



TOP PRACTICES FRONTLINE PHONE COACHING COURSE

“Improve the first point of contact connection,
increase your bottom line”

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How Does Your Practice Sound?

Many patients develop their impression of your practice from their telephone contacts with you.

If you have not evaluated the phone service that you give your patients it may be time that you did.

Patients tend to judge the efficiency of the practice by how well its phones are managed and how the staff that answers them treats them.

To many patients, how your practice manages its telephone call is an indicator of how well the practice will manage their care.

A good way to assess your practice's phone skills is to put yourself in your patient's shoes and call your practice.

The following are questions that your office needs to answer honestly to get a full evaluation of how you are currently doing and areas that can be improved on how you serve your patients over the phone

1. Can a patient schedule an appointment easily, how many questions do they have to answer?

2. Are calls triaged properly?

3. Are calls and messages returned in a timely fashion, what does that mean for your office?

4. How many calls does your office receive each day and what types of calls?

5. What are the peak hours for incoming calls?

6. Are you losing calls because patients cannot get through to a live person?

7. Is the staff overwhelmed by the amount of calls that come in each day?

8. Is staff stressed because they cannot answer the caller's requests due to lack of training?

9. Is staff trained to handle calls in a professional manner?

10. Do you feel that patients get a good impression when they call the office?

11. Is staff trained to handle the “upset patient” What is the protocol?”

12. Is the phone answered by the 2nd ring, if not why not?

13. Are patients put on hold for longer than 30 seconds, if so why?

14. Are patients greeted with a happy voice when they call the office?

15. If you were a patient calling the practice would you have a good first impression of the practice by what you heard when the phone was answered?

16. What are things you see that could be done to improve your phone presence to your patients?



Learning what to say and not to say when answering the phone in a professional setting is very important as many times it is the patient's first contact with the physician. Making an excellent first impression is critical in establishing the patient/practice (physician) relationship.

Establishing phone protocols and using the following information can make your patients feel they have called the correct office for them.

Phone Etiquette Do's and Don'ts:

Before you answer the phone be prepared. Take a moment to redirect your thoughts so you can focus on the call.

- Answer calls promptly, by the second or third ring.
- Smile as you pick up the phone.
- Assume your "telephone" voice, controlling your volume, pace and sound.
- Project a tone that is enthusiastic, natural, attentive and respectful.
- Greet the caller and identify yourself and your office.
- Ask, "To whom am I speaking?"
- Ask, "How may I help you?"

In the course of the conversation:

- Focus your full attention on the caller and the conversation.
- Enunciate/articulate clearly. Speak distinctly.
- Use Plain English (or the language the caller speaks) and avoid unnecessary jargon and acronyms or medical terminology they would not understand.
- Use action specific words and directions once you understand why the person is calling.
- Use the caller's name during the conversation.

- Always speak calmly and choose your words naturally.
- Use all of your listening skills:
- Listen "between" the words.
- Use reflective/active listening to clarify and check for understanding.
- If there is a problem, project a tone that is concerned, empathetic, and apologetic.

Avoid These 5 Negative Phrases.

1. "I don't know"

Instead, say: "That is a good question; let me find out for you" or offer to connect the caller with someone who could provide the answer.

If a call involves some research, assure the person that you will call back by a specific time. If you do not have an answer by the deadline, call back to say, "I don't have an answer yet, but I'm still researching it." There is no excuse for not returning calls.

2. "I/we can't do that."

Instead say: "This is what I/we can do." Then tell them what can be done.

3. "You'll have to"

Instead say: "You will need to" or "I need you to" or **"Here's how we can help you." (The last is the best)**

4. "Just a second" or "I'll be right with you"

Instead: Give a more honest estimate of how long it will take you and/or let them know what you are doing.

Example: "I will need to look at your account to figure out what is owed, it will take me a few minutes can I call you back or would you prefer to hold on the line?"

Example: "I have two calls ahead of you that may take several minutes, would your prefer that I call you back when I am done?"

5. "No."

Instead: Find a way to state the situation positively.

Example: "No, your orthotics are not in yet." **(instead say)** "I do not see that your orthotics have been delivered from the lab. Let me place a call to see when they will arrive and I will call you back."

Stop the “Slang” – Do not use slang words when speaking with patients over the phone or in person. Not all people speak the same “language” and slang can be confusing or misleading but most of all it is not ***professional***.

Here are just a few “slang” words to drop from your professional vocabulary

Gotcha, no problem, for real, awesome, what’s up, for sure, that’s cool, or chill out, yep, no way, you got it, that’s sick, nope, that’s dope, later. **(I think you get the idea)**



Triage Medical Phone Calls

Non-licensed medical staff should not make any clinical judgment about patients' needs or attempt to make a diagnosis. If they are involved in preliminary triage they need to have a clear protocol with algorithms.

Staff members also need to know when to defer the call to the physician to take over and make the decision whether the patient needs to be seen right away or not.

What is the protocol in place with regards to triaging patient medical problems?

Many times, patients may feel their problem is urgent and they need to be seen right away, but the triage questions reveal that there is no medical emergency. How can the practice handle such calls?

Does the practice have a training program in place that ensures staff members practice within their limitations and competence? (Risk Management)

What are the “Red Flag” symptoms that should prompt an urgent response by medical staff that triage patient phone calls?

Sample Triage Questions:

Provoking Factors	What makes the pain worse? What makes it better?
Quality of pain	What does it feel like? Has this happened before? Symptoms of pain, sharp, achy?
Region/Radiation	Where is the pain? Is it in one spot?
Severity of Pain	Rate the pain on a scale of 1-10 Is the pain worse with movement?
Time	When did it start? How long has the pain been present? Has this ever happened before?
Treatment	What have you done for the pain? Has anything worked to relieve it? Have you sought other treatment?



Handling Difficult Patients

In a perfect world all of the patients that come to your practice would smile, be polite and would thank you for your good service. This is not always the situation. Patients can be difficult in different ways for different reasons.

Patients can be upset over their bills, or angry over not getting better as quickly as they would like. There are multiple reasons patients can be unhappy when we encounter them and most times it has nothing to do with our practice, it is either their make-up or their life situation.

Below are a few important points that each staff member needs to take into consideration and practice when encountering a difficult patient of any sort whether it be over the phone or face-to-face.

1. Realize that you cannot change them; you can only change the way you deal with them. Chances are good that this is their habitual behavior. Some people are in love with their misery, this is a sad fact but a true one.
2. Do not take it personally! Their actions are a reflection of where they are with their life. We must remember they may be sick, tired, or have issues at home they are dealing with that is affecting their behavior when we encounter them.
3. Be empathetic. It is a sad situation when a person is stuck in a state of negativity or anger. Receiving compassion from another person will sometimes ease the situation.
4. Listen to their complaint and restate what you have heard them say for accuracy. When we are upset sometimes just knowing that someone took the time to hear us out makes the situation better.
5. Acknowledge their feelings. This does not mean that you have to agree with them. You are just acknowledging how they are feeling. "I understand you are not happy that you have a large deductible."
6. Set firm boundaries in your practice to what is unacceptable behavior and stick to them. "I will not tolerate being spoken to that way. I treat you respectfully and I expect the same in return." Everyone in the practice needs to understand the boundaries and what to do if a patient crosses the line.

7. Hold your ground. If you give in once, you have opened the door for further challenges with the patient. Your office policies are worth nothing unless everyone upholds them. Difficult people love it when they can push you around to do what they want.
8. Learn to use fewer words when talking to a difficult person. Rattling on and on only makes them more irritable and most likely they are not listening to you anyway. Use short concise messages, as they are more likely to drive your point home.

It is easy to forget the steps to calm a patient when you pick up the phone and find yourself faced with an angry caller. Use the five quick tips below to print and keep by your phone so it is easy to remember how to handle people who are upset.

Five Quick Tips to remember for Handling Upset Callers:

1. **Listen**; allow the caller to vent.
2. **Empathize**; acknowledge the person's feelings
3. **Apologize** when appropriate, even if the problem is not your fault, you can say, "I am really sorry this has happened" and mean it.
4. Keep a **Positive** attitude
5. **Solve**; suggest/generate solutions that you can both agree on and/or ask what you can do to help and, if reasonable, do it. If not, find a compromise.

Talk over the topics below with your staff and come up with agreed ways that your practice wants to handle certain situations. When everyone in the practice handles issues the same patients will understand that the practice is serious about how it is run.

Why do some of your patients lose their cool:

Factors to consider when dealing with difficult patients:

How to recognize signs of anger:

What we can learn from dealing with difficult patients:

The medical office phone presence is usually the patient's first contact with the doctor. It is essential that all staff members be trained on how to answer, speak and communicate with patients when they call the office.

Continued training and review are necessary even for the seasoned employee. Having staff go through this booklet and review the videos yearly is a good practice, one that your patients will thank you for.

How Your Frontline Can Increase Your Bottom Line



The number one item on the list of marketing and making a business grow is patient service. If you have poor patient service in your practice your bottom line will definitely show it.

While it is not always easy to get the buy-in from all team members to give great customer service, it is essential, not only to the growth of the practice, but to the overall workplace environment and quality patient care.

I am sure you will agree it is a much better feeling to have made a patient happy and feel good while at your practice than to have a them leave upset or unhappy.

In your medical office choose each day, each moment how you are going to treat those who walk through your door and every employee whether they feel like it or not knows that it is up to them to make the experience exceptional for your patients.

This is a culture that you choose for your workplace that sets the tone, starting with the owner of the business. That culture has to be shown and experienced by each team member individually so that they can experience how it feels so they will be able to also choose to do it.

It is the experience of witnessing "walking the talk." As it is easy to say, you must smile and treat each patient as if they were your grandparent, but to see the physician business owner and management truly live the culture is the best training you can give to all of the employees of the business.

Training is the key to providing great patient care and service. Knowing what procedures, products and services the physicians provide is essential for every team member to know and understand so they can educate the patients the practice serves.

Having scripts on what to tell patients about services, procedures and products will ensure that staff members tell the patients exactly what the physician would want their patients to know.

Not only should all staff be trained on products and services they also need to understand the various treatment protocols and why patients need to keep their appointments in case they call to cancel.

Setting up these protocols is essential in training and keeping the patients educated to the importance of their continued treatment.

Education is the key to delivering excellent quality patient care and service. Having staff who can tell patients the right information they need to know about what services, products and procedures the physician provides will increase the probability of patients entrusting their care to your practice and ultimately increase the practice revenue.