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Health Information Compliance Alert

Training Strategies: 3 Key Points Maximize Your Scripting Success

Know when canned responses could land you in hot water.

While scripting may be a valuable resource for your frontline staff, you could find it counterproductive if staff don't know when to abandon the script and consult your privacy officer.

Know Your Scripting Limits

Your frontline workers must recognize their limits with a script and realize when it's necessary to steer a patient towards a higher authority, directs **Sandra Nutten,** a consultant with **The Superior Consultant Company** in Ann Arbor, MI. This is especially true for any potential privacy grievances. "If it's a complaint, [employees] need to understand that it really needs to be heard by the privacy officer," she says.

Call in the big guns: It's one thing "to share and disseminate information to patients so they can make a decision," explains Nutten, but when patients believe that their privacy rights have been violated, your privacy officer should be notified and involved. Furthermore, employees shouldn't hesitate to involve the privacy officer if a patient has very specific questions concerning the HIPAA regulations, advises **Teri Ann Isacson,** an attorney with **Pingel & Templer** in West Des Moines, IA.

Your staff should be able to handle general concerns regarding your entity's policies and procedures, but if, for example, the patient has more detailed questions about particular privacy rights, then it's time to call in the privacy officer, Isacson says.

Watch Out For Canned Answers

When delivering scripted responses, you want your staff to be comfortable -- but never too comfortable. It may be easy for staffers to start relying on their scripts so heavily that their responses to patients' privacy questions begin to sound too phony or canned, says Nutten.

"I would never want [scripting] to be a mechanical, routine address to the person who is asking or expressing the question or concern," she states. "In other words, if I have to depend upon a canned answer, then I don't understand" the patient's concerns or problems, Nutten explains.

Dependence on canned responses could be one indication of bad scripting, suggests Amatayakul. If the script is seen as too involved or not easy to use or comprehend, then your employees could start to rely heavily on rote responses to fend off patients' questions. Or even worse, they may just abandon the script altogether, she remarks.

To prevent this, you need to keep your scripts concise and easy to use, instructs Amatayakul. In addition, you must make sure that your staff understands the scripts and their concepts well enough to exercise some professional judgment when necessary, she notes.

Furthermore, Amatayakul encourages entities to revisit their scripts every few months, so that updates can be made and the language freshened.

For example, she states, as NPPs get more and more widely distributed six months from now, reexamine your scripts dealing with NPP inquiries and determine whether you need to apply edits.

Keep Your Scripts Handy

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Your well-written scripts won't do your staff much good if they don't have them readily available. While some entities may decide to have a binder full of scripts for each workstation or employee, **Margret Amatayakul**, president of Schaumburg, IL-based **Margret A. Consulting,** recommends getting a bit more creative.

Good idea: Since you don't want your scripts to be too long or abundant, consider using small spiral notebooks that you can attach to an employee's computer monitor.

While such notebooks may have been originally designed as quick reference guides for software programs, there's absolutely no reason you couldn't put your scripts on them for easy access, she states. "You could be looking at your screen and filling in data on your computer," and still have immediate access to whatever script you'd need when approached by a patient, says Amatayakul.

Another strategy: Another option for keeping those scripts handy on the frontline is to make use of other HIPAA compliance components in the workstation. Amatayakul reports that one facility she's seen decided to post the first layer of their NPP in large letters on an easel atop the registration desk.

Then, on the back of the NPP, the facility printed the necessary script relating to NPP distribution. "So the front [containing the NPP] faced the patient and the back was where the clerk could see what her script was supposed to be," she recounts.

Note: For other articles on scripting, see "Saddle Up With These Scripting Samples" and "Attain Optimal Compliance By Scripting Responses For Frontline Staffers" in this issue.

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