Despite increasing options of buying spectacles and contact lenses online and elsewhere, the overwhelming majority of the public still choose to attend for an eye examination before purchasing optical goods usually from the same provider. Mintel’s most recent report¹ makes it clear that eyewear users are aware of the importance of the eye exam and its role in eye health. Yet the marketing of optometric practices is dominated, both externally and internally, by the promotion of optical goods rather than services. Perhaps now, with a reduction of growth predicted in the industry,¹ and an increasingly ageing population, it is an opportune time to consider the marketing of optometric services. Although there are exceptions, services have a number of very distinct characteristics that differentiate them from goods and have an impact on how they can be best marketed. These characteristics of intangibility, heterogeneity, inseparability and perishability are described below.

**Intangibility**
Before purchasing spectacles, patients can try them on, feel the weight of the frame, consider the size, the colour, the finish, look at any markings, logos etc and take a view about quality. However, this is not possible with an eye examination. The intangible and abstract nature of the eye examination has a number of consequences for practices and patients:
- Patients have difficulty in evaluating competing service providers and this fuels the perception that the purchase of these services is highly risky
- Patients will search for tangible clues including things like the cleanliness of the practice, the appearance of the staff, the state of equipment which may be visible etc, to help them decide whether to attend your practice or not
- Patients will very often in such circumstances depend on personal information sources (word-of-mouth) and price as a basis for gauging quality.

**Heterogeneity**
Every patient is unique and this has an impact not only on the outcome but also the process of the service. The patient has to participate in the eye examination process and actively ‘consumes’ the service. Various people are often involved in delivering the eye examination service – from the receptionists, the pre-exam screeners, the optometrists, the dispensing opticians to other support staff. This often leads to increased variability of the service and may even affect the outcome. Because patients have individual needs, there is an expectation that the eye exam would be tailored to their specific needs – once again resulting in variability of experiences between consumers and even with the same consumer at different times. Some patients will have additional tests routinely and others might not, leading to questions about consistency.

The very personal nature of eye care services means that the service characteristic heterogeneity like intangibility has to grapple with issues of quality control. It is not straight
forward to produce a 'one-size fits all' approach. As a result, patients perceive a high level of risk in buying the service while practices often have difficulty in presenting a consistent image and developing a strong brand.

**Inseparability**

Unlike most goods, which are produced, sold and consumed separately, the production of a service and its consumption are inseparable. To benefit from optometric services patients have to attend the practice and 'consume' the service.

The optometrist, practice staff and the consumer have to be present and have to interact during the entire process. Optometric services have to be sold first, the patient then travels to the practice where the service is performed and consumed.

While the method of production of goods is generally of little interest to the consumer, the production of an eye examination is critical to the patient not only in terms of the reassurance and confidence in the results it produces, but also in terms of enjoyment or satisfaction with the process. This inseparability leads to patients becoming co-producers of the service, which means that they may have to be 'trained' to participate effectively in the process.

The contribution of the training effect to improve reliability of results with some optometric tests (for example visual field analysis) is well known and practices may allow patients a few minutes of additional time to be 'trained' during or before the actual eye examination.

**Perishability**

Eye examination services cannot be stocked like goods and sold the next day. This perishability means that when an exam slot is not allocated, or a patient cancels (and this slot is not reallocated) or fails to attend, that slot is 'lost' and cannot be reclaimed. The optometrist and support staff time, the practice overheads and the opportunity cost of not making a sale all add up to the actual cost of not having that appointment slot filled. The consequence of this, especially when demand patterns are variable, is that the practice has to be proactive in managing and responding to its patient demand pattern, attempting to even out the peaks and troughs, ensuring that congestion is avoided at peak times and unused capacity avoided at off-peak times.

### 10 top tips to maximise your marketing potential

- Have a brochure about the eye examination process in your practice and/or make it easier for the public to view the process – for example a view of the consulting room equipment and/or pre-screening equipment and/or a slide show/animation/streaming video of what happens in an eye exam in the waiting area.
- Encourage positive word-of-mouth comments and recommendations. This can be a simple thank-you letter to existing patients and those who recommend new patients, or a mechanism that provides some reward as an incentive for recommendations. The idea is to turn patients into ambassadors of the practice.
- Prospective patients and customers often view price as a signal of quality. Be sure that you are not charging fees at a level that may raise negative questions about the quality of the eye exam. The old adage you get what you pay for is still very alive in the public mind.
- Measure how well the practice is...
Management matters

Doing with its services delivery. Create a patient ‘satisfaction index’. In many practices this may mean introducing a patient questionnaire (although there are other methods) to gauge patient satisfaction.

● Because a single individual can make or break the success of a practice, the behaviour and reputation of every member of staff needs to be positive before, after and during the patient’s visit and in the local community (for example, friendly, compassionate, supportive of the local community, highly qualified and so on).

● Develop and train your staff to collect optometric data from patients and empower them to repeat tests appropriately (for example, visual field assessment if fixation errors, false positives or false negatives are significant) without first having to refer to the optometrist. This avoids unnecessary repeat assessments/visits and undue delays for patients, enhancing the experience of the service.

● Locate your practice with easy access by road (including parking), railway, or other public transport.

● Educate and ‘train’ your patients to bring with them a list of their medications and their current or previous spectacles when attending the practice. When dilation of the pupils is part of the process, ask patients not to drive to the practice or ensure that they have someone who can drive them back while the pupils are still dilated.

● Employ creative pricing and promotion strategies to avoid non-attendance. For example:
  – Differing prices for eye exams on busy days versus quiet days, and/or promoting special days for selected patient groups
  – Limiting slots for certain patient groups
  – Contacting patients who have booked eye exams in advance to remind them of their appointment
  – Have a list of patients who have agreed to be called in at short notice if there is a cancellation.

● Train practice staff to perform a number of tasks (for example spectacle frame selection, visual field analysis, non-contact tonometry and instructing on contact lens placement, removal and hygiene) so that differing services may be offered at peak versus non-peak times. The use of part-time staff can help the practice to cope with busy periods.

And finally

The optometric landscape is constantly changing and thinking on services marketing continues to evolve as new technologies allow consideration of services that do not necessarily exhibit typical service characteristics, for example tele-ophthalmology and tele-optometry, reducing practice visits and travel by patients while improving the service quality in locations where few specialists serve a large rural population.

References


● Professor Nizar K Hirji, consultant optometrist Hirji Associates – mentoring, consulting and coaching in optometry www.hirji.co.uk, nizar@hirji.co.uk