

Secret Shopper Checklist

1. **Scheduling call:** Call to ask to schedule for both a massage and a chiropractic visit. If asked about insurance, let the receptionist know that you don't have any and will be paying out of pocket. The goal is to let the conversation flow naturally to explore how the receptionist responds to the request and if they give you complete, accurate information.

Call Start Time:	Call End Time:	Name of receptionist:	
Clearly stated their name AND business name?			Y / N
Asked your date of birth?			Y / N
Asked if you are new to our practice?			Y / N
Asked how you heard about us?			Y / N
Asked if we will be billing insurance for you?			Y / N
Explained our "Time of Service" payment policy and what you will owe for your first visit?			Y / N
Asked if you would like to schedule at our Eagle Point or Medford clinic?			Y / N
Asked about your massage therapist and/or style preference?			Y / N
Asked if you have a chiropractor preference?			Y / N
Asked to email or mail you the paperwork ahead of time?			Y / N
Confirmed check in time (20 minutes before appointment)?			Y / N
Confirmed address and basic directions to clinic?			Y / N
Encouraged you to give us a call if you have any questions?			Y / N
Was receptionist welcoming, knowledgeable and pleasant to deal with?			Y / N
Additional comments on you experience?			

2. **Checking In:**

Receptionist Name?		
Receptionist made eye contact within seconds of arrival?		Y / N
Smiled when greeting you?		Y / N
Confirmed your name and your appointment provider?		Y / N
Welcomed you to our practice?		Y / N
Clearly Reviewed paperwork?		Y / N
Asked for picture ID?		Y / N
Collected correctly for today's visit? \$ _____		Y / N
Advised that chiropractic assistant is next step?		Y / N
Directed you where to sit?		Y / N
Told you where the bathroom is?		Y / N
Pointed out the water/tea/fruit available to you?		Y / N
Encourage you to let us know if you need anything?		Y / N
Was receptionist welcoming, knowledgeable and pleasant to deal with?		Y / N
Was the reception area clean and comfortable?		Y / N
Was the bathroom stocked and clean?		Y / N
Additional Comments:		

3. Rooming:

Chiropractic Assistant's Name?	
Assistant introduced herself?	Y / N
Confirmed/stated your name?	Y / N
Smiled when greeting?	Y / N
Assistant mentioned next steps? (Vitals and then to see provider?)	Y / N
Directed you where to sit in room?	Y / N
Instructed you what to expect next? (Dr _____ will be in shortly.)	Y / N
Encourage you to let us know if you need anything?	Y / N
Was pleasant to deal with?	Y / N
Was room clean and comfortable?	Y / N
Additional Comments?	

4. Chiropractor:

Chiropractor's Name?	
Chiropractor introduced their self?	Y / N
Confirmed/stated your name?	Y / N
Shook your hand?	Y / N
Smiled when greeting?	Y / N
Briefly mentioned next steps?	Y / N
Discussed your condition/needs in detail?	Y / N
Explained what to expect during care?	Y / N
Did they tell you when to reschedule for chiropractic and massage?	Y / N
Discussed other clinic services? (Supplements, massage, VSP, other providers, etc.)	Y / N
Directed you to check out at the front desk?	Y / N
Was welcoming, knowledgeable and pleasant to deal with?	Y / N
Did you receive a courtesy call from the CA or chiropractor later that day or the next day?	Y / N
Additional Comments?	

5. Massage:

Massage Therapist Name:	
LMT introduced their self?	Y / N
Confirmed/stated your name?	Y / N
Smiled when greeting?	Y / N
Briefly discussed your massage needs?	Y / N
Directed you where to put your clothes?	Y / N
Advised you to disrobe to your comfort level?	Y / N
Advised you to get under sheet specifically face up or face down?	Y / N
Asked if you had any questions prior to leaving room?	Y / N
Was room clean and comfortable?	Y / N
LMT put bolster under your legs?	Y / N
Checked to confirm that you are comfortable?	Y / N
Lighting was appropriate and comfortable?	Y / N
Checked level of pressure at least twice during massage?	Y / N

Discussed other clinic services? (Supplements, primary care, VSP, other providers, etc.)	Y / N
Did they suggest that you schedule another massage?	Y / N
Did they direct you to check out at reception?	Y / N
Did the LMT offer you water after you massage?	Y / N
Was welcoming, knowledgeable and pleasant to deal with?	Y / N
Additional Comments?	

6. Checkout:

Receptionist's Name?	
Asked you how you were doing?	Y / N
Smiled?	Y / N
Used your name?	Y / N
Mentioned our product of the month?	Y / N
Rescheduled you before you left?	Y / N
Additional Comments?	

7. Overall Experience:

Did you hear your name at least 10 times?	Y / N
Did you feel cared for at each step?	Y / N
Were all your concerns listened to and all your questions answered?	Y / N
Did you feel the team was genuine?	Y / N
Would you come back?	Y / N
Based on this experience, would you recommend us to a friend or family member?	Y / N
Was the parking lot free of litter?	Y / N
Did the building feel clean and comfortable?	Y / N
<p>We'd love to hear any and all additional comments you'd like to share about your experience. What were you "wowed" by? What can we do to improve? Feel free to use the back of this page if you need more room to write.</p>	