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The 2026 Clinic Call Conversion Report

What 20,909 clinic calls reveal about turning more enquiries into booked appointments.

January–June 2026

20,909 clinic calls analysed

Including detailed transcript analysis of **1,394** substantive new-patient conversations.

Your clinic may not have a lead problem.

It may have an enquiry-conversion problem.

Clinics invest heavily in Google Ads, SEO, social media and referrals to generate new patient enquiries. But attracting enquiries is only half the challenge. The return on that investment depends on what happens once a prospective patient starts a conversation with your clinic.

Every enquiry represents an opportunity to book an appointment. If conversations aren't handled consistently and confidently, potential patients may choose not to book, regardless of how they found you. Improving the quality of those conversations can increase appointment bookings and generate more revenue from the marketing you're already paying for.

Patient Journey:

Marketing → Enquiry → Conversation → Appointment → Revenue

What we analysed

20,909

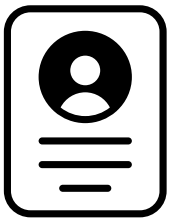
total clinic calls

11,090

calls with transcripts

1,394

substantive new-patient conversations



35

clinic profiles represented

Behavioural insights were drawn from 1,394 genuine new-patient conversations where clinic teams had the opportunity to influence appointment bookings.

Sales values are recorded differently across clinics, so results should be viewed as indicators of stronger enquiry-handling and conversion behaviour, rather than direct clinic-to-clinic comparisons.

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What successful calls did differently

Captured contact or location information	
90%	**70%**
Calls with recorded sale	Calls without recorded sale

Discussed a specific date or time	
93%	**77%**
Calls with recorded sale	Calls without recorded sale

Ended with a clear next step	
98%	**89%**
Calls with recorded sale	Calls without recorded sale

Discussed payment, deposits or payment links	
27%	**15%**
Calls with recorded sale	Calls without recorded sale

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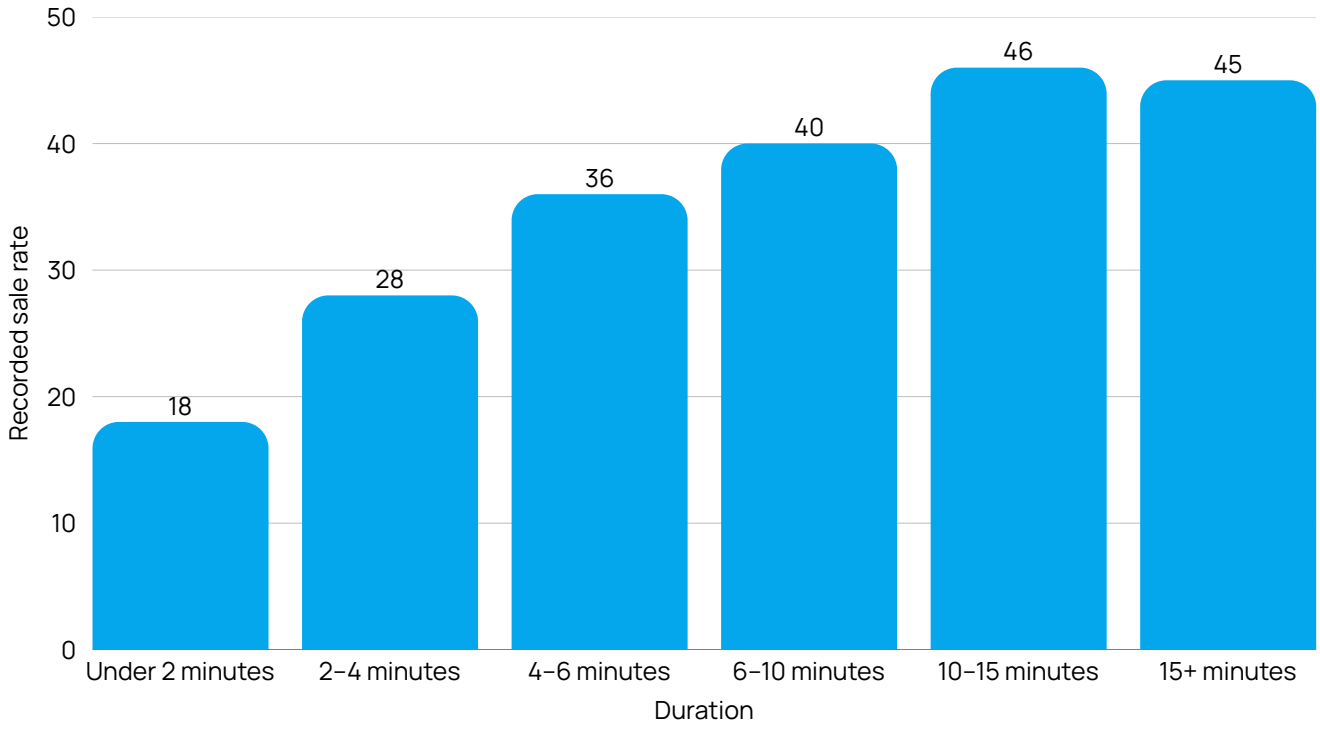
Successful calls were longer—but only to a point

4 minutes 31 seconds
median call without a recorded sale

5 minutes 41 seconds
median recorded-sale call



Longer is not automatically better. Calls lasting more than 15 minutes did not outperform calls lasting 10–15 minutes.

The aim is not to make calls longer. It is to complete the right steps.

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Six things stronger clinic calls consistently do

Step 1

Listen

Allow the caller to explain the immediate concern.

Step 2

Acknowledge

Show that the caller has been heard.

Step 3

Qualify

Ask only the questions required to identify the correct service.

Step 4

Explain

Describe the suitable first appointment and price.

Step 5

Offer

Give a specific date, time or clinical handover.

Step 6

Confirm

Make sure the caller knows exactly what happens next.

Common points of enquiry leakage

Weak	Strong
“Someone will call you back.”	“Sarah will call you today between 2pm and 3pm.”

Weak	Strong
“Have a think and let us know.”	“We have Tuesday at 10am or Thursday at 3pm. Which works better?”

Weak	Strong
“I’ll email you some information.”	“I’ll send the information now, and I’ll call you tomorrow at 11am to answer any questions.”

General email or callback deferral appeared in 22% of calls without a recorded sale, compared with 14% of calls with a recorded sale.

Avoiding price does not remove the objection

Patients often ask about price because they need enough information to decide whether to proceed.

Recommended response
"The initial assessment is £X and lasts approximately X minutes. During the appointment, the clinician will assess the problem, explain their findings and recommend the most appropriate next step."

This approach informs rather than sells. It gives patients the practical information they need without pressure.

What we found
27% of calls that resulted in a booked appointment included a discussion about **payment, deposits or payment links,** compared with **15% of calls** that did not result in a booking.

Key takeaway
Confidently explaining fees and payment details doesn't create objections. It helps remove uncertainty and makes it easier for patients to commit.

Complex enquiries need a different route—not an unclear outcome

4 minutes 48 seconds	6 minutes 53 seconds
Other clinic enquiries	**Neuro and complex enquiry median**

These calls may involve:

- Family members
- Hospital discharge
- Mobility concerns
- Home-visit coverage
- Insurance
- Clinical matching

Recommended route

Listen → Capture essential information → Confirm postcode and funding → Warm clinical transfer or fixed-time assessment

Main takeaway

Complexity should change the pathway, but it should not remove the need for a clear next step.

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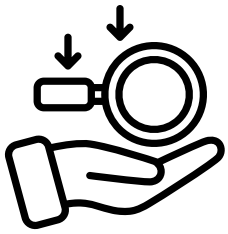
A simple framework for new-patient calls

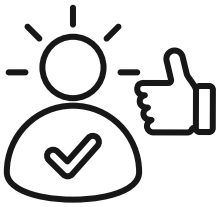
LISTEN

L 

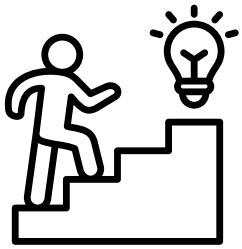
— Let the caller explain

I 

— Identify the need

S 

— Show understanding

T 

— Tailor the first step

E 

— Explain the practical details

N 

— Nail down the booking

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How consistent is your current process?

Read each statement and score how consistently it happens during your new-patient calls.

1 = rarely | 5 = consistently

STATEMENT	1	2	3	4	5
1 We answer new-patient calls promptly	○	○	○	○	○
2 We allow callers to explain their main concern	○	○	○	○	○
3 We acknowledge the caller's situation	○	○	○	○	○
4 We ask only relevant qualification questions	○	○	○	○	○
5 We explain the first appointment confidently	○	○	○	○	○
6 We explain prices clearly	○	○	○	○	○
7 We offer specific appointment options	○	○	○	○	○
8 We capture contact details before ending the call	○	○	○	○	○
9 We give a clear callback window when required	○	○	○	○	○
10 We record why an enquiry did not book	○	○	○	○	○

Your Total Score

Add up your score 10-50

_____ /50

RESULTS: WHAT YOUR SCORE MEANS

41–50
Strong process
Keep doing what works

31–40
Reasonably consistent
Focus on small improvements

21–30
Significant variation
Inconsistency is limiting results.

20 OR BELOW
Likely preventable enquiry leakage
Urgent opportunity to improve.

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Three changes your clinic can make this week

Small changes to your call process can lead to more booked appointments and stronger patient relationships.

1 Replace vague callbacks with fixed times

2 Offer two specific appointment options

3 Review five new-patient calls every week

Manager review checklist

Use this quick checklist when reviewing calls.

1	Was the caller allowed to explain?	☐
2	Was the correct need identified?	☐
3	Was the first step clearly explained?	☐
4	Was a specific appointment or handover offered?	☐
5	Did the caller know what would happen next?	☐

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Turn the findings into a repeatable front-desk process

Clinic Call Conversion Workshop

Live front-desk training for private healthcare clinics

WHAT'S INCLUDED

- 60-minute live online workshop
- Up to 10 team members
- Front-desk workbook
- New-patient call framework
- Call-handling script
- Objection-handling guidance
- MSK, neuro and home-visit scenarios
- Manager call-review scorecard
- 30-day recording access

Investment

£495

per clinic

Book your Clinic Call Conversion Workshop

Looking for recommendations based on your own calls?

Ask about the Call Conversion Audit and Bespoke Training package.

Scan to book

Open your camera and scan the QR code to book your workshop.

Or Book Online

klatch.co.uk/clinic-receptionist-call-handling-training/

Spaces are limited.
Secure your session today.