

# Supporting Staff to Work Efficiently

Effective teamwork can take some of the stress from medical practice and turn the office into a pleasant place for physicians, employees, and patients.

## **Chapter in Brief:**

- ▲ *Putting together an efficient support team starts during the hiring process. Asking each candidate practice-specific questions and running a few pre-employment assessments can help identify the best people to join your team.*
- ▲ *On-the-job training helps equip employees to become successful team members. Practice management consultants recommend spending time upfront to ensure new hires have the training they need. Follow up with ongoing staff development.*
- ▲ *By communicating clear expectations, physicians can effectively delegate certain tasks to other staff members. This lets the physician focus on what he or she knows and does best while staff take care of other responsibilities. But you can't just dump and run and expect the job to be done right.*

**I**magine a practice in which every member of your team clearly understands his or her responsibilities, takes the work seriously, and approaches every task and project with efficiency and enthusiasm. Attention to detail is valued, individuals work well together, and employees anticipate the needs of physicians, patients, and one another.

This kind of office can be your reality if you hire the right people, train them well, support their professional growth and devel-

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Date \_\_\_\_\_ Time \_\_\_\_\_ [ ] F/U Appt  
 Patient \_\_\_\_\_ [ ] Chart  
 Caller \_\_\_\_\_ [ ] Billing  
 Phone Number \_\_\_\_\_ AM PM  
 Chief Complaint \_\_\_\_\_  
 Assessment \_\_\_\_\_

[ ] Discuss and advise **Action**  
 [ ] Rx to Pharmacy \_\_\_\_\_  
 [ ] order lab work \_\_\_\_\_  
 [ ] call for office visit in \_\_\_\_\_ days/weeks  
 [ ] Other \_\_\_\_\_

**Coding**  
 \_\_\_\_\_ minutes spent in telephone medical discussion  
 [ ] billable [ ] not billable

Telephone service  
 5-10 minutes  
 11-20 minutes  
 21-30 minutes  
 Online encounter

Physician	NPP
99441	98965
99442	98967
99443	98968
99444	98969

Signature \_\_\_\_\_

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opment, and delegate effectively so they continue to learn new skills. In this chapter we offer several strategies that will put you on course to having an efficient, expert, and effective staff.

## Hire the Best

It's almost impossible to establish during the hiring process exactly how competent and efficient an employee will turn out to be. Just because someone shows up on time for an interview does not necessarily mean he or she is highly skilled in prioritizing tasks, managing time, or staying calm on days when the schedule goes haywire. But there are clues to look for and hiring techniques that can help ensure that you end up with the best possible team.

Rob Scroggins, a consultant with Cincinnati-based Clayton L. Scroggins Associates, Inc., encourages physicians and office managers to ask candidates practice-specific questions during the interview process. Instead of inquiring in general terms about how an individual copes in a busy office setting, get specific. "Ask questions about rooming patients . . . how they handle a situation when the waiting room is full and the exam rooms are full and the doctor is running 30 minutes behind," suggests Mr. Scroggins. "Put them in a hypothetical situation," he says. Other situations to present might include these:

- You're at the front desk, and four patients are lined up waiting to check in. What do you do?
- Your co-worker has been out ill all week. It's Friday morning; and you're backlogged with work—calls to return, charts to file, procedures to schedule, and a work area that's one big mess. How would you prioritize in this situation?
- A patient is demanding to be added to the schedule for a non-urgent matter. What is your response?
- You are working on special projects for two different doctors in your practice when a third asks you to help her with a task that needs to be done this week. How would you respond to doctor number three?

With 50 employees in her practice, Rhonda Holloway, administrator of Dermatology and Skin Surgery in Shreveport, La., has experience with the hiring process. She routinely conducts one telephone and two face-to-face interviews before hiring anyone.

During those interviews she's on the lookout for clues about how efficient and productive a potential staffer might be. "I pay attention to whether they follow-up with me after an interview," says Ms. Holloway, as one example of what helps her evaluate a potential employee.

Productivity expert and bestselling author David Allen says one of the best ways to increase the odds of having an efficient workforce is to take a systematic approach to the hiring process. Busy doctors, especially those in solo or small practices, too often hire based on gut feeling alone. Intuition is no doubt helpful, but a little science can't hurt. Mr. Allen recommends that practices engage a consultant to administer either the Myers Briggs Type Indicator (MBTI) or the DISC® personality assessment. "They will help you make a more educated guess," says Mr. Allen, adding that both of these tools are now widely available and not cost prohibitive. If you choose to use a profiling tool for hiring, be sure to use it across the board to avoid legal problems; and have everyone in the office take the assessment when you launch the process. It can be enlightening and useful for employees to understand not only their own strengths when it comes to work style, but the strengths and tendencies of their co-workers as well.

Once you've got the right people on board, it's important to take time to make sure they know what's expected of them. This up-front investment in a new employee can take time, but it pays off in the long run.

The initial days on the job are intense for Ms. Holloway's new hires. "Training goes on for a good month," she says. Every new employee is paired with an existing staff member, someone whom Ms. Holloway recognizes as a good example in terms of expectations, productivity, and time management. "For the first month I don't count on [new hires] to be on their own at all. It pays off in the end. If people learn the wrong way, it's difficult



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to get them to learn the right way. Bad habits are hard to break,” says Ms. Holloway.

### **Foster Accountability**

Holding staff accountable is key to developing good habits for efficiency and time management. “You can’t legislate, but you can control people for outcomes,” says Mr. Allen. “No one responds to generalizations,” he adds, noting that laying out clear expectations will result in the staff’s understanding exactly what they are being asked to do and within what time frame. “Keep track of what you expect people to do,” says Mr. Allen, and let staff members know you are paying attention and have your own expectations about what should be accomplished.

Ms. Holloway works hard to hold staff accountable and support them to perform at a high level. “If someone isn’t performing up to par, I’ll talk to him or her up to three times,” she says. “You have to be sure people know what’s expected of them. Sometimes you assume they do. Or maybe they don’t understand the big picture,” says Ms. Holloway. She also holds monthly meetings with each department in the practice to address productivity and other concerns as they arise. Physicians can help out, says Ms. Holloway, by bringing issues to the attention of staff or the practice manager as they occur. “I don’t want to hear a month after the fact that a nurse hasn’t been doing what the doctor needs,” she says.

Opportunities for additional learning can help retain and stimulate staff. Unlike physicians and licensed nurses who, in most states, are required to engage in continuing education, no such mandate exists for the majority of medical office staff employees. That doesn’t mean, though, that your employees would not benefit from—and indeed appreciate—having access to professional development opportunities.

“I’m a huge fan of staff development,” says practice management expert and author Elizabeth Woodcock. “It helps the practice and it helps the employees,” she says.

Ms. Woodcock encourages practices to take advantage of free training that is available in many areas. “CMS has wonderful, free front-office and business-office staff training,” she says. “And most Medicare and Medicaid carriers provide at least one

free seminar each year.” Ms. Woodcock also recommends risk management training sessions provided by your malpractice insurance company, seminars offered by the insurance carriers for which you are a provider, and computer-user groups and

## Options for Staff Development and Training

Investing in the professional development of your employees will not only make them more competent and productive, but can also save you time and money by reducing turnover.

The **Medical Group Management Association** ([www.mgma.com](http://www.mgma.com)) has more than 20,000 members and offers a wide range of professional development opportunities for management-level staff. The MGMA holds an annual conference and has state and local chapters nationwide.

The **Professional Association of Health Care Office Management** ([www.pahcom.com](http://www.pahcom.com)) offers an annual conference and has local/regional chapters in several states.

The **American Academy of Medical Management** ([www.ePracticeManagement.org](http://www.ePracticeManagement.org)) offers practice management seminars across the country on a variety of topics as well as customized in-house workshops for medical groups.

Staff members engaged in coding and billing may benefit from membership in the **American Academy of Professional Coders** ([www.aapc.com](http://www.aapc.com)).

Look for specialty-specific management associations that may benefit your staff, such as the **American Association of Orthopaedic Executives** ([www.aaoe.net](http://www.aaoe.net)) or the Plastic Surgery Administrative Association ([www.plasticadmin.org](http://www.plasticadmin.org)).

Your malpractice insurance carrier probably offers risk-management seminars for staff, and you may qualify for a discount on premiums if you and your staff attend.

Many county and state medical associations sponsor workshops for office staff on a variety of topics including billing and collections, patient relations, scheduling, and time management.

Ask your EMR or billing software vendor about staff training and user groups.

Many community colleges offer clinical skills training for medical assistants as well as front office, coding, billing, and transcription courses. Consider tuition reimbursement for employees who successfully complete course work.

workshops that will help staff make the most of your practice management, billing, and electronic medical record systems. All of these professional development opportunities can help make your staff more efficient, productive, confident, and capable.

## Delegate Effectively

How much of your time do you spend in direct patient care versus mundane tasks that are not revenue producing and don't require a medical license? How much more could you contribute to your patients in terms of quality care and to your practice in terms of profitability if you tipped the balance toward doing more of what you were trained to do? Master the skill—and the art—of delegating, and you can spend more time on the activities most important to you and your patients.

Mr. Scroggins says that capitalizing on the skills and talents of office staff is critical for good physician productivity. Ideally,

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physicians should delegate everything that doesn't require a medical license. “Taking past history, vital signs, recording a patient's current symptoms, these tasks can all be handled by someone other than the doctor,” says Mr. Scroggins.

There are a variety of explanations for why physicians resist delegating. Organizational psychologist Donna Genett, PhD, author of *If You Want It Done Right, You Don't Have to Do It Yourself* (Quill Driver Books, 2003), says one reason people don't delegate is evident in the title of her book. “When I'm at a book signing, people pick up the book and don't even see the word ‘don't’ in the title. That's how deeply ingrained our belief system is,” says Dr. Genett. Having been told for so long and having embodied the idea that “only you” perform up to your own standards conspire against anyone who needs to master the art of delegation to maximize productivity.

In addition, Dr. Genett says, doctors don't delegate because they don't want to lose control. Given the way physicians are trained and the level of responsibility they assume, it makes sense. Because in many instances the buck stops here, physicians naturally feel accountable for the quality of their work. The key to overcoming this kind of resistance to delegation means discerning the risk associated with the task or project. You would never delegate making an accurate diagnosis or performing emergency surgery, of course, because you are indeed responsible for the outcome. But do you really need to research and purchase a new copy machine for the office, or would that task be better suited to someone else—such as one who actually uses the copy machine every day?

Another reason doctors may resist delegating is based on past experience. "People have had true disaster experiences with delegation," says Dr. Genett. "So they throw the baby out with the bathwater, assuming that delegation doesn't work." The problem, she suggests, is that too often people think they're delegating when what they are really doing is "dumping." If, for example, you tell your office manager to "buy a new copy machine" but don't provide any criteria for what you want in terms of price, quality, or timeline, then delegation may indeed backfire. Your expectation might be a \$1,500 copier that can be delivered tomorrow when your office manager plans to research for at least a month before spending twice that amount.

In her book and a companion workbook, Dr. Genett outlines six steps in the process of effective delegation. "I emphasize the word process because the reason people have problems with delegation is that they see it as an event rather than a process," she says. "We give something to someone, rattle off quickly what we want, and walk away. Then we're upset when it doesn't work out." Dr. Genett's six steps are as follows:

**(1) Choose the right person.** "Typically, we have our 'go-to' people and our 'non-go-to' people. We end up overutilizing our 'go-to' people," says Dr. Genett, a habit that is unfair not only to them, but also to other staff members who miss opportunities to develop professionally by assuming more responsibility. "Your performance bar is set only as high as your weakest link," says Dr. Genett. If you want a team of highly competent players, test

their abilities by challenging them to perform.

**(2) Be specific.** Don't dump a project on a staff member and run, assuming he or she understands the outcome you expect and will deliver it. "Define the expected result, and ask people to paraphrase back to you what they've heard," advises Dr. Genett. But don't be overly specific, or you risk falling into the dreaded "micro-manager" category. "Define the 'what' specifically—the 'how' shouldn't matter," she adds.

**(3) Set a deadline.** "This seems obvious," says Dr. Genett, "but we may assume something is a simple task that can be done in an hour, only to hear them say at the end of the day, 'I didn't know you needed it today.'" In setting deadlines, factor in what else the staff member may have going on (including assignments from your partners) and how your request meshes with competing priorities.

**(4) Clarify authority level.** Not paying attention to this step can result in disaster. "People will over- or underestimate their own authority based on their risk tolerance," says Dr. Genett. "High risk-tolerance people would rather ask for forgiveness than permission, and low risk-tolerance people will be knocking on your door every five minutes asking what to do next." Dr. Genett outlines three authority levels in her workbook:

- *Recommend:* "I've done the research, and these three copy machines are my top picks."
- *Inform and initiate:* "I've done the research and plan to order this machine next week."
- *Act:* "Come see the new copy machine that was delivered this morning."

**(5) Build in checkpoints.** Once you've delegated a task or project, check on the progress regularly—more often at first, then less frequently, depending on how it's going. "This is what turns an event into a process," says Dr. Genett. "And don't just walk up to someone and ask, 'How are you doing?' because they'll always say, 'Great,' even if they haven't started." Scheduled checkpoints give both you and the person to whom you've delegated an opportunity to refine and adjust based on progress.

**(6) Debrief.** Once a delegated task or project is complete, set aside some time (a few minutes or an hour, depending on the magnitude of the assignment) to review how the process

unfolded and how well the end result met expectations. First ask the person how he or she thought things went, then offer your own feedback. “This is like a mini-performance review and an opportunity for continuous improvement for both parties,” says Dr. Genett. This step will help you delegate more effectively in the future.

“If you never learn to delegate, you’ll never have a staff that is fully developed,” says Dr. Genett. Delegating also helps you determine who your most valuable players are and who is not performing up to par. “People not willing to step up need to step out,” says Dr. Genett. “They’re a drag on the rest of the team.”

### **Spend Time to Save Time**

No one likes to waste time sitting in meetings, but a reasonable amount of planning and strategy can pay off in terms of efficiency and effective time management. If you have an office manager or practice administrator, meet with him or her regularly. Take an hour a week or a couple of hours each month (either one-on-one or at your regular partner meetings) to review financials and other practice goals, make decisions about next steps, and troubleshoot operational or staffing problems. This small investment of time delivers big dividends.

Setting aside five or ten minutes each afternoon for a “staff huddle” to plan the following day is time well spent. Go over the schedule, anticipate potential bottlenecks in the schedule, and make adjustments as needed. This small investment of time may be one of the most valuable things you do for the success of your practice and the sanity of you and your staff.

If you work in a group practice, sit down with the other providers in the office periodically to share best practices on how to better manage time, both in the office and the hospital or other outside patient care. Invite your office manager or administrator to sit in on these meetings so that he or she can follow through on new ideas and help implement new systems.