THE TELEPHONE **DOCTOR** / PODIATRIC PRACTICE MANAGEMENT 2019



The 10 Worst **Patient Service Mistakes**

You and your staff need to avoid these practice killers.

BY NANCY FRIEDMAN

ost of us know what the best patient service feels like. And some of us know what the worst patient service mistakes are. To make it even, we've compiled the ten worst patient service mistakes. Take note and don't let these happen to you!

Not Being Friendly Enough

Without exception, not being friendly is the number one patient service mistake. Patients should be treated as welcomed guests when they call or visit your office. As we've all experienced, sometimes we're treated as an annoyance or an interruption.

Fix: A happy smile works wonders, whether you feel like it or not

2. Poor Eye Contact

Heads that twirl on a spindle when you're working with a patient is a big mistake. Keep your eyes on the patient. It's a sure sign the person you're talking with isn't holding your interest when you're glancing all around. And they'll notice it quickly. Obviously, making good eye contact on the phone is a bit difficult, albeit impossible.

Fix: When you're on the phone you need to be completely focused on the call and the patient. Don't

than establishing immediate rapport with the patient.

Fix: Drop the internal conversation as soon as you see the patient. Carrying on a conversation with someone in your office while you're talking with a patient on the phone is a real no-no!

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type, unless it pertains to the call, don't read something else, and don't do anything but listen to the caller.

5. Talking with Co-workers and Ignoring or Not Acknowledging the Patient

This mistake happens a lot. It seems as though it's more important to continue talking with a co-worker



4. Being Rude

No one thinks they're rude; certainly not on purpose. However, the patient can perceive many things you do as rude. And as they say, "Perception is reality." What's rude? Interrupting the patient, not listening to their concerns, talking on your cell phone when trying to help them, not sounding happy, chewing in the patient's face or on the phone. This is just the start!

Fix: Be sure you're not doing these "Rudes".

5. Poor Product and Services Knowledge

If you're not familiar with the products and services you offer, it's going to be very frustrating to the patient. Take the time to learn about your practice. Know what's going on. If you're temporary or are new with the practice, that shouldn't be used

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as an excuse. Patients don't care if you're new, working on a temporary assignment or if it's not your department. All they want is help and information.

Fix: Ask to be trained. Ask for more information from your practice. Telling a patient, "I'm new" or "I'm just a

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temp" only adds fuel to the fire. You can explain that you will find someone to help them as you are "not familiar" with the situation. That at least shows you're going to help them.

6. Leaving a Patient without Telling Them Where You're Going and Why

It's a very good idea to explain to your patient, in person or on the phone, what you're going to be doing for

them. It helps them a lot and gives them a lot of patience. If you need to "go to the back" to get something, it's easy to say, "Mrs. Jones, the CAM walker you're looking for is in the stock room. Let me go get it for you. I'll be a few moments." The same procedure should apply on the phone. Never tell the caller, "Hold on." Let the caller know where you are going and approximately how long you think you'll be. This will make working with the patient easier for both of you.

Fix: Good communications is critical.

7. Blaming, Accusing, and Complaining

It's not the person you blame that will look bad ... it's you. Don't blame (or knock) the practice, its policy, or any member of the staff. Patients don't want to hear about whose fault it is, they just want the situation fixed.

Fix: Take full responsibility of the situation on hand. Don't blame, accuse, or complain.

8. Not Double-Checking

When a patient wants something and it's not available, it's how you reject them that's more important than the fact that you are rejecting them. The process of double-checking should become habit forming. It should be a standard operating procedure. It feels so good when you tell someone, "The last time I checked we were out of stock but let me double-check for you to be sure." It's a big mistake to not double-check.

Fix: Be a double-checker.

9. One-Word Answers

We're taught in school that three words make a sentence. Don't answer with one word. Even yes, no, and okay are perceived as rude and uncaring.

Fix: Use complete sentences for your patient.

10. Head Shaking

When a patient asks you for something, give a verbal answer. Shaking your head up and down or back and forth is NOT an appropriate answer. They can't hear your head rattle.

Fix: If you're not able to accompany them to the x-ray room, give them clear concise directions within the office.

Fixing these patient service mistakes will enhance your ability to work better with patients. Remember, it's the subtle, little differences that make the big difference. PM



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