
Front Desk Sample Scripts

UNIVERSAL OPENER (WORKS IN EVERY BRANCH)

- “Thanks for coming in. I’m here to help.”
- “Let’s take this one step at a time.”
- “I want to make sure we get you to the right support.”

1. HANDLE ON YOUR OWN: ROUTINE + CLEAR

When it’s scheduling/paperwork/navigation

- “I can help with that right here. The next step is _____. It will take about ____ minutes.”
- “Here are your options: A) ___, B) ___. Which works best for you?”
- “Before you go, here’s what happens next and when: _____. ”

If they’re annoyed but manageable

- “I hear you. This is frustrating. Let’s focus on what we can do today.”

2. ASK FOR CLARIFICATION AND COME BACK: UNCLEAR, NON-URGENT

Gather only what’s needed

- “I want to make sure I’m understanding. What’s the main thing you need help with today?”
- “Is this about something happening today, or something ongoing?”
- “Is anyone in immediate danger or needing medical help right now?” (*If no, proceed.*)

Pause and return

- “I’m going to check the best path so I don’t give you the wrong info. Can I step away for two minutes and come right back?”
- “Thanks for your patience. I’m going to confirm what we can offer and what the next step is.”

Confidentiality-friendly

- “You don’t need to share details out here. I just need the broad category so I can route you.”

3. INTERRUPT A SESSION/APPOINTMENT: URGENT CONSULT NEEDED

Warm handoff language

- “I’m hearing enough that we should get you support today. I’m going to bring in a clinician/staff member now.”
- “You’re not in trouble. This is about getting you the right help quickly.”

Containment + safety

- “Can you stay right here with me while I get someone? I’m going to be back in one minute.”
- “Let’s move to a quieter spot while we connect you with the on-call person.”

If it’s a high-emotion situation

- “I can see this is a lot. We’re going to slow it down and get you to someone who can help right now.”

If they want to argue the details

- “I’m not going to ask you to explain everything here. The priority is connecting you to support.”

4. CALL FOR MEDICAL: SUSPECTED EMERGENCY SYMPTOMS

Direct, calm, non-negotiable

- “Based on what you’re describing, we need medical help right now. I’m calling for medical support.”
- “I’m going to call 911/EMS. Stay with me. Try to take slow breaths.”

If they resist

- “I hear you don’t want that. I’m concerned about your safety, and this is the fastest way to get you checked.”
- “We can’t safely ‘wait and see’ with these symptoms.”

While you call

- “Are you having chest pain or trouble breathing right now?”
- “Have you fainted or felt like you might pass out?” *(Just enough to relay to EMS.)*

Keep privacy

- “We’ll keep this as private as we can. Let’s move a few steps over here.”

5. CALL POLICE/CAMPUS SAFETY: WEAPON/THREAT/VIOLENCE/REFUSAL TO LEAVE

Boundary + safety script

- "I want to help, but I need you to lower your voice and step back from the counter."
- "If you can't do that, I'm going to involve campus safety."

If they refuse to leave

- "This conversation is over for now. You need to leave the office."
- "If you don't leave, I will call campus safety/police."

If they escalate

- "I'm going to step away now and get help." (*Then do it. No debate.*)

Non-provocative phrasing

- "I'm not going to argue with you. We're focusing on safety."

DE-ESCALATION "MICRO-TOOLS" YOU CAN DROP INTO ANY SCRIPT

Name the emotion without agreeing to the behavior

- "I can tell you're upset."
- "This feels urgent to you."

Offer choices (reduces power struggle)

- "We can do this one of two ways..."
- "Would you prefer to sit or stand while we figure this out?"

Slow the pace

- "Let's take a breath and do one thing at a time."
- "I'm going to ask one short question, then I'll get help."

Avoid gas-on-fire phrases

- **Skip:** "calm down," "you need to," "that's not my problem," "policy says" (unless necessary).
- **Replace with:** "Here's what I *can* do," "Here's the next step," "Here are your options."

QUICK "ROUTING" LINES FOR COMMON CATEGORIES (WITHOUT INVESTIGATING)

- **Counseling distress:** "Let's connect you with our on-call counselor."
- **Equity/Title IX-type concern:** "I can connect you with the appropriate staff member to talk about options and support."
- **Medical concern:** "We're going to get you checked by medical staff right away."