



The Customer Journey

Touchpoint **three**: Getting there, first impressions and welcome



Touchpoint **three**: Getting there, first impressions and welcome

One of the aims of your practice should be to exceed every patient's expectations with the quality of care, service and products that you provide. However, before this can be done you will need to understand the needs and expectations of each patient, as an individual. Initially, the Optical Assistant or Receptionist should be responsible for gathering information and an understanding of the patient's needs. The good practice team will take responsibility for the care of patients from the minute they arrive at the practice, until they leave. Of course, the Optical Assistant will have little influence over patients during their time with the Optometrist or Dispenser. However, at all other times the Optical Assistant should feel that they are responsible for the patient. Often practices, confident that they are providing the best in clinical and technical expertise, forget that a more demanding public is seeking more than just good products and clinical care; they expect good customer service, as well.

The complete customer journey through the practice will involve contact with almost every member of the practice staff team. For all practice staff to work together efficiently, as a team, it is essential that good communication skills are utilised. Effective communication is important, not just when handling patients, but just as importantly within the practice team. To enhance a patient's perception of practice efficiency, all members of the team must ensure that relevant information is passed, with the patient, from one member of the team to the next. This will reduce the need for patients to answer the same questions more than once and increase their confidence in the service and care delivered by the practice.

Before a potential new patient can receive the best service and care, they must be attracted to the practice in some way. The external appearance of your practice will cause passers-by to make a judgement, rightly or wrongly, about the quality of both the care and products available. Likewise the way frames and advertising materials are displayed, or merchandised inside the practice, will influence whether someone will buy something or not. So, before considering the best ways to communicate face-to-face consider the best ways to merchandise your practice.

Touchpoint three

Merchandising

Of course, a complete re-fit is not necessary to improve the message that the practice communicates. Often all that is required is a 'spring clean' with attention being given to the window display, reception area, point of sale materials and the frame displays.

To ensure the practice looks the best it can:

- (a) Consider it through your patients' eyes and remember what it looked like the last time it was refurbished or decorated. Ask yourself and your staff the areas that could be improved upon.
- (b) Ask for the opinions of others, e.g. friends and patients
- (c) Have a daily practice 'audit' to ensure the practice appearance meets the standards agreed.

Effective displays

In today's sophisticated retail environments, merchandising and display are considered as much a science, as an art. It is fair to say that poor quality product displays and promotional materials are usually representative of lower quality retail establishments, in the minds of the public.

The main objectives of good merchandising and display are to:

1. Make customers aware of the products and promotions available
2. Inform customers where products and promotions are (sign posts)

Merchandising begins with the window display. This is the first opportunity to attract potential customers into the practice, as well as reassuring existing patients that they made the correct choice.

Few people have the creative skills and flair required for window dressing. If a member of staff does not possess these skills, it is worth employing a professional. However, do ensure that the message or theme being conveyed is appropriate. Many practices have seasonal themes such as rabbits and daffodils in the spring and fallen leaves in autumn. Whilst these may be aesthetically pleasing to passers by, they are not always an

effective means of projecting the practice's primary business messages. However, a 'linked' theme such as winter sports, with sunglasses or Wimbledon etc. is usually more successful and effective.

Many manufacturers and some of the optical marketing groups provide good quality displays that project this optical message. Optical products due to their small size can often be difficult to display in the window, but simple, clear window displays can be created with the use of image boards and other promotional point-of-sale materials.

All merchandising and display should be intended to encourage people to:

- (a) Visit the practice
- (b) Consider the best options

Always use the A.I.D.A. model when creating new displays. Ask yourself, 'Will this display have this effect on those who see it?'

- Attention – stop and look
- Interest – attract and think
- Desire – consider and want
- Action – need and buy

The practice environment

Compelling fact

We decide within six seconds whether we are going to make a purchase from a particular outlet.

It is well accepted that the public dislike confusion and clutter. This is probably because it gives an impression of inefficiency. None of us are likely to enter a dark and gloomy environment willingly. Do look at your practice from the outside and ask yourself, 'Does the practice look bright and welcoming?'. A well-illuminated window display will make a great

difference to the numbers of people it attracts. Do keep the window display simple. Try not to display more than two or three messages at a time. It is more effective to change the display more frequently, than to present many messages at once.

Frame displays

Consider the frames stocked and displayed in relation to the profile of existing and potential new patients. For example:

- (a) **Signpost brands** The well-known designer brand names, to attract brand aware 'younger' customers.
- (b) **Ophthalmic brands** Quality, 'classic' brands for 'loyal' customers who are less interested in designer names.
- (c) **Own brands** Good quality, value for money.
- (d) **Non branded** 'Bread and butter', often basic options.

Stocking a wide range of frames should mean there is something to attract a wide cross section of people, regardless of budget and taste.

To achieve the most impact and encourage the choice of better quality frames it is advisable to 'theme' displays by presenting major, well-known brands or collections together.

When displaying frames generally, keep ladies, gents, children's and unisex frames separate and make sure that each section is labelled clearly. It may be worth considering separate displays for rimless or titanium frames, for example. This will draw attention to these types of frames and will be seen as a practice promotion. Place the 'best', higher priced frames at eye level and mid-priced ones at the top of displays. Position the 'good', but less expensive frames lower down. This will encourage the choice of higher value frames. It also makes it easy for dispensing staff when assisting patients.

Frame displays should never be more than five frame facings wide. This allows people to see all the frames on display. A run more than five frames wide will cause confusion. Those browsing will not be able to 'see the wood for the trees'. Consider putting a gap or break in the display every four or five frames. Always keep frame displays full. It looks good and discourages the opportunistic shoplifter.

Pricing

All frames should be clearly priced on the temple. The price should be bold and unambiguous with 'Frame only' or 'Complete with lenses' when appropriate. Printed labels look far more professional than those hand-written.

Contact lens areas and accessories

It is difficult to display contact lenses effectively, so there is a need for display cards, leaflets and perhaps price lists to be readily available. This will help generate more enquiries for contact lenses.

Often contact lens solutions and accessories are displayed at eye level, behind the reception desk. After the window display, this is the most important and effective display in the practice. Do use it wisely, by displaying show cards for premium frame, ophthalmic lens or contact lens brands. Display contact lens solutions in a cabinet to one side of reception or elsewhere in the practice and keep the displays full.

Point of sale (POS) materials

Many practices 'suffocate' their displays with too many display cards and brochures on display, at one time. Observers and visitors to the practice will suffer from information overload. Like the window display, keep show cards and other related point-of-sale materials to a minimum and use them only if linked to a display or practice promotional theme. Take care to ensure that all materials on display are up-to-date and in good condition. Faded and torn POS materials should be removed and replaced. Most suppliers' representatives will be pleased to provide new and up-to-date materials.

Summary

Remember merchandising is:

- the responsibility of the whole practice team
- continuous
- about communication
- 'free' advertising for the services and products of the practice

Also, 'good merchandising increases sales values'.

Arrival and greeting

The Receptionist, or Optical Assistant is usually the first (and often the last) person a patient, or potential new customer speaks to. Because of this, it is important that the manner, style, and methods of communication used are appropriate for the image and character of the practice. Remember, first impressions are lasting impressions. Of course it would be almost impossible for a practice owner or manager to be present for every enquiry or appointment that is made, unless they employ no one else. So, good and effective communication skills are a necessity for every member of the team. It is a good idea to aim to greet visitors to the practice as though they are welcome visitors to your home. Consider them as acquaintances or relatives that you do not know very well, although you want to create a good impression and make them feel at home.

When someone enters the practice, always stand as they approach the desk. This puts you on the same level as the patient and will help you to build a rapport with them more easily. Remember to make eye contact and smile. This should be followed with you saying *'Good morning/ afternoon! How can I help you?'* Avoid just sitting there waiting for them to speak first. They may be nervous about what will happen during the eye examination and will need to be put at ease. General conversation will help most people relax and show that you are interested in them as an individual. To ensure consistently good first impressions learn to apply the following communication skills. They are equally appropriate for Dispensers and Optometrists, as well.

Communication skills

Verbal & vocal

Compelling fact

The actual words spoken, only account for as little as 10% of the communication process, face-to-face.

Most impressions made during face-to-face communication are due to body language. This will be considered in more detail in this and other Customer Journey modules. So, whilst it is important to consider what is said, it is even more important to consider the way words are spoken and

what you, or the person speaking, are doing at the time. Some factors to bear in mind when speaking, either face-to-face, or on the telephone, include;

- Vocal **TONE** to communicate
 - interest, enthusiasm, excitement, boredom
- Vocal **SPEED** to communicate
 - nervousness, anger, excitement, urgency
- Vocal **VOLUME** to communicate
 - confidence (or lack of it), anger

How your voice is used will influence how the listener receives your message. For example, a soft, gentle tone and speed can help to relax and reassure a nervous patient. However, confidence and control will be communicated by increasing the speed, volume and tone of the delivery.

Of course, you need to be aware of how you use your voice, but it is also important to listen to how patients use their voices. They may be nervous, angry, or in a hurry. When you know this, you can react accordingly and show empathy, when appropriate. By being aware of a patient's vocal style will help you to avoid talking 'up' or 'down' to them. To build a rapport with patients it is important to communicate with them in terms they readily understand. This will help you to appear to be on the same level as them.

Once adept at communicating with people at all levels, the remainder of your responsibilities will become much easier. In addition, those visiting the practice will be more relaxed and confident. This will allow more time to build a rapport and provide you with a greater understanding of their needs. This has been shown to improve the levels of patient satisfaction. Of course, satisfied patients are more likely to return as well as recommend the practice to family, friends, and work colleagues.

So, to communicate effectively and help build a rapport...

NEVER talk **at** or **to** people...

but ALWAYS speak **WITH** people whilst still controlling the conversation.

This will help you to remember that communication is a two-way process.

Some practice staff may be uncomfortable about allowing patients to talk enough, because they feel they may lose control of the situation. However, when the correct questioning techniques are used, you will have greater control of a conversation at all times. The skilful communicator enables the patient to feel in control whilst continuing to discover their needs. When a person's needs are better understood it is easier to aim to exceed them.

Communication between people, face-to-face, is a combination of the following skills:

Listening – active and passive

Verbal – what is said and what is not said

Non-verbal – body language and mannerisms

Good communication requires good use of all three of these skill areas.

Listening Skills

Before considering verbal skills in more detail, it is important to understand that listening is a large part of successful communication. There are two types of listening; passive and active. However, for effective in-practice communication active listening should be encouraged, at all times.

Passive listening

Television and radio has had the effect of encouraging 'passive' listening habits, which can mean the listener is not listening totally, but part listening whilst thinking about or doing something else.

Many people, when listening passively, often appear to be inattentive, which can appear rude. In addition, they may miss some important information, as well.

Active listening

Active listening is more demanding, but much more rewarding, for both the listener and customers. However, it may require practise to improve your ability to listen actively.

The successful active listener makes regular eye contact with the speaker, nods agreement, asks relevant, appropriate questions and summarises what they have heard. This can be achieved only when you are really concentrating on what is being said and how it is delivered.

In customer care and sales situations, active listening shows patients that they are being paid attention to and that their needs are being understood. This makes them feel important which is one of the golden rules of good customer service and care. It will also help to avoid patients feeling that you are indifferent to their needs.



It is good to remember the adage, “We have two ears and one mouth and that should be the proportion we use them”. To listen actively, twice as much as talking will show you are a good communicator. To prove the point, remember the occasions when you have been the customer and how you felt when you thought

you were not being listened to properly. Or, consider the stereotypical salesperson, who talks so much that there is no room for anyone else in the conversation. This is not considered good communication.

The following is an exercise designed to help you consider how good you are as a listener.

Exercise

Listening skills checklist

Read each of the following statements and put either ‘T’ for true, or ‘F’ for false to indicate your personal response in each case.

1. I tend to jump into conversations sometimes interrupting others to do so.
2. Sometimes I ‘doodle’ or play with a pencil or paper clip when others are talking.
3. I often have trouble listening when there are distracting noises nearby.
4. I’ve learnt how to pretend to listen.
5. I sometimes lose the thread of the conversation and have to ‘fake it’ until I am back on track.

6. I ask questions to make sure I interpret a speaker's message clearly.
7. I'm a direct person; if someone says something I don't like, I speak out immediately.
8. I believe that people shouldn't be judged on appearances.
9. I've noticed that many people have trouble expressing themselves.
10. I frequently anticipate what a speaker will say next.

Answers

Listening Skills Checklist

- | | |
|------|-------|
| 1. F | 6. T |
| 2. F | 7. F |
| 3. F | 8. T |
| 4. F | 9. F |
| 5. F | 10. F |

If you achieved less than 10 correct answers, go back to the checklist and make a note of the incorrect statements. If you achieved 10/10 well done, if not, you will certainly benefit from working on your listening skills.

Conversation structure

Every conversation must have a structure. This structure will help you to have control of the situation as well put the patient at ease. Make sure this structure is used whenever a conversation is started with an individual for the first time. This applies, not just to reception staff greeting a patient for the first time, but to the Optometrist and Dispenser at the point of handover.

A well-structured conversation will always begin with...

General Questions

These are used to develop a rapport, especially when meeting or greeting someone. For example:

'How are you today?'

They should always be 'open' questions that cannot be answered with 'yes' or 'no'. By asking a question, you encourage the patient to feel involved and in control. If you make a statement e.g. *'It's very cold today.'* it will give the impression that you want to be in control. This is unlikely to put the patient at ease. If someone appears to be particularly nervous, ask more general questions to help them relax and gain confidence. Once a rapport has been established, general questions can be followed with...

Specific Questions

These will help you find out more information and appear genuinely interested. For example, *'How can I help you?'* Like general questions specific questions should also be 'open'. Open questions cannot be answered with a single word, such as 'yes' or 'no'. They can be used to find out more relevant information about an individual and the reason for their visit to the practice.

Open questions are very important as they encourage the patient to think about and inform you of their priorities, concerns and requirements or objectives for their visit to the practice today. When asked an open question some people take the opportunity to talk and never stop! The solution to this is to interrupt them with a closed question to bring the conversation back on track. The effective use of open questions is essential to find out relevant information about a patient at every stage of the customer journey.

Leading Questions

These are usually 'closed' questions. Closed questions can only be answered with a single word, often 'yes' or 'no'. To provide confirmation or reach a decision, closed questions are very useful, e.g., *'Do you prefer this frame?'* or *'Did you want plastic or glass lenses?'* However, if a decision cannot be made yet, you still have the opportunity to ask further specific questions to establish other needs followed by further recommendations.

It is a mistake to use a leading question too early in any conversation, e.g. 'Can I help you?' This is likely to leave the customer feeling that they will have no control over the course of the conversation. It is unsettling for the patient, who may not feel inclined to visit this particular practice again.

Understanding a patient's needs

Before you can effectively offer the best products and services to each patient as an individual, you should find out as much relevant information. Everyone is different and has individual circumstances, personalities and needs. Therefore to provide the most appropriate eyewear solutions you will need to understand these requirements.

Whilst there are definitive clinical and technical needs for each patient on his or her record card, you will need to find out additional personal and lifestyle information to ensure you can match product recommendations to the customer's individual expectations and resources.

Typically, the basic information found on a patient record card includes:

- Name, address, telephone number.
- Sex, age.
- Optical prescription.
- Medical history.

Of course, this information is vital, but to fully maximise product opportunities you will need to develop more detail so that your recommendations can be personalised.

Extra information should include:

- Hobbies/sports.
- Pastimes.
- Vocational needs.
- Budget (if appropriate).

Some of these extra questions can be asked using a 'lifestyle' questionnaire, or alternatively in conversation and noted as extra information to supplement the record card.

Spend a few moments developing some examples of questions, to help you glean this information. It is advisable to use questions that the customer can answer easily. For example, 'Do you drive?' followed by 'If yes, do you often drive at night?' This is a more subtle approach than asking 'Do you want an anti-reflection coating?' to which they will probably say 'No', because they may not understand what this will do for them.

Sample lifestyle questions:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

The following is an example of CIBA Vision's lifestyle questionnaire. Some of your questions will probably be similar. The use of this type of questionnaire will make dispensing more beneficial for the patient and the practice, as well as saving time. If your practice does not use this type of questionnaire, this could be a good time to try it.

Your examples may include variations of the following:

- 1. Why have you attended for an appointment today?**
- Routine eye examination/check up
- Want new glasses
- Want new contact lenses
- Think vision should be checked
- Other

2. If you currently wear glasses or contact lenses, do you wear them:

	Glasses	Contact lenses
All/most of the time	<input type="checkbox"/>	<input type="checkbox"/>
For reading/working	<input type="checkbox"/>	<input type="checkbox"/>
For TV/driving	<input type="checkbox"/>	<input type="checkbox"/>
For sports/leisure	<input type="checkbox"/>	<input type="checkbox"/>
Other		

3. Do you find your current glasses:

Inadequate in bright light?	<input type="checkbox"/>
Scratched?	<input type="checkbox"/>
Uncomfortable to wear?	<input type="checkbox"/>
Have annoying reflections?	<input type="checkbox"/>
Have thick lenses?	<input type="checkbox"/>
Are constantly on and off?	<input type="checkbox"/>

4. When would like to be able to see without wearing glasses?

Playing sport	<input type="checkbox"/>
In the rain	<input type="checkbox"/>
Reading a menu	<input type="checkbox"/>
When you wake up	<input type="checkbox"/>
Change your eye colour for a special occasion	<input type="checkbox"/>
Other	

5. Which of the following do you do regularly?

Driving	<input type="checkbox"/>
Closework	<input type="checkbox"/>
Work at a computer	<input type="checkbox"/>
Work under fluorescent lighting	<input type="checkbox"/>
Work outdoors	<input type="checkbox"/>
Other	

6. How do spend your leisure time?

Eating out	<input type="checkbox"/>	Clubbing/parties	<input type="checkbox"/>
Cinema	<input type="checkbox"/>	Gym/squash/tennis	<input type="checkbox"/>
Football/Rugby	<input type="checkbox"/>	Cricket/Golf	<input type="checkbox"/>
Needlework	<input type="checkbox"/>	Cooking	<input type="checkbox"/>
Computing	<input type="checkbox"/>	Reading	<input type="checkbox"/>
Gardening	<input type="checkbox"/>		

Customer Journey materials

'Lifestyle questionnaire' (ZCJQUEST1)

'Making the most of your visit' leaflet (ZJMOSTLEAF1)

Additional information gained before the examination not only provides you with a better idea of the options to recommend, it also shows you are interested in them as an individual.

It is important not to make the error of pre-judging your patients and therefore restrict the opportunities that may be open for dispensing to them the best products they can afford.

Note:

When you are with someone completing paperwork, others may enter the practice. If you are alone on the desk, do still acknowledge these people entering the practice with eye contact and a smile. Then ask them to take a seat and let them know that you will be with them shortly.

Waiting for the Optometrist

When the paperwork has been completed patients are usually requested to take a seat in the waiting area. This may not be the best use of their time. Why not encourage them to browse the frame displays. If they require new spectacles it may save them and the practice time after the eye examination. Equally if the Optometrist is running late, the wait will not seem as long. The good Optical Assistant will start by pointing out some of the newer frame styles and collections that the patient may be interested in.

Action Plan

Spend sometime as a practice team discussing how to improve the way patients are handled when they arrive for an appointment.

1.
2.
3.
4.