# Captivating the Customer

*Milestone 1 - Selling Skills*

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# Impact of Communication

★ Words 7%

★ Tone of Voice 38%

★ Body Language 55%

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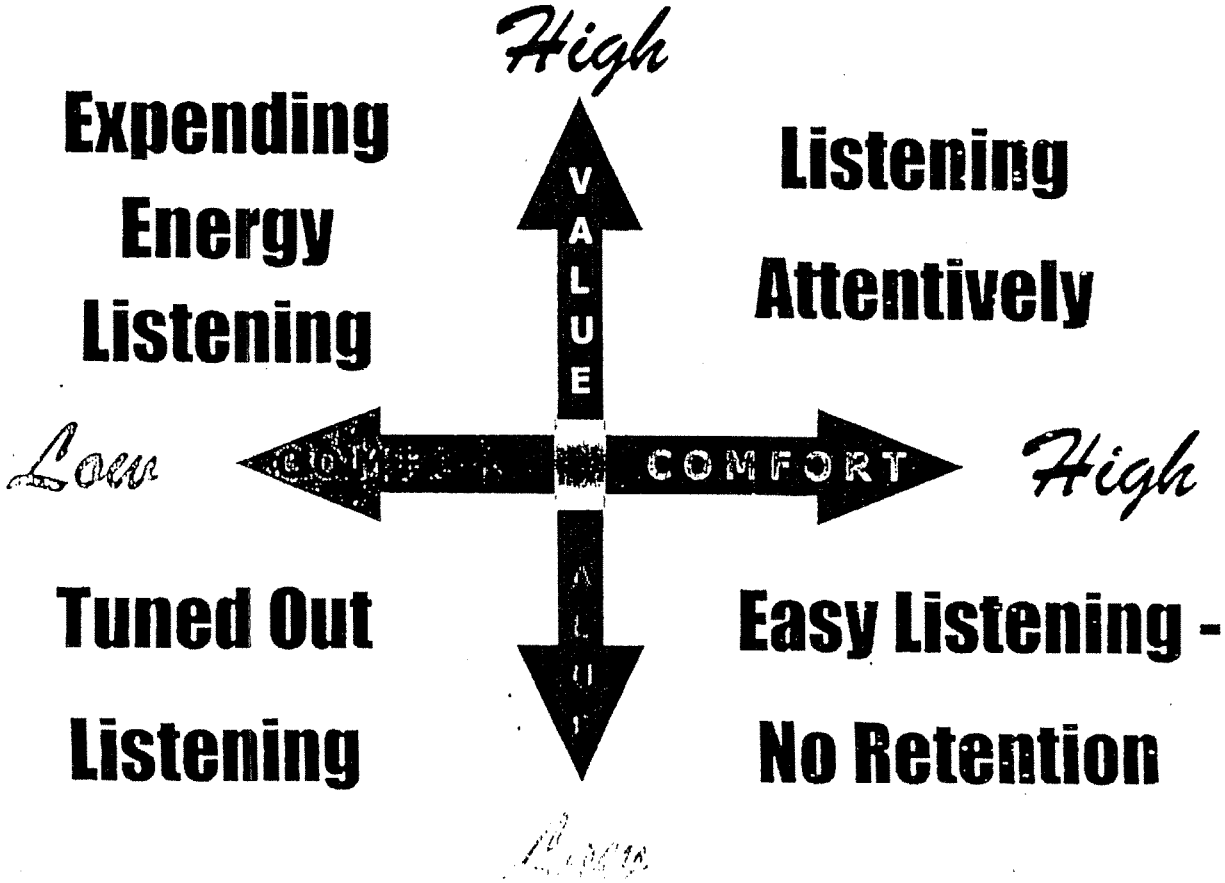
# Definition of "charisma"

An "exceptional" ability to secure other people's devotion or loyalty.

Webster's

# Comfort/Value Index

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# Driving Discussion Words

- ★ Quality of life **plummets**....
- ★ **Unnecessary** pain/cost/...
- ★ The **shocking** truth is....
- ★ The **staggering** statistic is....
- ★ The **immense** pain causes...
- ★ This is a **critical** time to .....
- ★ Survival is the **foundation** for cholesterol therapy
- ★ Early diagnosis and treatment is **crucial** to quality of life....

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# Driving Discussion Words

- ★ **Many** of the features you would expect…
- ★ The **respected** participant in scientific outcomes
- ★ The **solid experience offers**...
- ★ The **respected** leader in scientific outcomes...
- ★ **High performance**
- ★ Has **won** the **respect** of…
- ★ Has **played** a **major role** in…

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# Non-Verbal Techniques

- ★ Eyes
- ★ Head
- ★ Fingers/Hands
- ★ Legs
- ★ Overall Posture
- ★ Facial Expressions
- ★ Mirroring

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# 3-Step Process

1. Determine customer's BEST style picking up Cues and Clues

2. Align yourself with the customer's BEST style through verbal and vocal skills

3. Align yourself with the customer's BEST style through visual and non-verbal skills

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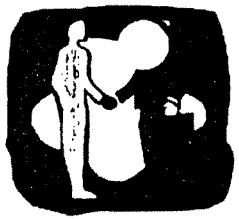

MILESTONE 1 LEADER GUIDE

# Captivating The Customer

MERCK
SALES TRAINING & PROFESSIONAL DEVELOPMENT

*Selling Skills*

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# CAPTIVATING THE CUSTOMER

## OVERVIEW

As a result of this program, participants will improve customer relationships by applying verbal and non-verbal engaging attributes to enhance overall effectiveness of sales discussions.

## OBJECTIVE

At the completion of this course participants will be able to:

- Recognize their individual engaging attributes which enhance their ability to gain access and improve overall customer communications to cultivate long-term, value-driven relationships
- Identify, build skills and self-assess via videotaping and role-plays the three components of communication which keep physicians engaged: verbal, vocal and visual skills
- Recognize and apply impactful Verbal skills, i.e., clearly stated targeted messages tied to specific needs; crisp, concise vocabulary; Driving Discussion words, etc.
- Recognize and delete verbal Weakeners from Verbal communications
- Recognize and cultivate expert vocal skills: voice tone, pitch, inflection, volume, clarity and tempo
- Recognize and develop expert non-verbal techniques: use of body language, specifically posture, eyes, hands, and arm movements
- Recognize verbal and non-verbal cues identifying physician's communication styles
- Lead a sales discussion applying assertiveness, persuasiveness, strategic questioning and engaging skills

## SPECIFICATIONS

- ✔ AUDIENCE: Office-Based Representatives
- ✔ PDS LEVEL: Milestone 1
- ✔ COMPETENCY: Selling Skills
- ✔ DELIVERY METHOD: Classroom
- ✔ CORE OR ELECTIVE: Elective
- ✔ PREWORK ASSOCIATED WITH THIS COURSE: N/A
- ✔ POINT DESIGNER(s)/Trainer(s): Sue Clark
- ✔ VENDOR: N/A
- ✔ PROPOSED AVAILABILITY DATE: August 2001



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- ✔ TOTAL TIME AND NUMBER OF LEARNING OBJECTS: 3.5 hours, 8 Objectives
- ✔ TRAINER QUALIFICATIONS DESIRED/REQUIRED (Background, experience, knowledge, skills, etc.):
- ✔ LEARNING LINKS: No Pre-requisites
- ✔ COURSE RATING: 2

**MATERIALS/ EQUIPMENT**

- Overheads
  - Please refer to Appendix
- Overhead Projector
- Video Cameras (4-6)
- Videotapes (1/participant)
- TV/VCR's (4-6)
- Masking Tape
- Blank Flipcharts (3-4)
- Prepared Flip Charts
  - Please refer to Appendix
- Markers
- Index Cards
- People Magazine (1 each partic.)
- BEST Styles Poster
- NBS Poster
- Body Position Posters with Answer Key
- Participant Guides
- Handouts (in Appendix)
  - Sales Discussion Checklist
  - Tone of Voice Script
- Play Microphone

**ROOM SET-UP REQUIRMENTS (IF APPLICABLE):**

**Facilitator Tip:** Be sure all cameras, tripods, TV's and VCR's are set up in advance and are fully function. Prepare all fill-in flipcharts in advance.



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## PROGRAM OUTLINE

| Segment Name /Timing | Point/Rationale | Summary | Materials/Resources |
|---|---|---|---|
| **Introduction and Videotaping (30 minutes)** | Introduces the concept of captivating the customer through a study on communication. Give participants an opportunity to videotape themselves presenting a sales discussion to use as a baseline to assess their own ability to engage a customer. | ▪ Icebreaker: Charismatic People<br>▪ Agenda<br>▪ Psych study on communication<br>▪ Pair videotaping of sales discussion<br>▪ Activity: Sales Discussion in Trios: Rep, Physician, Observer | Overheads<br>Video cameras (4)<br>Blank tapes (1 for each participant)<br>Participant Workbook<br>Sales Discussion Checklist |
| **Engaging Attributes (15 minutes)** | Introduces the concept of captivating a customer through the participants' own experiences with customer service. Examines "charisma" and allows participants to start evaluating their own engaging attributes. | ▪ Flips Positive and Negative Experiences<br>▪ WB: My Engaging Attributes<br>▪ Definition of Charisma<br>▪ Value/Comfort Index and Activity | Prepared Flips:<br>▪ Negative Experiences<br>▪ Positive Experiences<br>Participant Workbook<br>Overheads |
| **V1: Verbal Qualities (30 minutes)** | Identify and use impact words known as Driving Discussion words, recognize and delete verbal Weakeners through discussion and practice activities. | ▪ Discussion: Three Components (or 3V's) of Communication: Verbal, Vocal, Visual<br>▪ Driving Discussion Words<br>▪ Verbal Weakeners<br>▪ Activity: Fixing "Broken" Statements to make captivating<br>▪ WB: Sample Engaging Openings<br>▪ WB Activity: Develop Engaging Openings | Overheads<br>Participant Workbook<br>Prepared Flips:<br>▪ "Broken" Statements |
| **V2: Vocal Qualities (30 minutes)** | Through discussion and activities, participants will identify and use their vocal tone, pitch, and inflection that impacts engaging a customer. | ▪ 3V's<br>▪ FC: Voice Qualities<br>▪ Activity: 4 Scenarios using Vocal Qualities<br>▪ Activity: Deliver Engaging Openings | Overheads<br>Participant Workbook<br>Prepared Flips:<br>▪ Voice Qualities<br>▪ Scenario Debrief<br>Handout: Tone of Voice Script |



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## CAPTIVATING THE CUSTOMER

| Segment Name /Timing | Point/Rationale | Summary | Materials/Resources |
|---|---|---|---|
| **V3: Visual Qualities (30 minutes)** | Participants will identify and discuss common body language signals that impact communication with their customer. | ▪ Non-verbal Techniques<br>▪ Body Positions<br>▪ Activity: Mirroring | Overheads<br>Participant Workbook<br>5 Body Position Posters |
| **Flexing to the Customer: BEST Styles Alignment (60 minutes)** | After a brief review of the BEST Styles, participants will discuss and use activities to build skills allowing them to pick up on cues from their customers that indicate the customer's BEST style. This allows the representative to adjust accordingly, therefore becoming more engaging to their customer. | ▪ Three Steps to Flexing<br>▪ BEST Styles Review<br>▪ Physician BEST Styles<br>▪ Engaging Our Physicians<br>▪ Activity: Needs Based Selling Discussion Guide<br>▪ Debrief Styles and Approach | Overheads<br>Participant Workbook<br>BEST Styles Poster<br>Prepared Flips:<br>▪ 4 Styles |
| **Videotape Review and Wrap-up (75 minutes)** | Review videotaped sales discussion from beginning of workshop; strategize how to captivate the customer based on what they learned today. Wrap up with debrief of top takeaways. Participants complete the Learning Check. | ▪ Review video tapes in small groups<br>▪ Debrief review of videotapes<br>▪ Develop personal strategy for becoming Captivating<br>▪ Debrief Top Takeaways<br>▪ Collect and destroy videotapes | TV/VCR's<br>Videotapes<br>Overheads<br>Participant Workbooks<br>Prepared Flips:<br>▪ Top Takeaways |
| **TOTAL TIME** | **4.5 hours** | | |



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## Introduction and Videotaping

### Learning Objective:

*Identify, build skills, and self-assess via a videotaped and observed sales discussion role-play the three components of communication which keep physicians engaged: verbal, vocal and visual skills*

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| **OH #1 – Captivating the Customer**<br><br>**People Magazine** | **Icebreaker/Opening Activity**<br>■ Handout People Magazines as participants enter the room<br>■ **Refer to WB Page: Icebreaker Activity and Say:** Look through the magazine and find individuals you think are charismatic people. Use this page in your workbook to jot any notes down about what makes that person charismatic. Be specific. Are there any particular traits or qualities that add or detract from that person's charisma?<br>**Note to Facilitator:** Browse through the People Magazine you've purchased for the workshop. Choose 6-10 individuals and write their names and charismatic characteristics in advance of the workshop.<br>■ Allow 5-10 minutes.<br>■ Spend 5 minutes debriefing the qualities, traits and characteristics of each individuals the participants found in the magazine. |
| FC | ■ Write common characteristics, qualities and traits for each individual on one FC: Common Characteristics of Charismatic Individuals<br>Note to Facilitator: Hang the flipchart on the wall. |
| | ■ **Say:** Welcome to Captivating the Customer! Today we're going to discuss the key communication skills that are integral to successful sales discussions. Charisma is just one part of what makes a person engaging or captivating. We've just looked at well-known individuals and identified what makes them charismatic. We'll identify tools and techniques in this workshop that will allow us to develop our charisma: the ability to engage and captivate our customers. |
| **FC** | ■ **Say:** Let's review the Agenda for today's workshop.<br>■ Introductory and Videotape/Role-play Activities |



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- Icebreaker/Opening Activity and Discussion
  - Charismatic People Mixer
  - Study on Communications
- Videotaping Activity
  - Groups of 2-3
  - Each practice a sales discussion
  - Peers evaluate
- Engaging Attributes
  - Examine own customer service experiences
  - Link to the NBS method
  - Examine concept of charisma
  - Your engaging attributes
  - Value/Comfort Index Tool
- The 3V's
  - V1: Verbals – the words we use, driving discussion words
  - V2: Vocals – the tone, pitch and pace of our voices
  - V3: Visuals – our body language and that of our customer's
- Flexing to the Customer
  - Putting it all together; the 3V's, our BEST Style, our customer's BEST Style to be as engaging as possible with our customers
- **Say:** Throughout each of these segments we will be doing a variety of activities connected to your experiences and best practices.

**OH # 2 – Impact of Communication**

**Say:** Albert Mehrabian, an expert in the communication field, researched an often-quoted statistic. He found when communications are received, the following weights are applied to the mediums (fill in percentages as you discuss each)



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**Refer to OH: Impact of Communications**

- Communications: 7% to the words;
- 38% to the tone of voice;
- 55% to the body language

Note to Facilitator: Cover the percentages with an index card. Uncover as you talk through the slide.**[Source: "Communication Without Words" in *Psychology Today* in 1968.]**

**Note to Facilitator: If you'd like more information on Albert** Mehrabian **and the studies he's conducted around communications, the following website contains a full bibliography of his work: http://www.kaaj.com/psych/home.html.**

**In addition, Albert Mehrabian wrote a book on the impact of communications titled ""Silent Messages" -- A Primer of Nonverbal Communication (Body Language) for the General Audience".**

- **Say:** Your physicians are getting only 7% from your words; 38% your tone of voice and 55% of the message when you're expressing yourself as you lead a sales discussion. In today's session we're going to focus on all 3 components that make up the skill of being engaging: the actual words you're utilizing during discussions, how you're expressing them in your tone of voice and how you appear visually as you converse with the physician. **Ask:** "What does it mean to engage or captivate?"
- ***Possible Responses:*** *Catch a person's attention, charm someone, develop a rapport or conversation with a person*
- **Ask:** By a show of hands, how many of you "use it", meaning know what strengths/attributes you



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have and leverage them, put them out there?

- **Say**: To engage or captivate is classified as an Influence Skill.
- **Ask**: "Why do you think it's termed as an "Influence" Skill?"
- ***Possible Responses:*** *You influence the customer through your attributes, and they pay more attention to you*
- Engaging is a key "Influence" skill to use with customers, as are being assertive, persuasive, effective with questioning, and good listening.
  - **Ask**: What is the difference between being assertive vs. being aggressive?

    **Possible response**: Aggressive is construed as a negative behavior while assertiveness is boldly going after something in a constructive manner.
  - **Ask**: What does being assertive mean? Why is this skill valuable to you as a representative?

    **Possible response**: Asserting is being confidently aggressive; knowing your products and aggressively selling them to your physicians.
  - **Ask**: What does being persuasive mean and what is its value?

    **Possible Responses**: Persuading is the ability to influence someone's decision by presenting sufficient knowledge and evidence to change behavior.
  - **Ask**: What are the characteristics of asking good questions? What is the value of good questioning skills?

    **Possible Responses**: Good questioning is the ability to ask well thought out, open-ended, goal-oriented questions.
  - **Ask**: What are the characteristics of active listening? What is the value of the active listening skill?

    **Possible Responses**: Active listening is the ability to become completely other-person centered in a discussion and demonstrating verbally and non-verbally your total involvement and understanding in what they're saying.
- **Say**: Without truly understanding a physician's concerns, how can you proactively adjust your approach to sell them your product? It is extremely important for access and success with customers to be sensitive to their needs and in tune to their styles of conversing and working.
- **Explain** the skill of engaging involves using your energy and unique attributes such as your verbal



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| | and non-verbal skills to inspire, interest and motivate your customers so to build and sustain some long-term and highly valued relationships.<br>■ **Instruct** participants to get into groups of three. Each person should bring a sales aid to his or her group.<br>■ **Say**: We'll start today's workshop by getting into groups of three to practice and videotape each of you doing a sales discussion and practicing the skill of engaging your customer. |
| Video cameras (4) | ■ **Give** each trio 3 blank videotapes and instruct them to write their names on the outside cover of the video. Video cameras should be set-up ahead of time on tripods in either corners of the large training room or (ideally) in breakout rooms.<br>■ **Explain** how to use the video camera, i.e., eject and play buttons. |
| **FC** | ■ **Refer to FC: Videotaping Instructions and review.**<br>■ Five minutes to prepare a sales discussion<br>■ Use the sales aid you brought with you<br>■ Three minutes to present it and be videotaped<br>■ Observer starts and stops recording AND completes Checklist<br>■ Remaining participant plays the part of the physician |
| • **Sales Aid**<br>• **Sales Discussion Checklist** | ■ **Tell** the participants they will each have an opportunity to act as a sales rep, a physician and an observer. Each should take five minutes to prepare a 3-minute sales discussion based on the sales aid they wish to use. Then each will take turns leading a sales discussion using their sales aid while the others in their group will act as a physician and an observer. The observer will have a checklist and will start and stop the recording. Each observer should give the checklist to the sales rep they observed when completed. |



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- Handout the Checklists
- Review the Checklist with the participants.
- Instruct them that when they are the observer they should check off items the sales rep does during the sales discussion then give it to the person they observed.
- Ask: What questions do you have about the checklist or the videotaping activity?
- 
- **Instruct** participants to take five minutes to prepare their sales discussion.
- **Call** time after five minutes
- **Instruct** participants to videotape the first sales discussion.
- 
- **Allow** each participant to rotate roles so each has an opportunity to be videotaped. Allow ten minutes for each.
- **Instruct** participants to hold onto the checklist for reference later in the workshop.
- **Say:** Later in today's workshop, you will have the opportunity to review your videotape and your checklist filled out by the observer in your group. Right now, let's debrief your sales discussions for a few minutes.

FC

- **Refer to FC**: Ranking
- **Ask**: From a customer's perspective, on a scale of one to ten, how interesting do you think you were to listen to?
- **Plot** each participants' rankings on a the FC: Ranking
- **Ask**: How effectively did you use your verbals, such as power or driving discussion words?
- **Ask**: What weakeners did you use/hear?
- **Ask**: What about your non-verbals? Was your body language, hand gestures, facial expression engaging?

  **Say**: As you're aware, the need to be compelling and captivating to your customer is key to keeping him/her involved and interested. We can all be captivating in many different ways. Some by appearances, some by non-verbals, some by verbals. You may or may not think that you were engaging during your role-playing. The art or skill of being engaging comes naturally for some and takes some concentrated effort for others.



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**Transition:** Throughout this workshop, we're going to be looking at various tools and techniques to help us become more engaging. Let's look at some characteristics of being engaging in the next section; Engaging Attributes.



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## Engaging Attributes

***Learning Objective:***

- ***Recognize individual engaging attributes that enhance the ability to gain access and improve overall customer communications to cultivate long-term, value-driven relationships***

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| | ■ **Say**: Sometimes it's helpful to observe others' skills in captivating customers to improve our own. Let's examine how others have engaged us. |
| Participant Workbook | ■ Refer to **Workbook page: Positive/Negative Experiences** |
| | ■ **Ask**: Think back to a time when you were the customer. Think of a positive customer service experience you've had (in a store, restaurant, hotel, etc.) and the person responsible for this positive experience; what attributes do they possess that engage their buyers? **Say**: Write the attributes in your workbook. We'll share them in a few minutes. |
| | ■ **Allow** 1-2 minutes. |
| | ■ **Call** time after 1-2 minutes. |
| FC: Negative Experiences | ■ **Say:** Now think about a negative customer experience you've had. Write down the attributes the individual had that disengaged you. We will share them in a few minutes. |
| FC: Positive Experiences | ■ **Allow** 1-2 minutes. |
| | ■ **Call time** after 1-2 minutes. |
| | ■ **Ask** participants to share their negative customer service experience first and list on FC: Negative Experiences |
| | ■ **Ask:** Looking over the list, what other items might we need to add? |
| | ■ **Ask** participants to share their positive experiences and the engaging attributes of the salesperson and list on FC: Positive Experiences. |
| | ■ **Ask:** Looking over the list, what other items might we need to add? |
| Participant Workbook | ■ **Referring to Workbook page: My Engaging Attributes, ask: If** your physicians and office staff were polled and asked to compile a list of your engaging attributes, what would you think would be |



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on the list? Have participants jot down their list.

- **Ask** participants to share their lists with a partner.
- **Ask** volunteers to share their attributes aloud from **Workbook page: My Engaging Attributes and record on FC**

**NBS Model Poster**

- **Referring** to steps of the NBS process on the **NBS Model Poster;**
- **Say**: Engaging occurs throughout the selling process. It's required for you to gain access and get in the door! Engaging involves knowing what attributes you possess and how to ratchet them up or down based on your customers. You need to be sensitive to, and recognize both verbal and non-verbal customer cues.
- **Ask:** What does "charisma" mean?

  *Possible responses: Charm, magnetism, personality, appeal, allure*

**OH #3 - Def. of charisma**

- **Refer to OH: Definition of Charisma:** "An "exceptional" ability to secure other people's devotion or loyalty."
- **Say**: Possessing engaging attributes are similar to having *Charisma.*
- **Ask:** When you think of someone who has charisma or is charismatic, who comes to mind?

  *Possible Responses: Martin Luther King, Jr., John F. Kennedy, Bill Clinton*
- **Ask:** What attributes do they possess that make them charismatic?

  *Possible Responses: magnetism, charm, personality, appear larger than life*
- **Ask:** Do you see any similarities between our positive list on the flipchart and the attributes that make a person charismatic? What are the similarities?

  *Possible Responses: Yes (If not, relate to meaning of charisma)*

**OH #4 : Value/Comfort Index**

- **Refer to OH: Value/Comfort Index**
- **Say**: How attentively your physician listens to you depends on two important factors: the *value* s/he perceives you bring to the interaction - what you're saying and the *comfort* felt in the situation with you, the speaker. Most likely the value is much more important- we could stretch the comfort element to mean the situation at hand for the physician- time he can offer, issues in the office all can affect the comfort he has to sit and listen to a representative.



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- In situations of High Value and High Comfort, he'll find it easy to listen attentively.
- In situations of High Value and Low Comfort, the picture changes. He's still motivated to listen but has to expend more energy in order to do so.
- In situations of Low Value and High Comfort, his listening behavior is bound to drop off because his full attention is not fully on you.
- In situations of Low Value and Low Comfort, he's inclined not to listen at all.

- Think about your physicians and the value and comfort levels you place on them. Those with whom you have strong rapport, smooth and comfortable conversations, as well informative, information exchanging discussion are probably falling within the High Comfort and High Value block. It's fair to say that any of your selling situations that are not High in Comfort and Value are at risk! Might your competitors be enjoying a high comfort and high value relationship with your customers?
- **Instruct** participants to think about a recent sales discussion they had with a physician. Using the Value/Comfort Index, ask them to summarize the discussion and then rank it on the Index.
- **Time** for 3-5 minutes.
- **Call** time.
- **Ask** participants to briefly share the summary of their discussion and how they ranked it on the Value/Comfort Index. Ask the participants why they ranked the discussion the way they did.

**Transition**: Today we're going to be focusing on learning to engage our physicians so we captivate their interest and listen to our messages during sales discussions. We will be talking about the three components of being engaging; verbal, vocal and visual qualities



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## First V: Verbal Qualities

***Learning Objectives:***

- Recognize and apply impactful Verbal skills, i.e., clearly stated targeted messages tied to specific needs; crisp, concise vocabulary; Driving Discussion words, etc.
- Recognize and delete verbal Weakeners from Verbal communications

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| FC | ■ **Referring to FC: 3V's, explain:** The three components to effective communication can be categorized as the 3Vs. Each plays an integral role in how your communication and how your sales discussion is received by the physician. Each also, when utilized skillfully, engages your physician. |
| Participant Workbook | ■ **Referring to Workbook page: The 3 V's, review the Verbal, Vocal and Visual components of good communication:** Verbal- the words we utter; Vocal- how we utter the words; and Visual- what we look like when we're expressing ourselves. |
| | ■ **Explain: The first V: Verbal:** These are the words and phrases you use when you communicate- the core messages for the product, compelling language, good vocabulary and grammar, clinical study information, competitive information, etc. |
| | ■ **Ask:** How does our effective use of verbal skills positively impact our relationships? |
| OH #5-6 : Driving Discussion Words | ■ **Referring to Overhead and Workbook pages: Driving Discussion (DD) Words and Weakeners**, Lets' review some words that enhance our verbal messages |
| | ■ **Read** aloud more Driving Discussion words and phrases |
| | ■ **Ask:** What words or phrases would you add to this list? Write participant responses on a flipchart. |
| | ■ **Say**: Discussion Driving Words add a lot of interest to your compelling message. They add the zest and punch to hook your physician and maintain his/her interest during the sales discussion. They also are effective throughout the discussion, especially the opening. |
| | ■ **Say:** Of course, there are also words that detract from our Verbals that we call Weakeners, such as ums, uhs, and's, like, and repetitive fillers. |
| | ■ **Say**: Are you aware of how you use Driving Discussion words and Weakeners? Are you heavy on one side vs. the other? Let's do a quick test. Instruct participants to pair up and get back to back. |



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Direct them to take turns providing 1 minute compelling message to their partner. Instruct partners to keep count on the number of driving Discussion words they hear as well as Weakeners, tell their partners, then switch.

- **Allow 3 minutes.**
- **Ask class** by show of hands: How many had 5 or more Driving Discussion words? 7? 10? 12? Etc.
- **Ask**: How many had 10 or more Weakeners? 7? 5? 3? 2tc.
- **Say:** Awareness is the first step! Think about your Driving Discussion words and avoidance of weakeners prior to every call. Pick up the habit of starting off on the right foot with every call!
- **Ask:** How effective are our openings and compelling messages? Do they have "drive" and add some real "punch"? Or are they weak and flat?
- **Ask:** Why are Verbals so important as well as challenging for representatives?
- ***Possible Responses***: *Difficulty in knowing what might interest/hook a physician, intimidation, uncertainty if physician will listen to you, weak starts, hard to know how to connect to physician, etc.*
- **Explain:** One of your main goals on a call is to hook the physician right off the bat. With the great number of reps calling on doctors today, there is a real need for a rep to stand out from the pack. This is accomplished with a stimulating, compelling opening!
- **Ask**: How do you stand out with an opening?
- ***Possible Responses: Preparation and practice! Using openings containing Driving Discussion words, being well prepared, and appearing confident and professional.***
- **Say:** Let's do a quick activity that you can use in the field when you prepare your compelling openings.
- **Instruct** participants to take out the sales aids they've been using during the workshop.
- **Explain** they will have 1-2 minutes to look through the sales aid and count the number of power or driving discussion words in the sales aid. Ask them to write the words down.
- **Allow 2 minutes.**
- **Call time.**
- **Ask class:** In the sales aid you chose, what power or driving discussion words did you find?
- **Allow** participants to share the words they found in the sales aids.



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|---|---|
| | ■ **Write** words on flipchart.<br>■ **Say:** You can use your sales aids to help you develop your sales discussion. You can also use the list of driving discussion words in your workbook. |
| FC: "Broken" Statements | ■ **Say:** Let's do one more activity. Now that you are aware of power words and weakeners, let's practice fixing "broken" opening statements. I will show a "broken" opening statement on the flipchart. Your task is to "fix" the statement and make it more compelling or captivating by using power words and getting rid of the weakeners.<br>**Note to Facilitator: "Broken" statements are contained in the Appendix.** |
| Participant Workbook | ■ **Divide** the class into groups of 2-3 each.<br>■ **Refer** participant to **WB page: Fixing Broken Statements**<br>■ **Explain** that when the "broken" statement is shown, they may work in their teams to "fix" the statement by rewriting it using driving discussion words. They will have 1 minute, then the next statement will be shown.<br>■ **Review** the example "broken" statement and the "fixed" statement on the flipchart.<br>■ **Ask:** What questions do you have on the activity?<br>■ **Show** Flipchart pages one at a time until you've gone through all of them.<br>■ **Say:** Let's share some of our "fixed" statements. I'd like the presenter of the statement to read the "broken" statement and then read the fixed statement in a tone of voice appropriate to that message. We'll be talking about the importance of tone of voice in the next section.<br>■ **Allow** the groups to share some of their "fixed" statements and briefly debrief. |
| Participant Workbook | ■ **Refer** participants to **Workbook page: Sample Engaging Openings** and review<br>■ Ask for volunteers to read the sample statements aloud so they can hear the impact or DD words. ) |
| Participant Workbook | ■ **Refer** participants to **Workbook page: Developing Engaging Openings** and direct them to brainstorm as a group five engaging statements utilizing Driving Discussion words- their own and/or those in their Workbooks<br>■ **Say:** You may choose to use your sales aid for this activity. |



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- **Ask** volunteer quads to share their openings.

**Transition:** Just as important as verbal qualities, vocal tone and pitch have just as much impact on how engaging we are to our customer. What we sound like can dissuade or persuade our customer to prescribe Merck products.



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## Second V: Vocal Qualities

***Learning Objective:***

**Recognize and cultivate expert vocal skills: voice tone, pitch, inflection, volume, clarity and tempo**

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| FC: 3 V's | ■ **Referring to FC: 3 V's, ask:** So you have the words down, but how are you *expressing* them? Did you ever hear yourself on tape and think you don't sound like yourself. This is because we have preconceived assumptions that may be way off. What do you sound like when you're talking? Professional? Enthusiastic? Interested? Confident? Are you presenting yourself *engagingly?*<br>■ **Ask:** Think about people you know and interact with regularly that have engaging or captivating voices. What is their secret? Why are their voices so effective?<br>■ **Share a personal example:** |
| Participant Workbook<br>FC: Vocal Qualities | ■ **Referring to Workbook page and FC: Vocal Qualities, Say:** The voice qualities for you to work on enhancing to engage your physicians are:<br>⇒ Volume: Are you so quiet and soft that people can't always hear you or so loud you're annoying?<br>⇒ Pitch: Do you speak high and squeaky or low and gruff-sounding?<br>⇒ Tone: Do you have a cold, flat or pleasant, warm tone of voice?<br>⇒ Inflection: Are you punching the right words for emphasis to keep the listener with you?<br>⇒ Clarity: Do you slur or mutter or enunciate your words and articulate?<br>⇒ Tempo: Do you talk nervously fast or boringly slow?<br>■ Say: Let's try an activity that will demonstrate these qualities.<br>■ Select two volunteers from the class, preferably one male and one female. The male will play Part A and the female will play Part B.<br>■ Instruct the participants to practice getting into character for each scenario listed on the script for a few minutes out in the hall. They should really play it up and get into using their voices to convey the scenario so the rest of the class can guess what is happening. |



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| | |
|---|---|
| FC: | Note to Facilitator: The script is located in the Appendix of this Leader's Guide.<br>■ While volunteers are in the hall preparing:<br>  ■ Explain to the participants that they are going to hear the same dialogue in 4 different scenarios to illustrate the power of vocal tone.<br>■ Say: As the scenarios are being presented, watch carefully and try to figure out what is going on in the scenario by the tone of what is being said.<br>■ Call volunteers back into the room.<br>■ Volunteers should present the first scenario<br>■ Refer to FC: Scenario Debrief and debrief the scenario with the following questions:<br>  ■ What is going on in this scenario?<br>  ■ How can you tell?<br>  ■ What is it about their vocal tones that give you the clues you need?<br>■ Allow participants to share out any other observations they made about the scenario presented.<br>■ Allow volunteers to present second scenario and then debrief.<br>■ Repeat until all scenarios have been presented. |
| Participant Workbook | ■ Say: The tone and inflection of our voices can be very powerful tools to engage and captivate our customers. In the same way that we listened to tone of voice to deduce the details of the situation presented to us, we can use tone to capture someone's attention. We can also listen to our customer's tone of voice to gain clues about their interest or disinterest in what we are saying to them during sales discussions.<br>■ **Refer to Workbook page: Developing Engaging Openings-** Have participants pair up and practice delivering the statements they developed during the Developing Engaging Openings activity in the previous section to each other applying strong voice quality.<br>■ Refer to FC: Vocal Qualities<br>■ **Say:** Pay attention to your voice qualities as you practice delivering your engaging openings to your partner. |



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- Allow 5-7 minutes.
- Call time after 5-7 minutes.
- **Pass:** Microphone around and ask for volunteers to share some examples with the whole class.
- Debrief each opening that participants share with the following questions:
  - What was effective about the vocal tone?
  - How did the Vocal Qualities list and the Tone of Voice activity help you to become more attuned to how you use your tone of voice?

Say: We can all continue to improve how we use our vocal skills during sales discussions.

**Transition**: Now let's move on to the last "V " – visual - which covers what our customers "see" in us, that creates their perception of us, remembering that perception is reality.



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## Third V: Visual Qualities

***Learning Objective:***

***Recognize and develop expert non-verbal techniques: use of body language, specifically posture, eyes, hands, and arm movements***

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| | ■ **Say:** Visual and accounts for the largest percentage- 55%- of what people pay attention to when listening. This is listening with your eyes; here non-verbals are key! |
| | ■ **Ask** participants: "Why do you think people put so much emphasis on body language or things other than the actual words spoken?" |
| | ***Possible Responses:*** *We're visual people and become distracted by appearances and the style people have in communicating, You don't have as conscious control over your non-verbals as verbals- especially if you're expressive. These are therefore usually truer indicators of how you feel.* |
| | ■ **Ask:** How does our effective use of Visual skills positively impact our relationships? |
| | ■ **Explain:** If there is a discrepancy between what we hear verbally and what we see in the body language, we have learned that the body tends to tell more of the truth. Remember the saying, "actions speak louder than words"! |
| **OH #8 – Non-Verbal Techniques**<br>Participant Workbook | ■ **Say:** The most common body language cues are divided into parts of the body: Refer participants to **Overhead and Workbook pages: V3-Visual Qualities - Non-Verbal Techniques** and review some common cues and what they signal to the speaker.<br>⇒ Eyes - listen with your eyes<br>⇒ Head - listen by nodding<br>⇒ Fingers/hands/arms- What are you doing with your fingers/hands/arms?<br>⇒ Legs – crossed, moving back and forth<br>⇒ Overall posture – slouching, sitting tall and straight, sitting back |
| **WB: Body Positions** | ■ **Refer to Workbook page: Body Positions** and explain that you're going to describe some body positions a physician may take and ask participants to interpret their meaning. |



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- **Show Posters for each position: Ask participants** to interpret each body position's meaning.
  **Note:** Answer is on the back of each poster.
- **Ask:** For each of the positions, what strategies can we use to respond appropriately while maintaining engagement with the physician?
- **Instruct** participants to fill in strategies in **Workbook.** As they're discussed, ensure the following are covered:

**Graphic: Open Position**

⇒ *Open Position*: The physician is in a *receptive* mood. You should continue to deliver a compelling message and gain agreement

**Graphic: Evaluator Position**

⇒ *Evaluator Position*: The physician is weighing your discussion. If he begins to move backward away from his desk, it may be a negative sign. If he leans forward and asks questions, it may be a positive sign. You should adjust the course of your discussion to keep his interest or answer any objections.

**Graphic: Defensive Position**

⇒ *Defensive Position*: The physician is withdrawing from discussion and may be bored or threatened. A change in strategy is needed.

**Graphic: Point-To-Be-Made Position**

⇒ *Point-To-Be-Made Position*: The physician wants to raise a point or ask a question. Allow him free expression and probe for better understanding.

**Graphic: Closed Position**

⇒ *Closed Position*: The physician may have already reached a decision and is probably not listening to you anymore. Find out what the decision is and attempt to overcome any objections. Disengage appropriately.

- **Ask**: How do you remedy a situation where a physician exhibits several closed positions?
  *Possible Responses: vary tone, ask an open-ended question, use humor*
- **Ask:** Are there any other positions you've observed during a sales discussion?
- Ask volunteers to "act out" the additional positions they've observed and instruct class to guess:
  1. The position
  2. The message of the position
  3. How they would best respond
- **Ask:** What best practices do you use to remedy these situations when you are in sales discussions with your customers?



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- **Allow** participants to share their experiences and resolutions for a few minutes.

OH #8

- **Referring to OH: Non-verbal Techniques , say**: Another effective non-verbal technique to align with your physicians and increase your chances of good rapport is to use mirroring.
- **Ask**: " Just from the sound of it, what would you think mirroring involves?"
- **Explain:** Mirroring is the matching of patterns; verbal and non-verbal, with the intention of helping you enter the customer's world. It's positioning yourself like to match the person talking. It subconsciously raises his/her level of trust by building a bridge of similarity. Sometimes we mirror without being aware we're doing it- especially when we have a close relationship with someone. Have you ever observed two close friends talking and looking like they're matching body language?
- **Say**: Basically there are three components of mirroring:
  - ⇒ Static body movements, sitting or standing
  - ⇒ Dynamic body movements such as head bobs, eye movements, shoulder movements
  - ⇒ Key gestures, especially when used for emphasizing important points
- **Demonstrate** mirroring with a participant.
- **Instruct** participants to pair up and have a two-minute conversation about anything and mirror each other as they do so.
- **Debrief** the activity:
  - How did it feel to mirror somebody?
  - How did it feel when you were being mirrored?
- **Sum up explaining** that no body movement or position has a precise, universal social meaning that is the same in every situation for every individual. It is extremely important to consider the specific context and personalities involved in a situation when you attempt to interpret body language. The key is to be observant and use the cues presented.

**Transition:** In addition to the 3 V's: Verbal, Vocal and Visual, we can also use the knowledge we have about a customer's BEST style and our own BEST Style to help us engage that customer.



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## Flexing to the Customer: BEST Styles Alignment

***Recognize verbal and non-verbal cues identifying physician's communication styles***

***Time: 30 minutes***

| At A Glance - Material/Media | Instruction |
|---|---|
| OH #9 : | ■ **Referring** to **Workbook page and Overhead: Three Steps to Flexing, review** the three-step technique to improve your ability to engage others in conversation:<br>1. Determine customer's BEST style picking up Cues and Clues<br>2. Align yourself with the customer's BEST style through Verbal and Vocal skills<br>3. Align yourself with the customer's BEST style through Visual and Non-Verbal Skills. |
| BEST Styles Poster | ■ **Review** BEST Styles briefly.<br>■ **Refer to Workbook pages: Physician BEST Styles and Pushing Their Buttons.** For each style review the following factors after each for additional ideas from class based on their personal experiences:<br>■ Qualities<br>■ Appreciations<br>■ Pet Peeves<br>■ How to Connect |
| | ■ **Refer to Workbook Pages: Engaging our Physicians and ask** participants to think about two physicians they call on that are difficult and jot down their names on **Workbook page: Engaging Our Physicians.** Instruct them to write down what the physician does verbally, vocally and visually and what strategies they can use to reach that physician and what the physician's BEST Style is. Refer back to BEST pages in their workbooks when developing their strategy.<br>■ **Allow 5 minutes** for completion.<br>■ **Ask:** What are some of the strategies you came up with to reach your difficult physician?<br>■ **Allow** participants to share their strategies with the class. Encourage participants to take notes to gain ideas for the future. |



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| At A Glance - Material/Media | Instruction |
|---|---|
| | ■ **Ask:** What are some of the best practices you heard when we shared our strategies? |
| **Participant Workbook** | ■ **Refer to Workbook page: Needs Based Selling Discussion Guide** and instruct participants to individually create a sales discussion for their difficult doctor. |
| | ■ **Allow 5-7 Minutes** |
| | ■ **Instruct** participants to pair up to practice their new sales discussion. |
| | ■ **Instruct pairs to take turns leading short (2-3 minute)** discussions. Partners will take turns playing physician and rep. If they are the physician they should role-play according to the characteristics of their partner's difficult doctor. If they are the rep, they should practice their sales discussion based on the strategy they developed earlier in the workshop. |
| Participant Workbook | ■ **Instruct** pairs to provide feedback to each other following the exercise using the **Workbook Page: Skill Practice Checklist.** |
| | ■ **Remind participants that** they should provide feedback on their partner's ability to connect with styles, as well as application of all V's: Verbal, Vocal and Visual. |
| | ■ Following the Skills Practice, **Ask Participants**: |
| | - What was effective? |
| | - What was Ineffective? |
| | - What would you do differently next time with this physician type? |
| | - How will you use the 3V's when you see this physician back on territory? |
| FC | ■ **As class is sharing outcomes,** collect best strategies for each BEST style using four flipcharts positioned in each corner of the room marked for each style, as well as best practices on the three V's captured on one flipchart marked Best V's. |

**Transition**: We've talked about a lot of different ways communication is impacted: by our verbals, vocals and visual. Also, we related all of those things to how we can best flex to our customer to be engaging for them.



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## Videotape Review and Wrap-up

Identify, build skills and self-assess via videotaping and role-plays the three components of communication that keep physicians engaged: verbal, vocal and visual skills

Time: 45 minutes

| At A Glance - Material/Media | Instruction |
|---|---|
| **TV/VCR's**<br><br>Participant Videotapes | ■ Instruct participants to get back into their original groups from the videotaping activity at the beginning of the workshop.<br>■ Tell the participants they will have 15 minutes to view their videotaped sales discussions.<br>■ Refer Participants to WB Page: Sales Discussion Checklist.<br>■ Say: While you are viewing your videotaped sales discussion, assess yourself using the checklist. After you have watched your tape, allow your peers in your group to give you any additional feedback, then move on to the next videotape.<br>■ Allow 15 minutes.<br>■ Monitor participants and address any issues or questions.<br>■ Call time.<br>■ Spend about 5-10 minutes debriefing the self-assessment using the following questions:<br>  ■ What types of things did you notice about your sales discussion now that you didn't before?<br>  ■ In terms of Verbals?<br>  ■ In terms of Vocals?<br>  ■ In terms of Visuals?<br>  ■ In terms of your BEST Style?<br>  ■ In terms of the BEST Style of the physician and how they were reacting/responding to you?<br>■ **Refer participants to WB Page: Strategies for Becoming Captivating** and say: Spend the next 5 minutes reviewing your checklist and come up with a strategy to improve how captivating you are to your customer. Write your plan in your workbook.<br>■ Allow five minutes.<br>■ Call time.<br>■ Say: Share your strategy with a partner for the next 2 minutes. |



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| | |
|---|---|
| FC | ■ Allow two minutes.<br>■ Call time.<br>■ Debrief the Top Takeaways with the following questions:<br>  ■ What will you take with you today to apply tomorrow as a result of what was just shared?<br>  ■ Will your strategies help you to apply these new skills?<br>■ Continue asking for participants to share their Takeaways.<br>■ **Write** the top takeaways on FC: Top Takeaways.<br>■ **Thank class** for their hard work and great participation.<br>■ **Handout** Level 1 Evaluations.<br>■ **Say:** Please complete the Evaluations and leave with me.<br>■ **Collect** and destroy videotapes per Legal requirement. |



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# APPENDIX

**QUALITY CHECKS:**

*THE APPENDIX SHOULD INCLUDE:*

FLIPCHART GUIDE

- POSTER IMAGES
  - NBS Poster
  - BEST Styles Poster
  - Body Position Posters
- SLIDE/POWERPOINT IMAGES (LARGE ENOUGH TO READ PRINT)
- ANSWER KEYS TO EXERCISES
  - Body Position Poster Answers



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The following pages contain a listing of flipcharts that will be utilized during this workshop.

Flipcharts marked ***"Printed"*** will be provided to you with the workshop materials.

Flipcharts marked ***"Fill-in"*** will have to be prepared by your prior to or during the workshop.



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**Fill-in**

**Agenda**

- Introductory and Videotape/Role-play Activities
- Engaging Attributes
  - The 3V's: Verbals, Vocals, and Visual
- Flexing to the Customer
- Videotape Review and Wrap-up

**Fill-in**

**Videotaping Instructions**

- Five minutes to prepare a sales discussion
  - Use the sales aid you brought with you
- Three minutes to present it and be videotaped
- Observer starts and stops recording AND completes Checklist
- Remaining participant plays the part of the physician

**Fill-in**

**Positive Experiences**



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**Negative Experiences**

**The 3 V's**

**"Broken" Statements**

- Dr., I just wanted to share some information with you about Osteoarthritis.
- Dr. Asthma is a killer that affects thousands of people.
- Osteoporosis is a preventable disease.
- Heart disease affects the lives of individuals and families alike.
- Hypertension is a major problem in the U.S.
- 75% of women aged 60-70 have evidence of OA of the hand, it is the most common form of arthritis.
- How is Vioxx going?

**Vocal Qualities**

Volume
Pitch:
Tone
Inflection
Clarity
Tempo

**Scenario Debrief**

#1 #2

#3 #4

**4 Styles - Bold**



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| 4 Styles – Expressive | 4 Styles - Supportive | 4 Styles - Technical |
| --- | --- | --- |
| | | |



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| Best V's | Top Takeaways |
| --- | --- |
| | |



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**Tone of Voice Activity Script**

Use the dialogue below for each of the following scenarios:
Scenario 1: Two people who are angry at each other.
Scenario 2: Two people who are good friends, but B is sad about something.
Scenario 3: Two people who know each other, but B does not recognize A.
Scenario 4: Man attempting to ask a woman out on a date.

Dialogue:

A. Hi.
B. Hello

A. So, how are things going?
B. About the same.

A. I didn't expect to see you here.
B. I could say the same of you.

A. Are you busy?
B. No, not really.

A. Would you like to talk?
B. I could...for a little while.

A. All right.
B. Fine.



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# Sales Discussion Checklist

## Verbals

1. Does the representative use Driving Discussion words? Write them down.

2. Did the representative use any Weakeners? (i.e. uh, um, really, like)

3. Was their discussion concise yet impactful?

## Vocals

Rate the following voice qualities on a scale of 1-5, 5 being the best.

1. Volume: Are they so quiet and soft that people can't always hear them or so loud they're annoying?

2. Pitch: Do they speak high and squeaky or low and gruff-sounding?

3. Tone: Do they have a cold, flat or pleasant, warm tone of voice?

4. Inflection: Are they punching the right words for emphasis to keep the listener with them?

5. Clarity: Do they slur or mutter OR enunciate their words and articulate?

6. Tempo: Is their pace appropriate for the situation?

## Visuals

1. Did the representative maintain an open and friendly position during the discussion?

2. Did the representative use body language to help their message or hurt it?



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