



Presents

"Don't Be Afraid, It's Only Selling!"

Workshop "Notes"

The Science of Selling

By Robert Bell

Editor's Note: This is the first of a series of articles written by Robert Bell and originally published in INVISION Magazine. Used with permission of INVISION Magazine.

Thank goodness for science! Thank goodness that most people reading this — eye doctors and opticians — have strong scientific aptitudes. And finally, thank goodness that selling is truly based on a scientific principle.

Yet, for the most part, the majority of eyecare professionals just suck at selling. C'mon, we can admit it. Hey, you don't have to say it out loud but you can nod, smile to yourself and think, "Well, he does have a point." But am I already contradicting myself? If selling is scientifically based and the majority of you have strong scientific aptitudes, why wouldn't all of you be selling phenoms? For two reasons: 1. You've accepted the absolutely wrong definition of what selling is (don't be upset, most people have) and 2. Because of that and until now, you thought selling had absolutely nothing to do with science. So, here's your new definition of selling: to help your patients acquire what they need! That's all it really is. I promise you. Look at this new definition. Isn't it a natural extension of who you're supposed to be as a healthcare provider, anyway? Doesn't that make you happy?

Yes, you can breathe easier because selling has nothing to do with persuading or convincing someone of something. This traditional definition has been the key source of your professional frustration because no one (including you) likes to be persuaded of anything. Yet, your selling techniques are based on this illogical definition. Is it time to stop the madness?

Let's look at this — scientifically.

Consider the three types of laws. The first type are the laws of your recognized higher power, or moral laws. The second type are the laws of man. Now, can either of these two types of laws be easily broken?

Unfortunately, yes.

Someone can walk into your office, take a frame off the frame board, put it in their pocket and walk out without paying. In one fairly easy step, the first two kinds of laws have been broken. It's important to note that, even though there may be consequences, those consequences are not always immediate when someone acts immorally or illegally.

There's a third type of law based in physical science. These laws cannot easily be broken and if these scientific laws aren't recognized or respected, the consequences are invariable and immediate! These are the laws of nature.

If you let this workbook slip from your hands, it will fall to the ground. Not every once in a while but every ... single ... time! Gravity. If you happen to be standing on a tall building and don't respect this scientific force, the consequences will not only be immediate but also pretty dire.

Sir Isaac Newton, who discovered gravity, also discovered the laws of motion. This is important to know because selling is based on the scientific, physical principles in these laws.

If this isn't recognized and respected ... well, it hasn't been, has it? And because it hasn't, you and your patients are suffering the immediate consequences. The single biggest consequence is that the majority of your patients leave your office with just one pair of eyewear when you know their actual needs require more.

To understand the true nature of selling, we have to understand the rules of the law of motion. Here's one, in very simple terms:

An object in motion tends to stay in motion in the same direction and with the same velocity unless met with an unbalanced force. An object at rest tends to stay at rest unless met with an unbalanced force.

What you're currently unaware of is that you're the unbalanced force getting in the way of the natural motion of the selling cycle with your patients. Not to worry: We're going to change that and have the force be with you — instead of against you.

Part 2: For Whom the Pendulum Swings

For whom does the pendulum swing? It swings for everybody. There ya go. I just gave you the secret to selling! If you remember that, the way you now approach your patients will drastically change and your sales will dramatically increase. By the way, so will your customer satisfaction. The only thing that will decrease will be your level of frustration. Don't leave now; let me explain. Last month, in "The Science of Selling," I shared one of the rules of the law of motion. I'm paraphrasing:

An object in motion tends to stay in motion. An object at rest tends to stay at rest.

A pendulum in motion swings back and forth from negative to positive and back again. The pendulum in the neutral position has no motion.

People walk into your office in one of these categories. Some walk into your office very positive and happy: "My friend just got the coolest pair of glasses here and I want them, too. Plus, I need new sunglasses. Here's my wallet!" Don't you just love 'em? Yet, they make up a very small percentage of the patients walking through your door.

The other small percentage of folks walking through your door are the negative, nasty patients. I don't have to tell you what they sound like, do I?

But most of your patients are neutral. They might sound something like this: "Oh, let me think about it" or "It's a little out of my price range" or "I don't think I really need this now." They're not happy and they're not angry. They're just smack-dab-in-the-middle and they're vigilant about staying right where they are. Why? Because they know what they know and will not allow you to persuade them otherwise. (Remember, selling has nothing to do with persuasion). Why do they like the middle so much? Think about when you're a consumer. We're all wary of being persuaded.

There's nothing motivating them to move ... yet.

So, of the three types of patients, the positive patient is the easiest to sell. They're excited about being there and their listening is turned on. They want and seek your help.

Now, of the two remaining types, negative or neutral, who is easiest to sell?

Before you answer, remember the LoM. Most people will tell me the neutral or average patient is easiest to sell. But this patient is not moving at all (an object at rest tends to stay at rest). The negative patient, however, is in motion and can only go in one direction (positive) and will get there with uniform velocity.

So the negative patient is easier to sell than a neutral one. Sounds illogical, but they'll offer less resistance (because there is another rule of the LoM that I haven't revealed yet).

My last question is the most important question I will ever ask you because it's the key to everything!

In order to sell your average/neutral patient — y'know, the ones stuck in the middle and not moving at all — in which direction should you move them? Positively or negatively?

Part 3: Move your Patients in a Negative Direction — And Watch Your Sales Soar

In order to sell your average/neutral patient, in which direction should you move them? Positively or negatively?

Most folks will say they would move them in a positive direction. Sounds logical, doesn't it? In fact, that is exactly what most professional salespeople do.

Uh-oh.

Moving your average patient — the one who has no movement or motivation to move — in a positive direction is, without a doubt, a colossal mistake and the most frustrating trap a salesperson can set for themselves and their patients. Yet it happens all the time.

How does this usually happen? The method most salespeople use to move their average patient in a positive direction is to make a presentation of features and benefits — or as eyecare professionals like to call it, "educating the patient."

A salesperson will start presenting the wonderful features and benefits of a product, only to be met with a bit of resistance and/or a little objection from the customer. So, the salesperson will become a little more persistent and try again, only to be met with more resistance from the customer. (I call this the "Yeah, buts ...") The more the customer resists, the harder the salesperson tries (to persuade). The harder the salesperson tries to persuade, the more the customer resists.

And so on and so on. It's an ugly song and an awful dance. By the way, if you ever wondered why salespeople generally have a reputation of being pushy, aggressive, sleazy, insincere, etc., here's your reason: the "Yeah, buts!"

This is also the exact reason that all eyecare professionals (and anyone with a brain) are wary of being perceived as "salespeople." They don't want that perception to damage their professional reputation. Can't say as I blame you, if that's the only way you know how to "sell." I mean, seriously: Who wants to be in the persuasion or "Yeah, buts" business all day long?

But why is moving a neutral customer/patient in a positive direction such a bad thing to do? Look at the following law of motion and you tell me:

For every action, there is an equal and opposite reaction.

Do you get it now?

To illustrate, let's think about the pendulum again:

Any time you try to push an average patient — the one in the middle, not moving — in a positive direction, they will resist and be vigilant about staying right in the middle. Try again and they will resist again with the same effort in which you tried to persuade them.

Are you starting to wonder what would happen if you took the patient on the road less traveled and in the opposite direction? I hope so. Am I actually implying that the key to successfully selling your average patients is to move them in the negative direction?

I'm not implying it; I'm saying it unequivocally!

Start moving your motionless, average patients in the negative direction, and your sales and the satisfaction of your patients will soar.

Scared? Please don't be. Rest assured the next section will make complete sense, cause some of you to have "a-ha" moments, and even make some of you laugh. (What's the point if we're not having fun?)

But most importantly, it will make the "chore" of selling vanish. I'm going to give you complete control of the selling process in your office. Hope that sounds good to you.

Part 4: Use the Strongest Human Motivators to Increase Sales

The biggest obstacle facing salespeople is they try to move their average patients in a positive direction. Because selling is based on the Law of Motion, moving average patients in a positive direction proves to be futile. The harder you try to push them in that direction, the more they resist. (For every action, there is an equal and opposite reaction.) The educate-and-persuade process is irritating and awkward for patients and it's frustrating as hell for you! Well, isn't it?

Right now, most of us are trying to move that average patient in the positive direction by making two very big assumptions:

1) We assume, because we've told them of their needs, they actually heard us and understood those needs.

2) We then assume they want to hear all about the products that will save the day, so ... we tell them. This is how most of us have been trained to "sell," yet it doesn't seem to work to anyone's advantage. The remedy? Do the opposite.

The opposite of telling is asking. But there is a secret to asking questions: Only ask specific questions (for which your patients have answers) and make sure those questions cause movement. To create questions that cause movement, we have to discover what motivates.

Two of the strongest human motivators are "seeking pleasure" and "avoiding pain." Of the two, which do you think would be a stronger motivator?

If I told you I would treat you and your entire family to the finest gourmet meal at the best restaurant in town, order the best wines and have the chef make his world-renowned dessert just for you, that would be pleasurable, right? But then I tell you the only catch is the maitre d' has to smash one of your fingers with a ball-peen hammer before you sit down to this fine meal. "How would you like your steak cooked this evening?" (Whack!) or "Did you spot a McDonald's down the street?"

As much as we enjoy pleasure in our lives, avoiding pain is the overwhelming human motivator. So we need to develop questions that uncover pain. This is the first step in systematically bringing patients in that negative direction on the pendulum. We need to develop these "pain questions" based on the following template: How do you use your eyes in a particular situation?

If we start to ask questions that cause movement in a negative direction, questions that uncover someone's pain, do you think your patients/customers would ultimately want to avoid that?

What's going to happen is this: Your patients start to become aware of their own pain. Once that happens, they are going to hang on every word you say to help them make that pain go away.

For example, you may want to ask an emerging presbyope, "Do you ever find yourself taking your glasses on and off when you're trying to read something?"

Try this: For every product you sell, develop and write down specific pain questions. How? Look at each benefit of each product and develop the pain questions on that basis. Try to paint a reallife picture with these questions. For instance, "When you're taking your kids to practice in the afternoon, do you find yourself squinting a lot, or shielding your eyes while driving directly into the sun? Does that feel safe?"

Part 5: Why You Need to Be Asking Dumb Questions

Not sure if you know this about me, but I am royalty. OK sure, I'm self-appointed royalty, but royalty all the same. For I am the king of dumb questions! Bow before me, you sales peasants. *Muuhahahahaha!*

In a world in which everyone is trying to outthink everyone else, why would I claim to be something so seemingly stupid? It's quite simple: dumb questions get smart answers. When you ask dumb questions, people make an extra effort to help you understand their responses. When you're in sales — and you are — nothing is more important than understanding your customers' needs.

Guess what else happens when you ask dumb questions? People become less defensive when they hear seemingly simple questions. They let their guards down, and establishing trust gets that much easier.

Before I share the dumb questions you should be asking, let me give you a heads-up. Many of you will read these questions and roll your eyes or give a snooty "harumph." Others might think, "Wow, he wasn't kidding when he said these were dumb." But here's the thing: Until you ask the questions, you don't know the answers. You may assume you do but, trust me, you don't. Ask the questions. Wait. Listen carefully for the answers.

Last month, I gave you a homework assignment: Develop a list of "pain questions" for each product you sell based on how a patient uses their eyes in particular situations.

This is how it works: Ask the pain question (such as "When you're driving directly into sunlight, do you find it hard to drive?" or "Do you ever find yourself taking your glasses on and off when you're trying to read?") then follow up with four very simple questions. Each question gently moves the customer toward the negative arc of the pendulum.

(Remember the pendulum? We've learned why moving patients toward the negative side of the pendulum is how you get them to swing in the positive direction, with velocity — and how it trumps trying to educate them into buying.)

So, here are the four dumb follow-up questions:

1. How often does that happen? (We need to know occurrence.)

2. When it happens, does it bother you? (Patients begin to focus on their own pain or annoyance.)

3. OK, and how much does that bother you? (How much pain are they in? How much does it hurt?)

4. Would you like to me to help you with that? (Would you like me to make the pain go away?)

All of these questions are important, but understand that question No. 4 is the bomb! Once you hear "yes," the pendulum swings, in one fell swoop, to positive! Bang! It's a beautiful thing to watch. You're asking them for permission to "educate" them which means they're in control. Well, they think they're in control, but the person asking the questions controls the direction of the conversation.

Do you know what a person's favorite subject is? Yep, themselves. When you try to educate them (make a presentation) before you ask these questions, you deny them the opportunity to talk about themselves. Without that information, how can you satisfy their needs? Well?

By the way, do you know what else is happening here? Review the questions again. Do you see any room in here for the patient to ask about price or whether their insurance covers it? Price and insurance coverage play a role, but they become a lot less central to the discussion because you've now changed how this game is played — in your favor.

You did it gently. You did it with their cooperation. You actually have them focusing on their visual needs above all else. Well, why not? You're their eyecare professional — and because you've swung them in your direction, now you can make your presentation.

Part 6: Timing Is Everything

When you ask the last of the four questions, "Would you like me to help you with that?" and your patient answers "Yes," you're done! Congratulations, the sale is over.

You've just taken care of the hardest part of the selling process and the pendulum is swinging, at high velocity, over to the positive side. You will not believe how good this is going to make you feel.

Do you realize what's happening here? When they say, "Yes," they have just given you their expressed permission to educate them. You've made them self-aware of their pain. Their "pain" bone is connected to their "hearing bone," and you've activated them to listen to you! They are now salivating — well OK, maybe not salivating — to learn all about what you're going to do for them. Price be damned, insurance be damned. I'm in pain. Stop the hurt! Help me!!! Please?

Now, and only now, is the time to make your presentation. When it comes to making the presentation in the sales process, timing is everything! So, let's talk about the presentation.

Nah, scratch that. I'll never teach you how to make a presentation. Why? Because there are people far more qualified to teach you. Who are these people? The vendor representatives with whom you do business. They should be teaching you all about their products simply because they're the ones with the product expertise. Great resources, your sales reps are. Tap their knowledge!

And though I won't teach you how to make a presentation, there are two critical things you need to know about making the presentation: 1. When to make it.

Yes, I'm repeating myself, but making the presentation at the right time is critical. So when should you educate your patients? Only after the sale is done! Meaning, only after you get your patient's permission to do so.

Can we all agree that a presentation is basically telling the customer all about the features and benefits of a product? I mean, that's what we've always been taught, right?

Yeah, cut that out. Stop doing that.

From now on (and only after you have your patient's permission), talk about the features of a product but never, ever, ever tell them about the benefits!

No, I'm not crazy and, yes I know, some of you are having a visceral reaction to this. (That's good! I'm bringing you to the negative side of the pendulum.) Instead of telling them about the benefits, ask them about the benefits!

It might sound like this:

"Ms. Canova, this sunglass lens is polarized. Which means that it will virtually eliminate all that harsh glare you were complaining about when you're driving your kids to soccer practice in the afternoons."

(Now, ask.)

"Do you think that might be helpful (or advantageous or beneficial, etc.) to you?"

"Yes, I think it would."

"Great. How?"

Sit back and let them tell you about the benefits.

You've just parted the Red Sea. They're closing the sale for themselves and this is pretty much going to quash any buyer's remorse. Ever think that was gonna happen? Feels pretty good over here on the positive side of the pendulum, doesn't it? Are you loving life yet? If not, wait until the September issue. In the last part of this series, I'll share with you one more technique: how to handle any objections that might arise with just five words or less. You'll then be ready to bring home the bacon (or tofu, for our vegan friends) and make your patients happier with their eyewear experience than ever before.

Part 7: "What Works Best For You?"

I've shared with you the very basics of my sales training techniques I've seen work for all kinds of optical businesses. I've also shown you an understated way to take and maintain control of the conversations you have with your customers.

Now we're at the point at which your customer must make two decisions:

Do I need this? Do I want to pay for this?

Uh-oh. Don't freak out. Don't get heart palpitations. This is actually the easy part.

I'm going to show you how to give control back to the customer — or at least, it'll seem like that. Keep in mind: Up to this point, the momentum (remember the pendulum?) has been in your favor. You've very gently and subtly taken your customer in the direction you wanted to take them and where they needed to go to get their best vision.

So, let's quickly review:

- You now understand that selling isn't about persuasion. It's about helping people get what they need.
- To that end, you've asked a series of pain questions related to how they use their eyes in certain situations.
- You followed up with questions of how much "pain" they're in, and how often.
- Then, you asked for their specific permission to allow you to help them now, and only now, learn about the features that will best meet their needs.
- You then asked them how the features of this product will be a benefit to them. Hey, seriously, nice job. But, what would you like to do now?

Hmm? You want to know how to close the sale? I just told you. Did you see it?

Once they grasp how the product will help them and once they share with you why it would be advantageous for them to buy it — hey, they're closing themselves now, aren't they? Ask the final question and get the hell out of the way.

What's the question? "What would you like to do now?"

There are several good ways to ask this question:

"What should we do now?" "What would you like me to do now?" or, if you're giving the customer three choices — always three, not two or four — the question becomes, "What works best for you?" Oh, how I love that question!

Up until now, there hasn't been any room for the customer to ask about price or insurance, or to pose an objection. Any or all of that might come up now. But that's fine, because you've set the stage: Your client is properly armed with product knowledge and has a deep understanding of the

benefits. Whatever price you're charging, both of you have now established the value. Need becomes more important than price!

But if an objection arises, you can handle it with the following five words: "Other than the fact that" ... as in, "Other than the fact that they're a bit more money than you'd like to spend, are there any other reasons why you wouldn't want to purchase these glasses today?

"No."

"OK, shall we explore a less expensive option for you?"

The only objection that those five words can't handle is, "Let me think about it." Want to handle that? Try one word.

"Let me think about it."

"And?"

And gently keep eye contact ("And?" is a curve ball. They're not ready for it.)

"Oh. Um. Well, to be honest, it was a little bit more than I wanted to spend."

Wow, an objection. Do you happen to know five words that will help you handle that?

If you've taken anything away from this series, it's my hope that you truly embrace the fact that selling is just a process in which you help your customers acquire what they need.