the staff at Blank Clinic. That's awesome.

Those small things mean so much. Do you have packets? Do you have folders that they can put all of their information in?

How about the follow up visit itself? Does it get scheduled or are we saying, oh, just call us when you need us.

That's a really simple way to just enhance patient care.

So let's think About a little bit different version. I know this came up a lot more with COVID but remote support appointments are very, very easy to do. They can be very quick, but they're effective, efficient. And for some of your patients this can be just a quick check in just like a, hey, six months, do we need to make any adjustments, those types of things? Now I will say this is not for every patient, but there are some patients who can't take an hour off of work to come in for a 10 minute appointment.

For you to say, yep, things are good. Think about incorporating tele audiology into your practice.

So there was a study determined to design, to determine feasibility and outcomes of hybrid audiology. They looked at patients aged 70 years or older, first time hearing aid users and they followed up with two Internet based follow up appointments. So this is after that initial appointment, getting fit with hearing aids, verification of hearing aids. This is after that. So they did these through remote support.

And you can see based on the table, you can look at the dark blue bars, which is their acceptance of telehealth, before trying this. Then at the end, which is the light blue bars, you could see after this, patients were more comfortable with telehealth. Think about those patients who come in every six months. You hook them up to the software, no changes, they know how to clean their hearing aids. Think about what teleaudiology would do for you and your clinic.

So the conclusions of this, which were very strong coming from a researcher, that this was a feasible hybrid audiology service delivery model for older adults. And I think that's pretty powerful. Like I said, think about the time that that would alleviate in your schedule where you can get more of those inpatient appointments available.

So this was also done a few years ago. This was another study that looked at 50 participants over 100 different sessions and the average age was 65 years. So we looked at commuting time. So the average commuting time from their house to the office was 35 minutes. And you could see that patients were highly satisfied with remote sessions.

And HCPs were also satisfied and felt that they were valuable and that they were as efficient as a face to face session. I want to bring your eye down to the 64% in the bottom left hand corner. So 64% of these patients 65 years and older would prefer a virtual appointment if possible.

So once again, think about a commute time of 35 minutes each way. So you're looking at an hour and 10 minutes plus the appointment time in the middle.

That's a good chunk of your day. If you've got a younger professional who's working, that may be very difficult.

Now, that was what we previously looked at with older adults. Now with our younger patients, we looked at these with younger patients. So between the ages of 11 and 19, I will tell you, kids are not super psyched about coming to the audiologist. They're not super excited to get their hearing aids adjusted or even wear their hearing aids. And we looked specifically at this age range because this group were frequently missing appointments.

Once they got into remote support appointments, they felt more relaxed, they would recommend it, and they would actually prefer a remote session. So if you're working with teens or younger adults, maybe they have after school activities, after work activities. They're hard to pin down. This is something that would be highly beneficial for them.

So offering convenient telehealth appointments can be a strong differentiator for you and your practice and may generate patient loyalty.

So, looking at retention of patients, do you know how many patients you're losing to your competition annually? Something to think about. Our benchmark survey indicated that on average, 20% of patients were reported to be new to the practice, but not new to hearing aids, meaning they had gotten their hearing aids somewhere else. So maybe that relationship wasn't nurtured by the original practice or they weren't satisfied with that patient experience. Either way, it reinforces that importance of providing an enhanced patient experience and marketing to your existing patients.

Practices facing 20% or higher attrition rates have a huge opportunity to keep existing patients by using some easy and automated retention strategies with their existing database. This can be done just by regularly reaching out to your patients four to six times a year. There's numerous automated ways to do this.

This can also bring in the concept of demoing. I know when we first launched our Infinio sphere device in the fall, I had customers who had a list of patients who they called and said, hey, there's a new product. I want you to come demo this. That is a way to keep those patients coming back to you.

We also have the opportunity to consider retention with normal or mild hearing losses. So the benchmark survey asked what services the practices offered as part of a holistic approach for patients either without aidable hearing loss or mild hearing loss. 93% of the best in class practices utilized

cerumen management. So we know that this is a service that typically needs regular touch points. So providing this opportunity and building that relationship with our patients is going to benefit everyone.

Contacting your current patients not only prevents attrition, but it can create loyalty and patient advocacy. By nurturing the relationship with your existing patients, you'll see much better return on investment on your marketing efforts. But more importantly, you'll turn your existing patients into advocates and ambassadors for your practice. Satisfied patients tell their friends and families, but ambassadors tell everyone.

Patients who receive regular updates from their healthcare providers are three times more likely to refer others. And we talked about that NPS score earlier and patient advocacy you'll get. With a high nps, how many of your patients can you think of that could be advocates for your practice?

So we've spent an hour talking about the whole patient journey, from each touch point, from awareness to being in the actual waiting room, that phone call to your exam to that follow up. What are the things that you are going to implement tomorrow? Think about your patient journey, walk through your clinic and see it through the eyes of a patient. Thank you so much for your time today and of course, your commitment to exceptional patient care because we're all here to make things better for all of our patients in the hearing community.

All right, if there's any questions, feel free to pop them in the Q and A.

I did get a few comments that a lot of people do demo and I love that. The one thing I want to encourage is if you are demoing, make sure we're demoing both in quiet and in noise. Because many hearing aids will sound very similar and quiet. Where Phonak very much excels and where the difference in technology will be is in noise. So if you are demoing, make sure we're demoing in noise and in quiet.

Any other questions? Popping up?

All right, I don't see anything else popping up. Have a great day everybody.