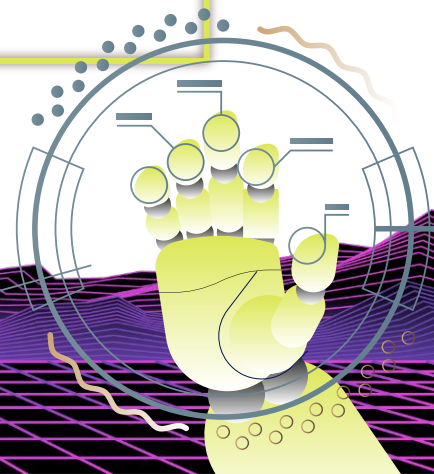


Total Recall
C-104503



xeyex 

software for opticians



“Poor Recall Marketing Costs Practices Millions”

Independent Marketing Partnership (2013)

“An Independent Marketing Partnership survey found the average response rate to a three-letter recall series was 52 per cent. This showed that nearly half of all patient letters are failing to produce an appointment. Despite this, some independents achieve response rates of up to 70 per cent suggesting there is considerable scope for improving the performance of other practices. Increasing the recall rate by just 10% would add £31,000 a year to a typical practice's income, said Hutchison.”

“Poor Recall Marketing Costs Practices Millions”

Independent Marketing Partnership (2013)

“According to Hutchison of the Partnership, a key problem was the letters themselves. ‘We asked a professional copywriter to analyse 63 typical letters. With a couple of exceptions, all of them failed to adopt the basic principles of effective written communication,’

‘For example, the letters do not convincingly explain the eye care benefits for patients if they have regular appointments. Nor do they take the opportunity to create awareness and demand for better quality optical products.’”

“Poor Recall Marketing Costs Practices Millions”

Independent Marketing Partnership (2013)

- Understand the rules of recall
- Learn the most effective methods and how to apply them
- Understand the importance of timing and “economic cycles”



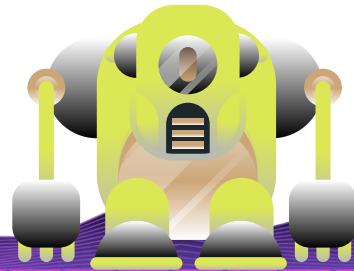
01



Discussion Points

What are the rules regarding recall, according to the Opticians Act?

What should be included in the written prescription?






Opticians Act 1989 - Rules On Recall



Particulars to be included in a prescription or statement 2.8.1 A prescription provided in fulfilment of the duty imposed by section 24(2) of the Opticians Act shall include:-

<https://www.abdo.org.uk/wp-content/uploads/2012/07/AG-Section-2-August-2013.pdf>





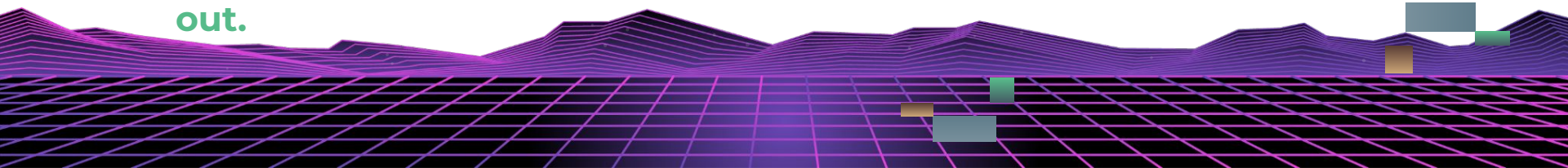
1. Particulars of any spherical power of each lens to be included in the appliance prescribed and, where appropriate, particulars of the cylindrical power (including particulars of its axis), prismatic power (including particulars of the orientation of the prism) and near addition of each such lens. (BS No: 2738-3/91 Part 3).



2. The date of the testing of sight.

3. The name and address of the patient and, if he/she is under the age of 16, his/her date of birth.

4. The name and practice address of the prescriber who carried out the testing of sight.

5. The address at which, or the name of the hospital, clinic, nursing home or other institution at which, the testing of sight was carried out.





<https://www.college-optometrists.org/clinical-guidance/guidance/knowledge,-skills-and-performance/the-routine-eye-examination#Aftercompletingtheroutineyeexamination>

After completing the routine eye examination

A53

When you have completed the tests you should tell the patient what you have found and what you would recommend. You should also recommend when they should have their next eye examination.

A62

In the absence of clinical indications, you should not recall patients more frequently than the following intervals:



| Patient age and/or condition | Recommended minimum re-examination interval |
|------------------------------|---|
|------------------------------|---|

The intervals given below should not be taken as applying automatically to all patients in a category.

| | |
|---|----------|
| Up to 16 years old, no binocular vision anomaly or refractive error | One year |
|---|----------|

| | |
|--|------------|
| under seven years old, with binocular vision anomaly or corrected refractive error | Six months |
|--|------------|

| | |
|---|------------|
| Seven-15 years old, with binocular vision anomaly or rapidly progressing myopia | Six months |
|---|------------|

| | |
|-----------------------|-----------|
| 16 years old and over | Two years |
|-----------------------|-----------|

| | |
|--|-----------|
| with diabetes who are part of diabetic retinopathy monitoring scheme | Two years |
|--|-----------|

| | |
|--|----------|
| with diabetes who are not part of diabetic retinopathy monitoring scheme | One year |
|--|----------|

GDPR Things to remember

| Right | What does this mean in practice? |
|----------------------------|--|
| The right to be informed | <ul style="list-style-type: none">• Be transparent about how you use personal data by letting patients and customers have access to 'fair processing information' – e.g. by using a privacy notice.• Supply this information in a way that is: concise, transparent, intelligible and easily accessible; written in clear and plain language, particularly if addressed to a child; and free of charge. |
| The right of access | <ul style="list-style-type: none">• If you process personal data then individuals – e.g. customers, patients, staff – can ask what you are processing and why, and ask for copies of that data |
| The right to rectification | <ul style="list-style-type: none">• Individuals can ask you to rectify personal data if it is inaccurate or incomplete.• Respond to such requests within one month, although if it is a complicated request you might be able to extend this by two months. |
| The right to erasure | <ul style="list-style-type: none">• This is also known as 'the right to be forgotten' – e.g. a person might be able to ask you to delete or remove personal data you hold on them.• This applies where there is no compelling reason for its continued processing. It is therefore not applicable where there is a duty to keep accurate records – e.g. keeping health and employee records is often a legal requirement or best practice and a requirement in case of a legal claim etc. |

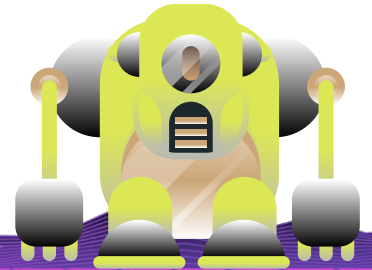
GDPR Things to remember

| Right | What does this mean in practice? |
|--|---|
| The right to restrict processing | <ul style="list-style-type: none">• A customer has the right to 'block' or suppress you processing their data in certain circumstances. This is unlikely to apply in a typical optical practice.• If there is a basis for a customer to exercise this right then you can store the personal data, but not further process it. |
| The right to data portability | <ul style="list-style-type: none">• This is unlikely to apply to optical practices because it applies when processing is carried out by automated means. |
| The right to object | <ul style="list-style-type: none">• Individuals can object to you processing their personal data in certain circumstances• If you used "legitimate interest" as the lawful basis for processing personal data and an individual objects you must stop processing data unless you can a) demonstrate how your legitimate interests override the interests, rights and freedoms of the individual or b) you are processing the data for the establishment, exercise or defence of legal claims• If an individual objects to you processing personal data for direct marketing, you must stop processing data for that purpose |
| The right not to be subject to automated decision making including profiling | <ul style="list-style-type: none">• This is unlikely to apply in optical settings. |

02

Discussion Points

What are your recall methods?
How effective is each method?
How do you track success?
What is your golden formula?

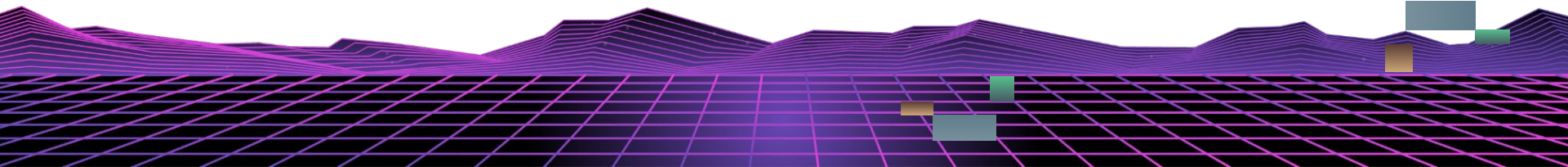




What methods are most effective?

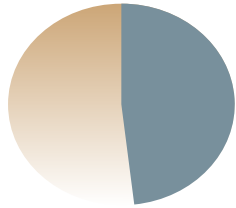
- SMS
- Email
- Postal
- Phone call

Individually, limited
success
together = greater
success



Average Industry Success rate

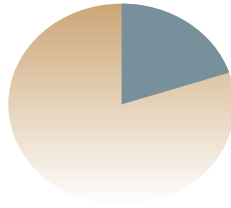
52%



3 Letter Recall

Independent
Marketing
Partnership 2013

77%

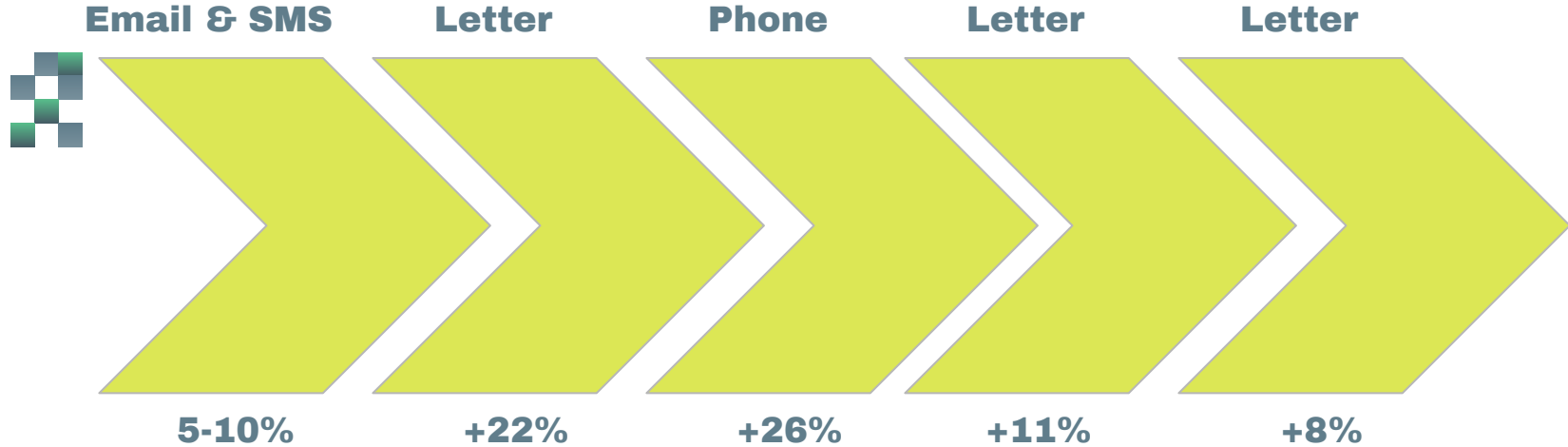


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Intelligent Recall

Even at 77%
Recall Success
you need to find
an extra 23% of
new patients just
to stand still

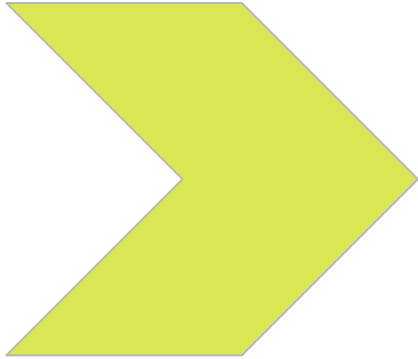
The Golden Formula...



= 77%

The Golden Formula...

Email & SMS

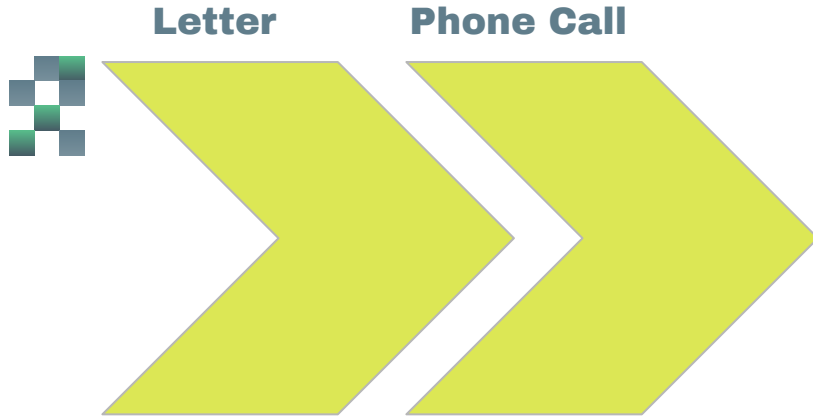


- Initial Point of Contact
- Sent simultaneously
- Includes link for Online Booking

Data analysed by XEYEX (over 300 practices) showed that Online Bookings accounted for:

- 30% of bookings aged 55+
- 30% of new patients
- Majority are same day appointments
- Majority are booked "out of hours"

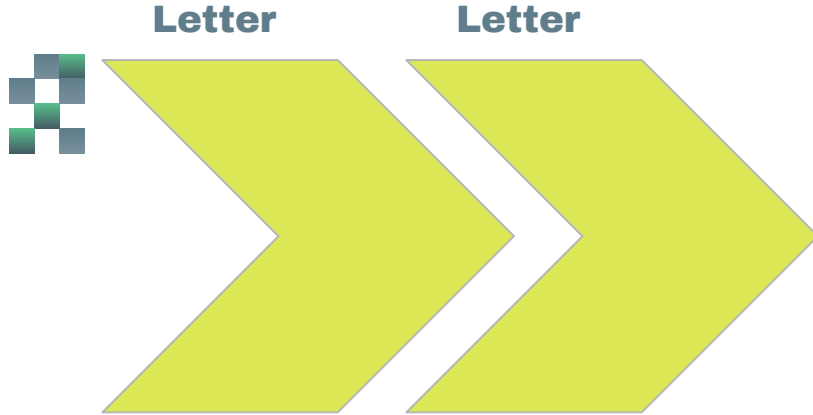
The Golden Formula...



- Include information about the importance of regular eye examinations
- Letter have a “lifespan” of approx 5-6 weeks

- Opportunity to speak to your patient
- Ask if they received the letter
- Book IF they are ready, don't be pushy!

The Golden Formula...

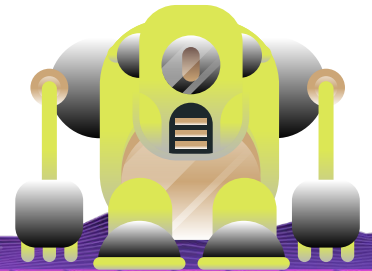


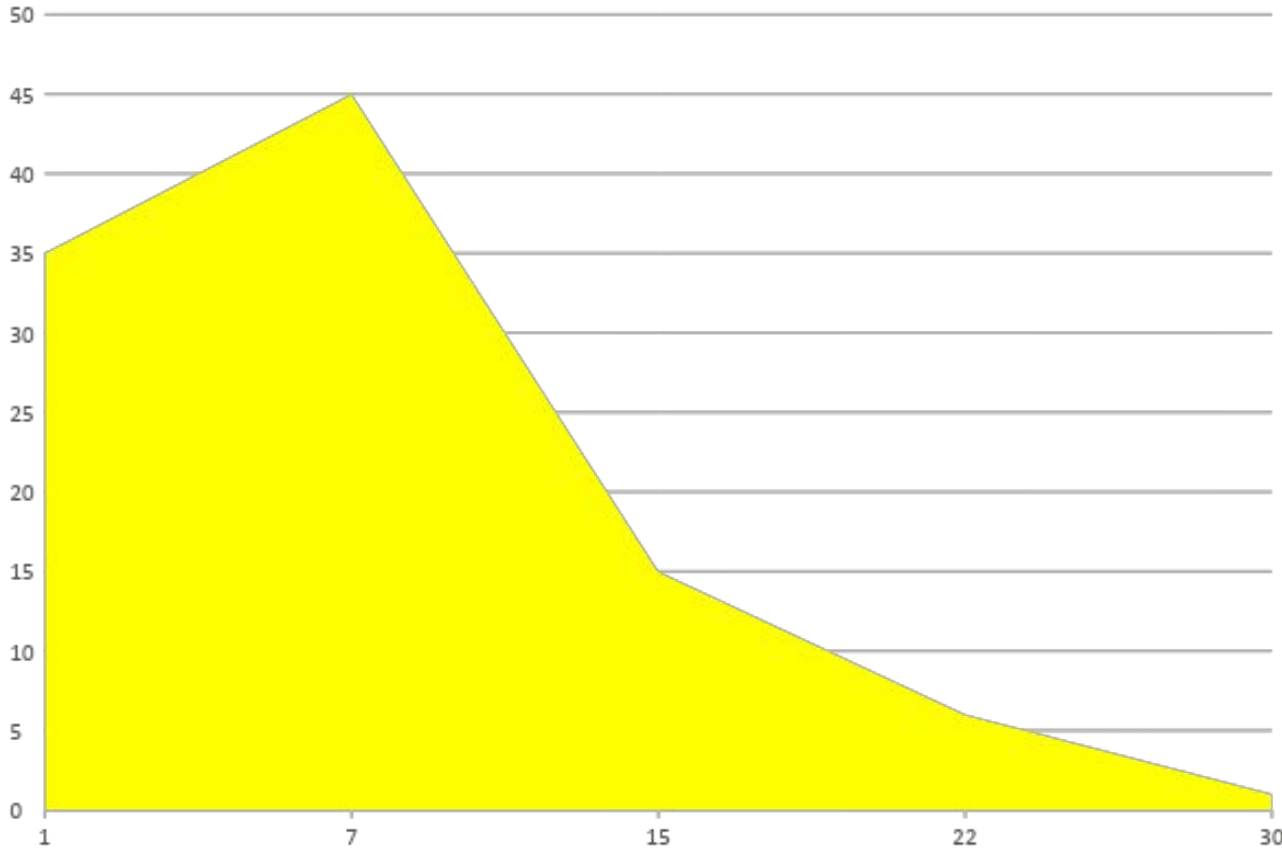
- Timing is important
- Speak to XEYEX to find out the secret formula!

03

Discussion Points

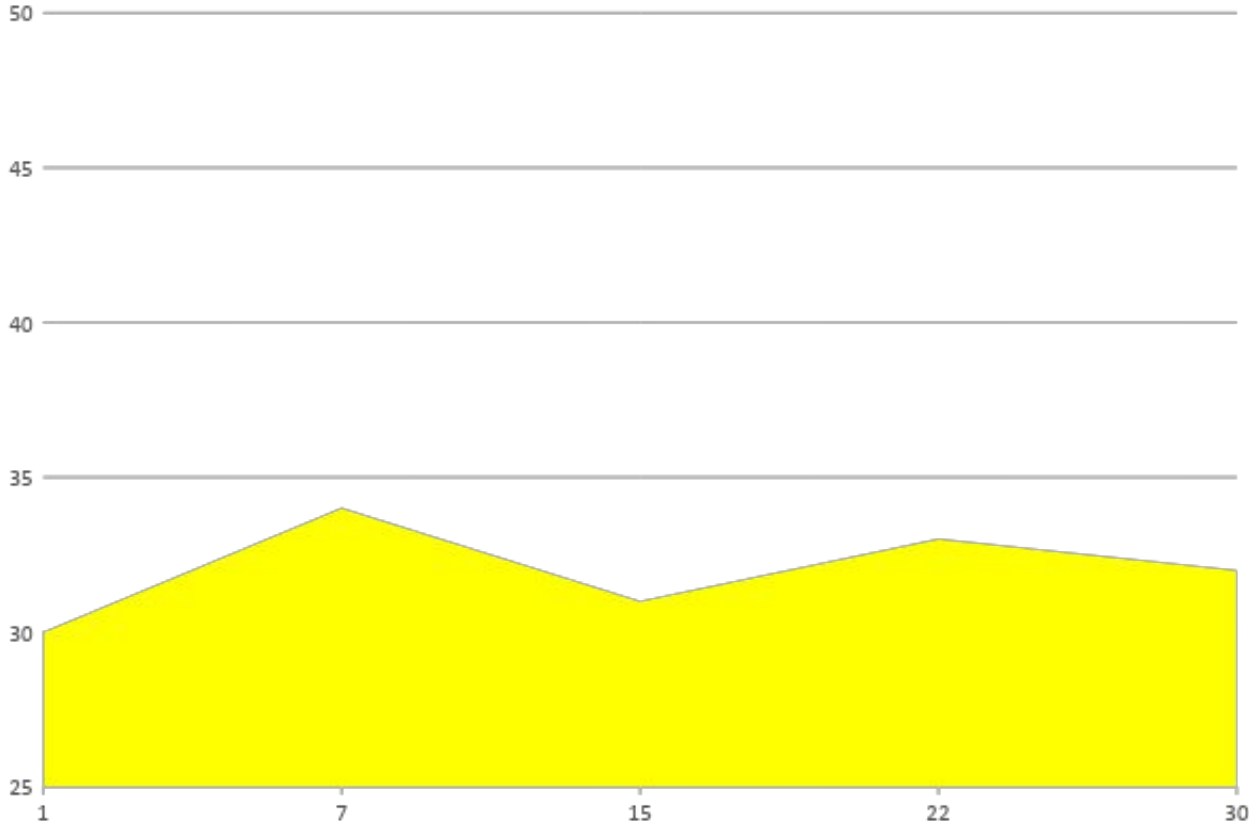
How does the timing of recall impact on your clinic capacity?
What do you think an economic cycle is and how can it affect your patients?





- Mass recall done at the start of the month fills early appointments
- Later appointments remain unfilled
- Poor early capacity leads to patients booking weeks in advance
- More chances of patients DNA'ing or cancelling



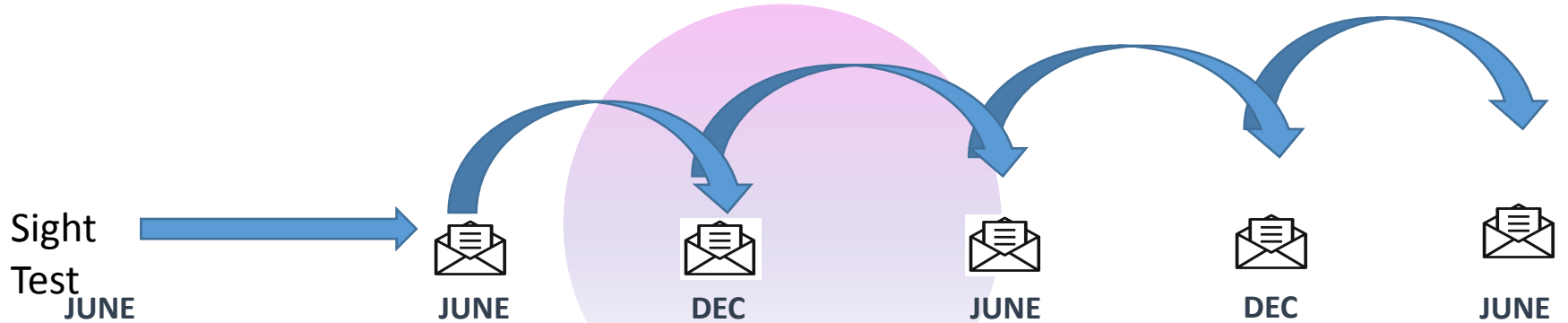


- **Balanced approach**
- **Evens out availability**
- **Improves DNA rate by reducing waiting time for appointments**
- **Don't forget majority of Online Bookings are same day, so availability is key**



Economic Cycles

- Rigid timings clash with life events
- Would you be more or less likely to book near payday?





“We have more practices in Scotland than Specsavers and we can use that data to maximise results for our clients”

Grant Cardwell, founder & CEO



- **Communication - think about the content of your recall letters**
- **Timing is key - Speak to XEYEX to find out more about timing & intelligent recall**
- **Data is King - Use your PMS to it's maximum to collate and analyse as much recall data as possible - know what does and doesn't work well**
- **Think about the psychology of the patient - what leads to no shows & cancellations - overcome and prevent those issues**

You can achieve Total Recall





software for opticians

Scan the QR Code to
download your CPD
certificate!