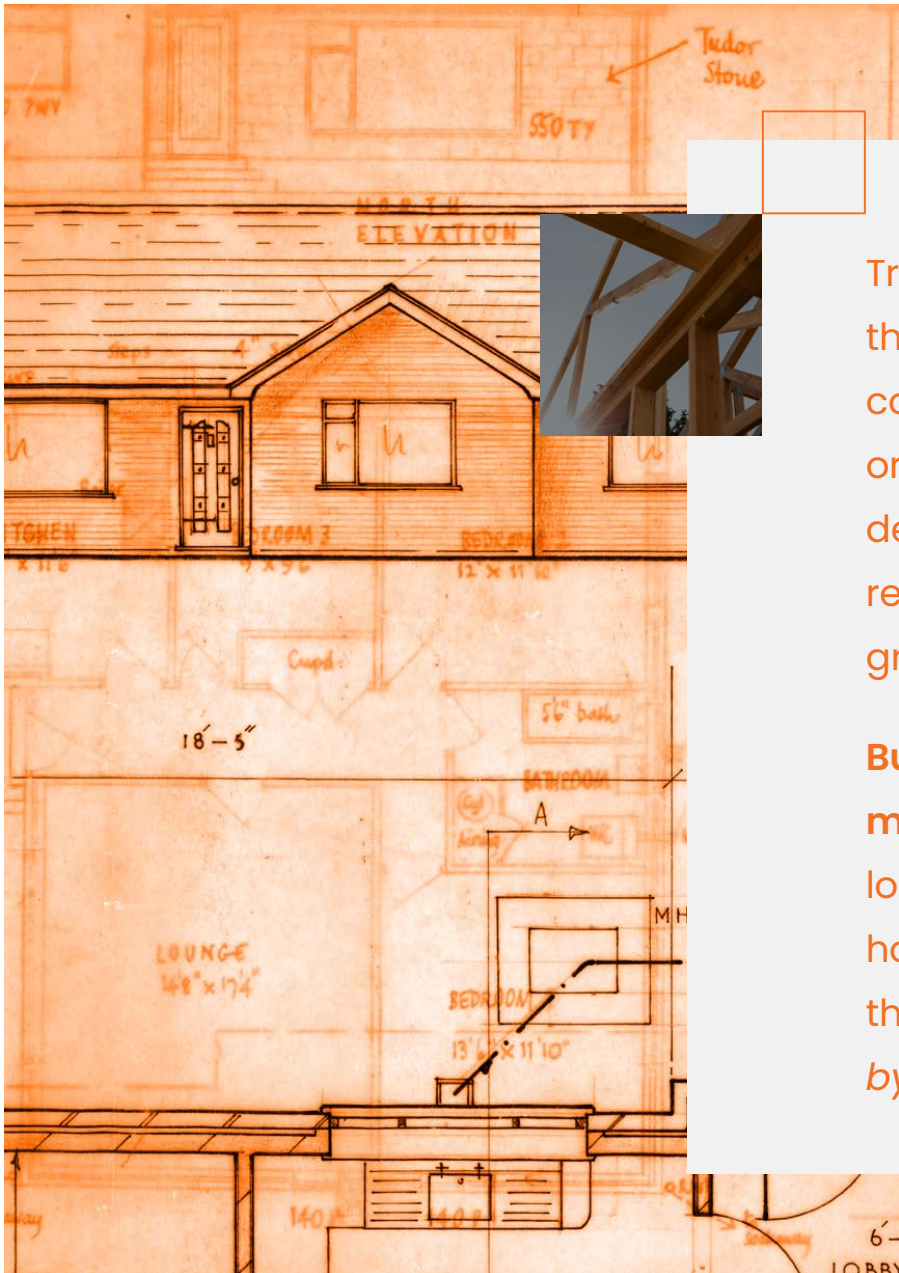


Growth with purpose for mission-driven hospices



## How to Build an Integrated Sales Strategy



Transcend's GRO™ methodology believes that regardless of whether you call it sales, community education, business development or something else, having a team of individuals dedicated to developing professional referral relationships should be a core part of your growth strategy.

**But sales is so much more than dropping off muffins or handing out pamphlets.** As you look to refine your organization's approach to home-based care sales, Transcend suggests thinking about three key pillars, *underpinned by a culture of compliance.*

## Pillars for Improving Your Sales Team Performance

Increasing the right mix of admissions for your organization is your fuel for growth. This report shares insights for growing those admissions through stellar sales team performance.

All recommendations are based squarely on a solid foundation of compliance. Upon that foundation, the pillars of data, operational design and sales team accountability provide a sound framework for substantial growth.

### THREE PILLARS

Data

1

Design

2

Accountability

3

COMPLIANCE

PILLAR ONE

# Sales Data

Data is king for monitoring, managing and improving your sales team performance. And the most effective data should be relevant and real-time. In fact, current data dashboards are steadily becoming a must-have – **because otherwise, you're flying blind.**

The best data program is the one that works for your agency. You must determine as a team which Key Performance Indicators (KPIs) are most meaningful for you and can help you identify opportunities for growth.

### KPIs for revenue generation:

- Census
- LOS (overall and by referral source)
- Referral/admission conversion percentage
- Average time to admission
- Hospitalization and ER avoidance
- PEPPER report information

### KPIs for sales team performance:

- Referral source mix
- Referrals by salesperson
- Census by salesperson
- Conversion by salesperson
- Progress to sales plan
- Visit productivity:
  - Documented visits with minimum number of target accounts
  - Documentation timely entered into a CRM software

### Data to sell with:

EHR data to use in an ALF/SNF:

- Number of clinical visits
- Visit breakdown by discipline
- Total patient care days/hours provided monthly or quarterly
- Changes in functional status or level of care by patient
- Discharges by death or extended prognosis (hospice)

Value-based outcomes data:

- CAHPS scores
- Clinical outcomes for selling
- After-hours calls taken
- Percentage of live discharges (hospices)
- DNR conversion status (hospices)

Another important aspect is making sure all key team members know where to find the data within your technology stack. If you don't have a single platform or dashboard, educate team members on where and how to access all data sets.



When you have meaningful data to work with, a strong organizational design framework is imperative to capitalize on the numbers.

One of the most crucial factors is the alignment of your sales team and admissions team. This function is driven by steadfast leadership alignment. What are the reporting relationships within your organization? Do sales and admissions report to the same leader(s)? Are you getting the same answers from your admissions lead and your sales lead?

To ensure that your leadership stays aligned with the needs of your sales and admissions teams, consider these attributes:

- **Recurring meetings** – Keeping leaders from the sales and admissions teams in the loop and in sync is crucial to building a culture of excellence and growth.
- **Focus** – If you split roles or duties (for example, an admissions nurse who also does sales visits), you’re also splitting outcomes.
- **Growth mindset** – Is your organization fully aligned around growing your market share? Does your staff all work to find ways to admit all eligible patients in a compliant manner?
- **Support** – Sales teams thrive with good marketing “air cover.” Sales and marketing working hand-in-hand is needed to reduce volatility and diversify referral mix.
- **Integration** – Sales can’t be just a “bolt-on” or stand-alone department. Sales must stay closely aligned with admissions/intake and have a seat at the leadership table.
- **Scale** – As your organization grows in census, your number of salespeople should increase according to a staffing grid similar to their clinical counterparts.
- **Compliance training** – Regular training and oversight for compliance are crucial for risk management.

“The importance of integrating sales (marketing) and access (admissions) is a lot more important than I originally realized.”

– Business Development Leader,  
Hospice of the Panhandle, Kearneysville, WV

## PILLAR THREE

# Sales Team Accountability

With a strong organizational design for support and great data to inform selling tools, the final pillar is a fair and equitable way to hold each sales team member accountable. Yes, relationships with referrers are still important. But the “spray and pray” approach of dropping off donuts and branded swag then hoping to snag a referral won’t cut it to fuel your growth.

Again, you need to create the kind of accountability structure and reporting that works best for your agency. But here are some considerations to include if you haven’t already:

- **Quarterly sales plan** – Each member of your sales team should present a quarterly growth plan to leadership, including the clinical/admissions lead. This plan should be specific, with estimated referral volume generation and detailed plans to grow census.
- **Productivity requirements and route planning visibility** – Team members should have clear expectations for how many relationships they need to foster, and leadership should *always* be able to discern where salespeople are in the field on any given day.
- **Detailed documentation in a CRM software** – Including specific notes of who was visited, conversation specifics and follow-up items. To be reviewed no less than weekly by the sales leader.
- **Tangible success metrics** – Such as minimum requirements for visits per day and expectations for referrals per referrer source. These may differ per salesperson based on how accounts and prospects are assigned (“fair” doesn’t mean “equal”).
- **Leadership ride-alongs and mentorship** – Multiple times per week for coaching and support. Sales leadership is *not* a desk job!
- **Continual, honest conversations from leaders** – Marked by enthusiasm and compassion while being totally transparent about shortcomings and areas for improvement.
- **C-suite relationships** – Agency leaders should hold themselves accountable for developing deep and consistent relationships with the C-suite teams at area hospitals, payers and corporate long-term care chains.

“In sales, people will do what you inspect, not what you expect. Driving accountability via ride-alongs, reviewing visit documentation, and setting productivity metrics with my frontline sales team is crucial to our growth and position in the market.”

– Leslie Nichols, Director of Business Development, Centrica Care Navigators, Kalamazoo, MI

# Need help shaping sales team performance for your agency?

Transcend Strategy Group offers deeply experienced assistance providing analysis, structure, data design, training and other support for providers of home-based healthcare.

Outside perspectives can help – sometimes internal dynamics can mask blind spots and cloud opportunities for making changes that can lead to significant growth.

To start a conversation, email [hello@transcend-strategy.com](mailto:hello@transcend-strategy.com)



The best sales program is the one that works for your organization. There isn't a one-size-fits-all offering that will lead to success. Factors such as external partnerships, certificate of need, community demographics and risk tolerance all factor in to how you design your sales team.

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