



Anatomy of an Occupational Health Sales Call

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"Tell 'em what you're going to tell 'em, tell 'em, and tell 'em what you told 'em."

—Mark Twain

Urgent care clinic operators would be well advised to keep in mind Mark Twain's advice on how to approach a speech or a paper; the same sequence applies to an occupational medicine sales call. In Phase I, it is best to articulate a clear objective for your sales call and provide your prospect with a "roadmap" for the course of the call ("Tell 'em what you're going to tell 'em"); Phase II is the time to conduct the sales interview ("Tell 'em"); and in Phase III, summarize key points, reiterate action steps, and depart on a high note ("Tell 'em what you told 'em").

In a typical sales call, phases I and III are likely to consume no more than one minute each, although their importance is disproportionately high. Consequently, phases I and III need to be exceptionally well developed and executed. They seldom are.

Phase I

Phase I of a typical sales call includes that all-important first minute. The likeability of the sales professional and the overall tone of the call are established during this phase. The sales professional should focus on doing several things:

- Respect your prospect's time. Determine at the outset exactly how much time he or she has to share with you. For example, you might say, "Thank you very much for finding time in your busy schedule to meet with me. About how much time do you have available?"
- Clearly state the objectives of the visit, i.e., "my objective here today is to learn more about...."



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- Lay out your roadmap or the expected sequence of activity.
- Elicit approval for every step ("Is this acceptable to you?").
- The key here is to dismantle the inherent salesperson-prospect suspicion barrier by showing respect for the prospect and stating your intentions clearly up front.
- Phase I is extremely short and vitally important; meticulous care must be given to fine-tuning your approach during this phase.

Phase II

The purpose of most sales calls is to identify a problem and engage in a dialogue that moves your clinic into a position to provide a solution to that problem. Some basic rules include:

- Talk less than you might wish, especially at the outset.
- Ask broad, open-ended questions intended to uncover a problem.
- Listen for statements that beg for a greater degree of specificity and then probe for more information (e.g., if your prospect states, "Quality is important to me," follow up by asking, "How do you define quality?").
- Take notes to reinforce your apparent interest in what the prospect has to say and retain your focus.
- Summarize key points throughout the sales call.
- Move toward an "If we could, would you..." conclusion to Phase II.

Phase III

The last minute of a sales call has the potential to turn around an otherwise lackluster sales session. Conversely, a poorly executed last minute can nullify an otherwise good effort. Three steps should be routinely included in Phase III:

- Summarize the key points of your meeting.
- Verify your action step (i.e., what both parties are going to do next).
- Offer a sincere—and enthusiastic—final comment ("I am really excited about the possibility that your company may work with our clinic"). ■