

Narrator: Welcome to the Pharmacy Marketing Simplified Podcast, part of the Pharmacy Podcast Network. Pharmacy Marketing Simplified focuses on easy and proven marketing tips from pharmacy owners and industry experts to leverage in your independent pharmacy business. This podcast is all about pharmacy marketing and how to be successful in today's competitive marketplace.

Nicolle McClure: Welcome to the Pharmacy Marketing Simplified Podcast, part of the Pharmacy Podcast Network. I'm your host, Nicolle McClure, president of GRX Marketing, and today, we'll be tackling the subject of pharmacy image and tips for creating a positive image for your pharmacy. I'm so excited to welcome Bruce Kneeland to the show, who I consider a community pharmacy expert.

Nicolle McClure: He has been involved in the pharmacy industry for more than 40 years. He's held a variety of senior management positions with companies, such as Vice-President of Franchise Development for Health Mart, Vice-President of Communications for National Wholesale Druggist Association, and Vice-President Corporate Membership for the National Community Pharmacists Association. He's also a frequent contributor to pharmacy magazines and a speaker at national and pharmacy conventions. Most of his articles and presentations center on interviews with successful pharmacies where he documents best practices in the area of pharmacy management, marketing, and enhanced patient-care services.

Nicolle McClure: Bruce, welcome to the show.

Bruce Kneeland: Well, thank you Nicolle, it's nice to be here and I'm excited to share some thoughts and information on my favorite subject, is how do we help independent pharmacies be more successful?

Nicolle McClure: Perfect. Well, let's get started. One of the things that I love that you do is you travel across the country every year to independent pharmacies and document what you see and experience with them. Give our listeners an overall experience of what you see when you visit those kinds of, some good and bad and maybe the ugly too.

Bruce Kneeland: This is funny, I have this little saying that I sometimes use to remind people, particularly some of the clients that I'm working with. Half of the pharmacies out there are below average. Unfortunately, whenever I'm out and about doing anything, and I just took a trip to Salt Lake and back this last week and stopped in and saw seven different pharmacies. There are some that are really not doing very well, and some of your listeners here may be those and are wondering what's going on.

Bruce Kneeland: Where I am lucky, is that I do get to visit by appointment and by assignment, some of the most remarkable pharmacies in the country, and I can tell you that what I do see, is that there are thousands of independent pharmacies that are growing and they're prospering. That convinces me that thousands more could,

if they would just catch the vision and implement some of the things that we're going to be talking about as we go through this interview.

Nicolle McClure: Okay, and that's encouraging to hear, because it's not hard these days, hear more of the doom and gloom information of the pharmacy industry. Just maybe by making a few changes in your pharmacy you could really prosper.

Bruce Kneeland: I'm absolutely convinced that's the case and one of the evidences of that, there's a few trends that are clearly out there, and one of them that I see is that there are lots of guys who own one or two stores, who are now stepping up to the plate and buying their third, or their fourth, or their fifth store. In most cases, those stores that they're picking up, are stores that are marginal. With a few simple changes, they're able to turn these stores around and turn them into very profitable entities.

Nicolle McClure: I'm definitely seeing that as well, talking to more multi-store owners, and "Power In Numbers" type thing.

Bruce Kneeland: Yeah.

Nicolle McClure: So when you're out and about in the pharmacies, what are you seeing that they are promoting, and maybe some of the things that they're not and that they're missing the boat on?

Bruce Kneeland: Okay, in terms of what they're promoting, I don't think it's going to be a surprise to anybody that I'm seeing people who are doing a great job, a sophisticated job in working on refills and making sure that their current patients are getting a higher percentage of their refills. Some of the ways that that is done, is simply with refill-reminder phone calls, refill-reminder texts. I don't know that phone calls and texts are, that's one of the techniques that you would use after you decide that, that's something you're going to focus on, because I think the real need in that area is the personal conversation with the people when they come into the store to remind them, encourage them and to work with them on techniques and tips that they can use in order to do that.

Bruce Kneeland: Refill-reminder programs that leads to medication synchronization, and boy I run into people who just swear that, that's absolutely turned their business around. Compliance packaging is an important thing. I visited with a wonderful store just Monday in Salt Lake City where a guy is doing a wonderful job with immunizations, and we're not talking Flu Shots anymore when we talk immunizations. We're talking the whole range of things, which I'm frankly not totally aware of what they are. He mentioned specifically TDAP and Gardasil. The interesting thing on Gardasil is that he's focusing on the young adult patients who can make that decision on their own. He hasn't had much luck with the teenage population or the pre-teen population.

Bruce Kneeland: Immunizations I just mentioned, the biggest one that I see now emerging is people who are focusing on nutritions and drug nutrient depletion, nutrition, diet, weight-loss programs, those types of things where, they're not only are they selling the product, they're selling the counseling and putting people into a program.

Bruce Kneeland: There's lots of things these guys are doing. The people who are suffering, are the ones who are still hoping and imagining that they can fill more prescriptions and take care of their problems with prescription volume. While that's been the paradigm for forty of the forty-five years that I've been in this business, I think you still need to fill a lot of prescriptions, I'm not one of those that thinks we need to move into the cognitive services only, I love the combination. Dispense or fill a lot of prescriptions, that gives you contact with a lot of patients, and then you can do a lot of other things with a small subset of those patients.

Bruce Kneeland: It's the people who are still hoping that they can fill more prescriptions, that they can fill their way out of this problem, I don't believe that, that's possible anymore.

Nicolle McClure: I definitely agree with you. I think that's just becoming more evident every day we run into constant barriers, new barriers, that just solidify that message.

Bruce Kneeland: Yeah, the business has changed.

Nicolle McClure: I think you brought up an interesting point about promoting Gardasil, of that's a great way to tap into that younger market. We get that questions sometimes of, "How can I reach out to that younger demographic?" There's a variety of ways to do that, but what better way, than offering something that they need, and you can have them be a customer for life, as they grow older and go through those different stages and medication needs.

Bruce Kneeland: Yeah, and you just said something that I think is not obvious to the industry as a general rule. We tend to have concentrated on Baby Boomers, I'm one of them, and Baby Boomers are wonderful customers. Thirty years ago we were a big percentage of the population. We're not anymore. The population is younger, the Millennials are coming along. I find it interesting to realize that more babies were born last year, than were born during the height of the Baby Boom. When the Baby Boom happened in the 40's and 50's, it was a huge percentage of the population, but the fact of the matter is there's more babies born now than were born then. Young mothers and young people are going to be critical to the success of any pharmacy going forward and they've got to find a way to reach out and capture these people and bring them into their pharmacies.

Nicolle McClure: Mmm-hmm (Affirmative), definitely. So some of these new services that you highlighted, they're a bit, some of them are a bit complicated, maybe not always understood by consumers. As you know pharmacy has their own kind of sub-language of acronyms...

Bruce Kneeland: Yeah.

Nicolle McClure: ...important sentences that you can use, but we often at times have to remember that the everyday person doesn't really understand what we're talking about, so give some tips of why it's important, or how the pharmacist and their staff can explain these types of services in simple terms.

Bruce Kneeland: That is the challenge, is simple terms. I had a conversation with my son-in-law this weekend. He's a computer guru, works for a company that goes into businesses and manages their software. In chatting with him a little bit, we're talking about ERP, we're talking about CRM, we're talking about some of these acronyms that I'd be surprised if anybody listening to this podcast understood, and that's exactly the point. ERP by the way, stands for Enterprise Resource Planning, CRM stands for Customer Relationship Management, which I do hope that people like you, Nicolle, can bring into common usage in the pharmacy arena.

Bruce Kneeland: I look at websites all the time when I'm doing research, I'll be speaking at several meetings this summer, as I go to websites, I see folks, people posting things like MTM. Many of them even take the words Medication Therapy Management and put it as a bullet point on their website. I would speculate the 3% of the non-pharmacy-oriented population has any clue what that means. Physically, what does it even mean, and then what does it mean health-wise, why do they care, even if they know what it means.

Bruce Kneeland: I have clearly come to believe that the time has come in this industry for every pharmacy to reach out and figure out how to bring on and/or hire a marketing pro. You mentioned, how do we simply do that, or how do we simplify it? That's the hard part, how do you take the complicated concept and reduce it to something that is a sentence or two that will resonate with the consumer, and not only get them to understand what it is, but get them to realize that it would have a benefit for them.

Bruce Kneeland: When we talk about immunizations in a pharmacy, what does that mean in terms of convenience, what does that mean in terms of "What do I pay for it?", what does it mean in terms of "How is my doctor going to know that I got it?" So, all of these tools are in place, and consumers just don't know or understand how and why they should be getting a pneumonia vaccine in their pharmacy, when their doctor didn't tell them to do it and they'll be confused as to knowing whether their doctor even knows that they got it.

Bruce Kneeland: You need somebody, some staff member who can become expert at it, or you need to hire somebody who can help you craft the message, create the graphics, and then frankly build the culture into the pharmacy where the staff knows what's going on and how they can do it. I'm going to go back 20-25 years. I used to play the game back when I was involved with the Family Pharmacy Program which is now the Good Neighbor Program, I would go into a pharmacy

traveling and I would point out to the person in that independent pharmacy, all of the Family Pharmacy logo, and all of that stuff, and I would say to them, "I'm confused, I thought I was in Jordan River Pharmacy. What's all this Family Pharmacy stuff?"

Bruce Kneeland: The clerks would look at me with some starry eyed thing saying, number one, who is this idiot and why is he asking this question, but they had no ability to explain how Harry's Pharmacy was flying Family Pharmacy colors. That's so true with the Health Marts and the Good Neighbor pharmacies, or the Health Wise pharmacies, whatever identity program your pharmacy may belong to, the point I guess I'm trying to make is you not only need to how to explain it simply, you need to get your staff to be able to do that, and to care that you're doing it. That's an awful lot said for that, but that takes a program, that takes an effort, that takes, it's got to go to the top of your agenda, is how do I make my pharmacy more appealing, more compelling to the people who are doing business with me, and obviously to the people who aren't yet coming in for their prescriptions or health-care services in my location.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: Whew! I'm sorry for that long-winded sentence.

Nicolle McClure: NO, it was a great explanation and it's funny because we have some of the same conversations with our clients that are affiliated with the different organizations and I think it's sometimes it's a bit of a brand-identity struggle, of which one do they promote...

Bruce Kneeland: Yeah, the world is full of examples of people who promote both. At this stage in my life, I'm not a proponent of one way or the other, it is what it is, you've made a decision, now maximize it.

Nicolle McClure: Right.

Bruce Kneeland: So, you can go either way. The dual-name thing is, I travel a lot, so I stay in an awful lot of hotels that are Clarion by Hilton.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: It's the double branding thing is not uncommon in our society. It works and it works when you make it work.

Nicolle McClure: I think you brought up a good point. I think sometimes the disconnect of, you may have a pharmacy owner that is passionate about trying new things and marketing them properly, and whatnot, but if your support staff isn't behind you, it doesn't really matter, because they're the forefront of your pharmacy, typically. They're the first person that's greeting the customer and talking to

them when they check-out, so I think pharmacy owners definitely need to find a way to engage and excite them about some of these new programs as well.

Bruce Kneeland: Absolutely, the old farmer cliché is you've got to get the water to the end of the row. You may have people on your staff who are marginally committed to your business, and one of the pieces of marketing, and this is another thing I guess I would want to say, is people think marketing, they automatically turn to advertising, and that's huge mistake. Advertising is a major piece of a marketing program, but training your people and getting them so that they know and understand who you are, what you stand for, what your reason for being is, is probably Step One in the success, well Step Two, number one is you've got to know what it is you sell, but Step Two would be winning over your staff, making sure that you have people who know and understand that their job is not to fill prescriptions, their job is to help people live healthier lives.

Bruce Kneeland: The beautiful spin-off of that, and again, I hate to go down a rabbit hole, but it's one I feel very strongly about, is the pharmacy business is not the business of filling prescriptions fast and accurately. The pharmacy business is the business of helping people live happier, healthier, more productive lives.

Bruce Kneeland: I get emotional about this, and I had a conversation the other day with a brand new marketing person who was brought in for one of the companies that I do some consulting for, and I tried to help her catch a vision that her job is not to make pharmacists successful, her job is to help pharmacists make people healthier, and that's where my passion for this industry lies, this profession lies. I'm not a pharmacist, I don't have the ability to practice the profession, but what has kept me passionate about it for years is knowing and understanding that there's people who are better off now because they chose to do business with a pharmacy that did more than put pills in the bottle.

Nicolle McClure: Mmm-hmm (Affirmative)

Nicolle McClure: Excellent point and I think what you said kind of resonates with all of us. I think that's probably why a lot of us got into this industry is for that passion, that's why GRX Marketing is here, because we have a real passion for independent pharmacy owners, so...

Bruce Kneeland: Yeah, it's easy to fall in love with this profession when you see somebody really come into a pharmacy and be relieved or pleased that the pharmacist helped solve a problem that had been a major one in their lives.

Nicolle McClure: Mmm-hmm (Affirmative), Definitely.

Nicolle McClure: So you kind of touched on earlier that marketing is not just advertising, that's something that we definitely advocate for as well. It's so much more, marketing is such a broad term these days. If you asked an independent pharmacy owner,

"What is marketing?", what do you think their response would be and, what are they doing right with marketing and maybe what are they doing wrong?

Bruce Kneeland: The first thing, and this is a real recent example is "Marketing is something that I don't have time to do," "Marketing is expensive," and "Marketing is advertising." Those would be the three most common things that come up when I try to have a conversation around it.

Bruce Kneeland: Number one is, if it's expensive, you're not doing it right. You need to look at your marketing dollars as an investment, and you need to be able to determine whether or not that investment is generating a return. I hate to say first, second, or third, I don't know what's more important, but the major concept that I would want them to grasp is marketing is everything that you do that appeals to people in your area, and that steps back to some of the classic, the exterior appearance of your store, the interior cleanliness, is it clean, is it well laid-out, have you paid serious attention to the assortment of items that you put in your pharmacy?

Bruce Kneeland: I walk into pharmacies all the time where you walk down a row of OTC shelving and there's 6 or 8 inches of empty space between one product or another, product is there one item deep. It's clear that the guy doesn't have the right merchandise in the store, it's not selling, but he keeps it on the shelf, and the first thing that does to me as a consumer when I walk in is say "Sheesh, is this guy ready to go out of business?"

Bruce Kneeland: It's the appearance, it's the impression that you make. We chatted a little bit about the employees, are they cheerful, are they there, are they visible, have they been trained to know how to deal with customers? This is an art, there's different ways that you can train your people to do stuff and that flows back to your personality and your definition of who you are.

Bruce Kneeland: Marketing is the sum total of all of those things, and I see people who are doing it exceptionally well. I've created this little, I like to come up with patterns or whatever, but I've created that I see four kinds of stores, and they all can be defined with one word that starts with "c."

Bruce Kneeland: I see stores that are conventional, those would be the 15-5000 square foot stores where they're selling OTC's and candy and greeting cards, that's the conventional image of a pharmacy.

Bruce Kneeland: I see stores that have moved into a clinical mode, where they get rid of most of the stuff in the front of their store, and they have a private space for counseling, and they're focusing and concentrating on supplying some of these enhanced-care services that we've made fleeting reference to.

Bruce Kneeland: I was in a wonderful store in Panguitch, Utah just yesterday that clearly comes under the category of cute. I mean the guy's selling flowers, he's selling toys,

he's selling candy. He's got displays up that support these things, so it's a cute store. Its just a pleasant place to go.

Bruce Kneeland: Then I was in a store last Thursday that I would classify as crummy. It's just dirty, you've got burnt out lights, so marketing, pick something and then pull everything you can to support that image that you're trying to create. I would suggest that nobody would want to consciously create the crummy image, but people are doing that, frequently doing that.

Bruce Kneeland: You have to sit down, you have to talk with your staff, you have to figure out where do we want to be, how are we going to get there. We have very limited resources, what can we do that will be simple, and yet effective? There's things that you can do, and the first one is clean the store up.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: Get rid of some dead merchandise, open the place up, make it a little bit more viable, and then bring in some new services that will have meaning to a small percentage of your population, and the goal I want to talk about, this small percentage.

Bruce Kneeland: One of the examples I use in my CE programs is yoga. Just yesterday I was with my grandkids, two days ago, I was with my grandkids at karate classes, and right next to it was a yoga salon. They must've had 30 or 40 women coming in and out between class switches, all these women are going there and they're paying big bucks to take yoga classes. 2% of the population takes yoga. If you can find something that appeals, to 2 or 3 or 5% of your customer base, that can be a big impact. If you can get 2 or 3 or 4% of your patients to get a Shingrix shot in your pharmacy, that's huge.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: So it's not most people, it's not the vast majority of people, it's a meaningful number of people that would do something that you can do in your pharmacy that's consistent with your image. Yeah, most people aren't going to do that, but some will and they'll pay for it.

Nicolle McClure: Yeah, no, excellent point, and I think that just pointing out that focusing on those more specialized services, doesn't mean that you're going to abandon what else you're offering as well, or maybe eliminate a demographic, you're just focusing, targeting more on that one group.

Bruce Kneeland: I'm sorry, I just talked with a wonderful young lady, she's actually a Pharmacy Resident doing her residency at a pharmacy up in New York, and she goes over and does hospital transition discharge with people and they put all the stuff in a compliance pouch package and charge \$20 for it.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: They get 2 people a week, it's not like this is a big deal, but 2 people a week over a year, at \$20 a package, makes a difference in your bottom line and they're now the pharmacy in the area that does this and the people in the hospital know about it and they talk about the pharmacy. So there's serendipity plays a big role in your success, and I know we still want to chat a little bit about word of mouth on this thing, but that's what generates word of mouth, is when you do exceptional things that are different than everybody else, even if it's for a small percentage of your patients, the halo effect helps the whole pharmacy in other ways.

Nicolle McClure: Definitely. Just some of that thinking outside the box and what other markets can you capture. It doesn't always necessarily have to be directly healthcare related, you can partner with some other type of business in your community and grow that way as well.

Bruce Kneeland: Now, that's interesting, and something I know I've thought about but I couldn't come up with. Can you think of another kind of business that a pharmacy could work with that wouldn't necessarily be healthcare related? Have you got something on the tip of your tongue that you could share?

Nicolle McClure: Well, one thing that we encourage is to partner with local pet shops, if you do compounding services, so just go in and have a conversation about that program, and ask if you can leave a brochure, some sort of leave-behind. I think pets are very passionate for a lot of people so when somebody comes in and says that their dog is sick, having that resource of the local pharmacy to be able to provide that medication, is a great avenue and connector for that pharmacy owner.

Bruce Kneeland: I love it. You start talking about people that have passion for their pets, I've got 5 kids, 4 of them have children and have given me grandchildren, and we love them for it. One has got fertility issues, and so they have a dog. The point of this, is that, that's my grand-dog, and I better know his birthday and everything else, and to that point, they had a chance to take a trip, so we drove from Prescott, Arizona to Los Angeles to pick up a dog, and bring it back here and take care of it for 3-4 weeks, so that they didn't have to put it in a kennel, just the same as we would have done for one of our grandkids. So yeah, people are passionate about their pets.

Nicolle McClure: Yeah, definitely. That's 1 kind of example of going beyond just healthcare-related type businesses, kind of branching out a little bit more in your community. You never know where those types of partnerships are going to lead you.

Bruce Kneeland: I will say one other thing too that you didn't, it's implied in what you said but it needs to be brought out. You're getting out of the pharmacy, and you're going

someplace else. There's magic that happens when you get out of your pharmacy and go visit other businesses in your area and develop relationships with them. The thing that I say from time to time that drives my wife crazy, but at any one time there's more people outside of your pharmacy than there are inside your pharmacy. Get out of your pharmacy and go meet them.

Nicolle McClure: I agree 100%. We kind of touched on it earlier, word of mouth.

Bruce Kneeland: Yeah.

Nicolle McClure: I think it's a wonderful thing, but chances are it can hurt you more than help you, as we know. People tend to talk more when something negative has happened, over positive, and I think that especially rings true today with social media. Unfortunately when they've had a bad experience in a business, people rush to social media and post bad reviews, and things like that, now, whether or not it's warranted, often times remains to be seen. Talk about word of mouth and the good and the bad of it.

Bruce Kneeland: Unfortunately, my going-in proposition is that it's the best kind of advertising you can get, but it doesn't happen spontaneously. You have to engineer, you have to create word of mouth. Then you have to have a way to mitigate the plausibility of negative word of mouth which mathematically will occur 5 or 6 times more often than positive word of mouth will happen.

Bruce Kneeland: One of the things I've seen people do is create a customer referral program where you actually have little cards and things like that, that you can give people that will encourage them or give them something physical that they can hand to somebody else. The word of mouth thing is implied again when you're doing shingle shots, when you're doing the adherence packaging, when you're ...I work for a client that has this program where they make phone calls to people on their birthdays. Every time I end up visiting with people who are using that particular company's name, product, they talk about how somebody picked up a customer because somebody told their neighbor they were so thrilled that their pharmacy called them and wished them "Happy Birthday!"

Bruce Kneeland: You've got to be doing things that are above and beyond the norm in order to create it and then you have to make it easy for somebody to talk about you. I love the little cards that you can give them that they can hand to somebody that will take \$10 off or give them a free pound of fudge, or whatever it is that you've got that would be designed to appeal to people. But you have to have a program.

Bruce Kneeland: The other thing that you have to have a program for, is what do you do when you have disappointed somebody? So somebody on your staff has got to be watching social media to see when somebody is talking about you and then you've got to have a program for reaching out to that person, finding out what happened, apologizing and then making good in some way, shape, or form.

Bruce Kneeland: It's a circular thing. You have to do something worth talking about, you have to make it convenient for people to talk about you. When something goes wrong, you're out of stock, whether it's your fault or not, you're the one, the pharmacy is the one who's taking the credit for the fact the prescription didn't come in from the doctor, that your insurance company doesn't pay for it. How do you explain, apologize, and then have some sort of program for mitigating that? Again, I don't know that it needs to be clinical. Scott Patterson owns a couple pharmacies in Kansas, he does have fudge, he does have a coffee bar. He has these little wooden nickels that he hands out at the pharmacy, when something goes wrong, that the patient's irritated by, or inconvenienced by, he gives them one of these wooden nickels where they can go get a cup of coffee or they can get an ice cream cone.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: But that's something that he does. It fits his personality, his style. It's a whole program you have to have. Again, I'll pat you on the back, I think you need to hire, or have somebody on your company who can think these things through, and then help get them implemented in the store and driven all the way through so they can become part of the culture of the pharmacy. Does that make sense?

Nicolle McClure: Yeah, absolutely. Like you said, you have to prepare in advance, because usually when these negative situations come up, obviously they're going to come up out of the blue, unexpected, most of the time. If you're not ready for it, if you're flailing around, it takes you a week to get back to the customer, things like that, because you're trying to figure out what to do, that's critical time that has passed to salvage that relationship with the customer. It's important to have a plan in place and know what you're going to do when those situations come up and how you're going to act on it.

Bruce Kneeland: Yes, and any situation will come up, that will be different from the situation that came up before, so the plan has to be broad enough to handle all of that. The classic mantra that they'll teach you in marketing school is, "It's not when you screw up that matters, it's how you take care of the screw up that matters."

Bruce Kneeland: People are disappointed all the time, so how do you take care of those people. I still laugh, we've had some home remodeling done here as we've moved into our retirement home in Arizona, so we've been having contractors come in and out, and fortunately we've had a good selection of them. I saw a sign posted in somebody's yard a couple years ago, you know how when they're doing remodeling, they put a sign in your yard that advertises their name. This guy simply said "If you call, we'll show up." Sadly speaking, that's the level of customer service that's the banner. We've called people, and they have never showed up.

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: Customer service is king. Fortunately for independent pharmacies, the bar to be exceptional is so low that you can do it, simply by giving people a wooden nickel when something goes wrong, so have a program, have a plan, and drive it through. The bad things that happen become the reasons that people will talk about you because it's how you handled the bad thing.

Nicolle McClure: Yeah, definitely, turn a negative into a positive.

Bruce Kneeland: Yes.

Nicolle McClure: Well, I think, wrapping it up here, anything else you want to share with our listeners before we finish the podcast?

Bruce Kneeland: Yeah, and it's the classic thing that people like I do all the time that nobody wants to hear. The secret to success is believing that you can succeed. It's attitude, it really does come back to, "Hey, there's a problem, but me and my team, and my suppliers, my vendors, the people who work with me, we can figure out a way to get through this."

Bruce Kneeland: The people who are not succeeding are the ones who are complaining, and believe me, there are plenty of reasons to complain, and I'm not a Pollyanna, I know there's significant challenges facing this industry, but I see people all the time who have figured out how to handle slow and low, and terrible reimbursement, from third-party vendors. There's ways around this, there's ways through it, but it takes that "Hey, I'm going to dig in, and I'm going to figure it out, and we're going to move forward. There is a way."

Nicolle McClure: Mmm-hmm (Affirmative)

Bruce Kneeland: I would say that clearly anybody listening to this interview is already above average because they're looking for solutions. Those people who are above average who are looking for solutions, get to the trade shows, read your pharmacy journals, get out of the pharmacy, and don't necessarily go look at other pharmacies, go look at other retailers in your area, other service businesses in your area, and see the little twists that they're doing with stuff that matters. Keep at it and work at it, and know that you can succeed. The pattern is out there now, we know where to go. It's med sync, it's refill reminders, it's immunization, it's drug-nutrient depletion, it's nutrition and weight loss support. Those patterns have proven themselves and they're there to be followed and you can find people who can show you how to do it.

Nicolle McClure: I think that's a great way to wrap up what we discussed today, so thank you Bruce so much for your time, I think it was a great discussion on a lot of things that the independent pharmacy owner should be doing if they're not doing already, so thanks so much for joining me today.

Bruce Kneeland: Thank you and have a good day.

Nicolle McClure: Thank you for listening to another episode of the Pharmacy Marketing Simplified podcast. Be sure to check us out at PharmacyMarketing.com.

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