November 15th 2022
Fed up with telephone tennis? Digital engagement tools in dermatology follow-up



#### Susie Samuel Veterinarian, Founder of VetHelpDirect & Digital Practice

### **Social Media**

What would you recommend as a starting point for someone naive in the subject? Which is your favorite tool for beginners?

I'd recommend starting with the tools you probably already use and are familiar with - Facebook (for broadcast outreach). I'd try and move fairly quickly onto PMS integrations to allow direct messaging between the practice and your clients, though, as it's that social/one-to-one interaction that makes the difference between advertising and communicating.

### Which for you is the best social media (Facebook, Instagram or TikTok) to educate the customer?

It depends what cohort you're after! Facebook still has the greatest reach, but if you're after under 35s you probably want Instagram, and if you're after under 30s, consider Snapchat. TikTok is an odd one, it's not really well set up for "normal" advertising, but if you can establish yourself as an influencer (even only very locally) on that platform, then you're reaching the next generation of clients early.



## How to make the use of WhatsApp profitable?

While it's difficult to justify charging the same for a WhatsApp consult as a face to face one, the other side of the coin is that you can see a lot more telemed clients per hour. And if you take a deposit from each consult, you won't get the lost time due to no-shows (at least, not entirely, as people are more motivated to turn up, and even if they don't, you have made enough to cover 5 minutes of "dead air"). If you use it for dealing with routine admin - such as repeat prescription requests, insurance forms and paperwork, that sort of thing then you'll probably find it takes less with time to deal а batch of asynchronous messages than jump from phone call to phone calls, meaning staff productivity goes up.





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### **Telemedecine**

### How will they do the payment if we use telemedicine? Before, after consultation?

Depends how you set it up. However, we'd recommend charging a deposit first (in case they're noshows!) and, even better, preauthorizing their card, and then taking the full payment after the consult.

# How to make the use of telemedicine profitable?

While it's difficult to justify charging the same for a telemed consult as a face to face one, the other side of the coin is that you can see a lot more telemed clients per hour. And if you take a deposit from each, you won't get the lost time due to noshows (at least, not entirely, as people are more motivated to turn up, and even if they don't, you have made enough to cover 5 minutes of "dead air").



### Do you consider telemedicine consultation before a in-clinic consultation?

There's no single answer to that. However, I think that for many subacute or chronic conditions, both pre-consultation telemed triage and post-consultation follow up are very valuable, alongside face to face. For your genuine emergencies, it's much less useful - except possibly for reassuring the owner as they bring the patient to you, or you head out to them.



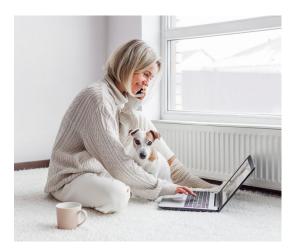


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### **Digital appointements**



### How do you manage (digitally) no-shows?

We have been working with practices to send charge hold links to clients automatically prior to appointments. When they click on the link they preauthorize their card for a deposit which can be taken if they don't show. Other clinics charge a nominal fee in advance. Then, if you get a no-show, you've already taken a fee from them so you can get caught up, but not lose money on it. We have about three times more clients who take appointment on line who do not come to their appointment compared to « classical » telephone appointments, despite texting and e mailing to remind them the appointment the day before: do you have a solution for this?

There's no single solution, unfortunately. However, а preappointment charge on their card means that the client has already paid a deposit. essentially, which usually dramatically cuts down on missed appointments. l'd also strongly recommend a reminder closer to the time - definitely the day before, but also consider reminding them that morning, and/or an hour before.

# How to tell people that digital appointments should not be used for scheduling operations ?

Just because it can be done, doesn't mean it has to be done that way. While this does work for some practices, overall, we'd suggest you get better results from using digital communications to deal with routine admin - ordering repeat prescriptions, booking appointments, even triage of,"is it really urgent?" type questions. Try to use the digital as a conduit to communicate with the real person on the end, not just as a clever schedule planner.



