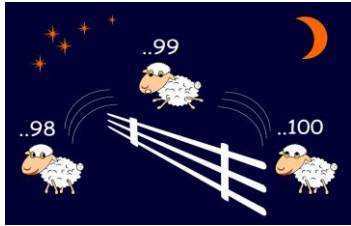


Staffing : What's Keeping You Awake at Night ?!



Dianna Graves, BS Ed, COMT
has no financial relationships to
disclose. She is an Independent
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Being a manager in a clinic can cause a lot of
sleepless nights.

There are staffing issues
regarding :

- * productivity of staff
- * not enough staff
- * mean staff, absent staff,
goofy staff, scary staff
- * are you getting the point
about your staff ?!



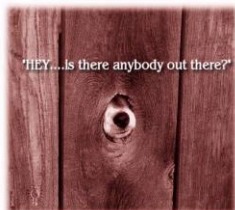
There also are sleepless
nights because of:

- * doctors : issues, quirks,
needs, "gotta have",
"I want", "make it happen"
- * governmental regulations: every abbreviation
known to man and more
- * administrative issues
- * competition from outside groups
- * money: we want more, need more, "gotta have
more" , pace of change in practice !!!



And lastly, is there
anybody really out
there listening to:

- Voice of Reality
- Rationalization
- Reasonability
- Liability
- Competency
- Trustworthy
- Me ????!!!



Staff Productivity

Your staff is like a baseball team: you have a
superstar,
you have the
firebrands, you
have a go to guy
that's an
everyday guy....and
then you have the
rest. The everyday
players that show up
and play. No glitz, no
glam, no fanfare



Bostonglobe.com

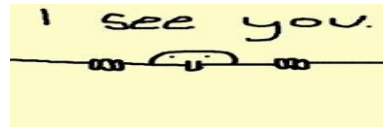
While everyone loves the marquee player when they go to a game.....it takes a team to win the game. It's the everyday players that get lost in the shuffle.



Pinstripedalley.com



CBSnews.com



They are also the ones that come under scrutiny the most.

New computer systems have the ability far better than we ever did in the past to monitor productivity (amount of patients seen) and timeliness of the exams (time from start to finish of a patient exam).

EX: Tech 1 had a 29 y.o. male that needed an exam for his DOT paperwork because he drives a school bus. NO medicines, no medical issues, vision 20/15 OU.

Tech 2 had a new 72 y.o. male with AODM, high BP and bilateral IOLS. Vision 20/40 and 20/70 and a poor memory 😊



Tech 2 is slower than Tech 1....? These types of scenarios will be highlighted when you are short staffed and the doctor's productivity continues to increase. Staff shortages are going to occur. No manager wants to practice FAT - but you have to look at your area and stay attend of the trends.



Memgenerator.com

Staffing: Do I Have Too Many or Not Enough Staff - says who ???

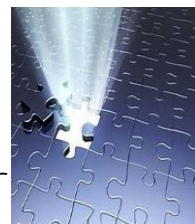
Doctors are just like technicians - you have slow doctors, fast doctors, doctors that see a lot of routine, generally uncomplicated patients and doctors that see the train wreck patients that need a lot of hand holding or special testing.

It's great to say doctors need 2 ½ technicians, but if they are seeing a lot of complex patients, they may need more.




Sometimes the analytics don't give the whole picture. When it is determined how many technicians a doctor needs and averaged throughout the country - you often don't know:


- Patient mix
- Type of doctor (specialist versus general)
- Amount of testing that particular doctor does
- Work ups for various patient types: PEDS, FEMTO versus regular cataract



Each area has times of year when staff are looking to move - and times they will not budge. One of those times is right after the budgets are set for the upcoming year. That's when your staff assesses the potential for future raises, bonuses, perks etc. *How do they get this information ?*




Listening to the doctors! Unfortunately, doctors forget that while they are conversing in the halls, their exam rooms with other doctors, or even sharing the news with their assistants, this news is going to spread through the other techs. And you can't stop it once it gets going.



Mean Girls

Mean girls will destroy your office if allowed to. Every office has them - they are usually the doctors assistant or Managers friend. Therefore they are considered **protected**. IF a staff member comes to discuss the mean girl - and how they are behaving - remember...while *one* came to talk with you - they are often the messenger.




Think Of Them As A Toxic Employee - A Clinic Killer

You Can't Ignore The Problem Because It Isn't Going Away !

Their bad attitude/behavior will cause the rest of the teams morale to decrease -and *their* bad behavior to increase. You need to speak with the toxic employee about their behavior as soon as it is brought to you to prevent further damage.

This Is Not The Approach!



PROTECT the people that have come to you to discuss to toxic employee behavior and make it more about what *you* have noticed or seen. Discuss the issues and how their behavior is affecting the rest of the **TEAM**. Telling them they are not a team player is **NOT** going to work because they think they **ARE** the team!

What Are The Dynamics Around The Behavior?

This needs to stay professional - never let it get to a personal level.

IF they are your friend - you need to discuss that this is not the role you wanted them to fulfill when you hired them - and while you are supportive of them - you have the group to look after as well. Have

examples of the behavior they are doing - and how it affects the morale of the group.



If they are the doctor's right hand man...

You have got to get the doctor involved because often *the techs* behavior is a reflection of the doctors behavior in front of the other staff. The staff member's rules should be the same as the rest of the group:

1. Keep them in the vacation pool with the others
2. Be careful of the bonuses/perks other staff don't get

These staff are going to try and turn the tables on you!



They may try and show times where you showed favoritism or special treatment to other staff. They will definitely go to their doctor - and maybe even your boss to ease the pressure on them.

Stay the course and be prepared - make sure it is not personal. Stick to the facts and keep focused on the behavior you want changed

Do Not Show Favoritism



Their expectations regarding training, classes, certification, performance should be the *same as the rest of the staff*. In other words - most of the problems in this situation are the *doctor's* behavior that allows the staff's behavior to run rampant. **Prevent slug mentality !**



FAVORITISM

THE ONLY ONES THAT SAY IT DOESN'T EXIST ARE THE ONES GETTING IT

Now That You Addressed It - Don't Let It Slide

Don't be covert - make sure you are in the picture and noticeable. I have a rule with staff....there are three sides to every story... Yours, Mine and somewhere in the middle.



Make sure you can see their behavior as well - and be prepared that they may leave over this attack and the doctor may put pressure to leave their person alone !

Staff Hiring & Retention

Getting good staff is difficult to say the least - but how can you keep them?
 When we hire a new technician, I try to set the relationship tone right from the start. Know your "audience"...millennials want different packages than older employees!



Why Do Staff Leave?

The major reasons I see people want to achieve when they change jobs is:

- *Respect /Do not feel appreciated
- *Growth
- More money
- Stress/no personal life time
- Poaching from other groups



Staying Salary Competitive

Make sure you offer competitive and appealing employment packages. Salaries are of course primary in a number of employees view, staff also wants to know about

- time off
- medical benefits (both single and family)
- retirement plans and any profit sharing they receive from your organization.



GET A LIFE

Groups need to be aware that staff burnout is a big issue with employees. Saying your group supports a good home/life work balance, and then demanding more and more of their personal time to make it happen will create discord very quickly. Be aware staff need time to breathe..... and time to be away from work to stay happy!

KPCB's 2015 Internet Trends Report

Which Working Benefits Do Millennials Value Most?

% of global millennials ranking each of the following benefits first



n= 4,364 graduates across 75 countries
 Source: KPCB
 Forbes statista

What are Millennials Looking For ?

“Flexible hours were considered the most valuable benefit by 19 percent of those surveyed while cash bonuses were the top desire of 14 percent of respondents.

Interestingly, *family-orientated perks such as free child care, maternity benefits and financial assistance with housing were all given far lesser importance by the world's millennials”*

Forbes.com

"EMPLOYEE LOYALTY BEGINS WITH EMPLOYER LOYALTY. YOUR EMPLOYEES SHOULD KNOW THAT IF THEY DO THE JOB THEY WERE HIRED TO DO WITH A REASONABLE AMOUNT OF COMPETENCE AND EFFICIENCY, YOU WILL SUPPORT THEM."

HARVEY MACKAY

© Lifhack Quotes

I do the interviewing. The interview involves me explaining to them what our group is looking for:

1. WHAT the job is
2. WHEN they need to be here - and any potential times we would expect them to be
3. LATE nights and OT
4. Weekend hours ?



"A player who makes the team great is better than a great player."

*Their responsibility in their growth - they will need to take the HOME STUDY/ COA/COT test and the timing of when I expect this to happen

- **BEING A GOOD CITIZEN** and being an expected part of the group.

Quotesgram.com

After we discuss *all* of the expectations for the job that I have- I ask them what it is that *they* want from this job.

I make sure that they know that we are very committed to their future - and will work with them as a team to make sure they get what they need. But it is a collaboration. They will have the opportunity to shine individually - but they are part of a team as well.

Create A Nuts to Bolts Training Plan And Stick With It

Regardless of their certification - start them slow! Evaluate *all* their skills, and have a check off system to make sure nothing is missed. Make sure they know you do this with everyone.

They should have a trainer with them during this time. The trainer has them watch them first - and then watches them. Watch how they behave with the patient.


This is the time to note any potential personality traits you want to amend in the beginning - afterwards will get harder.



The goal in the beginning is to help them understand not only about the job but also the way the clinic runs, what the doctors want on each patient and the expectations of the fellow staff.

It also ensures they have someone to be their buddy - and to have their back from the start. Have a team of trainers - and make sure the message is the SAME. No variations in the beginning.





Training a new staff member in a week and then putting them in the job with minimal supervision is a big mistake. Here's what happens: Why do you check pupils? To rule out an APD. What is an APD? A pupil problem. But they can't tell you WHAT the problem is - nor what it looks like. But they think they are doing it right.

Training/Certification

It is important to make sure the staff realizes your commitment to them - and certification/education is one of those ways.




TEST ANXIETY

Not only is it good for them and their future - but also for the future of your practice. Have a development timeline, and help them stick with it. Testing often makes them frantic!


What are The Physician Expectations/Needs

Computer systems, governmental constraints, less patient to doctor face time, patients living longer with more aging problems making their exams harder and longer. They feel less like they are practicing medicine and more like documentation wonks. Does your group go to scribes? And how? What is the financial cost to the practice versus doctor satisfaction?




What Makes Your Group So Special ?

Have a critical eye at *your group* - and *other groups* - and ask: Why would someone choose your group versus someone else? What can you offer that others can't because if you don't have "it"word spreads fast!




Getting Out Of The Box versus Being Boxed in

- Hiring Bonuses
- Help with student loans ?
- Clinic Growth and ensuring staff to doctor mix correct
- Bonus plans
- Head Hunters to find staff ?
- Is it time to get an HR department versus Administration trying to juggle ?



Regulations, Rules, Oh My

Training:
MIPS/MACRA/
Government
OSHA/Safety
Continuing Education
Hands On Training
Face Time With Staff



So....**what** is keeping me up at night ?
Better yet - what's keeping **YOU** up at night?!



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