

336 – Dental Drama with Gilly Woodhouse

Steven Bruce

Hello and welcome to this evenings live CPD. When I send out my emails about this topic this evening, I confess I wasn't entirely sure what we'd be talking about, and I'm not sure I even know now. But I do know this evenings guests pretty well. So I'm pretty certain it'll be very, very good value indeed. I'm talking, of course, about Julie Woodhouse. She's a long term supporter of our professions. And she's a lady who has built a very successful business acting as a business mentor to osteopaths and chiropractors. And when I say successful, I mean successful not just for our own business, but much more importantly, for the people that she's worked with. And again, Julie, welcome back to the studio. And we're gonna have fun tonight on where because we're going to talk we've got a case based discussion, we're going to talk about you as a case in which you've always been, and we're also then going to talk extensively I imagine about different aspects of marketing, because I don't know about you, I get the sense that people are struggling at the moment where they're concerned. And there are people out there wanting to fill their books, and people worried that their books might dry up at some point. But Shall we start off with the case based discussion? What's up with you?

Gilly Woodhouse

Well, I went to the dentist, as you do. And she said, oh, we'll just do an x ray. And then the next thing she's scratching her head and saying, Oh, dear, we've got a big problem. And I said, What I go regularly, obviously, and turned out

Steven Bruce

regularly could be once every 15 years.

Gilly Woodhouse

Well, it could be but it's easily six monthly. And yeah, she said, the bridge I had for 43 years, which was only supposed to last about 15 Good old NHS, the the back tooth had become infected and had then infected the bone and eaten it away. And I had absolutely no pain, no symptoms, nothing whatsoever. And she said, you're left with an eggshell piece of bone, literally, that's the term for it. So and so she said, it looks to me like you're gonna have to have some dental surgery, you know, my goal some people look forward to Yeah, so she said she had a consultant coming in from uch the next day who visited once a month so she said I think you should have a consultation with him to

find out what needs to be done. So I said, Okay, cost a few 100 quid. So he did one of those whatever they're called CT scans go around and and he said, Yeah, you've got dropped sinus and you need bone graft, so that you can have implants in and he said I would do the sinus lift the bone graft and put the implant straight in all in one go. And that'll be 13 grand, please.

Steven Bruce

There's an awful lot of people including doctors who sometimes wonder why they didn't become dentists. Because first of all, you've always got to go and it's always costs a lot of money doesn't Yeah,

Gilly Woodhouse

so. So my husband had had some implant work done with a chap up the road in Northwood. And he said goes to him go and see him. And I said, I'll be checking his credentials first anyway, rang him up. I think I got him because it wasn't that since I've been there. There's he's the only guy and he was making out. He was the receptionist. She's very highly qualified cooks he can do that. So I felt a bit embarrassed with what I was checking he was but then All surgeon you know. So anyway, there's there's not huge amounts of them. But he did say to be as lovely man, we did say to me was he does about four sinus lifts a week, because he's very, very accomplished in doing that, that surgery in particular. So he said to me, he was trained in Switzerland. And he said that he would not put implant straight into a bone graft, because it's not stable. And he said, huge risk of it coming out causing more problems and all the rest of it. So he was the same price pretty much. So I basically decided to go with him, he was much more personable, and David already knew him and recommended him so.

Steven Bruce

So I imagined that there are probably quite a few people thinking what the hell is a sinus lift or a dropped sinus and all the rest of it. So I think, this video that we've got of the procedure, it's a patient video provided by the company that presumably markets these things, and it's a bit long, it's three minutes long, and it's quite slow pace. But I think we should run the video so that people can see exactly what we're talking about that that reason yeah. And then we'll talk some more about what's going on on that side of your face. Right let's look at the video.

Speaker 2

Patient Information film, sinus floor elevation, inadequate bone for implants in the back to the area.

Speaker 2

If back teeth are to be replaced after having been missing for a longer period, implants will not find the adequate and bony support they need from the maxillary sinus floor.

Speaker 2

For a successful implantation, considerably more bone is required.

Speaker 2

To build up this missing bone, first a lateral opening to access the maxillary sinus is required. Then, the tender inner skin of the maxillary sinus. The so called Schneid Aryan membrane is detached from the bone.

Speaker 2

It may be necessary to insert a proven protective membrane, such as geistlich bio guide. The geistlich bio guide with its natural structure, supports wound healing and promotes undisturbed bone regeneration. It is broken down naturally by the body after a few weeks. The Sinus floor is then elevated with a proven bone substitute material such as geistlich bio OS the lateral opening is covered with another protective geistlich bio guide membrane. Finally, one or several implants are inserted. The natural structure of geistlich biomass serves as a scaffold for new bone formation. It's intermingled with new bone after four to six months, and is then included in the natural remodelling process of the bone. The implant is now anchored in the body's own bone, just like a natural dental route. This ensures a solid fixation over time. Due to the sinus floor elevation, the implants and crowns fulfil the function of strongly anchored artificial teeth with natural appearance.

Speaker 2

geistlich bio guide and geistlich bio AAS are the world's most widely used bone regeneration materials in dentistry. They are scientifically documented in several 100 studies and have been used on over 4 million patients

Speaker 2

geistlich biomaterials wishes you a successful regeneration and a radiant natural smile

Steven Bruce

so actually, that's the kind of film I'm not sure I'd want to see before I had any work done on my teeth. It's

Gilly Woodhouse

no I did have to say to him, Can you please stop showing me videos because of course you know much as you guys are announcing big gigs. He's a dental geek and he was

Steven Bruce

very happy to see a video about what they did to your teeth, I wouldn't want to see it before the mind directly. Yeah. The reason I mentioned it is because you know, this is a there is this element of there is an important element of practice coming out of what we're about to discuss in this. And that is one of them is about the information we give to patients. And we've had a number of people on the show who said that you've got to think twice about things like having even skeletons in your own show in your clinic room, because some people are scared at the thought of its skeleton. You showing them you carefully showing them all the joints and bones and some people don't like that at all. But that's so you've what stage of this have you got to do? Now you've had the hole drilled in your maxilla and you've had concrete poured into your sinus?

Gilly Woodhouse

Yeah, they they first had to get the 43 year old bridge out with two teeth.

Steven Bruce

Then you said good old NHS me ago was there with the NHS was dreadful. He said something he said would last 15 years and it's lost in 41. Yeah. And

Gilly Woodhouse

it's and he said, Oh, it's got precious metal in it as well. And indeed, he kept that. I said, Can I have a ring made? Oh? Yeah. So you had to take that? And no, it was very brutal. And I was practically

having a panic attack over it. Because it's obviously it's very private place your mouth and to have someone in is lovely, lovely man, a very gentle man isn't super. But you know, you have to yank to get the lemon thing out. And it was awful. I'm cringing at this. I know. And I thought to myself, he was sort of busy saying yes. And then we just cut this window and I stopped telling me what you're going to do. I don't want to know. And and I said, you know, I'm not sure I can do that. And he said, Well, you could have sedation, I don't think you'll need it. And then I got it. And then I came back in for a checkup on that. And he said, Actually, I think I recommend sedation in your case. And I said, Yes, thank you. I

Steven Bruce

think I need it. But it wasn't a bloody epidural. Yeah, well, it wouldn't have worked.

Gilly Woodhouse

So yeah, that was expensive as well. But I just thought, you know, I'll pay for it. But before I went in for that procedure, I was in a bit of a state was very emotional, I had palpitations, I was gonna have a heart attack, I was in a really bad state. And I thought, I'm not even going, I'm not going I'm not going anywhere. My husband drove me there. And then, you know, and it was. So before that, I was looking online, how to how to deal with anxiety before a dental procedure. And I ended up on YouTube. And actually, I found this American lady who did the most extraordinary sort of three or four minute exercise where she calmed the vagus nerve down by doing certain strokey things with the ear to pull the air and then do different things. And then you do that. And she pulled them first. And then you did this than the other and then you put them again, she goes, doesn't that move better? And I was like, What does actually and you know what? I actually went from like, a nine to a one. So you

Steven Bruce

went to someone to have that done.

Gilly Woodhouse

And I actually felt myself calm right down, and I feel good. And that's the only way I managed to walk into that office that day. Because, like, literally, I was absolutely terrified.

Steven Bruce

Yeah, I can imagine that. There are many parallels between dental work and what we do in our treatment rooms as osteo isn't chiropractors, but I suspect some people do come in nervous. I mean, I might actually look up that video and send the link out in tomorrow's email because yeah, this whole thing to people for all sorts of reasons. Yeah, it was really actually

Gilly Woodhouse

work because I thought this is level rubbish, but I'll follow along, like tugging at my ears in my office. Like if anyone can see that.

Steven Bruce

You've been to see I think an osteopath having to your senses. For what reason?

Gilly Woodhouse

Yes. So I have been seeing my osteo and she's been doing a lot of work on releasing the, I believe, you know, sorry if I get this wrong drainage there and doing a lot of drainage work here. And just

easing generally everything. And, and I I've interviewed Joe Wildy, who's written a fantastic book called Mind and membrane is a costume. Yeah, in queue in London. And she does a lot of intra oral work and so we did a podcast together and I've been to her place and we've I've had a couple of treatments with her as well. quite extraordinary work she's she does I can if I sort of really calm and just focus I can sort of feel things things are happening and changing. What she's,

Steven Bruce

you know that you've given her a bit of a shout out on the show. We'll have to see if we can get her in in person.

Gilly Woodhouse

Oh yes, you must do some Last night,

Steven Bruce

I'll let you make the introduction because

Gilly Woodhouse

she's her body of work is I think it's fascinating. The connection between head trauma and mental health. Right? Yeah. Her books on Amazon.

Steven Bruce

Yeah. So you have this treatment? Yeah. And you believe that it's helping in some way?

Gilly Woodhouse

Yes. enormously. The dentist is quite surprised at how quickly everything's been healing up.

Steven Bruce

And which is your SEO fn. And right. Shout out for as well.

Gilly Woodhouse

He's amazing. Is my bestest. And then, and then yeah, I think Joe and she was saying how she's making space in my face. Sort of here and here. There's some kind of I don't know, she's opening it up. She's trying to do and she'll kill me. But I said to her, I think this is like a bit more swollen than the other side and looks a bit pinker to me. She said, Well, it's sort of banana face really. And so it turns that turns out that maybe I'm a bit asymmetrical, and I never knew it.

Steven Bruce

Well, I suspect most of us are asymmetrical. I remember when we went when I went through osteopathy training, that I think we will probably do a bit of cranial training or something like that something which I've never gone into in any depth. But all of a sudden, you realise just all those asymmetries that we've all got. I don't look I don't look at you and think banana.

Gilly Woodhouse

Clearly, why couldn't pull the ZT boys in the playground all those years ago.

Steven Bruce

It was Simon says in a comment about your your treatment and saying that you can numb the trigeminal nerve, which serves the side of the face. But you can't switch off the pressure receptors.

So taking that bridge out must have been very uncomfortable. I suspect you already know that. But it's a nice explanation of why that's the case. Yes, and cookies asked for a link to that video, if you can remember. And I said we'll get that video. And we'll get the link from you one way or the other. If we did wrestle out of you. And we'll send it out tomorrow.

Gilly Woodhouse

Yeah, no. Sounds like a really good idea. Yeah, it was really helpful. I was surprised. I literally was just like, Oh, this isn't gonna work. So we interrupted you telling us what has been doing? Yeah, so she has been doing a lot of general drainage and getting things moving again, and, and Joe's been sort of opening that she said, my teeth starting to move or trying to close up that gap. That's all I've got left now my front teeth, and then a wisdom tooth right at the back. And

Steven Bruce

I'd love to say that's why we sat you there because it's your good side facing the way we always do it.

Gilly Woodhouse

Thank goodness. And I can check. Like you don't have any other side.

Steven Bruce

I think in terms of addressing asymmetry, I ought sometimes to sit that so I twist the other way in the chair. We've already got the video, so it's going to be shared with everybody apparently. So. That's good. Yeah. Okay. So one thing that we use the dental drama is a bit of a hook to make people want to watch to see that sort of discomfort. You've been through deliberate. And we there's all sorts of things we can do about this. I mean, I don't know how you have posted pictures of yourself in your own Facebook group, haven't you? Yeah, and, and there's an element of I think in terms of and then we're talking about marketing businesses about, you know, putting your own personality into your marketing or what's happening in your own life into your marketing.

Gilly Woodhouse

I mean, it's made me feel quite vulnerable, but I just sort of thought, you know, it's part of life. It's what I'm going through, and you can't just have it all fun and flowers all the time. Sometimes something happens, it's not so great. I

Steven Bruce

think there is, again, at our level of business, you know, as osteopaths running a business of the size of yours or the size of APM for example, actually, it's really important that we seem to be human beings rather than, you know, great big corporations which put out snazzy videos like the one we've just seen there with a horrible American accent accented voiceover and there's nothing against American accents but the ones they use for these videos seem to be particularly unpleasant I don't know why but it makes it makes us more personal isn't I imagine that you know, someone sees your your picture or hears about what you've been going through them. I mean, I can relate to this as a person now rather than simply as osteo. Biz the company or osteo business or whatever it was he called now,

Gilly Woodhouse

your biz fix, austere biz fix coming into play now.

Steven Bruce

Before we get into some details about marketing, then what's changed? You know, for anyone who doesn't know the business up until very recently has been called osteo. Biz, which I've always told you off about because you do work with chiropractors as well. I know you've got a long track history of having osteopathic treatment in the family but and you're very, you're a great fan of osteopathy and cranial osteopathy in particular. But osteo. Biz was the original name. Now it's osteo. Biz fix what's changing? Well,

Gilly Woodhouse

it was Asti biz mastermind. That was my my sort of core group programme and Yeah, the world's changed and what people want is changed. And, and I was sort of trying to figure out why people were kind of sure not sure. And whilst I was on holiday in Tenerife in in only September, I suddenly thought, you know, sometimes you've got to change things when the market changes, you've got to notice otherwise, you know, you might go on under, because not changing and keeping up with what people want. And, and I just thought, you know, I've got some core principles that I teach within what's been my mastermind, and obviously, what I do when I've got a private client is same sort of framework I have. And I thought, What if I just take out the core elements, and then serve it up and bite sized bits? Because it's, you know, can be overwhelming. And I've been guilty of overwhelming people, when I do a one to one and go, this is, this is the grand plan, and then they go, but and then I say, No, no, no, we're going to do it in baby steps. And we're going to help you and we're not doing it all on day one. But I just think that I tested this out really, sort of slightly by accident in the summer, and when I did a summer school for five weeks, and we did the training in bite sized pieces every week together, and they could get all their questions answered, they're not they go and do stuff. And, and these guys were just amazing, they will not do marketing, and AdMob by the time I finished with them, some of them will do like videos, and they'll be going to lead and doing amazing shoulder exercises demonstrating an A lovely guy who's, I've been talking to him for years doing this in Wales, and and he's so delightful. And he was so funny. And I said to him, use your humour in your marketing, because when they come in, you know, you're you're funny, like, really great chap. And, and he said, Oh, I didn't know me, you know, but professional. I mean, everyone thinks they've got to be professional, but can be a bit stiff. And it's not really the it's not you. So, you know, be yourself. So I think that's

Steven Bruce

a tricky balancing act, isn't it, there's a, we're on the subject of dentists, those if anyone wants to Google, the singing dentist, which you've probably come across, the guy is fantastic, very, very funny. But at the same time, when you go for a dental appointment, he's got to be absolutely serious. He's a professional health care practitioner, and he can't afford to be too light hearted about what's going on, all of the procedures have to be professional. And I agree with you, I think there's no reason why you can't inject a certain amount of personality into your marketing effect. And I think it really, I think it really, really helps. Sorry, I interrupted you this when I

Gilly Woodhouse

was just gonna say that, but this guy who was just like, I want to do that, I do them up a bit. And, and I sort of challenged them all to do a video and get it into the group. You know, like, this is your challenge. You just, it can be short, it doesn't have to be long. Just be yourself. And, and I don't even remember what the video was about. He was showing us some chair based exercise or something or rubber. And all of a sudden in the background, Nino, Nino, Nino, and he went, I hope they're not coming for me. And it was hilarious. I said, there you go, people will come to you because you were

funny. And they're, you know, they're in pain. And just just sometimes to have some humour to get there is really helpful. Yeah,

Steven Bruce

I agree with that. And we, I think you can always find reasons not to do these things you can you can imagine, what's the case, if it's a patient who's in awful pain, and they're seeing this video, and they they're not in a mood to laugh about something or take it in that sort of thing. But there are 1000s of others who aren't in that state. And 1000s of people who've got friends who are in a sorry, state who will look at that and say I like this person I'm going to refer my friends to. But getting people to sit in front of a camera is challenging. I mean, I quite liked doing what we're doing now. And we've got half a dozen cameras around us. But there are people in it. I've got a very good friend who is an extremely good osteopath. But just faced with a simple microphone and she drives up she went, she can't talk. This is so terrified about the sound of their own voice or their image on camera. How did you get your, your members of your group to overcome that obstacle? That you paid me money and I'm not giving you back?

Gilly Woodhouse

Pretty much. No. Look, I've been through that myself as well when I first started there, so I thought they're all They're all watching me. And they're all judging me. And they're all saying she's not even an osteopath, who was she? And I went through all that same mind monkey staff and I'm thinking oh, they're all watching me. But the actual truth is, only one person is watching you and when you can calm that monkey brain down and say one person is one Watching me probably on their phone just like we're talking to one person now. Absolutely. When you do that, and you you stop thinking you're broadcasting to the whole world, that you're only you've only got one viewer, Steven, I'm sorry to tell you. Yes, absolutely, just one. And

Steven Bruce

that's also different later on, but that's not important. If I talk to the camera, I'm talking to one person conscious of that. And

Gilly Woodhouse

even the news readers sometimes get it wrong and say put that in your diaries. I've only got one diary, haven't got several. Or they'll say good night, everyone. Yes, I'm just sitting here in my lounge. Don't call me everyone.

Steven Bruce

The autocue for the end of the show.

Gilly Woodhouse

But if you tell if you talk to one person and you use the singular, yes, then you

Steven Bruce

brilliant. The great exponents of this was the radio to DJ Terry Wogan wasn't it when he was renowned because everybody felt that he was their best friend because he was always talking directly

Gilly Woodhouse

with him in the farm kitchen. Yeah, I listened to him every morning, dear listener, and it was just for me. And that's that's kind of stayed with me. And then when it came to me starting this business and thinking, I'm going to I'll have to do that same thing to get through it.

Steven Bruce

So we're going to come back to mastermind in a minute, but on the stone we're on the subject of video how important is video now in terms of marketing businesses like osteopath, chiropractors, physios? They're

Gilly Woodhouse

not gonna like this vital

Steven Bruce

I suspect the counter argument is going to be I've got plenty of patients, word of mouth is all I need. And they're gonna find me somehow your counter counter argument. Once

Gilly Woodhouse

that starts drying up, you're in trouble. And I've had many an osteopath come to me or clinic where, you know, yes, they've done very well on word of mouth. And that's great. But I always call that the cherry on the icing on the marketing cake. And, you know, if, if that word of mouth dries up, you've got no no structure in place to bring for new patients. So you're in trouble. We've

Steven Bruce

had wonderful chiropractor on the show, he only attends virtually because he's in the States. But he talks a lot about the importance of having a waiting list. And it's far better to have a waiting list and maybe have to refer people to others than it is to have empty books, isn't it? And we're not talking about unethical marketing here. Obviously, it's not hard to sell. This is just letting people know that you're there and

Gilly Woodhouse

what you do and and of course, very often people are, you know, round a side street or upstairs or something. And even if there's a sign in the window that says osteopath, there was one around the corner from me for a long time. It's the Osteopath in the window. And I never saw it because, you know, we walk along, we look at our shoes or our phones.

Steven Bruce

It's the same for every every business, isn't it? Yeah, I'm gonna do a piece to camera now. So, you know, you might one with my one viewer. One of our problems here in APM is that we still struggle because people have not heard of us how after 10 years, how can people have not heard of us? And the best way for me would be if my one viewer were to tell a few other people about APM because it means we can deliver more and better and gonna respect but getting back to mastermind. You the comment you made earlier, this business sprang out of a mastermind group that I was a member of. And it would have been 10 years ago almost exactly that we were developing this business because June next year is our 10 year anniversary this year. Right? And so, you know, we came out of this mastermind group and I always thought that the big strength of that group was that I was the only Asti I was only a healthcare. No, there was a dentist in the group. But other than that we were the only healthcare practitioners in the group. They were people who were good security cameras for buses, there were people who ran car sales firms and all this sort of thing, dealership, all this sort of

thing and there was a huge benefit in having that variety of inputs into how you would go about building your business or changing or adapting your business. And for me this was a huge change because we went from I went from being someone running and working in a clinic to somebody who's running something completely different altogether, which leaves me no time to be in the clinic now virtually you're the criticism people aren't you said had a view is that what you're not even an osteopath, which surely that's a strength? Yeah,

Gilly Woodhouse

it is because I say it's like my secret weapon. Because I'm the patient looking in. Yeah. And I'm like, You're making it really difficult for me to book. Don't make me fill in some form in your contact us page and three o'clock in the morning. I'm in agony and I'm looking for a solution. Don't make it difficult for me. And there's a lot a lot of times you know, you have to wade through website pages that go on and on and talk about me me me me and it's not about you, the practitioner was the you go and talk about what services you have. But I always sort of say think about your website as your shop. window at night when no one's around, and the doors shut and the lights are inside and you go look at that check shirt. Now, I like the look of that. The because the buyer is looking for a solution, you know, maybe going to a wedding and he wants a snazzy shirt or whatever it is. And so when he's in pain, if he looks into your website, and it's all are started up a piece, but yeah, so in 1947, and then I've done this law of CBD is like, nah.

Steven Bruce

The person who wants to know all that background stuff, he's got the time and has in the mindset to do that. They'll find it anyway. But as you say, the person who's in pain and needs a solution. Now, even if it's the middle of the night, and they can't get an appointment, they can make that appointment if you've got an electronic system as most people have these days. And that's what they want. People don't want hurdles, do they know?

Gilly Woodhouse

Because they literally, you've got it, you've got three, maybe four seconds when they come from a Google search. They look and if it's, you know, visit an old website that doesn't function on a mobile, so easy to click back and go to one of them. That was horrendous. Where else can I go? And then you see a nice website with white space and short paragraphs, short sentences, bullet points, you can get into it very quickly. Pick out the information. And there's the book now button of

Steven Bruce

so do you tell? Do you tell people to get a professional website designer? Or do you say you're okay to go and get WordPress and do it yourself? Or does it depend on how good they are designing? Yes. And

Gilly Woodhouse

a very high proportion of studios are technophobes. So yeah, they shouldn't be going anywhere near a website because they'll have a breakdown. So when I've got contacts, of course, and you have no doubt, yeah, WordPress is best. Still.

Steven Bruce

Really simple and flexible, isn't it? Yeah. And actually, a word of advice, if I can offer one on this topic is that when you go to a web designer, the chances the possibility is they'll say, Oh, yes, we use this specialist language to design websites. And and it probably is really good if you're a specialist, but it

means that you will always depend be dependent on them to edit the bloody thing. Yeah. And if you want to change the layout, you can't do it. If you want to change your word, you can't do it times, or you need specialist skills to get in there, which means that they are probably going to be busy, and they won't be as responsive as you'd like them to. Whereas you don't need much technical knowledge to edit a WordPress website. Once it's once it's set up. The layout is very important. It's much harder to come up with a good layout when it is just to edit what's on the cover questions for you. First from Simon, we were talking about video, Simon says yes, all very well, Julie. But don't you have to be worried about advertising standards and the grsc regulations if you're going to start putting videos out?

Gilly Woodhouse

Yes. So obviously, you're not going to be making any kind of crazy claims about curing this, that and the other. But if you keep it simple, and to the point, I often say let's talk about niggling aches and pains, you know, you're not giving it a name. But that person on the other end knows exactly what they're dealing with. It's driving them bonkers. So just keep it simple. You know, the kinds of simple things you're hearing all day long in clinic people moaning about, use that as your topic to talk about, there's more people out there who are in the same boat, and they just don't know you exist. They don't know where you are. They don't know who you are. They don't know what you do. They think you're probably just backs. And it's their elbow. So talk about elbows. Yeah, and Head, shoulders, knees and toes too.

Steven Bruce

Yeah. And one thing that we've emphasised, we've done a couple of shows in the past specifically about advertising standards. One of the things I've always emphasise to people is that as long as you don't actually break the rules, which are on the Advertising Standards website, and I will send those out again tomorrow to sit to show you what we are allowed to show our viewers what we're allowed to say and what we're not allowed to say. But as long as you don't break those rules, you aren't gonna get in trouble with the HSA. And even if someone complains, and someone has to complain about you, the HSA isn't gonna go looking and not police. No, they're not police. Some of the chiropractic professionals suffered because a bunch of self appointed policemen went hunting for them, particularly after I think it was treatments for babies that got some attention, wasn't it? Simon Singh and SRTM and some others went after them. Was it the good good thinking society? Yes. Anyway, but unless someone complains them, they aren't going to pay any attention anyway. But even if they pay attention, all they're going to do is say take that down. Yeah. And if you refuse, then you'll end up in front of the grsc or the GCC perhaps, but why would you refuse? They're only going to say that if it breaches their rules, as far as the grsc and the GCC are concerned. You've got to work quite hard. it'd be the victim of a complaint on the basis of an honestly made video telling people exercises for your knee or exercises for the neck or what you do in clinic treating this or that. Again, babies you've got to be careful with, although we didn't do a video. Sorry, dude, we're recording very recently about practice, but practice based research networks, which is something the current practice already set up. This is now being set up with in core, the osteopathic research organisation, which hopefully might generate some credible and reliable evidence to show that yes, we do have a beneficial effect on various conditions and babies. But that's, that's another show. Yeah. Cookies asked what content you recommend? I mentioned a few things. So maybe I'm wrong. What would you put in your videos if you were Ostia or Cairo?

Gilly Woodhouse

Literally listening to those complaints that your patients are making. So when they're giving you their symptoms and problems, they'll also give you complaints that I can't pick the grandchildren up anymore. So just say to them, would you love to pick up the grandchildren again, without horrific back pain? Because you're meeting them where they are. So they can see, oh, they might be another solution that I didn't know about before. Or they, you know, I've had to give up golf now I'm feeling quite depressed, because I'm not going out with my friends on a Saturday morning. So listen to the complaints. I sort of talked about it in terms of music, so they giving you their symptoms here, like an octave higher. What can you hear? Yes, in the scimitar in the complaints, rather, because flip that round and feed it back out. And they do

Steven Bruce

like the idea that you're not saying, Oh, you've got a sore back, we can fix that. You're saying Hang on, how's your life going to change? If we fix that sore back? Is it picking up the kids? Is it playing your favourite sport?

Gilly Woodhouse

Is it a little bit more aspirational than what you know?

Steven Bruce

Is it getting a good night's sleep? Yeah, I

Gilly Woodhouse

wouldn't be so grumpy with the kids. And I would well.

Steven Bruce

Actually, Tracy has sent in a comment. She says she's got a second business with only one thing that she does. And she can make endless videos about that. One thing. osteopathy has got loads of things that it does. So there's no there's no shortage of things that you can do with with the videos. But it does mean you sticking your neck out and getting in front of a telephone with a camera on it and just making the video doesn't it doesn't have to be it doesn't have to be massively good. quality video is high res it doesn't have the price. And there is as we often say, on this show, there's some there's some merits and value in not being polished. Yes, because then you come across as real, you know, the person Hoover's, that siren going off behind me, yeah, I'm not in a studio, I'm not. And

Gilly Woodhouse

you know, it's so easy to do. Even if you're by yourself, all you need is an extendable tripod, with a ring light on the top, and the phone holder in the middle, and a little clicky button about 20 quid on Amazon, I've got one setup in my office all the time. So if I have an idea to do something, or all my VA is nagging me for a video on something, I just literally drag it across, check the Lippie and click off I go and click stop, boom, you use one of those circular lights around your room to give you a green light is is part of that stand for 20 quid, it's a bargain. And just makes it easy to set up all the time. So you could have one in the corner of the treatment room. And then you've got five minutes before your next patient, you could literally do a 32nd two minute video of something you just thought that's a good idea.

Steven Bruce

I mean, if you're in a big clinic, it's probably worth getting all of your practitioners to do something. So they're all introduced in one way or another on the website. We're not talking about themselves necessarily talking about what they can do.

Gilly Woodhouse

Yeah, what they're seeing in clinic at the moment, it might be that, you know, I've seen a lot of knees this week, talk about what kinds of knee problems and how that's affecting people. And

Steven Bruce

yeah, you're going to know more about this than I do. But Juniper says, apparently having videos on your website automatically increases how high up the Google list you'll appear. It's good for your SEO, your search engine optimization. Make sense? To me? Yeah.

Gilly Woodhouse

Which I mean, I haven't heard that exactly. But I would say yeah, you know, but and, and videos on your Google listing helped you a lot as well, right? I'm always business Yeah, your Google business profile. I always say do a video about bring us in from the car park or the bus stop or whatever. Show us in show us where things are because might be that I'm a control freak. I don't know. But I quite like to know where I'm going when I'm going somewhere new line can I park where's the Where do I go? And and then I and then the other one I really like is what happens on a first appointment. Yeah. And why would you want to know all my personal history for you know, what, what are you up to? And I mean, my husband was treated by somebody one day After he hurt his back with playing golf when we were away, and he said she was very chatty at the beginning, wasn't she? And when? No, she was asking you questions. He just thought she was chatty. But you know, just to explain, she's gonna have some questions for you. That

Steven Bruce

must be the mark of a very good practitioner if it came across as a chat rather than an interrogation. He was extraordinary.

Gilly Woodhouse

Yeah. Yeah.

Steven Bruce

After some more from Tracy Tracy says, the same Tracy. It could well be she says, I think we can do our sites ourselves. If we're tech savvy. I did a copywriting core. She says we've made the biggest difference. I mean, I would say myself that Yes. If you really aren't that interested, maybe copywriting courses or website editing courses are worthwhile, but it might be better use of an osteopath chiropractors time to be in the clinic treating people rather than learning to do sort of the cheaper end of the spectrum jobs?

Gilly Woodhouse

Yeah. Because for a lot of you that those are like, it's an impossible job truck, trying to think about a website is just a nightmare. So yeah, if it's not your bag, if you enjoy doing it, do it. I've built websites myself, if you enjoy tinkering with those, then do it. But if it's a nightmare, get rid of it's one of those 10 pound tasks that I talk about.

Steven Bruce

Exactly. Yeah. I will say we have. We do have some people who are members of APA. I think they struggle to turn the computer on sometime. I'm not talking about you, obviously. They stored it on the computer and I think we are well we the right service for them. We talk them through it. Because

Gilly Woodhouse

your superpower is osteopathy or chiropractic tech, and that's fine. And that's why I've always got team who who deal with the tech foot clients because I know that's an issue and I you know, I don't want it to hold them back by saying go off and do this by yourself. They'll just have a meltdown. And I wouldn't want to leave them like that.

Steven Bruce

This one I think is probably quite close to your heart and what we meant we talked about earlier on before we came on here. Morgan, who I'm sure you must know says Julie made me go online best thing I did in the only the only practitioner in my area that does it anyway. And I find it makes me more accessible. Yeah, talking about going online.

Gilly Woodhouse

Yeah. Well, it's still there's still a lot of people who don't have online booking.

Steven Bruce

It's not just having a website is the ability to book online.

Gilly Woodhouse

Yeah. Remember Bob at 3am He needs to be able to book in LCS, gone again. And he's ended up on Morgan's website. And he's booked himself in and then he goes try and get some sleep now. I'm seeing her in the morning. Yeah.

Steven Bruce

I think you you're a fan of clinico want you with the people that you work with? We in my clinic use Jane and we napm are quite a fan of Jane because of because of the fact we have close connection with I think they've largely similar. Is there a reason that you go with clinico or just familiarity? It's super

Gilly Woodhouse

easy. That's the biggest thing is so easy for the clinician to use given that might be technophobes. And, but more importantly, it's very, very easy for the patient. There are some systems where you've got to give them your email, your name, your dob, etc, then you go through to the calendar. And then after you've clicked and clicked and clicked, you found, oh, they've got no appointments for six weeks. Now you've got my data. And some people I mean, I'm pretty really easy my data on putting my email address in everything all the time, but a lot of people don't want that. And they don't end up being perhaps spammed. So I just think, you know, if you end up on clinico, it just goes, which day, morning, afternoon or evening, boom. Now, yes, you're gonna have my data. I'm delighted I'm seeing you in the morning.

Steven Bruce

And, you know, I'm not we're not here to disparage any particular systems. I know, Jane is very, very easy to use from both practitioner and patient point of view. But it's also worth practitioners

thinking when they will if they're not online already about, you know, on that day, when the receptionist calls in sick, you've got a system which can do an awful lot of stuff for you. Without you having someone sitting at a desk or while if you're a sole practitioner, you've got no receptionist, you're set, you're treating a patient, you don't have to take phone calls while you're treating or ignore phone calls that could be bringing you in business. Yeah. Yeah, I don't think I've met anybody who's switched over to online systems who has regretted having done it? No,

Gilly Woodhouse

neither do I. After 10 years. So many people have said to me, why didn't I do this before? But

Steven Bruce

people often come up with things. What happens if the internet goes down and you think well, if the internet goes down, you're simply in the same position you were without the system but in clinic, you can still work because it'll all up it'll upload its information to the cloud. When the internet comes back. You have to see it on your phone. Well, even if all of your access to the internet went down, you can still use these systems even without the internet and then they upload the information off is what you won't be able to do. was download any changes to the diary that were booked externally. But as you say, if you've got your phone, then most of them will work through the phone as well. There's so much we can talk about in this. And I'm keen to know, the detail of what went on in your mastermind groups, how did they work? What's the sort of common problems that you solved? And how?

Gilly Woodhouse

Oh, gosh, that's a big question. Often, there wasn't any online booking or there was a very clunky old system that was not patient friendly. And so it's, it boils down often to getting those systems in place and as automated as possible, so your hands off? Yes. So you know, I like to keep the away from the tech as much as possible, get it all set up. So I will say it's sort of a bit of a hump at the beginning, because we've got a bit of work to do, but we help to do it, and help with the setup. But then, but then it all just works, there's a form goes out, if if you want up to you, I don't tell you to be a clinician, but you know, saves time, if they filled a form in with medical history before they come, and they put the correct name of the tablets, not, you know, it's the blue one. And then you can ask your supplemental questions on top of that, and it's sort of probably saved you quite a lot of time in clinic. And maybe that means you don't need such a long appointment. You know, that's up to you. But it does mean that appointment reminders go out. So you haven't got to think, Oh, I haven't text Bob. But he's always late, I've got to remind him, it's today. It's all taken care of an automatic. And people turn up on time.

Steven Bruce

And of course, they can pay online as well, which I've always thought is a no. For me, that was always an obstacle in clinic, I did not want to ask patients for money. I felt that interfered with the whole relationship I had as a practitioner with the patients. With the system, we're using Jain in our clinical clinic. So you can take money through the system, which means you actually you can simply say, Is it okay, if we just take payment from the card we've already got online, you press a button, and it's done. And patients seem very happy with that. And of course, if it's a first appointment, they can pay in advance. So if they missed the appointment, then it's their hard luck, it's much easier to keep the cancellation fee. So while we're thinking about Morgan says she uses a system called Aleksey, which I've never heard of.

Gilly Woodhouse

Yeah, it's free, apparently. Yeah, it's it hasn't. For me, it hasn't got all the bells and whistles that I like, you know, things like you can plug in rehab my patient, Tim Allerdycy is fantastic exercise app.

Steven Bruce

I can do that with Aleksey or you can't I

Gilly Woodhouse

doubt you can with Aleksey, I might be wrong. But I doubt you can. So you can that goes into clinical. So you give the exercises to the patient. Tim and I both say print them off and give them in their hands because it's got your marketing information in the corner. And he and Bob might show it to Dave down the pub. And you might get another patient and it emails to them as well. And it goes on their clinic notes. So you can even if someone else in the team sees the patient next time, they can see at a glance what exercises they had. So that it's all these efficiencies that I really liked. So that the whole system is is efficient and time saving, because that's often one of your biggest problems is time.

Steven Bruce

I wonder is it when you're deciding on a system like this and I know nothing about Aleksey Tracy says it's free unless you have some add ons that know what the add ons are. But then you start paying money for it. Is it worth before you invest? Having a good idea of where you think your business is going to go? Because I do wonder when you start off with something we used to use PPS, PPS, and I'm afraid I will be specific about PPS PPS is an awful clinic booking system. And we switched to Jane. And it was a hell of a struggle to get all of the notes across to Jane, everything else goes to Jane. And the jeans staff were immensely helpful, hugely helpful and make in doing that for us it took a while, but they put all the notes across and so on. But if you start off with a system, which isn't going to meet your needs, five years, hence, you're probably going to put yourself in a similar position.

Gilly Woodhouse

Yeah, potentially. Yeah, I think it's looked at being as efficient as you can with a system that's built specifically for clinics. And then it'll grow with you.

Steven Bruce

Yeah. Tracy, so she really rates clinico only moved to it to have more of a CRM for both businesses. CRM is a customer relationship. Yeah.

Gilly Woodhouse

We use the acronym all the time, then you can't think what it actually stands for.

Steven Bruce

So tell us what a CRM is because it's not just clinic software? No.

Gilly Woodhouse

Well, you need to keep in touch with patients, which is probably the number one issue. So all that marketing's being done all those videos you didn't want to do. You've done them the new patients have come in and then Never ever hear from you ever again. And there's that I think there's a lot of clinics that do that. So then the patient goes, Oh, I've got an elbow problem. Now I better go and see the physio. Because they haven't heard from you. They've forgotten about you. And they've drifted

off somewhere else. Yeah. Yeah. Because perhaps it's, you know, a year later. So it's vital to manage those patients very gently. I call them just little nudges, no big sales pitch or any rubbish like that. But just my best advice is a quarterly newsletter. Don't Don't make yourself do newsletters every day, every week. Now, I know you don't have the time for it. But quarterly, you've got different seasons, keep in touch with them, talk to them about, you know, are they getting ready for marathons? Are they getting ready for tennis again? Or, you know, what are they doing at the moment, all we know, at Easter, we're all guilty about we go outside and dig the garden like crazy over the Easter holidays. And then that's it, we need to see. Because we've, we've damaged ourselves.

Steven Bruce

And I'm guessing that we're cliniko It's easy to send out a newsletter as part of a regular fee to your patients and so on. Assuming they tick the box saying they want marketing or whatever else. We're gonna get some questions about GDPR, which I'll address when they come in, but we don't need to talk about it just at this moment. Yeah, and I don't know, I don't know the full capacity of Jane's system, then I'm suspect you don't know how exactly what all the things that cliniko is capable of doing. But a proper CRM can do all sorts of things for you can't it then you can sort of trigger people into different campaigns and have different routes for people to go down if they were interested in this particular treatment or that particular treatment? Yeah. And, you know, my viewer will be well aware that there are a lot of the emails that come out from me or from me or they're coming out from the CRM, yes, we write them, but we write them well in advance. And, you know, we schedule them to go out to different audiences, depending on what the content is.

Gilly Woodhouse

And just means you can plan ahead. Yeah,

Steven Bruce

and you're less likely to miss it. And you can send 3000 emails out address to an individual rather than say, Dear so and so rather than Hi there or whatever else you might put him in. This is a bit of a specific question he wants to know clinic in clinico integrates with stripe about payment, does it work with clover?

Gilly Woodhouse

I have no idea.

Steven Bruce

Maybe someone who's using clover and clinico can tell us that Yeah,

Gilly Woodhouse

I haven't. I've never heard of clover, Clover to be honest. Stripe works like a dream. I use stripe on my system. It's clean, and you get your money within two or three days. And

Steven Bruce

you've been ranting about clinic opened or rendered raving about clinico. And Tracy's raving. Backlinko weenies in here now says she went with Gene app over a year ago, and she can't recommend it highly enough. It's a game changer. I mean, it is it's just a beautiful setup. And I'm sure clinic has a beautiful setup as well. We're not here to promote either one of those in particular. Now, I haven't read this question through Amanda says, As a solo practitioner working from home, I

personally always speak to a patient I've direct contact. Before booking them in I explain how I work, and briefly check their expectations and needs to ensure I'm right for them. I'd feel too vulnerable having people booking in without that first contact. I guess we're all working in different circumstances. Now, what's the merit on that observation?

Gilly Woodhouse

Yes, I mean, it's going to mean it's time consuming, working that way. But if you're working in your own front room, for instance, then sure, you know, you, you probably gonna do a little bit more due diligence to make sure that you're comfortable with who's coming to see. So yeah, I

Steven Bruce

can understand I can understand the members hesitation about using an online system. As you've said, though, it does mean that you are possibly losing some patients who want to do it now. You are certainly losing some time in having a conversation with them before you make the appointment. But there's an element of relationship building in that phone call. I mean, it's nice to talk to a real person, isn't it? When you when you're going somewhere,

Gilly Woodhouse

that'll be horses for courses, you know, there'll be people like me, I don't want to talk to somebody, I just want to press the button book myself and and get on to the next thing.

Steven Bruce

And increasingly, that will be the case only in the modern world. Yeah. Yeah. I mean, regenerations we,

Gilly Woodhouse

yeah, my children's generations who are coming into their 30s When they some of them have actually said to me once a website designer, she said, If I can't book The thing that I want online, I'm not. I'm not giving them my custom layouts, literally that you're not having it. If you can't make it easy for me. I'm off somewhere else. And that could be a table for dinner and massage anything.

Steven Bruce

One of the safeguards of having an online system of course is that if someone makes contact through an online system, there is an electronic record in the in the cloud of what they've Done. And that is possibly quite valuable. If there is any problem later on, they will be, they can be tracked. Obviously, if there's if it turns into some sort of violent, horrible encounter, then it might be a bit too late later on, but there is that deterrent, that we've got your data, it's already there, and you're not gonna get away with whatever you go into the clinic. Kate says, I share receptionists and computer diary with exact software. She does this with the dentist that she shows a building with, she can't use her own booking system. And so I have a totally separate system to the dentist, which will be a nightmare with the receptionist having to use two different systems. Do you have any suggestions of a software that dentist and osteopaths could share with an online booking system? When Jane would work? Yeah. I don't know exact. And I don't know if there's anything specific that dentists would put into it that you couldn't put into other systems. If it's just a booking system? I don't I doubt it. Because you can in Jane probably in clinic, or you can write your own forms you can draw, you can also pick up forms that have been designed by people in Australia, New Zealand or wherever else and use there's change.

Gilly Woodhouse

Yeah, you can delete that question I would never ask that you can add in your own. So

Steven Bruce

I suppose the answer for Kate is you've got to be fairly specific about what you want to achieve with this form. If it is just booking people in, then both of the systems we've been talking about would do that. Yeah. And they will do all the other things that you need to do other than recording. And actually, they'll record the treatment as well. I'm not sure what dentists could do. That would be different.

Gilly Woodhouse

No, me neither.

Steven Bruce

Yeah. We I think we've done done to death online systems, and we need to move on to other things. And let's just Yep, here we go to questions about Instagram, Nikki says assuming we have online booking a good website, Instagram and Facebook up and running, is there anything else Julie can add? So we'll come on to anything else. But Sasha says any point of view about marketing on Instagram, I speak as a complete dinosaur whether Instagram is concerned, I've never used it. Not that I'm saying my clinic doesn't but I have never used it. So

Gilly Woodhouse

of course it's it's very, very visual. So videos work brilliantly on there, and reels, which videos up to 15 minutes long now.

Steven Bruce

What's What are the statistics tell us about what is the best length of video to post.

Gilly Woodhouse

And it can vary because you because you've got people who will want to learn more. But certainly very short ones grab people's attention. And they're doing that on YouTube as well. Now, of course shorts. So even 30 seconds can be enough. video

Steven Bruce

we showed earlier on the video from the dental company. Got its long, slow. And I was thinking it's only because I wanted to make everyone fully understood what you had to go through. And we'll be going through that, that we ran the thing. But I agree I think the shorter the better because particularly your person in pain at three in the morning. He doesn't want a long winded video about the anatomy and physiology just we can do this. This is roughly what we're going to do. Yeah, that's probably enough the point? Yeah, I think I think the longer videos work better when you're doing that, you know, the funny cat videos and things like that, or the things that keep people entertained, rather than just informed. My view. Nick says is MailChimp the best format for newsletter writing? Are there any others?

Gilly Woodhouse

Oh, there are others. Yeah, MailChimp have upset a lot of people because they've suddenly reduced the amount of contacts you can have on there from 2000 for a free free system to think about 500 which is stuff any patient says. So

Steven Bruce

yeah. If you want to go above that, then the price has been hiked enormously, hasn't it? Yeah, yeah.
So

Gilly Woodhouse

yeah,

Steven Bruce

I think so. I think Claire, my wife was telling me that she has used MailChimp, which is a paid version. But the prices have also gone up from the paid systems rather than just the numbers going down for the

Gilly Woodhouse

I think they've shot themselves in the foot really good. Okay, but Nyx

Steven Bruce

is asking whether there is a better system for newsletter delivery.

Gilly Woodhouse

It depends which system you've got as to what will plug into it? The answer, because you want them all to be talking to each other. Right. So you need something that will work with your well I wonder what

Steven Bruce

I wonder what system MCS is using for taking appointments because we've just said, you know, you can do newsletters through clinico and through Jane. And I couldn't do it through PBS don't get PBS. I hate to I hate to be so rude about PBS, but he's such an appalling system. And I'm always horrified that people are still using. Yeah, they're all there are lots of I can only think of very expensive systems that are good for doing newsletters. And they're only expensive because they do masses of other things like Infusionsoft which is the one we use those keep now but

then we hear in EPM that is not in the clinic. What are hardcopy newsletters? I happen to be a fan of hardcopy news, you're less of one.

Gilly Woodhouse

Well, I know, I know that most of my clients wouldn't have time, or the inclination to do them.

Steven Bruce

But hang on, you've already said they're gonna write a newsletter. So the only difference is whether it's in print or not?

Gilly Woodhouse

Well, yeah, but they haven't got to organise that they just press go and off it goes. So they type it and go. Whereas you've got to get it printed and the envelopes done and stamped and off, you know,

Steven Bruce

you've got an online design, design my newsletters, I've got a phenomenally good printer nearby. His name is Richard Marquis, and he runs Bluestar printing. He's a lovely guy, and he works for anyone anywhere in the country. I usually send him my my draft, about an hour before I want it, exaggerating only slightly, and he gets it done. But if I'm doing a newsletter, or anything else, I'll say to him, right, here's the data base I want them sent to and here's the newsletter, can you envelope them up and send them and get them out on this date, and he will make it happen? It is expensive. That's the big drawback. It's expensive. But what do we have to bear in mind in terms of outlay on marketing? Julie? Yeah,

Gilly Woodhouse

well, I mean, as far as that goes, you, you're gonna get a better open rate, definitely give you a better ROI. You know, if you're getting 20% open rate on emails, you're doing very well.

Steven Bruce

Surely the only thing that matters is how much you get back from the marketing. Yeah, it doesn't matter what the marketing, investment absolutely salutely. The only know I've got a very interested audience in APM. And you said 20%, actually, our open rates, even even among the sort of our most regular viewers on this show, the open rates are actually quite low. And whether that's because things go into spam, or whether because people are just too busy when they're going through their their emails. I don't know. We tried to change that.

Gilly Woodhouse

50 to 60%. Often, yeah.

Steven Bruce

Both of your members are very interested. Yeah. But open rates can be very, very low cost. As you said, if your newsletter comes through your door, you're going to see it. You're gonna go,

Gilly Woodhouse

oh, it's not a bill. What's this? So you you're likely to get a higher open rate? Probably I would be estimating but but it's the return on investment. Yeah. And then they actually take some action as a result, and they can't click on it, because it's a

Steven Bruce

drawback. Yeah. QR codes are coming back into fashion. A little bit. You can perhaps hope that people use QR,

Gilly Woodhouse

most people know what they are now. So yeah, you've got a good chance then of them at least doing that on their phone.

Steven Bruce

You we could possibly talk about content for newsletters, but that's another long subject, isn't it? So we were trying to mix his question about what's good for newsletters. I guess it depends. I've you've mixed wants to get in touch with me. I will. I will talk through what I think can go on. But it's probably a very specific question. She could probably find you as well. He or she? Oh, yeah. Yeah. So Sarah says, Julie, what do you think about putting personal stuff onto social media? Well, let's talk about social media. Okay,

Gilly Woodhouse

it's a good question. Well, that kind of brings us back round to the dental drama, really? I think if, yes, it depends on your level of privacy, I think you're, you know, if you're a very private person, then you're not going to be showing off your kids in their Santa Claus outfits, or whatever it is. If you're, if you're happy with sharing what your kids are doing, then then that that's okay. You know, be just be who you truly are. But if something's happened to you, like you've had a skiing accident, one guy I remember a few years ago has skiing accident, are pretty sure he broke his clavicle. And, and I think I was working with them at the time around that time. And we were saying, let's, let's take us on your journey back to health, you know, and he talked about how he had osteopathy, and then how acupuncture was really helpful. And so he kept, you know, talked about how much agony was in the beginning, and took us took us all the way through, and then what rehab he was doing. And it was really, it was quite fascinating, because he kept it short and to the point, you know, need sort of shared his little highs and lows as you went through the journey. But it was actually really nice for him to say, Oh, finally I can I can raise my arm again, or whatever it was, I can't remember the specifics. But I think that's really helpful. And then, you know, I've known asked us with frozen shoulder and then it's difficult for them to treat and then you know, do they share that or don't they share that because it's making them feel a bit vulnerable. And again, it's really down to Whether they feel comfortable,

Steven Bruce

Jo's actually asked whether we should have videos of us treating patients on the website. And obviously there is an issue of privacy and consent there. But we can always do it with models. I mean, we can still do the same process with a model and voiceover or talking while we're treating, can't we? Yeah, I

Gilly Woodhouse

think it's nice because it's demonstrating.

Steven Bruce

Can it be off putting you think if we do that, particularly high, high velocity thrust manipulations are probably not,

Gilly Woodhouse

you know, I personally don't like seeing those all over Instagram and stuff. I just find it a bit gut wrenching. I can't bear my kids cracking their knuckles. So I'm a writer was, but yeah, I just think that's clickbait. And it's literally Yeah.

Steven Bruce

I wish you thought of that.

Gilly Woodhouse

But, yes, but just sort of showing us like, gently what you do, but the way you do, I think is really helpful. Because people, you know, again, people, so often don't know what it actually entails and thinks perhaps you are just going to crack the life out of them. And, you know, for many of us, we don't want that now, and again, it has to be done. But

Steven Bruce

you, maybe you could, one could address that in a in a separate video. Maybe you could do it with a plastic spine and say yes, we do manipulation you have to demonstrate you just say well we're doing is separating joints and making the move better, or whatever you want to say when you can do it in a way which won't offend those who are squeamish, but will actually be appealing to the people who feel that that's what they benefit from.

Gilly Woodhouse

I'm always saying educate and inform in your marketing so people can understand more what it is you do.

Steven Bruce

Oh, this is what I'm interested in yours. And Danny wants to know what you think of LinkedIn? Do people get patients from it? Or are Facebook and Instagram better? Should we do tick tock? Who acts? Yeah, oh, yeah. The artist formerly known as Twitter?

Gilly Woodhouse

They answer is go where your patients are. So if you're in a city area, you probably got a lot of professionals all around you. So yes, go on LinkedIn and present yourself as a professional on there. Connect with people who, perhaps working in buildings around you in offices. You can write articles on there. And

Steven Bruce

I've always thought that's a key in LinkedIn. It's not a chatter facility like Facebook, it's not here's my latest cappuccino. It's nice. As you say, it's more for articles, isn't it? Yeah.

Gilly Woodhouse

So you're demonstrating your expertise and your professionalism, you know, you're still still be you again, you can still be funny or something. But yeah, it's really good for articles. And the thing is with LinkedIn is you can set it so that anybody can see your post. Whereas on Instagram of well, on Facebook, in particular, only your followers are gonna see them unless they're particularly going searching for hashtags. So you can get good reach on LinkedIn, actually. And it does, it raises your credibility. So I'd say if you were working with professional athletes, for instance, that's where you want to be. Because you can, you can set your stall there and say, This is what I can do. This is what I've been achieving with my athletes and so on. So I was very

Steven Bruce

touched. I've got an England rugby player who regularly wishes me happy birthday. Well, once a year generally. I'm sure it's, I'm sure it's automated. But I mean, it's still I think rock was an England rugby players just wish me happy birthday. And I quite like that. That's LinkedIn. And LinkedIn does allow you to do some of those silly social things like that. But primarily serious platform. Yeah.

Gilly Woodhouse

But generally, Facebook and Instagram are the places to be that the youngsters are on Tik Tok. And, you know, I don't sort of do training on that. Because I just think if, if you're a talker, you're going to be on there anyway, doing your thing. I prefer to, you know, just be a bit more strategic on Facebook, and Instagram where, you know, time and again, this is where the patients are coming from. There's millions of them on there. Yes.

Steven Bruce

Sarah, who said I don't want to spend time writing newsletters. Can I get enough patients just through doing social media?

Gilly Woodhouse

Yes, but But do keep in touch with your patients once you've gone because now they know you. They know who you are. They know where you are. They know what you do. They like you or else they wouldn't have come and they trust you. So you can continue to build that relationship. And that's why I say you know, don't kill yourself over newsletters, but a quarterly one is a good idea.

Steven Bruce

And we do sometimes forget, don't we that patients often are worried that they haven't got permission to come back again. Yes. And by keeping in touch with them, you can reassure them you it's okay to come back and we haven't said don't come back. You're fixed. We've said we think you're okay for things change. You can come back in again.

Gilly Woodhouse

That's my big issue with the shake thing. See how you go? Yeah, I've had a friend come back to me and said, What the hell does that mean? How am I fashionable yeah, see how you go? Yeah. Am I am I in charge? Now? I don't know what to do. You're the expert. You tell me? Do I need to come back? I don't know.

Steven Bruce

It reflects to some extent I will nervousness about our own capability knowledge, doesn't it? We, we don't want to be too assertive about what we're telling patients because we might be wrong.

Gilly Woodhouse

Yeah. And there's also a fear of putting your hand in someone's wallet taking money there is yeah, it's not that I think, you know, let's go back to Bob at 3am, he's got a problem. And he's looking not for half a job, he's looking for a full solution to his problems. So give it to him, as far as this possible with, depending What's wrong with him. Give him you know, if you if you think probably my experience, that knee kind of problem is going to be about three or four treatments, then then talk to him about that came in. Yeah.

Steven Bruce

The nice thing about all sorts of CRMs customer relationship manager systems is that if you've got clients, patients who have a specific interest or type of problem, you can channel your marketing according to those interests if you're diligent enough about recording what was going on. So if you've got someone who came in with a bad knee, you could be sending more information periodically about how to look after knees, what goes wrong with knees, or someone who's pregnant, you can be sending them information about babies and looking after babies, things like that good news, which is a useful function of a good CRM. You were talking about Bob with a bad name and ego, Bob, possibly a different Bob says I've used the free version of MailChimp for over eight years and have about 800 clients on them. They haven't started charging me yet. And I'm looking to move to brivo. With the free version allowing unlimited contacts. I do a monthly newsletter an average open rate of 40%. Yeah, all right, you can keep on telling me how good your open rates you. But you're gonna send as many emails out as I do.

Gilly Woodhouse

And whatever you do, don't put November newsletter. I've got an estate agent near me, they send me a November newsletter, I'm not reading it. Go away.

Steven Bruce

Now, go on and tell us talk to us about I mean, first of all, there's the heading of your newsletter, whatever you call it in the email, or how you do it, what briefly, do you think would be ideal content for a newsletter?

Gilly Woodhouse

Well, because I tend to talk about seasonal ones. It's like what's what people about to start doing? What's happening with the weather? Now? You know, do people need to do people need a nice hearty winter soup was healthy, or, you know if that's if you're if you're keen on nutrition as well, or, you know, like we're coming up to Christmas, and a few people are going to do their backs in lifting that big old turkey out of the oven, because they didn't pick it up, bend their knees and pick it

Steven Bruce

up with the backers? Back.

Gilly Woodhouse

So like, think about what, what people are doing. And then in the coming month or months, depending on how often you sending in talk about that? Or give them you know, numbers worked really well. Three mistakes runners make? I want to know what they are? Well, I don't personally, obviously I don't do running and or three ways or five ways in odd numbers work nicely. Five, five ways to let's

Steven Bruce

be honest, you could you could Google any of those. You can say it don't say to Google or Siri or somebody tell me five things. Runners you need need to know will do wrong and getting things wrong is always a good

Gilly Woodhouse

if they're keen sportsman and they're going to be competitive. They don't want to get it wrong.

Steven Bruce

What about stuff that's not related to treatment?

Gilly Woodhouse

Yeah, if he wants an open day coming up, as you have an open morning coming up, and yeah, talk about that, and what you know what you're going to be doing what's happening at the farmers market or anything like that? Well,

Steven Bruce

I asked that question. Because in all the, all the newsletters that we have done, there has been a bias towards the non selling content. And then a big proportion has always been my rant in the middle with a weird picture of me and then me ranting about something which is done. It's designed to amuse so there's always going to be a cartoon in the newsletter somewhere because they're both online. I don't write them myself. But I look for healthcare cartoons and buy the rights to stick them

out in the newsletter. And there will be an article about something which is not selling my clinic at all. And then there'll be a few articles about back pain and at the bottom and by the way, we fix this or a picture of one of the trap practitioners doing stuff. Oh, you think that mix is quite valuable because it makes it a readable thing rather than an academic platform?

Gilly Woodhouse

Yeah. And I think this comes down to size of clinic as well actually. Because the sole practitioner or one or two together probably haven't got the bandwidth or the time to even think about how they would do that. So I would keep it very, very simple for them just to put a meme out picture of something is like Katniss and I have coming up or whatever it is. Happy Christmas, and a little article about bendy knees when you pick the turkey out of the oven. And that's that, but for a bigger clinic like yours, then yeah, bit more variety. Because you've got it's, it's multidisciplinary and multifaceted. And you want to show different aspects of that. So you can do a bit more variety in your newsletter. Sure, sure.

Steven Bruce

Excuse me. Mix again says what do you think of Google ads?

Gilly Woodhouse

Well, they work very well. A lot of people use them. I don't train on it. I don't I find using social really well listening to those patients putting out interesting common content that connects with more people like them, does the trick, and it's free. So I haven't found that I've needed to use that with any clients.

Steven Bruce

My own experience with Google ads? Well, yeah, again, it's all down to return on investment. So if you are going to use Google ads, then you've got to keep a very, very, very close watch on what you're spending and what you're getting back from it. Because they will charge you per click. And if you don't get the key words and the negative key words, right, you'll end up spending a lot of money on people who aren't interested in what you do. They want to learn to be an osteopath, or a chiropractor, or whatever. So I agree with you, I think they're very, very useful. But it is there's a real science to Google ads. And one of the worst things that I've seen, and I don't think we've done it ourselves, but employing agencies that profess to be able to do your Google ads for you. If you're going to do that, you've got to have them on a very tight leash and say, at the end of every week to week, month, whatever it is, right? Show me the return on the investment. Because if they can't show you a profit, which includes the amount of money you're paying them. So how much is it? How much are you getting from those Google errors? Then don't do Google ads? You can set budgets, can't you? So you can you can say I don't want to spend more than 50 quid this week, when you can test the water to see which ads work better. Yeah.

Gilly Woodhouse

Some people make the dreadful mistake of not reducing the area. Yes. And then, you know, their adverts are being shown in Edinburgh and clicked on when they're down in the south. And it's costing them a huge amount of money, because they haven't got it nailed down properly. So I would say, you know, yes, maybe for a bigger clinic, that is a worthwhile investment. But for you gotta be so careful. Yeah, you got to be so careful. And instead, get your Google reviews up. So that I mean, I always go past the sponsored ads anyway, I want to see what Google's found for me, not what you're paying to put in front of me sponsored

Steven Bruce

ads, the ones at the top of a Google search, you're getting more and more of them. It used to be just three. And now it's about two different groups of three. And you can you can make your own stand out. Once you get beyond that top list, if you do the right things with it. Any tips for that? How would you do that? What for tips to make yourself stand out in the in the Google search?

Gilly Woodhouse

Your reviews, there's a big one. Because if if you've got two reviews, and that guy's got 20 We can't you know, we're we're exhausted with making decisions these days. So we're just gonna go with that guy, as long as he looks all right on his website and everything. And you might be a better practitioner than him. But you just haven't done you done your homework and got your Google reviews up.

Steven Bruce

There are systems you can apps that you can buy that can handle your reviews for you. And I can't think of the names off the top of my head, but are they worth investing in so you don't have to worry about posting them yourself.

Gilly Woodhouse

You can automate that so that you can say, well, it's up to you after the first visit or after the second visit that an email will pop out to them and and ask them for review. And and that can happen again in the background. So you don't have to physically keep you feel like you're begging people to give you a review.

Steven Bruce

I don't think it's it's not always that difficult is it because if you if you just adjust your patient handling your communication slightly so when a patient says are going so much better since the last treatment, if you just say cricket were so helpful if you could just say that to camera, and we'll do it when we finish and we just hold a phone up to you and you do it as a library, or could you go to Google reviews and just put that something down like that because it really would help us and patients want to help you don't they feel they're instrumental in getting people to know about your business. Here's

Gilly Woodhouse

a tip it's even more helpful. If you say to them because they don't really care about your business? If you say to them, I want to help more people like you. Yeah, off we go. Yeah.

Steven Bruce

Yeah, that's that's really good idea. Real quick comments about other systems. I'm one of the mailer lights, as Tracy is not costly, but not lots of bells and whistles Active Campaign is great, but it does cost. And you can use it for many other things than mail shots. Yeah, and Active Campaign is something that we've looked at here. I mean, in terms of cost, you can go from free brivo or MailChimp, can't you to the one we use is something that's nearly 400 quid a month. But you have to work out whether you're going to get value for money for that we couldn't operate our business without something as complicated as the one we use because it controls access to programmes like to shows like this. Most people don't need that. So you and I, you and I at the bid before we came on air, we were trying to remember those three M's and they've come to my mind while we're talking.

Which is market message and media. Yeah. And you and you said earlier on when we when somebody asked what what should we use this, which we obviously remember where your market is. And so there will be people who use LinkedIn and don't use Facebook and vice versa. There will be people who respond well to emails that we send, we respond well to newsletters, and you can probably work out that demographic. And you can also hone it down by saying well which patient do I want to appear to appeal to? Don't you whether it's the pregnant lady, or the rugby player or whatever, and design stuff specifically for them? Yeah,

Gilly Woodhouse

that's gonna work much better. I'm always advising that know who your audiences because if you're just shouting out into the abyss, hello, anyone I can help everyone with anything. Doesn't land is just like noise. And the fact

Steven Bruce

that 80% of people might not want to read 90% of people might not want to read your message about knee pain doesn't matter, because there are 10% who see knee pain. That's me. I want it. Yeah,

Gilly Woodhouse

like I always say I haven't I don't do running, I'm gonna flip straight past the running video. And

Steven Bruce

the next one will be temporary mandibular pain, jaw pain for the patient? Because I mean, I've got that. You can do loads of those currently. Yeah. Claire has said how do the two of us come up with interesting subject lines? That thing that's clear telling me that I'm talking too much. I don't know. It's Michael or another clever. This is supposed to be your show. You're the experts in marketing and so on. And I'm doing a little bit.

Gilly Woodhouse

We always have a good chat we do.

Steven Bruce

So how do you come up with interesting subject lines, your emails?

Gilly Woodhouse

Well, you could have a look at answer the public.com and see what they're asking. So you could answer those. there. Right there. I

Steven Bruce

say chat. GPT. Chat. GPT. You

Gilly Woodhouse

use GPT is brilliant. It's lovely. I love it. Yes. You can pop something in it. Yeah. How does you can put something in there. Like how does osteopathy help knee pain? And write me a blog? Write me a short newsletter? How does osteopathy help, whatever? All kinds of chiropractic help

Steven Bruce

back pain? caveat this by the fact you've got to check what it says before you publish it. Yes, yeah.

Gilly Woodhouse

Just cut and paste. And then just see what it says. And then and then say, Can you write that in a friendlier tone? Please? Yeah.

Steven Bruce

Isn't that one of the problems with chat GPT, that people have used it once and say, Oh, I didn't like the answer to that. But they aren't aware that you can practically write a story for it and say, I want to talk to this person about this condition, I want it to be funny written in the style of a 1940s, radio bra. And whatever you want it to be, you know, and it will come up with something and it will vary according to all the prompts you then give it as well. And although I haven't used it myself for a while, it's it was it was amazing. What did come up,

Gilly Woodhouse

I use it a lot. Because if you're starting with an empty page, it can be quite daunting. So if you just say, right. I've seen a lot of nice lady, or I've seen a lot of headaches, like Oh, talk about the three types of headaches. And off it goes. And then you can go well, yeah, I wouldn't say that like that you can tweak it, and then cut and paste. As

Steven Bruce

far as a subject line is concerned, you could say to it, write me an amusing sentence of 10 words and less than that eight words, nine words, which will which will appeal to someone who's got this particular problem. You can word it however you like. And if that doesn't work, just change the wording and do it again or so you can come up with loads of things like that check GPT is free, isn't it? Yep. Certainly one version of it's free. I think the the one that research is more recent information you pay for but if you're just looking for good ideas, yeah.

Gilly Woodhouse

And you can see that yeah, you can I mean, I've used it loads, loads. So

Steven Bruce

I mean, if people want any sort of help or whatever in using chat TPT or these other things we're talking about, they can find you they can find me. We're both I think renowned for our customer service, and we're very happy to help people. Going back to that question of mixes, Nick said, if we've got online booking and we've got a good website and Instagram and Facebook, is there anything else you can think of what else could we be doing

Gilly Woodhouse

nothing less have forgotten something.

Steven Bruce

What about shows and demos and things like that going to expos or whatever you might have defined? Have you seen those being useful in the past with your clients? So the back pain show in Northampton? I remember Claire and I went to the other new mothers show in Northampton. We Yeah, this

Gilly Woodhouse

smaller local things. If there's anything going on, like mum and baby things, sometimes or NCT things, or yeah, there's sometimes local events going on where you can have a stand. Then yeah, definitely getting out and in amongst them. For sure. And same with your local Yogi's doulas, midwives, PTs, Pilates teachers, etc. Go and shake some hands.

Steven Bruce

Working with people who might refer to you, it's kind

Gilly Woodhouse

of feels like after COVID that people just don't really do that anymore. It's never come back up again. In this quite the same way. But just, you know, I mean, look, my dentist, surgeon Chappie didn't really know what osteopath did. The guy that sedated me, his mother is a local osteopath, it turned out. But the dental surgeon didn't really know about what osteopathy was about and everything. So you can imagine me currently about right pain in the chair, you should send all your patients to the Osteopath locally and get them seen because it can help with the, you know, the healing and, and everything after

Steven Bruce

two things also occurred to me. Journalists are inherently lazy animals. And if you've got we've got a local newsletter, newspaper that comes out. And there'll be one in virtually every area, including those little in your vicinity magazines, you get in touch with the people who produce those things and say, I will write you a column for every one of your newsletters on something. My wife does it for the local one in our area. And so every every time it comes out, there is a column in there written by the Ashgrove clinic. And you know, if you get in there first that's that's good publicity. It might not get very many people, but it will, it'll get your presence known. And the other one which I'm proud of this guy, and like to think that other people would have done it, but I thought of it in our clinic. Read the news, listen to the news first thing in the morning. And if there's a health care issue on it, call the local radio and say I can talk to you about this. We've had the local radio, come to my clinic with their journalist with Reuters and talk to us about this. And this has been broadcast to people sitting in their cars on the dual carriageway when you get on their way home. And all of a sudden, they'll thank you to Steven Bruce from the Ashgrove clinic. And you do that regularly, journalists will start coming to you for comment because they're lazy and they won't comment, then they want someone to talk about it. Yeah.

Gilly Woodhouse

And someone that they know they can trust because I've heard him talk before.

Steven Bruce

Obviously, you can be comfortable talking to journalists, and they'll often do it over the phone, which is relatively easy. But but it's, it's an easy win. I mean, it's five minutes of your time to find the contact details because they publicise them, and then to email them every time, there's an interesting story that you might want to talk about, doesn't even have to be in the news. You could say, I've just seen this in my clinic. This is really extraordinary prep, you will hear about it.

Gilly Woodhouse

And I think and I might have got this wrong, but I think that on Axl, which was Twitter, etc. I think it's hashtag or at journaux request thing. It's hashtag journaux request. And when they're looking for, okay, information. So

Steven Bruce

that's another way even if you want to, if you write for a publication, which is nowhere near your clinic, you can put the publication in your in your clinic waiting room and establish your credibility that way. Can you one final question? We've got two minutes left or so about. Simon says this is all great advice. But what about practitioners who don't use or feel confident using social media and patients who don't use it?

Gilly Woodhouse

I think the patients are on there. Even older people, I've got several school friends, parents who comment on my posts have to be in their 80s I saw a very old lady very bent over on her phone on social the other day on the tube. And I thought there they are. So and even if the very old people aren't on there, then our age group are who were worrying about our parents, so it'll

Steven Bruce

still get to there. Yeah, and that's for the practitioners who aren't comfortable using it. Well borrow a teenager, borrow

Gilly Woodhouse

a teenager or you know, it's just a it's just a medium for connecting with your next potential patient. And if you could just think But one next potential patient, it's not quite so overwhelming. And like I said before, in a listen to what people are saying to you or their listen to their misconceptions about what you do and just put those right and just educate and inform,

Steven Bruce

as always, great chat. We're out of time. Thanks, Julie. I mean, this could have gone on for hours. You and I are both at the end of a telephone and people want to talk about these things. Last comment from Beck's Beck says on a board outside the clinic, he has a wipeable chalkboard in the centre. So they update it regularly with leaflets attached to it. And Beck says it's the best form of advertising far above what comes through social media and the website, but they are in a small busy town. So that's actually an idea. I hadn't thought about that. You know, that could work in a lot of clinics, not in central London, probably. But

Gilly Woodhouse

yeah, where you can where you can put those on the pavement? Yeah, because people are looking down so they do work well. So

Steven Bruce

404 Viewers, not just one this evening. But I'm only talking to one as you rightly said, we're out of time to me. Thank you. Thank you so much. Yeah, lots of questions. Still, I see in the independent column in here. I'm sorry, we didn't have time to deal with them.