“Customer service” has traditionally been a term used in the business world, but over the past few years it has crept into the health care vocabulary. As a result, there have been numerous initiatives in health care to build customer service into the organization. Health care providers have come to realize what the business world has known for years: exceptional customer service positively differentiates one provider from another. They have found that incorporating good customer service at all levels in an organization is necessary but it is also difficult and requires a culture change. This article will focus on customer service in the clinical laboratory, defining customer service, explaining why it is important, and describing some ways to implement it.

Customer Service in Health Care

Customer service is a description of the activities associated with acting as a resource to provide information. The expectation is that the individual providing the customer service does it in a friendly and efficient manner. This is a somewhat new concept for health care at the organizational level. Traditionally, a patient would go to a health care provider because his or her health was less than perfect. The provider’s purpose was to provide health care knowing that this patient may be back and there were always other patients waiting to be treated. Providing health care alone was important; attitude while doing it was not. Now patients are more sophisticated, make choices about their health care, and look for exceptional service along with the health care. Health care providers must now “compete” for the patient. Providing exceptional customer service is often the differentiator. Wouldn’t you prefer to go to a friendly place rather than a non-friendly one, especially when you are anxious about being ill? Each of us has daily interactions that require us to obtain information that is pertinent to conducting our daily lives, such as banking, credit card disputes, grocery store checkout, billing questions, retail sales clerks, etc. Review your most recent experiences. What made them positive or negative? Most likely your answer is the individual you interacted with.

The next step is to think about health care and how you interact with patients, how this interaction affects the patient’s experience and, ultimately, their choice of health care providers. The interactions between coworkers set the tone for patient relations as well. Being considerate and respecting others is necessary all the time, whether the interactions take place between patients, clients, coworkers, friends, or acquaintances. Providing excellent customer service consists of the following components:

- Listen.
- Understand.
- Respect the need for the request.
- Respond.
- Ask if there is anything else you can do.
- Always remain friendly, courteous, and professional.

This translates into listening (not just hearing) with respect, and understanding the request so a friendly and correct response can be made. If a knowledgeable response cannot be given, let the requestor know a response will be forthcoming within a particular timeframe. Then, always get back to the requestor even if it is just to give a status report within the timeframe given. Sometimes it is appropriate to give additional information that the requestor may not have realized the need to ask for but is necessary. This is going the extra mile.

Why is customer service important in the hospital laboratory? Because laboratory professionals interact with one another and with patients, nurses, physicians, other departments, vendors, and maintenance personnel. If outreach (laboratory services provided to the non-inpatient) is associated with the laboratory, then the laboratory can be competing with commercial laboratories or other hospital outreach programs for physician and patient usage. Providing excellent customer service is important for growth in all of the above-mentioned situations. The performance of laboratory testing is similar in most laboratories due to regulations, equipment, and methodology. The piece that differentiates laboratories is the reputation built on the service provided. In many instances, the service defines the reputation. The customer service provided defines this service.

Achieving Outstanding Customer Service

Customer Service Culture

So, how do you achieve outstanding customer service in the laboratory? First of all, a customer-oriented culture is necessary. This is attained by first defining what customer-oriented means. Although customer service is an attitude that naturally promotes these actions, customer service in your
organization can be defined by listing actions to be used in particular situations in order to begin to establish the attitude. Providing customer service training programs for everyone, along with management’s commitment to promoting a customer service attitude, will go far in solidifying the customer service goals. This must be accompanied by programs that reinforce the customer service attitude, such as group discussions, outside speakers, department activities, and recognition programs for those that are customer-friendly. Obviously, not all of these activities are appropriate in all situations, but once resources have been determined and a plan implemented, the benefits will far outweigh the effort and funds initially committed. Employees will work better and more efficiently together. Patients and physicians will prefer the friendliness and efficiencies; consequently, they will choose this laboratory when in need of laboratory services.

Client Services Department

Another key aspect to customer service in the laboratory is developing a Client Services department. Client Services is the department that has “providing customer service” as its central mission. Responding to inquiries is what they do, and they do not consider answering the phone an interruption. Of course, this does not mean that no one else in the laboratory provides customer service. The Client Services department is the liaison between the physician/patient and the laboratory operations. To make sure that the Client Services representatives always provide information correctly and with a friendly attitude, tools and resources must be at their fingertips. This requires more than hiring individuals to answer calls. These 4 basic parameters should be used to form the Client Services department:

1) The Client Services department is the liaison between everyone outside the laboratory and the laboratory operations.

2) Answering questions and resolving issues is considered the purpose of Client Services, not an interruption.

3) Tools must be developed and information made readily accessible to Client Services representatives.

4) All measurable activities must be monitored for effectiveness and improvement opportunities.

Let’s look at how each of these parameters will shape your department. Client Services as the liaison means that the department must be easily accessible and anyone needing to access the department should know how to access it. A direct line without a phone tree for both “inside” and “outside” customers is the most efficient way. Accomplishing this with different phone systems may vary, but it is important in implementing the process to persuade callers to call the liaison and not the testing sections.

Since the purpose of Client Services is to resolve issues, the representatives will be awaiting calls ready to resolve issues, not wishing that there are no calls and treating the callers as if they are interrupting something more important. This is an important factor in promoting a customer service attitude. Another key factor is that the representatives answering the phone only focus on Client Services duties, not specimen processing, or phlebotomy, or whatever else may be related.

Being able to resolve issues efficiently and correctly requires that information be readily accessible and at the representatives’ fingertips. This is probably the most difficult to attain because it requires the efforts of the Information Technology department and the testing sections, but once the information is in place it can be updated and it contributes tremendously to the overall efficiency of the services provided by the laboratory.

Finally, but not any less important, is monitoring measurable activities. Improvement cannot occur without knowing current levels of activities. The term “benchmarking” is used frequently in health care and is used when information is needed to compare the outcomes of different organizations performing similar activities. This is frequently an “apples to oranges” comparison, so the benchmarking information may not be worthwhile. The best way to monitor processes and obtain benchmarking statistics is to set parameters based on current measures and set goals that are attainable by your organization. Even though there are similarities between organizations, such as size and patient mix, there are usually other factors that greatly influence how processes are designed and implemented, such as computer systems, organizational goals, laboratory equipment, etc. Benchmarking yourself takes all of these factors into consideration. Your own benchmarks will show when and how new improvement processes are to be implemented. This way benchmarking is used as a meaningful tool, not as just a number to reach.

The Process

Now that we have the general overview of what should be attained, let’s look at more of the details. Keep in mind that the development of a Client Services department occurs in phases over a period of time (usually years), but creating a blueprint is absolutely necessary. Once the purpose and the basics are determined, the implementation plan must be made and put into place. If calls are currently being received from “outside” the hospital, how many do you receive? When do the calls come in? Who currently receives them? Can the issues be categorized? Who answers the question or resolves the issue? How quickly? Review the same for calls originating “inside” from the nursing staff. Are the issues similar for the inside and outside calls? Can all the issues be resolved efficiently by the same individuals? How are outgoing and incoming calls coordinated? (It is less efficient and often frustrating for the same individuals to make outgoing calls along with responding to incoming calls.) Would it be best to at least eventually separate the resolution of inside and outside calls to specific individuals? All of this information may be difficult to capture unless there is a logging system in place. A temporary (manual) one can be implemented for 1 to 2 months, with the purpose of gathering information for the development of a Client Services department.

The above information will help in determining how many and what type of individuals are needed, at what time of day to receive the calls, the type of information requested, and the level of training that is required to resolve issues. This lays out the initial parameters that need to be in place. Monitoring their effectiveness is necessary by developing measures for each parameter and reviewing them frequently. Experience shows that if adequate training and tools are in place, the necessity of having medical technologists answering the phone is low. In the beginning, when training and tools are not in place, having a customer-friendly medical technologist answer the phone may be an interim solution. At any rate, at least having a medical technologist readily accessible to answer questions may be necessary.
Equipment

The most basic tool needed is a telephone. It should be equipped with caller identification, and have more than 1 line, headset capabilities, and the abilities to hold, transfer, and conference. Along with the telephone should be software that counts calls, monitors hold times, monitors lengths of calls, and monitors abandoned calls. Reports should be produced by the software for each parameter and phone extension daily. A personal computer (PC) with access to laboratory information system (LIS) information is also required for looking up results and their status. Call logging is indispensable. An electronic system is ideal, but manual call logging is a good interim solution. This log should include the name of the caller, client name or location, date, time, requested information, and resolution. Much of this can be in a check-off format with the use of agreed-upon abbreviations as well.

The next most important tool is a directory of tests listing synonym test name, test code, methodology, reference ranges, run schedule, phlebotomy instructions, transport instructions, exceptions, notes, where the test is run, section supervisor, and any other pertinent information. As everyone becomes more aware of the Client Services department being the center for information, the information needed to answer questions will become more apparent. Anything that can be listed or put in a spreadsheet or in a searchable database for easy access electronically is a necessity, but must be kept updated.

Policies, Procedures, and Structure

The development of policies and procedures specific to the department, in coordination with other laboratory policies and procedures, is necessary. HIPAA regulations must be incorporated into all policies and procedures. These policies and procedures will direct the department activities and will become necessary training tools as well as the basis for resolving quality issues. As the department becomes established and grows, a defined training program is necessary. The training should include customer service parameters, phone etiquette, organization structure, and the use of tools, as well as all policies and procedures.

In the beginning, the department structure is less defined, but as the department grows, structure becomes very important. The central mission will always be answering the phone and acting as the liaison for laboratory operations, so there must always be core positions that only perform this role. Additional positions will supplement the core activities, such as management, administration, and training and quality monitoring roles.

No matter how large or small the laboratory organization is, providing excellent customer service is essential to the viability of the laboratory. Going one step further and having a defined Client Services department that provides excellent customer service is essential in providing excellent health care for the ultimate benefit of the patient.

Customer Service at ARUP

The evolution of Associated Regional and University Pathologists’ (ARUP) Client Services department is a good illustration of the development of a viable Client Services. ARUP is a national reference laboratory that also houses on-site laboratories at the University of Utah Hospital and Huntsman Cancer Hospital. ARUP began as an outreach laboratory for the university in 1984 and is located 1 mile from the university in its Research Park. The Client Services (CS) department began with 3 employees and was located within the central ARUP facility servicing reference clients. There were 2 employees at the University Hospital servicing the inpatient and outpatient needs. These departments performed client services, exception handling, and referral testing duties. Today, CS has over 70 employees, services national reference clients, and works closely with the university clinical laboratory’s CS department. Exception handling, referral testing, and specimen processing are all separate departments. Everything was performed manually in the beginning, although LIS terminals were used to look up results and minimal client information. All faxing, copying, and “runs” to the technical sections were performed by those answering the phone. So, the CS representatives were answering the phone, making all outbound calls, faxing, copying, and visiting the technical sections when necessary. Call logging was also performed manually. There were few knowledge tools to facilitate quick responses. As a consequence, there were many calls transferred and put on hold. As testing volumes increased and electronic solutions entered the scene, service evolved to better meet the demands of clients and, ultimately, the patient. ARUP’s goal has been and still remains: Client Services is the liaison between the client (patient) and ARUP Laboratories.

The evolution of services has depended on measuring everything to be improved and planning for the resources to accomplish these improvements. Written procedures incorporating HIPAA and corporate policies and procedures have become essential. In the beginning, training was very informal. Once a formal training program was implemented, the advantages were tremendous. Overall service improved, there were fewer mistakes, the CS representatives had more confidence from the beginning, and the learning curve was less steep. Performance on quality measures also improved. The training program is 10 to 12 weeks long and the advantage is better, more consistent service to clients. Once the new-employee training is completed, competency tests must be passed. Ongoing training consists of monthly procedure reviews for designated procedures, in-services by various technical and nontechnical departments, corporate continuing education, annual competency tests, annual customer service training, retraining when necessary, and new procedure training.

Structure has evolved to accommodate the need to answer calls effectively in a timely manner. The phone system puts all calls into a queue for answering by the next available representative and monitors:

- number of calls;
- answer speed (hold time);
- abandoned calls and the hold time before the call was abandoned;
- the availability of each CS representative;
- the length of each call;
- the number of calls for each CS representative; and
- the number of calls in the queue and how long each call has been waiting.

Reports of these parameters are produced daily and monthly. As a result, service is monitored each day. This facilitates the ability to make quick corrections when necessary.

Answer speed is a critical measure. It is the result of the calls answered in a given timeframe by a specific number of individuals. This is a critical measure because it defines the number of individuals answering the phone and is a measure of overall performance of customer service. The number of individuals is the only parameter in this mix that is controllable.
Answer speed can be monitored hourly. This helps define shifts and is essential in planning hiring patterns. While the phone system monitors the result of structure and training, the structure is always defined by the goal to respond. There is a core of 40-plus employees who are first-line responders to calls 24/7; the balance of the employees are available to support the core team. CS Representative I and CS Representative II positions form the core. The Problem Resolution Specialists (PRSs) are hired from the CS Representative II pool and serve as team leaders and mentors and resolve complex issues. Coverage can be completed by varying types of shifts—8-hour Monday through Friday, 10-hour 4 days per week, or 7 on/7 off for weekend and holiday coverage. There are 8 teams of CS Representative I and II members, each led by a PRS. One of these teams performs all requests for additional testing on specimens already in-house. There are 2 Client Service Assistants who perform duties, such as faxing, that would ordinarily take the CS representative off the queue. When this position was first implemented, the answer speed initially dropped an average of 17 seconds. The management and administrative positions are: group manager for Client Services, exception handling and referral testing, CS supervisor, 3 leads, teaching specialist, 3 trainers, a QA specialist, 3 receptionist/operators, and a secretary. Technical issues are referred to a technical services team composed of medical technologists. This team resolves technical issues and monitors trends that may affect several technical sections.

Customer Service representatives are initially hired for their customer service experience. With an extensive training program and the use of many desktop tools, it is not necessary to hire for technical experience as this is part of the training program. Our experience has been that a good customer service attitude is essential and should already be part of an individual’s values as this is more difficult to train.

The desktop tools help the CS representative be efficient and effective. Each CS representative has a PC and a telephone (as described earlier) with a headset. Most of the information needed to respond to clients can be accessed through the PC. This information includes:
- test results;
- client information;
- call logging for entering each call and being able to refer to historical call data;
- the Test Directory, which includes reference ranges, methodology, specimen collection and transportation information, testing schedule, synonyms, technical area performing test, and responsible supervisor;
- specimen tracking information, which includes courier information, flight information, and status of specimens in-house;
- access to all scanned information arriving with the specimen;
- client supply ordering system;
- referral testing database of referred tests; and
- department policies and procedures.

Call recording (software that records all calls, allows listening to calls when necessary, and stores the recorded calls for 90 days) was implemented in spring 2007. In conjunction with call logging, these are powerful tools for training and for issue resolution. As a result of these and other tools, Client Services is able to resolve 93% of the requests they receive. The goal is to provide Client Services with as many tools electronically as possible so it can truly be an effective liaison for the client and resolve even more of the requests made.

Conclusion

The customer service that ARUP provides has evolved from a hopeful definition into a sophisticated attitude and culture. It has taken no small amount of planning, measuring, trial and error, and implementation. But, as a result, everyday activities run much smoother and, subsequently, the patient is provided with better health care. In summary, following are some key points to remember when developing a client services department:

- Define the goals for the department, focusing efforts to attain these goals.
- Set thresholds and measure the parameters needing improvement—when each threshold is attained, raise the bar. (ARUP’s original answer speed threshold was 2 minutes and is now 25 seconds.)
- Implement a training program with quality measures.
- Provide tools that promote effectiveness and efficiency.
- Promote a customer service culture always.