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# Audiology PRACTICES

## IN THIS ISSUE

**Business Planning for the New Year**

**Probe Microphone Measurements**

**Diabetes and Your Patients**

## ALSO INSIDE

**Professional Issues**

**Pandora's Box**

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# GO ONLINE!

## MARKETING IN THE HEARING INDUSTRY

BY MARKUS HILBERT, Au.D.

You may be wanting to grow your practice, reach more potential patients and earn their business. Yet you may also be trying all the “so-called” right tactics with a strategy not yielding the return on investment (ROI) you intend. While marketing is as much an art as it is a science, we can understand the consumer better when we take a broader perspective of the industry, our offering and how we go about promoting it.

## So what is our profession? What do we do? Audiologists

promote better hearing with two key components:

- **assessment**—testing and diagnostics, counseling
- **treatment**—product recommendation, AR and fitting.

From an end-user perspective, our first component regarding assessment carries less value than the treatment component. From the patient perspective, their experience for the purpose of a hearing aid fitting may not differ significantly from their experience with a hearing instrument specialist. The key is to deliberately show value—we can assess more, in greater depth, as the condition warrants with evidence-based practices. The overall care and available care is simply more advanced. So to stand out for clients, the first differentiation we need to make is about the profession of audiology and how being an audiologist adds value to the patient both now and in the future—specifically related to diagnostics and counseling. This differentiation is founded on good rapport between you (the audiologist) and your patient.

From an audiologist's point of view, we build rapport with a patient, which typically comes after they have agreed to be tested, have perhaps done some research and/or visited your competition. So during the initial interview, the real, yet unconventional "sale," is rapport, not products. We sell ourselves: clinical knowledge, product knowledge, and our expertise through our rapport, which should be positive and trust-building. If that rapport isn't there, you could be the best doctor of audiology in the country and still not close the conventional "sale" of a set of hearing aids.

Now imagine that this rapport starts months before. They are online researching hearing loss and there you are, answering a question they just typed in. In less than the 15 seconds it took to type in a response, you immediately get kudos. You're available. You listen. You respond. Imagine. Your rapport development can start at the beginning of their journey rather than at the end. You can help guide, coach and direct people and gain not only their trust but the trust of their friends. This word-of-mouth referral system can work long before they even choose to become your patient.

In essence, we can shuffle around two key components: rapport building and word-of-mouth referrals. Rapport building can now be one of the very first things that happens when a patient just starts to consider hearing loss instead of waiting until they see you—if they even choose you—months or years later. Word-of-mouth referrals can begin immediately even before a scheduled appointment or after a patient goes through the entire fitting cycle. That is a significant paradigm shift!

Secondly, we must recommend product, and as manufacturers become more involved to push their brand to the consumer realizing that brand matters to the boomer, we better be informed about all product. What differentiates us as professionals should not be the brands we do or do not recommend, but the knowledge we can impart on both. This differentiation also needs to be part of our "marketing message".

Marketing has specific purposes: to educate about our profession and its value to the consumer; and to differentiate ourselves not only on the basis of the products we do or don't carry but also on our overall knowledge and abilities about all products. Now we need to get this message out there.

**"What differentiates us as professionals should not be the brands we do or do not recommend, but the knowledge we can impart on both. This differentiation also needs to be part of our "marketing message".**

Now what...consider a mailer?...and hope that the right people read it and are in the right mood at the right time to respond to our call to action that is, at best, one of many others in their mail that day, and hope to convert that interest to a hearing aid recommendation. Or let's plan a lunch and learn or open house event and invite as many people perhaps through connection to patients in our database and hope that on a full stomach they too will convert in our favor. Have you noticed that essentially all the marketing we do is a shout out? We proclaim a message, hoping it is the right one, and put in a hook or call to action and see who responds. We compete with so many other voices and calls to action from all other product and service providers—who's to say we are even heard? And if we are, who's to say that the message of a competitor is not preferred?

But the real question is—why are we running around out there where consumers turn a proverbially deaf ear anyway, rather than letting them come to us, or find us where they already are when they are looking for hearing solutions. Let's join them on their journey of inquiry rather than netting them in!

It may be time for the industry to shift gears. Using the web offers a completely different realm. Having a website is one thing but there are other tools that can be used. Blogs are useful—the Hearing Journal now has one and it is exciting to see great minds contribute to this open sharing of information. Social online environments where people ask questions and are looking for answers are another tool. Google ads and SEO (search engine optimization) provide another way to be found.

Our profession must go from calling people in to us and hoping that whatever “offer” that we come up with is really the most attractive—to being present where the conversation is. As we know, people with hearing loss may wait 5-8 years before seeing a clinician; however, they may be looking online in the interim. During this time period, they may be searching for some direction, and if you’re there to give it, your trust is already starting to grow in a likely conversion if you handle it well. Our rapport with our patient must begin before we take a case history.

Handling online contacts effectively means being available; it does not mean running after leads with emails, newsletters or other means of unsolicited contact. As long as we are there to answer questions, be part of their journey to find their answers and guide them in their process that they have initiated on their own, we are likely to see a higher ROI than with events they have been invited to but did not request. Furthermore, they can share with their peers as they are finding better access to information with less personal cost of overcoming denial, facing a hearing test, admitting to loss and taking appropriate action in favor of amplification, then there is greater opportunity for you to shine.

The most important factor in all this is that your internal reality is equal to your external reality. Marketing communicates a reality to those outside the walls of your organization or your professional team. Whatever promises you make, you must fulfill. If you promise one thing or present anything in marketing, you better be able to produce that in-clinic, which is your internal reality. If you want to promote your profession then all the messages you send both non-verbal, from your administrative staff, clinical staff and even pamphlets, must communicate the same message.

That message should be communicated from a what’s-in-it-for-me (WIIFM) philosophy. The patient should hear your key marketing message, that has internal/external agreement

and immediately understand why they should take action. If you present this, with a simple helpful, professional presence online in chat rooms, forums, and other online activity, you will be considered not only desirable but an expert who is worth looking up.

***Here are four things you can do in your practice:***

First, brainstorm with your team as to what separates you from others in your area of competition in terms of your treatment experience and product selection, fitting and service experience. Such elemental considerations as open/close times, accessibility, or even how long you’ve been in practice

does not satisfy a WIIFM for the end-user so don’t get lost in the basics. *It is about experience and added value that can be felt by a patient.*

Next, determine if this core competency or strategic advantage that you’ve identified is lived out within the practice so that it can be announced publicly in your marketing efforts.

Identify 3 key ways of getting the message out there complimented by 3-6 key online activities you’ll engage in to be visible online. Spending some time participating online will cost you less and generate higher returns than a paid ad!

After executing the plan, reassess your results after every month. Make sure that you ask your patients how they heard about you, why they chose you and how you could have been a better resource before they even chose to come to you. This will make plan adjustment that much more accurate and easier.

Consistently applying this strategy will set you apart and grow your practice. The low cost nature of online advertising and the ease with which you can get started beyond the basic website and email contact just begs for you to jump in and become an online star!

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*Markus Hilbert obtained his Au.D. at Salus University and his MS from Portland State University. He has worked in Audiology in Canada, and has organized and executed outreaches to Malawi and India. He lives in Calgary Canada with his wife and two daughters. He sold his private practice and now works there in patient care for new owners while also managing Ear Works Inc.*

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