

TRAINING UPDATE

Lab Location:	GEC, SGMC & WAH	Date Distributed:	12/3/2015
Department:	All staff	Due Date:	1/5/2016
		Implementation:	1/6/2016

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Call Handling GEC.L03, SGAH / WAH.L04 v2
Description of change(s):
Section 1: remove call monitoring and outdated client service initiative
Section 2: change to all lab staff
Section 3: update job titles
Section 5: remove use of recorded information, replace priority value with critical value, specify read back for all results
Section 6: remove outdated documents, add policy
This revised SOP will be implemented on January 6, 2016

Document your compliance with this training update by taking the quiz in the MTS system.

Approved draft for training (version 2)

Non-Technical SOP

Title	Call Handling	
Prepared by	Leslie Barrett	Date: 11/20/2008
Owner	Lori Loffredo	Date: 11/20/2008

Laboratory Approval		
Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

Review:		
Print Name	Signature	Date

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1. PURPOSE

This procedure documents the standard steps and service guidelines for basic telephone etiquette and call related functions used within the laboratory.

2. SCOPE

This SOP applies to all laboratory staff, and all incoming and outgoing calls.

3. RESPONSIBILITY

The Field Operations Manager and Regional Lab Director are responsible for maintaining this SOP.

4. DEFINITIONS

N/A

5. PROCEDURE

5.1 Incoming Calls

5.1.1 Greet

Expectation
Smile and answer the call on the first three rings using a warm, sincere greeting by saying, "Thank you for calling the laboratory at _____, this is _____ . How may I help you?" Do not put caller on hold to finish other work.

Form revised 7/31/00

5.1.2 Anticipate and Satisfy

Expectation
Utilize all resources and be prepared to provide additional information during the call to prevent callbacks.
Release results only to authorized personnel; confirm contact information, fax number or printer number before releasing information.
Never hang up on a caller.

A. Put Patients First

Expectation
Listen carefully and respond appropriately to let the caller know you have heard them and are focusing on their issue.
Advise patients or clients what you can do for them, always demonstrating concern for the patient.
Use caller's name whenever possible.
Make the caller feel important by being proactive and anticipating unspoken needs.

B. Dedicated Professional / Privacy / Ownership

Expectation
Always use polite and professional language on the telephone and maintain control of the call.
Ask permission and wait for agreement before placing a caller on hold.
Know when to transfer a call and how to announce and effectively complete call transfers.
When dealing with an irate client, remain calm, listen attentively to the client, and then ask permission to continue.
Remember that there may be more than one correct answer and offer alternative solutions.
Take ownership of the call and be perceptive to patient and client needs but know when it is appropriate to escalate an issue.
Recognize language barriers and adjust speech accordingly. Contact registered translators if necessary.
Adhere to all compliance regulations and protect the privacy of each patient.
Set reasonable expectations for calling back patients and clients and keep commitments with regard to follow-up activities.

C. Courteous Tone

Expectation
Always smile and speak clearly using polite, courteous, and professional language, which communicates a friendly and caring desire to provide service.

Do not use slang or acronyms and avoid using words or phrases that have a negative connotation.

D. Reduce Anxiety / Testing & Services

Expectation
Be able to respond quickly and accurately to questions about tests and services.
Be aware that there are certain tests and screening procedures that cause greater anxiety for patients.
Demonstrate a sense of urgency by ensuring clients and patients are assisted as quickly as possible.
Recognize characteristics that demonstrate nervousness or anxiety in a caller and respond appropriately.
Be respectful of patient and client time. Ask permission to research issues that cannot be immediately addressed and set an agreed upon time for callback.

E. Timely, Accurate Communications

Expectation
Accurately communicate test requirements using the most current reference material and verify caller understanding.
Before ending the call, confirm the fax number when faxing results or other informational material.

F. Six Sigma Quality

Expectation
Act as advocate for patients and clients by considering patient impact when making decisions.
Listen carefully to patient and client concerns and agree to research opportunities to improve our business processes.

G. Document Interactions

Expectation
Maintain documented call notes of all client interactions according to protocol, including the name of the contact person along with any special instructions.
Document only facts and data in a clear and concise manner using approved abbreviations.
Require physician or authorized person to read back all results to ensure accuracy.

Form revised 3/31/00

5.1.3 Thank

Expectation
Sincerely thank the caller and successfully conclude the telephone conversation by confirming the caller's issues have been addressed. Remind caller of your name and inquire if there are any additional concerns before allowing the caller to hang up. "Again, my name is _____ and I want to thank you for calling. Is there anything else I can help you with today?"

5.2 Outgoing Calls

5.2.1 Greet

Expectation
Smile, place call and say, "This is (name) from the Laboratory at _____. I am calling for [state purpose]."

5.2.2 Anticipate and Satisfy

Expectation
Utilize all resources and be prepared to provide additional information during the call to prevent callbacks.
Offer to provide information about other results even if they are not Priority Critical Values .
Release results only to authorized personnel; confirm contact information, fax number or printer number before releasing information.
Never hang up on a caller.

A. Put Patients First

Expectation
Listen carefully and respond appropriately to let the client know you have heard them and are focusing on their issue.
Advise patients or clients what you can do for them, always demonstrating concern for the patient.
Use called person's name whenever possible.
Communicate Critical Value and STAT results in a timely manner.
Make the patient or client feel important by being proactive and anticipating unspoken needs.

B. Dedicated Professional / Privacy / Ownership

Expectation
Always use polite and professional language on the telephone and maintain control of the call.

Ask permission and wait for agreement before placing a caller on hold.
When dealing with an irate client, remain calm, listen attentively to the client, and then ask permission to continue.
Remember that there may be more than one correct answer and offer alternative solutions.
Take ownership of the call and be perceptive to patient and client needs but know when it is appropriate to escalate an issue.
Recognize language barriers and adjust speech accordingly. Contact registered translators if necessary.
Adhere to all compliance regulations and protect the privacy of each patient.
Set reasonable expectations for calling back patients and clients and keep commitments with regard to follow-up activities.

C. Courteous Tone

Expectation
Always smile and speak clearly using polite, courteous, and professional language, which communicates a friendly and caring desire to provide service.
Do not use slang or acronyms and avoid using words or phrases that have a negative connotation.

D. Reduce Anxiety / Testing & Services

Expectation
Be able to respond quickly and accurately to questions about tests and services.
Be respectful of patient and client time. Ask permission to research issues that cannot be immediately addressed and set an agreed upon time for callback.

E. Timely, Accurate Communications

Expectation
Follow laboratory policy for communicating Priority Critical Value and STAT patient results in a timely manner.
Before ending the call, confirm the fax number when faxing results or other informational material.

F. Six Sigma Quality

Expectation
Act as advocates for patients and clients by considering patient impact when making decisions.
Listen carefully to patient and client concerns and agree to research opportunities to improve our business processes.

FORM REVISED 03/1/00

G. Document Interactions

Expectation
Authenticate the call by documenting the full name and job title of the person receiving the results along with any special instructions according to the protocol.
Document only facts and data in a clear and concise manner using approved abbreviations.
Require physician or authorized person to read back all results to ensure accuracy.

5.2.3 Thank

Expectation
Remind the called person of your name and inquire if there are any additional concerns before allowing the caller to hang up after saying, "Again my name is _____ and I want to thank you for calling. Is there anything else I can help you with today?"

6. RELATED DOCUMENTS

Critical Values, Laboratory policy

7. REFERENCES

- Friedman, Richard H... Basic, Basic Telephone Skills; Eliminate the Five Forbidden Phrases; Curt to Courteous; How to Deal with Foreign Accents; How To Avoid Emotional Leakage; Treat Every Caller as a Welcome Guest. The Telephone Doctor® Customer Service Training, St. Louis, Missouri
- Patient Care Gold Standards Expectations and Behaviors

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
000	3/12/2010	Updated owner	L. Barrett	L. Loffredo
001	11/9/2015	Section 1: remove call monitoring and outdated client service initiative Section 2: change to all lab staff Section 3: update job titles Section 5: remove use of recorded information, replace priority value with critical value, specify read back for all results Section 6: remove outdated documents, add policy Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13	L. Barrett	L. Loffredo

9. ADDENDA AND APPENDICES

N/A