Chapter 3 – Standards and Protocols

Person-Centered Focus

Developing standards and protocols should be a priority for One-Call/One-Click Call centers to ensure the center is operating according to its purpose and objectives. Simply developing procedures is not enough. Standards and protocols are also essential. Standards describe how the center’s services are expected to impact its customers. Protocols describe how the center will deliver its services.

Standards should reflect the over-arching principle of ensuring that the customer has a positive, quality experience. The standards that contribute to this principle include:

- Person-centered approach – the focus should be on the customer and not on the system or the staff;
- Community involvement – in order to ensure that services are meeting customer need, the community should have a voice in center activities; and
- Universality - Serving all abilities and cultural backgrounds – ensure that procedures are in place to handle inquiries from people with disabilities and with different language and cultural backgrounds.

Developing Standards and Protocols

One-Call/One-Click Centers may have existing standards if they are part of an existing center, and these standards can be expanded to include the new functions being added. If the center is a new center, standards will need to be developed to address the center’s functions.

As a first step, identify all of the processes that are part of your center operations. Then draft the standards that relate to what impact on customers desired for each process. Next draft protocols so that they describe how the process is to be performed.

Both standards and protocols should generally address the following functions:

- Professional conduct and courtesy
- Privacy, confidentiality, security and HIPAA, if required;
- Resources
• Adequate staff to provide access to services for people with all abilities
• Email, voice mail and other social media methods;
• Difficult callers and complaints;
• Crisis callers; and
• Gaps in service

A standard/outcome measure evaluates the impact of the standard on the customer. To illustrate, the following is an example of how a standard and protocol might be developed. (The following are not examples of actual standards and protocols, but are provided as two illustrations of how the development process could work.)

**Standards & Protocols: Privacy, Security and HIPAA Compliance Example**

**Standard/Outcome** The privacy of the customer is preserved and not disclosed or discussed with others.

**Protocols** The security of individuals’ personal information is important for any One-Call/One-Click Call center. Protocols should clearly define the methods for safeguarding information and address specifics, such as

- File cabinets are locked and data transfers, emails, etc. are kept confidential
- Training is provided to ensure that staff is knowledgeable in how the security of the information is to be protected.

While not all centers will be subject to HIPAA requirements, training on HIPAA should be part of the initial staff training to ensure staff understands who is covered under HIPAA. For more information on HIPAA, see [http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/HIPAAgeninfo/TheHIPAALawandRelated-Information.html](http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/HIPAAgeninfo/TheHIPAALawandRelated-Information.html)

**Standards & Protocols: Information and Referral Example**

**Standards/Outcomes**

- Customers are treated in professional and courteous manner
- Customers received accurate information relevant to their requests
- Customers receive prompt responses to their inquiries

**Protocols**

- Staff will utilize the following skills and practices to ensure that the caller’s needs are clearly understood and that the appropriate resource information is provided.
  - Empathetic listening so call takers can correctly identify all callers’ needs
  - Rephrasing the caller’s inquiry
  - Explaining the eligibility requirements for the services that are requested
- Explaining options if available
- Scripts will be developed so that different types of calls will be handled in a consistent manner
  - Staff will use a standard greeting
  - Staff answering the call will identify themselves by name
  - Probing questions will be utilized to help determine the caller’s need
    - Caregiving scripts, transportation scripts, or other specialty scripts, if applicable will contain specific language that will help identify the type of ride or caregiving services needed, for example. Some centers may also provide “Options Counseling” and provide specific counseling on long-term support options.
    - Eligibility requirements will be explained for the services requested
    - No more than 3 resources will be provided, in general
    - If a call is transferred, the staff person will stay on the line (if this is an option with the telephone system and appropriate to the caller’s needs) until the caller is connected

Protocol Examples: Staff Performance

The examples below are not actual protocols for a particular center and do not represent a national standard for protocols but are intended to be illustrative of the types of protocols that could be developed for a One-Call/One-Click Center. These examples are not all inclusive; nor are they appropriate for all centers. Some centers may be simple phone systems and the more complex protocols for handling calls in a queue, contact type, out-bound calls, and technology-related protocols would not apply.

Protocol
- Provide the best resources to meet caller/inquirer’s needs.

Often there are many resources that address an issue that a caller may be inquiring about, but it is important to make sure that the resources provided are the most appropriate for the inquirer’s needs.
A caller may be calling about transportation but probing questions are needed to understand the customer’s need. For example, the caller may need a ride to dialysis three times a week; and although the caller can take transit to the dialysis appointments, the caller is too weak after treatments to take transit home. Similarly, a caller may be calling for assistance with transportation, but may need assistance with other services (meals, financial or other services) that apply to the caller’s individual circumstances. Again, probing questions will help identify the resources that may be needed.

The procedures should ensure that the resource information is kept current as well as the web links to providers. More information on resource management will be discussed in the chapter on “Resource Management” later in this Guide.

Protocol (staff responsibilities)

- Adequate staff will be available to respond to the number of calls received and to provide appropriate access to services, including the following:
  - Calls in queue will be answered first by staff
  - General calls will be answered by all staff
  - Specialty calls will be answered by specialists (Specialty areas may be determined based upon the center’s functions. For example, particular staff may be designated to handle calls about caregiving.)
  - Chat will be answered by staff designated to handle chats (if web chat available)
  - Voice Mail calls will be answered by all staff when no calls are in the queue or by designated staff for the first thirty minutes of their shift, but all voice mails will be responded to within 24 hours
  - Emails will be responded to within 24 hours by staff team lead

Protocol (outbound calls)

- Caller will receive return call within 24 hours of initial call with appropriate information on the ride that has been scheduled, including the following
  - Confirming the eligibility requirements
  - Confirming the details of the ride
  - Confirming the time of the ride
  - Confirming the cost of the ride, if applicable

Protocol (Difficult calls and complaints)

- Staff will be courteous to all callers but will refer difficult caller to supervisor if unable to resolve the conversation to the customer’s satisfaction or the customer wishes to make a complaint.

Protocol (Crisis calls)

- Staff will call 911 immediately in an emergency situation and alert supervisor to listen in and refer non-emergency crisis calls to the appropriate Crisis Intervention

A sample survey template to assess transportation need can be found on CTAA’s website at http://www.ctaa.org/webmodules/webarticles/articlesfiles/NE_Resident_Survey_Template.doc
Center. If the crisis is an abuse situation, staff will follow appropriate laws and regulations in how the call is to be referred.

**Protocol (Gaps in service)**
- Calls where the desired service requested is not available will be elevated to the supervisor to ensure all possibilities are explored. The customer should be advised to explore opportunities with family and friends and that the center will work with other organizations in the community to try to find a solution to the unmet need.

The service need should be reported and discussed with partner organizations to investigate how best to provide a solution to the gap in service identified. If this gap in service is a transportation need, it may be appropriate to take a fresh survey on the transportation needs in the service area.

**Protocol Example: Technology-related**

**Protocol (Triaging calls -Use of IVR (Interactive Voice Response))**
- IVR will be set up so that calls go into one of three queues – general, transportation, or caregiving based upon the caller’s response to the automated questions

**Protocol (Linking or transferring to service providers)**
- Calls will be transferred to an appropriate service provider, but staff will provide the name, telephone number and hours of operation in case the service provider is not available at the time of the transfer. The call may be transferred with the staff member staying on the line (warm transfer) if the caller appears to need special assistance.

**Protocols (Service level targets)**
- Eighty percent of the calls will be answered within 20 seconds of being put in the queue
- The percentage of callers who hang up will not exceed 5 percent
- The average talk time for a general call will be 3.5 to 5 minutes; the average talk time for a specialist call will be 6 to 10 minutes
- Web chat will be answered within 2 minutes

**Protocol (Ride Scheduling)**
- Rides will be scheduled within 24 to 48 hours of receiving the request, depending upon the type of ride requested, including the following:
  - Rides scheduled through call center staff will be scheduled within 24 hours
  - Rides using multiple providers will be scheduled within 48 hours
  - If there is no service available, the caller will be advised within 24 hours and other options discussed with the caller, such as family members, neighbors, etc.
Protocol (Language Line)

- Staff will transfer non-English speaking callers to bi-lingual staff, if available, or to a language line (interpretation line). The staff member should speak directly to the caller as they usually would, and allow time for the interpreter to interpret both sides of the conversation.

Protocol (ADA/TTY)

- A TTY Line will be available to callers, and it will be published in all the collateral material about the center.

Additional standards and protocols may be developed, as appropriate, depending upon the services the center provides. For example, if rides are being scheduled, a standard and protocol should be developed for following up with the customer with information on the scheduled ride. Follow-up calls may be provided by a partner or collaborating organization, and it is important that the manner in which the information is communicated to the customer is consistent among the partner/collaborating organizations. Training on the protocols should include both partner and center staff.

Include center staff in developing and reviewing the protocols as part of center staff development. This process will give staff a better understanding of what is required to meet performance expectations.

For centers new to the information and referral industry, more in-depth assistance in developing standards is available from the Alliance of Information and Referral (AIRS). AIRS provides nationally recognized expertise on developing standards. With their mission of "To provide leadership and support to its members and Affiliates to advance the capacity of a Standards-driven Information and Referral industry that brings people and services together," AIRS provides a variety of tools and resources to assist information and referral centers.” [http://www.airs.org/](http://www.airs.org/)