



PART SIX  
IN A SERIES

# 10 deadly sins in dental marketing

Strategies for boosting your business, your image and your profits

By Dr Genna Levitch

**K**nowing what NOT to do is as important as getting your marketing correct. In the previous article, we covered the first 5 no-nos of marketing professional services. There are 10 distinctive issues that differentiate marketing by the professions to all other marketing. The first five to refresh your memory are:

1. Third Party Accountability - APHRA stands watching you in the surgery;
2. Intangibility of Services vs Products;
3. Experience is Essential - how to provide evidence of prior success;
4. Limited Differentiability - to the public all dentists appear similar; and
5. Maintenance of Quality Control - something may go wrong!

The rest of the points below fill out the issues unique to the professions:

## 6. Making doers into sellers

**J**oe and Jane Public like to meet and become acquainted with the professionals who will be serving them. It is a way of reducing uncertainty. Using full time presenters to sell the services of unseen professionals may therefore be ill advised.

A two-pronged strategy has been successful: using personalised photographs of the dentist to promote a feeling of intimacy coupled with an extended initial consultation. This allows the marketing to create an impression that is then reinforced by reality.

The combination of expectation and subsequent over-fulfilment has the enormous power to produce long lasting credibility.

Unfortunately it can be exceedingly difficult to convince dentists to become actively involved in selling their own services. It takes considerable education, such as practice management courses, to enable dentists to understand the subtleties of communication skills. Many simply do not want to have anything to do with selling or do not have the personal characteristics that would make them good at selling.

## 7. Allocating professional time

**B**ecause we bill for our time and we cannot bill for the time we spend marketing, we are reluctant to allocate any more time or money than is absolutely necessary. Decisions have to be made in regard to how much time needs to be devoted to existing clients and how much to new prospects. Clearly, the need for dentists to be both doers and marketers creates many time-management problems.

## 8. Reactive rather than proactive

**T**he pressure of patients wanting work done immediately can cut into time set aside for marketing planning. Being proactive can mean that you become very protective of time set aside to develop and continue your marketing.

## 9. Conflicting views about marketing

**I**t's only been quite recently that dentists and dental practices have even been allowed to market their services. Onerous caveats on any kind of self-promotion had been in place since the beginning of the regulation of dentistry and the many older members of the profession today ridicule any attempt at marketing and deny it is needed at all.

Every practice must decide whether to market its services and if so, to what extent. Some believe that advertising dental services is unprofessional, ignoring the fact that exclusivity is the most powerful form of marketing. Others, particularly in newer fields of implants, cosmetic and rehabilitation dentistry rely heavily on very sophisticated marketing as a means of attracting patients. The full range of approaches goes from simply listing a name and address, to all-singing-all-dancing TV ads, full of flashing teeth, giveaways, discounts, loyalty programs, testimonials, guarantees and an immediate call to action. Your personal comfort zone will dictate how far you want to go.

The decision to market, as well as the extent and type a particular practice chooses, depends on many issues, such as its target demographic, the image it wants to project and the level of competition it is experiencing.



## 10. A limited market knowledge base

Many dentists simply do not have the knowledge required to make considered marketing decisions. The dental schools have not as yet included instruction in business practices where dentists might learn about marketing professional services.

This series specifically aims to fill this void by providing a summarised version of the academic background to this field of expertise. Otherwise the only option for dentists is to learn in their own time by attending seminars, conferences, reading books and sharing information with like-minded professionals. Others have hired professional marketing managers or marketing agencies to deal with these issues.

This approach begs two questions: firstly there has been precious little time to statistically establish which types of marketing should be applied in each situation.

This is a strategic issue. The agencies and practices that spend the marketing dollars get to keep the information that provides a guide to future success. The lack of consistent statistical evidence means that everyone has an opinion but with precious few certainties.

The second question is that services are inseparable from the individuals delivering them. This means you, the dentist, must have some rudimentary understanding of marketing, because you, not any marketer must ultimately decide the image of your practice that will be created.

Lets not forget that all the marketing in the world has one simple motive and that is to get the punter through the door. Having done that, or even before they arrive, there are individual “moments of truth” (MOT) which marketers have defined. Each one contributes to the patient forming an

opinion that it has either been a correct or incorrect decision to attend the practice. For a dental visit, 17 individual MOT’s have been identified. Next edition we will start to look at them and how to make each one a winner. The surprising part is that only 4 MOT’s occur in the dental chair.

In the next and final issue in this series we bring together the information presented by describing what the successful services experience would look from a patient’s point of view.

### About the author

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