

## Simple Scripting: Worth a Million Bucks

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As I travel around the country working with chiropractic assistants, chiropractors and their teams, I see many do's and many don'ts in all of the practices I visit. One of the big "don'ts," in my opinion, involves scripting. Although many doctors train their CAs and their teams on scripting, it always baffles me when something as easy as scripting is not taught more consistently. How can doctors expect their team to remember scripting if there is frequent staff turnover, for example? You can never train enough; in fact, you should make sure your team gets training each and every week, without fail.

Doctors may not recognize that what comes out of the mouths of their team members, and how it is said, absolutely affects patient actions. These are actions that will either make or break a practice; actions that truly determine if patients keep their appointments, refer others and pay! Some CAs are never really taught proper responses to questions commonly asked by patients, and if they are taught, it is never repeated.

After critiquing hundreds of practices over the years, spending time listening and observing chiropractic assistants and their teammates both in person and on the telephones, I find it unbelievable that more time is not spent on the simplicity of simple scripting. It would be wonderful if the leader of the practice - you, the doctor - realized how much it really matters.

If you keep reading and say to yourself, I get these questions from my patients all the time, or you know that your chiropractic assistant probably does not know the right answers, then it is time to get to work. It will change your practice for the better, I promise!

### Scenario 1: A New Patient Calls to Schedule an Appointment

When a first-time patient calls to make an appointment, how should you respond? Here are the possible choices; which one(s) do you think are correct in this situation?

- "When were you last seen?"
- "In case we get disconnected, may I please have your name and phone number?"
- "When do you want to come in?"

Both the first and second responses are correct. First, it is always important to get the name and phone number of the new patient in case a disconnection really does occur. Second, if you ask the caller when they were last seen, their response will alert your staff as to whether they are a new patient, an existing patient who was last seen five months (or five years) ago, etc.

### Scenario 2: An Existing Patient Calls to Cancel

The patient has been coming in for a couple of weeks for care; they are on a treatment plan for 12 visits, three times per week, and have multiple appointments already made. They call to say that they are feeling "so much better" and wish to cancel the other two appointments for the remainder of the week. Here are the response choices:

- Can I please reschedule your appointment for you?

- It is great that you are feeling better, Dr. Blackman is such a fantastic chiropractor; often times our patients feel better before the problem is actually fixed. He has you on a specific treatment plan and would want to discuss any changes with you, so let me get him on the phone.
- I am glad that you are feeling better - it was only a couple of weeks ago that you came crawling in. I'm sure you wouldn't want to be back in that situation, so keep your appointment today and discuss it with the doctor.

If you guessed both the first and second responses, you are correct. As a former CA, it was easy for me to "toot my doctor's horn" and tell patients the DC was an excellent chiropractor, and that there were times when symptoms might be gone, but that didn't mean the problem was fixed. It seemed like common sense to let a patient know that the doctor might want to spend a little time go over the X-rays now that they were finally "feeling" better. It's what I like to call a "mini re-report of findings" that reminds the patient of what brought them in originally and what is happening during the first few weeks of care.

### Scenario 3: Patient Comes to Their Appointments Habitually Late

The patient always shows up for their appointments, but is often at least 30 minutes late. How would you suggest the situation be handled? Here are your choices:

- Nothing is mentioned to the patient and they are sent to a treatment room or table.
- The patient is gently reprimanded; they are told that they are late and that this is not appropriate.
- The patient is asked if this is the best time for their appointment, since it seems like it is hard to make it at that time; an alternate time is offered.

It is so much easier to talk to our patients by offering another time that may be more convenient and not putting a patient on the defensive. So, in this scenario, if you chose the third option, you are right on! Why embarrass or make a patient feel bad if a situation can easily be resolved? Building positive relationships reinforces that you care and are willing to help. Not mentioning it to the patient only makes the situation worse, because it tells the patient that it is OK to be continually late. Imagine if patients came whenever they wanted. Remember, as a great man once said, "Don't let the inmates run the asylum."

Simple scripting really is worth a million bucks. However long it took you to read this article is about how long it would take to role play with your team. If done routinely, the appropriate words and sentences will come out without having to think about it. No situation will be too hard to handle, the flow of communication will improve and patients will understand and know what is expected of them. Remember, it isn't just about how you say it; what you say also matters.

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