

# Central Scheduling

## Lessons Learned Series

### *Marketing Centralized Scheduling?*

#### **Who speaks with more of your customers every day than the schedulers themselves?**

You have asked your customers (patients, physician office staff, and physicians) to call one part of your organization to gain access to your services. Centralized Scheduling in essence functions as a sales group. To ensure you are capturing as much of the market as possible, leverage the innate marketing opportunities Centralized Scheduling provides. The following basic sales functions should be actively managed:

#### **1) Each call is a sale**

The terminology employed by a scheduler is critical to capturing all the business available. Opening the conversation with something like - What would you like to schedule today? - may be losing you a sale. It may sound customer service-oriented but the patient may have other services they may need to call elsewhere to schedule. An opening question such as – What did the doctor order to be done? – may lead to hearing about all orders. The scheduler can then arrange a convenient schedule to complete all orders for the patient in one trip. An acute care facility has a competitive advantage to free-standing facilities--the ability to provide a full range of services in one trip for the patient. Educate the scheduler to compete for the business by understanding the patient's needs and providing excellent service to accommodate those needs.

#### **2) Offer follow-up service**

Closing the conversation is as important as opening it. Many patients may require a service subsequent to the current one being scheduled. In today's market, where insurance companies have influenced control over initial access to the more expensive diagnostic services by requiring less expensive initial testing, some patients may be finding that they need to make several trips to complete a diagnostic work-up. Wrap up the scheduling conversation by offering to help the patient with any future needs, educate them on the best time to call to avoid hold time and help them use any alternative access services you may have.

#### **3) Develop a relationship with referral sources**

The Centralized Scheduling department manager or designee can work with physician offices to ensure they:

- Know the operating hours, especially for frequently-used services.
- Can gain access to scheduling via faxing or special phone lines.
- Relate any service problems that staff or patients encounter to the office staff.

#### **4) Integrate Centralized Scheduling in any marketing device**

The Centralized Scheduling contact information should be prominently and consistently displayed in marketing materials, events and the web site (first page accessible).

## **5) Ensure Centralized Scheduling is informed of any coming Marketing Efforts**

Being prepared to answer an increased amount of phone calls due to a newspaper ad is important for the success of the marketing effort. If you are included in the “loop” by Marketing, your organization suffers.

In order for Centralized Scheduling to be an attractive offering to the marketplace, it truly needs to be comprehensive enough to completely service most callers. In other words, callers generally should not have to call both Centralized Scheduling and other departments for similar services. Build Centralized Scheduling to include all related types of services (e.g. all outpatient diagnostics or initial appointments for all outpatient services, like diagnostic and therapeutic).