

# How to structure a call

Call handling guidance



# About this guide

If you are a local Healthwatch member of staff or volunteer who answers phone calls from the public, find out how to structure your conversation to best help the caller and to support your wellbeing.

#### This guide covers:

- Starting a call
- Exploring and clarifying the caller's issue
- Ending a call
- What to do after a call

## Starting a call

To help you establish an appropriate relationship with the caller, you should:

- Have an agreed time for how long a phone should ring before being answered, e.g. on the
  third ring. If the phone is answered within one ring, the caller may be caught off guard. If
  no-one is able to answer the phone make sure that the voicemail leaves clear instruction
  on what to do next e.g. leave name and number for a call back or alternative contact
  method.
- Use a standard greeting, like "Good morning / afternoon, Healthwatch X" or "Hello, Healthwatch X". This enables the caller to confirm they have called the correct organisation and welcomes the caller to the service. A welcoming tone of voice is important.
- Have an agreed policy with your local Healthwatch on whether you use your own name.
   As you are answering the phone call as part of your work and not in a personal capacity, there may be some circumstances where an alias or 'Healthwatch name' is appropriate.
- Use a standard statement to start things off, such as "shall I tell you a little bit about what we offer? (outline the service purpose) ... does that sound like that the type of support you would find helpful?" This approach is useful for callers who may find it difficult to say why they are contacting Healthwatch.

## **Exploration**

To enable the caller to communicate the nature and purpose of the call, you should:

- Focus on the information they provide, particularly the facts.
- Try not to let yourself get distracted by worrying about whether you can or can't help.
- Take notes, particularly regarding anything you think is concerning.
- If you think the person is at risk and you are concerned about them, acknowledge it.
- Use open questions, like who, where, what, why and how, to explore the issue.
- Use closed questions, with yes or no answers, to clarify your understanding.
- Respond to what people are saying rather than working from a list of questions so that the person feels listened to.



 Acknowledge how the person is feeling - use empathetic responses to help create a rapport with the caller.

## Clarification

You should check with the caller that you have understood what they've told you. To do this you should:

- Make sure that you summarise what they have told you in your own words to clarify that
  you have understood. This can help you remember their situation as the wording will be
  more meaningful to you.
- Try to distinguish between the practical needs of the caller (e.g. information about how a service works) and their emotional needs (e.g. need to talk about an experience they have had with a service).
- Explain the role of local Healthwatch and tell them how you can help.
- Refer to their caller care plan if they have called before.
- Explain the role of other services you would like to refer them to, as well as other relevant information like opening times.

# Identifying next steps

To discuss the different options available and actions for both you and the caller, you should:

- Make sure the caller has the information they need in order to contact the services that you've signposted them to for further support.
- Do not overpromise about how another service can help them. Make it known that if they need further help in getting the support they need, to get back in touch.
- Check if there is a local library or community centre that has computers for people who
  do not have direct access to one so that they can access services that are only available
  online.
- Print and post information about a service if it is only available online for those that do not have a computer or know how to use one.
- If you are making a referral, be clear about the information that you need, tell the caller what they should expect to happen next, and what to do if they don't hear back from the organisation in question.
- If you are making an enquiry on their behalf, explain what you are going to do and provide realistic timescales of when the caller can expect an update. Check with them the best times to call, and if it ok to leave a message if met with no answer.
- Provide a clear summary of the themes and issues discussed and the support given. If you
  have agreed any action, it is important to clarify expectations and time frames, e.g. how
  long a referral process will take or when the caller can expect to receive some
  information in the post.
- Ask if it is ok for you to note their feedback about a service, explaining the value of doing so and how Healthwatch uses people's experiences to help improve health and social care services for others in the future.



# **Ending the call**

To finish the call at the satisfaction of you and the caller, you should:

- Provide reassurance to the caller that you have listened to their issue/response and that they are welcome to call again if they need to.
- End the call when:
  - The conversation has come to a natural finish.
  - o You have provided help and support to the caller within the Healthwatch remit.
  - The caller's options have been addressed.
  - You find that the call is going round in circles.
  - The caller is abusive or threatening (see advice below under 'ending challenging calls').
- Make it clear to the caller in what circumstances they can contact you again and at what time. Do you need to contact them to follow up? Make sure that you find out when is best to do so, and ensure you have the right contact details for them recorded.
- Ask any routine questions e.g. Demographic information or their experience of the helpline. It's important this happens after the needs of the caller have been addressed. You should also explain why you are asking for this information.
  - You should only collect equalities and demographic data when appropriate. For example, if a caller is distressed or upset you could say something like "I know this call has been difficult for you, so if it's okay with you, I'm going to post or email you a short form, which you can send back as and when you feel able to."

#### Ending challenging calls

Bringing a call to a close can sometimes be difficult, especially if you and the caller have not been able to reach an agreement.

If you are finding it hard to end the call you should:

- Say that you are going to need to end the call, e.g. "I am going to need to end this call soon. Before I do, I would like to check we have covered everything."
- If you are not able to reach an agreement to end the call, say something like:
  - "There is nothing further we can offer you today, but please call again if you think we might be able to help in the future."
  - "We have discussed the ways we can help you, and you have told us you would not like to pursue these (e.g. make a complaint to/contact the relevant service). If you change your mind, please get in touch."
  - "I understand you are unhappy that we are not able to (e.g. carry out an inspection at your mother's nursing home tomorrow morning). As I explained (short summary of how you can help/who you can pass the information on to/action that can be taken). If you do remain concerned (details of who to contact)."
- Agree internally the number of times you will tell someone you are going to end the call before you will terminate the contact (three times is commonly used by helplines).



- Avoid passive phases that may make the caller feel you are dismissing them, like:
  - "I have to go now as there are other important calls coming through."
  - "I have to go to a meeting/my manager wants me now."

## Terminating contact with a person

There may be times when you need to completely end contact with someone. This may be due to:

- having exhausted all options and not being able to help the person any further
- you have received guidance from another organisation recommending contact needs to end with this person e.g. the police or social services
- an assessment by the caller, in discussion with line manager or colleague, that continued contact is not helping the person, or the person has become abusive in their contact.

The decision to end contact with a person needs to be a team decision, so that all staff and volunteers who answer calls understand why. A strategy for dealing with this person in the future needs to be agreed within the team, as well as who will be responsible for informing the person that contact needs to end (such as a more senior member of staff).

When you contact the person, you need to be clear about what you want to tell them, for example:

We have had a number of conversations with you about your situation. We have discussed the following options (e.g. listing organisations you have tried to direct the caller to) and any other action you have taken (e.g. we have also shared your concerns with X organisation). We have spoken several times about your situation, and on this occasion, we are not able to offer any further options than the ones discussed before (it may also be worth reminding the person of the Healthwatch remit). As we are not able to help with situation X any further, we are going to need to cease contact with you about it. We would encourage you to contact (remind them of other organisations that you have spoken about before). If in the future, you have questions about a different health or social care issue, please do get in touch."

You may want to follow up in writing.

If the person still calls, you need to keep the call to a brief reminder of the advice given previously and not get into a debate, for example, "We have explained to you previously that we are no longer able to discuss situation X with you. I am going to need to end the call now."

## What to do after the call

Looking after your own wellbeing and completing administrative tasks between calls is important. You should:

- Complete any paperwork or enter any data about the call after the conversation has ended. This can also help you process the call in your own mind.
- Make a note of the facts gathered during the call. Be aware that people can request to see information that relates to them.
- Record if a safeguarding issue has been identified and if any action has been, or needs to be, taken. Even if no action has been taken at this time, record clearly what did happen.
   For example, 'high level of risk, however due to lack of information full assessment unable to be made'.



- Be aware of how you are feeling after the call. Are you ready to move on from the call
  and onto the next? Make sure that you allow space between calls so that you are able to
  approach the next call or task with a clear mind. To help clear your mind you might was
  to make a cup of tea or go for a walk.
- If there is an opportunity to debrief with a colleague or manager, you could discuss what went well during the call or what you could have done differently.

### Taking calls at home

Calls from vulnerable people can be more difficult at home, as you are away from the support of your team in the office. Take time to think about what you need to do to look after yourself after a difficult call, or how to process information that has upset you.

#### Top tips:

- Phone a colleague,
- Go for a walk,
- Have some time away from your desk
- Ask your manager or colleague to take the calls for the rest of the day.

It's important to remember that while some calls are more difficult than other and everyone copes differently, we are all providing a valuable service.

"Many thanks. I appreciate all your help. It is such a difficult time for everyone that they shouldn't have this additional stress."

Feedback shared with a local Healthwatch after using their Information and Advice service