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Finally to my co-author and friend, **Linda Abel**. She believed in my speaking and training career when it was merely just a thought. This is the only page in the book that she has not proofread, edited or revised. I must also acknowledge that Section 4 of this guide, (Billing and Insurance Issues) is 100% her work. I am confident it will be one of the most important tools an insurance assistant will ever use. My deepest thanks to you, Linda. This book would never have happened without you.

Illegal Interview Questions

- Illegal: Their Age
Legal: If hired, can the applicant furnish proof of age? Are you over 18?
- Illegal: Any questions about specific years (when) of school attendance or graduation.
Legal: What academic, vocational, or professional education the applicant has had, as well as schools attended.
- Illegal: Marital status
Legal: You may ask if their references will have them listed by the same name to enable you to check their work record.
- Illegal: Whether or not they have children or plan to have children, and the ages of their children. Also, how their children will be cared for if they are hired.
Legal: Explain that the job requires working from 7:30 a.m. to 5:00 p.m. and every other Saturday and whether they would be able to work those hours.
- Illegal: Whether they have ever had their wages garnished.
Legal: A credit check may be done.
- Illegal: Asking personal questions about their hobbies or habits.
Legal: You may ask them to tell you about themselves or ask them to comment on their career interests and goals.
- Illegal: Whether they have ever been arrested.
Legal: You can ask if the applicant has ever been convicted of a felony and if so, for what.
- Illegal: Who resides with them.
Legal: If offered employment, you can ask who can be notified in case of emergency.
- Illegal: If the applicant rents or owns his or her home.
Legal: You may ask the applicant where they reside and how long they have lived there.
- Illegal: Their race, national origin, religion, veteran status, or sexual preference.
Legal: None when it comes to the above mentioned areas.

Sample Interview Questions

Laurie's Top 10 Picks

- Why do you want to do this type of work? (This shows if they have given thought to the interview)
- What are/were your reasons for leaving your last job? (Beware of comments related to supervision)
- Of all your jobs, which one did you like best? Which did you like least and why?
(Listen for traits that would make the applicant seem difficult to bring into a team setting.)
- Which supervisors have you found easiest to work with? Most difficult and why?
(Determine if they like close supervision or hands-off leadership and consider if that fits the scenario of your office.)
- What part of your work have you found the most frustrating?
- What hours are you available to work? (Record the answer on an interview sheet)
- What type of situations fluster you or make you lose your cool?
(Beware of anyone who says they “never get flustered.”)
- When you applied for this job, what was your greatest apprehension?
(Never accept the answer “I had no apprehension.”)
- What do you think is your greatest weakness?
(Many of the people I interviewed told me it was their desire for perfection!)
- What have you done to improve your skills or grow personally in the last year?
(The answer doesn't matter to me I am just testing to see how “quick on their feet” they are with a tough question.)

Creating a Job Description

Any position within an office that is worthy of staffing requires a job description. Simply put, a job description provides the reason for the position, the guidelines for work, and the measuring stick by which performance can be measured. Each position in your office must contribute toward enhancing and accomplishing the goal of your business. Therefore, the best place to start creating a job description is with the mission statement of your practice. What is your business and what is your purpose? From that point, you can determine how each position is going to enhance and accomplish the goals of your business.

Step One: WHY - Identify the goal of your practice and specify *WHY this position exists*.

Step Two: WHAT - Identify the specific *areas of responsibility* for this position. What is this staff member supposed to do? Try to limit your list to three or four areas. Excessive responsibilities may lead to an overwhelmed staff person.

Step Three: HOW - Define the *major objectives* of each area of responsibility for the position. In other words, how do you want the job done? These definitions should contain enough detail to be clear, but may refer to specific policy or procedure manuals. This will allow you to define job duties clearly, but will not require re-working a job description each time an office policy changes.

Step Four: WHERE - A job description should always allow a staff member to know *where they stand in regard to their job performance*. If their job description clearly outlines their duties and they can see that they are accomplishing each duty as outlined, they can be relatively certain they are performing satisfactorily. If, as a supervisor, you feel that the staff member's performance is not meeting your expectations, you should be able to reference which objective of which job performance is not satisfactory.

Step Five: DEVELOPMENT - Always show your staff members that growth and improvement are not only desirable, but expected. The last area of responsibility on each staff member's job description should be a challenge to increase their knowledge or skills in a way that will further enhance their performance and value to themselves and the practice. Most people desire growth and opportunity, and including it on a job description helps remind them of your support of their growth and development.

Once you and a staff member agree on a job description, remember that the description should grow as the staff member grows. Both you and the staff member should periodically review the job description and the staff member's performance. This will allow you to reward excellent performance, and redirect staff members as they grow and assume new responsibilities.

[I would recommend that the first job description written should be done BY the doctor FOR the doctor.]

Job Description

Patient Services EXAMPLE OUTLINE

Major Goal: To care for all patients in a professional and proficient manner. Thereby causing an increase in patient satisfaction which results in more new patients.

Area of Responsibility 1: Management of incoming calls

Standards for this area are:

- Telephone is answered ideally before the third ring.
- All callers are greeted in a friendly, attentive voice.
- Appointments are made in a timely manner.
- Proper handling of calls is accomplished (putting on hold, transferring, etc.)
- (the list continues to cover all aspects of the standards required to fill the area of responsibility)

Area of Responsibility 2: Accounts receivable

Standards for this area are:

- Balance of account is requested at time of visit (or whatever your office rule is)
- Each day's receipts are (insert procedure here)
- Deposit is done daily.
- (the list continues to cover all aspects of the standards required to fill the area of responsibility)

Area of Responsibility 3: Scheduling

Standards for this area are:

- Patients are scheduled in the following manner: (insert your procedure here)
- All personal appointments for the doctor are maintained in the following manner:
- (the list continues to cover all aspects of the standards required to fill the area of responsibility)

Area of Responsibility 3: Teamwork

Standards for this area are:

- All coworkers are treated fairly and with respect.
What other duties might require teamwork?
Have you had problems with teamwork in the past? If so why? Insert performance standard to avoid that problem in the future.

Area of Responsibility 3: Attitude, education, personal development

Standards for this area are:

- Attend one continuing education course per year.
- Read monthly periodical on optometry
- (the list continues to cover all aspects of the standards required to fill the area of responsibility)

Orientation Day

Have an organized approach to a new employee's first day. Make the introduction to your group as smooth as possible by using these ideas.

1. Ask everyone on staff to greet the new person and introduce themselves in a friendly manner.
2. Assign someone to be the "first day buddy" to acquaint them to the office layout and share unspoken rules that are essential.
3. Prepare an orientation packet. It should include the following:
 - Hiring agreement
 - Copy of the office policy and procedure manual
 - Signature page documenting that policies have been read and understood
 - Payroll forms
 - Training schedule
 - Office contact numbers
 - Copies of articles you have collected that help new staff understand the industry
 - Terminology page
 - In-house abbreviations and frequently used words
4. Check in with the new person often and encourage questions.
5. Explain confidentiality to each employee even though it is in the manual.
6. Provide your best staff "models" to demonstrate serving patients in a friendly, professional manner.
7. Have the staff member follow a new patient through the whole system to learn what tests are done and how staff interact with patients. Be sure they follow staff who are performing in a manner that meets your approval. New staff will believe what they see is acceptable behavior.
8. Do not ask the new staff perform tasks on the first few days. Just let them observe and learn.
9. The education process should include viewing any patient education video tapes used in your office.
10. As a nice touch, consider having a staff member (or all the staff if possible) take the new person to lunch and welcome him or her to the team!

Confidential Employment Agreement

(one copy to employee, one for personnel records)

Name _____ Job Title _____
Starting Date _____ full-time part-time

Scheduled Working Hours _____ to _____ Lunch _____
Days per week: S _____ M _____ TU _____ W _____ TH _____ F _____ SA _____

No guarantee of hours is granted. When patient load requires a reduction in staffing you will be notified and asked to be off work without pay. Taking paid time off will be granted when requested in accordance with the vacation policy.

Salary and Benefits

Starting rate: _____ Pay rate will be reviewed annually.

Paid time off:

Dress requirements:

Conditional period of Employment

For each new employee, the first _____ weeks of employment are considered a conditional or probationary period. During this time the employee may leave or be dismissed without prior notice.

Termination

The employee is expected to give _____ weeks notice prior to voluntary termination of employment.

If dismissed, the employee will receive _____ weeks notice (or the equivalent in severance pay.) In the event of fraud, theft, or unprofessional conduct, the employee may be dismissed without notice or severance pay.

Employee's signature and date _____

Signature of employer _____

Date _____

This document is for information purposes only and is not a legal contract.

Evaluation of Performance

Purpose of the Performance Evaluation

To measure the employee's performance against his/her job duties and to identify strengths and weaknesses of the employee. The evaluation promotes maximum utilization of strengths to enhance the employee's capabilities and planning for improvement of weaknesses. It also provides a justification for pay increases and career growth.

Instructions:

Use the employee's written job description (see page 1:4) as a guide for evaluating the areas of responsibility specific to their position. Do not allow the rating of one factor to influence your rating of another.

Staff Member _____	Date of Evaluation _____
Position _____	Date of hire _____
Appraisal period from _____ to _____	Current rate of pay _____

Performance Factors

- | | |
|----------------------------|--|
| Exceptional: | Performance consistently <u>exceeds</u> all standards and requirements of the position. The employee has made significant contributions to the company by achieving greater than expected results. |
| Successful: | Performance that consistently meets all standards and often exceeds the requirements of the position. Demonstrates quality in their duties. |
| Meet Requirements: | Performance consistently meets job requirements. Achieves the level of an experienced employee. Continued performance at this level is acceptable. |
| Improvement Needed: | Performance of job requirement is inconsistent. Prompt and appropriate remedial action is necessary. Additional training, attitude adjustment, or more experience may be necessary. |
| Unacceptable: | Performance is producing an unsatisfactory result and does not meet the minimum standards and requirements of the position.
A counseling report is recommended. |

Attendance Record

- | | | | |
|---|----------|--------------|----------------|
| 1. Works the scheduled days | superior | satisfactory | unsatisfactory |
| 2. Works the scheduled hours | superior | satisfactory | unsatisfactory |
| 3. Reports to work on time | superior | satisfactory | unsatisfactory |
| 4. Ready to work at start of day & after breaks | superior | satisfactory | unsatisfactory |
| 5. Number of sick days used this review period: | _____ | | |
| 6. Number of days tardy this review period: | _____ | | |

Performance Summary

Overall job performance rating and comments from supervisor:

Areas of greatest strength:

Areas for improvement:

Comments from staff member:

Recommendations

Salary Increase _____

Goals for next review period: (see reverse)

I have discussed the ratings and comments in this review with my supervisor. I understand the evaluation and accept the information as noted.

Employee Signature _____ Date _____

Doctor/Manager Signature _____ Date _____

Next Review schedule for: _____

Counseling Report

Name _____

Position _____

Type of Action: Conduct/Behavior Performance

1. Describe the action and impact on the job or the practice:

2. Expected improvement and standards for the future.

3. Date for next review _____

4. Possible next action if staff member does not meet the required standards:

5. Staff member's comments:

6. Supervisors's comments:

I acknowledge that the above evaluation has been discussed with me and my signature does not imply agreement or disagreement. All of the labor laws applicable to this state still apply.

Staff member's signature/Date _____

Witness/Date _____

EXIT INTERVIEW

Purpose: To determine the reasons for resignation and to obtain insight into various working environments at our office.

Employee Name:

Date:

1. Reason for resignation:

2. Source of employee satisfaction, dissatisfaction:

3. Recommendations for change:

TIME OFF REQUEST FORM - STAFF

Employee Name: _____

Date of hire: _____

Date request made: _____

TIME OFF PERIOD

First working day of time off: _____

Last working day of time off: _____

Total # of days requested: _____
(scheduled work days only)

Type of days off: Vacation Personal Sick Unpaid Other

Employee Signature: _____

MANAGEMENT APPROVAL

Yes ____ No ____

Management Signature: _____

Date of Approval: _____

Comments:

Help Wanted Ads

Finding good people to join your practice is a challenge for most offices. We have found over time that to improve the quality of the applications we needed to be as specific as possible in the help wanted ad we placed. Instead of just saying “open position, anyone can apply” we tried to narrow down the scope of the position with detail.

Indicate in the ad the positive and negative aspects of the job. If it includes weekend and evenings, you might as well state that as many applicants may not have a lifestyle that would allow them to staff those hours. If a full benefits package is available, let them know what to expect.

Make the job sound interesting and if you have a friendly team promote that too!

Below are several examples of ads that have been successful for other practices. Mix and match the words, add your own and you are ready to go! Good luck in finding the right people.

Medical Assistant Needed

Full and part-time assistant needed for a growing optometric practice in (location). Duties include performance of preliminary eye tests and patient education. Previous experience helpful but willing to train the right applicant. Benefits include ().

Exciting Job Opportunities Available

Our practice is growing! Are you looking for an opportunity to work in a beautiful, modern optometric office in the (location) area? {Don't say this statement if it isn't true!}

We are currently looking to hire optometric technicians for our private practice. Responsibilities include (insert tasks). You will work closely with our doctor (s) to provide exceptional care to our patients. If you would like to explore this opportunity please (contact info).

Help Wanted

(ABC EyeCare) has an opening for a part-time assistant to work in our insurance department. Duties include processing and preparing claims, medical records maintenance, and providing general clerical support. The position requires approximately (insert hours per day/week), based on the volume of work and includes every Saturday. The ideal candidate needs to be detail oriented, neat in appearance, and willing to work both independently and as part of a team. Starting rate of pay is between (X and Y). Interested applicants should (insert how you want them to apply - come in, call, fax, email, send a resume).

Be sure to include contact information on all ads.

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

APPEARANCE

PURPOSE: To ensure a professional appearance by all staff.

PRACTICE:

Staff members are expected to be neat and professional in their appearance at all times. The impression given by the staff reflects on the doctor and the entire practice. Staff members are expected to adhere to the acceptable appearance code as follows:

1. Clinical staff are required to wear white uniform pants, or skirt, white or neutral hose or socks, white shoes (polished), and their name tag. Shirts or blouses are to be conservative and professional in style and color.
2. Business (reception, optical, other specified) staff may wear conservative, professional business clothing along with a name tag. Clinical whites may also be worn if preferred.
3. Skirts may be no shorter than two inches above the knee. Dress slacks are acceptable, but denims, khakis, or other casual pants are not appropriate.
4. One earring in each ear is acceptable. Earrings should be conservative and no larger than one and one-half inches in length or diameter.
5. All staff are required to bathe daily and wear deodorant.
6. Hair must be clean and dry upon arriving at work at all times.
7. Staff should refrain from chewing gum in the presence of patients both on the phone and in person.
8. Teeth must be brushed after eating, drinking, or smoking.
9. Underwear should not be visible through clothing.
10. Make-up should be natural looking and nail polish subdued.
11. Perfume should be worn only in small amounts.
12. All staff are expected to wash their hands with soap after using the restroom.

[These are just an example of dress issues you may wish to address. You will adjust this policy to your practice's "style" and patient demographics.]

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

BENEFITS

PURPOSE: To clearly outline any and all benefits available to staff as well as the conditions of their use and limitations.

PRACTICE:

1. If your staff is eligible for medical insurance, provide the details of the plan or a statement concerning the location of the plan/policy with details. This should include effective dates, specifics of coverage and cost, and all enrollment information.
2. If you provide sick leave for your staff, you should outline the number of days/hours available as well as the situations when it can be used (i.e. can sick leave be used for ill family members or illness of the staff member only?) Consider whether sick days not used will be payable on termination; what happens with unused sick time (can the staff 'trade' time for pay or other time-off at some point?), and any other special circumstances.
3. Time off for vacation or personal days should be detailed. Again, list any specific details concerning use of the time, request for time off, and what happens to unused time at termination.
4. Holiday pay, if available, should be detailed. List specific holidays observed by the office and how those days will be paid.
5. Establish any guides concerning abuse of time off, whether paid or unpaid.
6. Add information about any other benefits, such as vision exams, and discounted materials. Be certain to specify which benefits apply to staff only and which might include family members. Carefully define "family members" should you choose to extend any benefits beyond your immediate staff. Do you include parents? Stepparents? Aunts and uncles? Grandparents? Cousins? If children are included, determine whether you wish to include dependent children only or perhaps those who have grown and are moved away from home or married. It is always best to be as specific as possible.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

CHECK-IN PROCEDURES

PURPOSE: To promptly greet and register all patients and guests who arrive for an appointment.

PRACTICE:

1. Properly greet and welcome all patients and guests upon arrival. Determine the purpose for their presence in the office. (This may be for an appointment, to pick-up materials, or to speak with the doctor about a new product.)
2. For patient appointments, locate the patient's chart. Request that the patient complete any necessary paperwork. Note on the printed schedule that the patient has arrived.
3. Update the patient's record as needed. Any updated information the patient provides must be updated in the computer system. If the patient has changed insurance or added insurance information, a copy of the card should be made. When the chart is completely updated, it should be placed in the rack for the technician to begin the exam.
4. The charts should be counted and that count compared with the number on the patient schedule to verify that all charts are prepared for the coming day's appointments.
5. The cash drawer is balanced and financial closing procedures followed. Payments are safely secured in the appointed place.
6. When all patients have gone, all equipment should be turned off and covered, all lights and lamps turned off, and all doors locked. The security alarm should be set just prior to exiting.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

CHECK-OUT DUTIES

PURPOSE: To schedule all return appointments, complete any recall information, and to collect payment from patients.

PRACTICE:

1. When the patient completes his/her appointment, he will be brought to the check-out station along with the medical record noting any requested return appointments. If an appointment is needed, it should be made at a time most convenient for the patient. The patient then be given an appointment card with the practice name, the doctor's name, and the date and time of the appointment.
2. If the patient does not need a return appointment, they should be registered in the recall system so that they will receive a recall card just prior to the time the doctor would recommend they return. Tell the patient that they will be receiving the card and ask them to call for an appointment when it comes. Assure them that your doctor is anxious to continue their care and see them anytime before their recall if they have need!

For a participating Medicare provider's office:

3. If the patient is covered by Medicare, their copayment (20% of the Medicare allowable can be collected, as well as payment for any non-covered materials they have purchased. If they purchased post-operative glasses, payment should follow the Medicare guidelines for those materials.

For a non-participating Medicare provider's office:

3. If the patient is covered by Medicare, the staff should collect payment for all services and inform the patient that their charges have been determined by the Medicare limiting charge set by the government. Assure them that you will file a claim to Medicare and they should receive payment within a specified amount of time. Explain what payment (if any) they should expect. If they do not receive the appropriate payment, instruct them to call you so that you can assist them in refiling the claim and obtaining correct payment.
4. Provide a receipt for all amounts paid by the patient.
5. Express genuine appreciation for the patient for an opportunity to serve them!

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

CLOSING THE OFFICE

PURPOSE: To have the office ready to begin seeing patients upon opening the next day and to secure all doors into the office.

PRACTICE:

1. The closing person will begin closing procedures approximately twenty minutes before the anticipated end of patient hours.
2. The reception area will be tidied by straightening out magazines and toys, filling brochure holders, and stocking all coffee supplies for the following morning.
3. The doctor's schedule for the next day will be printed out and put on his/her desk. A second copy of the daily schedule will be made for the technical staff to follow.
4. The charts should be counted and that count compared with the number on the patient schedule to verify that all charts are prepared for the coming day's appointments.
5. The cash drawer is balanced and financial closing procedures followed. Payments are safely secured in the appointed place.
6. When all patients have gone, all equipment should be turned off and covered, all lights and lamps turned off, and all doors locked. The security alarm should be set just prior to exiting.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

CONDUCT

PURPOSE: To make staff aware about actions or behavior considered to be inappropriate and which could lead to dismissal.

PRACTICE:

Violation or misconduct of the practice policies may result in immediate discharge without notice.

The following list is intended to provide the staff member with a general guide to the type of conduct for which YOUR OPTOMETRIC PRACTICE may institute disciplinary action, up to and including immediate termination. While a progressive disciplinary procedure may be used, the nature of any action will depend on the circumstances of each individual case. Conduct of the type listed below interfering with the efficient operation of the practice, or causing harm to a staff member or patient will not be tolerated. The following are simply examples intended to illustrate the types of behavior that could result in immediate termination.

1. Rudeness to a patient or another staff member.
2. Breach of patient, or personnel confidentiality.
3. Stealing from the office or staff persons.
4. Falsification of any records, such as time cards, financial information, employment information, or patient records.
5. Illegal use of controlled substances.
6. Being under the influence of alcohol or mind-altering drugs while at work.
7. Insubordination to others.
8. Conviction of a felony.
9. Conduct which jeopardizes the quality of patient care.
10. Sexual harassment.
11. Solicitation of patients for sales of outside products or services.
12. Dishonesty.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

CONFIDENTIALITY

PURPOSE: To protect patient, practice, and staff privacy. In addition, to comply with HIPAA regulations requiring protection of all patient health information.

PRACTICE:

1. Staff members are expected to maintain patient, practice, and staff confidentiality at all times. This precludes discussions about patients or patient records at all times, unless it is related to the performance of duties in the office.
2. Any necessary conversations taking place at work regarding patients should be conducted out of hearing of other patients.
3. We do not release information about any patient without the express written permission of the patient. Any request for information about a patient should be handled by the office manager.
4. All patient records and papers concerning patient data should be kept in a space away from others who do not need to see the information.
5. Casual disclosure of information concerning personal information about the doctor, staff members, or sensitive practice data is inappropriate.
6. Disclosure of any patient health information is a violation of federal law. Penalties for such disclosure can be punished with severe fines.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

EYE CARE & MATERIALS

PURPOSE: To protect low-cost eye care and materials as a benefit to staff [and immediate family.] This benefit will be available to staff members upon completion of [three months] employment.

PRACTICE:

1. The doctors of YOUR OPTOMETRIC PRACTICE will provide staff members' refractive eye exams at no cost.
2. Staff family members (spouse and dependent children) will receive refractive eye exams at one-half the regular charge.
3. Eye examinations for staff should be scheduled in such a way as not to interfere with other regularly scheduled patients.
4. Materials, including frames, lenses, and contact lenses, will be available for staff members up to the value of [\$250 a year] retail price.

Date: [00/00/00]

Reviewed or Revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

HIRING PRACTICE

PURPOSE: To promote employment opportunities for all qualified persons regardless of race, color, creed, age, sex, marital status, political beliefs, or disabilities.

PRACTICE:

1. Any person can apply for employment at YOUR EYE CARE PRACTICE.
2. Persons seeking employment will not be judged by their color, race, religion, age, sex, marital status, political leanings, or disabilities.
3. In general, the application of anyone seeking employment at YOUR EYE CARE PRACTICE is considered to be confidential information.
4. YOUR EYE CARE PRACTICE hiring practices will conform to the federal, state, and local laws concerning nondiscrimination and equal opportunities.
5. All applications will be considered and employment will be offered to those candidates we consider to be best matched to the positions available.
6. Staff members interested in applying for an open position should apply with the [doctor/manager].
7. A job description with requirements for the position will be available for any candidates considered for a position.
8. Any person hired by YOUR EYE CARE PRACTICE is an at-will employee. This means that either YOUR EYE CARE PRACTICE or the employee may terminate their employment relationship at any time with or without cause. *[Employment laws vary from state to state. Check with the Department of Labor in your state for specifics concerning employment agreements and status.]*

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

HOLIDAYS

PURPOSE: To set guidelines for compensation for time off on recognized holidays.

PRACTICE:

1. YOUR EYE CARE PRACTICE will observe the following holidays, and a total of eight hours pay will be granted for each holiday to any full-time staff member (working 40 hours/week).

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

2. If one of the above holidays falls on a day when the staff member does not normally work, or a day when the office would not be open, a day nearest the holiday as possible will be granted as the holiday. The day may depend on whether or not the office closes for day in substitution of the holiday. (For example, if Christmas were to fall on a Sunday when the office would be closed but the decision is made to close on Monday, all staff will receive the Monday as their paid day off.)

3. This benefit applies to staff members who have completed three months employment with the practice.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

LUNCH

PURPOSE: To allow at least a 20-minute, uninterrupted duty-free rest period for any staff member working at least seven hours in a day.

PRACTICE:

1. All hourly staff who work at least a 7-hour day must take a minimum of a 20 minute, duty-free break. This break should begin no later than the 5th hour of work.
2. Hourly staff are expected to punch out for lunch even if they remain in the office to eat.

[There are labor laws governing required lunch periods that vary from state to state. Verify state requirements prior to implementing a policy.]

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

OPENING THE OFFICE

PURPOSE: To have the office doors opened, lights turned on, and staffing ready before patients arrive for appointments.

PRACTICE:

1. Upon arrival of the first staff member, all lights should be turned on in the reception area, patient rest rooms, and hallway to exam areas.
2. The coffee pot should be turned on so as to have hot coffee available for morning patients.
3. Front door should be unlocked and any patient(s) waiting to enter invited in with a cheerful greeting. Patient's appointment time should be verified reminding the patient that they are expected.
4. Put out morning newspaper.
5. Turn off the answering machine (or answering service) to receive patient calls.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

PAYROLL PROCEDURES

PURPOSE: To ensure compensation for services rendered.

PRACTICE:

1. All hourly staff members will be paid by check [bi-weekly] on regularly scheduled pay dates not later than [13 days] following the end of the pay period. A schedule of pay-dates will be posted.
2. State and federal regulations require that certain taxes be withheld from all wages. A written statement of the amount withheld is enclosed with each paycheck. Staff members should review this promptly for accuracy.
3. Each staff member is responsible for notifying the [payroll coordinator] in writing of any changes in address, marital status, or number of exemptions claimed.
4. Each hourly staff member is required to record his/her arrival and departure time using [time sheets or time cards]. Addition or deletion of time is each staff member's individual responsibility and changes must be initialed by [the office manager].
5. Paychecks will reflect actual hours worked during the posted pay periods.
6. Time and one-half will be paid for hourly staff for actual hours worked exceeding 40 hours within one work week (i.e., overtime will not be paid when hours include paid-time-off).
7. The work week begins Monday at 6:00 A.M.
8. Time off in exchange for overtime will not be permitted unless authorized by [office manager]. This time off must be taken in the same work week.
9. Any falsification of time records may be cause for dismissal. Payroll records are personal and confidential. Staff members are prohibited from punching in and out or otherwise modifying anyone's time card other than their own.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

PERSONNEL STANDARDS

PURPOSE: Standards, policies, and procedures have been developed as a guide for all personnel to follow in order to promote an effective, efficient, and equitable working atmosphere for all staff of YOUR EYE CARE PRACTICE.

PRACTICE:

1. In the spirit of teamwork, all staff members are expected to work together cooperatively and to conduct themselves in a professional manner at all times. Nothing is more important than treating our patients and their families with friendliness, respect, and courtesy. If there is some little “extra” we can do for them, let us do it willingly.
2. Each staff member has a specific listing of her or her duties in the form of a written job description. However, he or she is also expected to help others as needed, provided that this does not interfere with the completion of his or her primary responsibilities. The work of each of us is dedicated to one purpose: To make our patients realize that they could not have chosen a better place for their eye care.
3. In the event of absence or illness, other staff members are expected to substitute and cover additional duties as necessary.
4. We pride ourselves on an attitude of continual improvement of patient care and procedures. If you see a better way to do something, we request that you bring it to our attention. All suggestions will be carefully considered and implemented whenever feasible and appropriate.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

PUNCTUALITY

PURPOSE: To ensure that adequate staff are available to serve our patients and help maintain a smooth appointment schedule.

PRACTICE:

1. All staff members are expected to arrive at work on time and to be prepared to start their duties at the time designated by [the office manager].
2. Although we try to adhere strictly to an appointment schedule, the nature of an optometric practice is such that it sometimes requires staff members to stay on duty past the usual closing time. Every effort will be made to allow staff timely departures at the end of the day.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

YOUR OPTOMETRIC PRACTICE

PERSONNEL POLICIES

TELEPHONE GUIDELINES

PURPOSE: To ensure that all incoming calls are answered, messages taken, and calls handled properly.

PRACTICE:

1. The answering machine (service) should be deactivated every morning by the time office hours are posted to begin. This should be done regardless of when the first patient is scheduled for the day. [Policy or instructions for deactivating answering service should be posted or printed in a procedure book that can be named in this policy.]
2. Telephone calls should be answered by any available staff member as quickly as possible, ideally within two rings.
3. Incoming calls should be answered using the name of the practice as well as your first name. “Good morning. YOUR EYE CARE PRACTICE. Laurie speaking.” [Other specifics concerning how the message should begin may be printed here.]
4. Patient calls should be handled immediately if at all possible. If it is necessary to put a patient “on hold”, always ask their permission first and wait for their approval. If they prefer, return their call at a later time.
5. Vendor calls may be returned during non-patient hours unless other instructions are given by the doctor.
6. If another doctor calls for a doctor in your office, ask if there is a patient chart you can have ready for your doctor and then ask the calling doctor if you can put him/her “on hold” while you get the doctor to take the call.
7. Personal calls for staff should be limited to emergency calls only. If at all possible, avoid interrupting staff from patient care. Request that the call be returned as soon as the staff member completes care of their current patient.
8. If a patient calls requesting to speak with the doctor, inform the patient that the doctor is with another patient. Offer to try to assist the patient with their need or to have their call returned as quickly as possible. Always ask patients to return their call if they have not heard from you by the end of the day or the appointed time.

Date: [00/00/00]

Reviewed or revised: [00/00/00]

Telephone Techniques

Since much of the contact with patients and business people are made over the telephone, this is an important part of your work. Listen carefully to the person calling so that little, if any, repetition is necessary. Be sure that the information that you record is complete and correct. If necessary, ask the person to spell names or repeat them. This is better than taking down incorrect or incomplete information. Here are some tips for effective telephone communication.

1. Answer the phones as promptly and pleasantly as possible, ideally within two rings.
2. Use a definite salutation: "Good morning, ABC Eyecare. This is Laurie."
3. Develop a pleasing telephone voice and personality. Use a modulated and normal tone of voice. SMILE as you talk. Your smile is expressed through your voice. Speak slowly.
4. Be efficient. Do not interrupt, but lead the conversation to a pleasant close.
5. The telephone is for business. If personal calls are necessary, please limit these calls to 3 minutes. It is better to leave personal calls for when you are at home.
6. Avoid saying that the doctor is "busy" It can give the impression of "the doctor is too busy for you." It is better to say, "The doctor is with a patient at the moment; may I help you with something?"
7. Complete all pertinent information on telephone message forms, including the time of the call.
8. Have a pleasant closing on hand such as: "Thank you for calling, Mrs. Greene." Remember that a pleasant "goodbye" is more professional than a casual "bye-bye."
9. When using the telephone to arrange appointments, be positive. For example, you could say, "Dr. Brown would be available to see you at 8:00." Do not suggest possible objections to the patient such as, "We can see you at 8:00, or is that too early?" If the patient has objections to the time you offer, let them come forth with them. Then reply or rearrange the appointment if possible.
10. Using the patient's name, always ask the patient if they mind if you put them "on hold" and WAIT for the response before doing so.

11. Use the patient's name frequently in your discussion
 12. Never keep the caller on hold for more than one minute without checking back to let them know you are watching the line. If you expect a longer delay, offer to return the call.
 13. If a doctor calls asking to speak with one of the doctors, ask if the call is regarding a patient whose chart you could pull.
 14. When receiving calls from vendors or other business people, a good practice is to say, "May I give him your name?" Then refer the call to the appropriate person in the office.
 15. NEVER ARGUE WITH A CALLER.
 16. Before placing calls, have your information ready and know what you're going to say. Writing out a script or notes on information you should give or obtain is often very helpful.
 17. When taking calls, **listen** to what the caller is saying. Write it down. Repeat the message back to them. Concentrate on the task at hand regardless of distractions.
 18. Be equally polite to all patients even if they are unfriendly. Some patients are elderly and can be frightened by any visual changes. Try to put yourself in their place. A soft, kind word to them may reassure them and make the situation much more pleasant for both of you.
 19. NEVER suggest a possible diagnosis or reassure a patient that "they will not go blind" or make similar comments. Only the doctor is qualified to determine this regardless of how many years you have been in the profession.
 20. If someone has a complaint, do not interrupt them. Let them talk it out. Be very pleasant. Express concern with comments such as "I understand," and attempt to help them. Offer to find out what you can do for them and then be certain to follow through. Sincerely apologize for mistakes or inconveniences. (See Dealing with the Angry Patient)
 21. NEVER tell a patient, "I can't find your chart." If you are not able to locate the chart, tell the patient you will obtain the information they need and return their call. Then do so promptly.
 22. The bottom line for telephone usage is to always be courteous. The way you phrase things usually has an impact, such as:

"May I have your name, please," rather than, "What's your name?"

"What problem are you having with your eyes?" rather than, "What's your problem?"
- Remember, the person on the other end of the phone line only hears your voice. Please choose your words carefully.

The Concept of the “The Answer Book”

There is a right answer to every question a patient could ask. How do your staff members learn those right answers? Most often it is by trial and error. They receive their basic training and then are left to fend for themselves in finding answers to patient questions.

Even when they have the right answer, how do you know that they will choose the right words to make the response as professional as possible? If a patient were to pose the same question to each of your staff members, including you, would the answers always be the same?

An answer book is a manual that lists as many questions and answers as you can possibly think of regarding patient interaction. It's tedious to put together, but once you do it, staff have a training guide and a resource to refer to whenever necessary.

Here are few examples of how the book should look:

1. “Why can't I get an appointment to see the doctor sooner?”

Response: I'm sorry that we are not able to accommodate you on the date you would like. Dr. Jones has been so popular with his patients that his appointments are usually filled about three weeks in advance. I can put you on our cancellation list if you would like.

2. This bill is outrageous!”

Response: Please let me take a moment to review the itemized statement with you which will indicate what additional charges you have incurred and why. Then if you still feel the bill is out of line, I will be happy to share that with the doctor. (or office manager).

3. “How much does it cost to come to your place?”

Response: The charge for an exam is determined by the specific services we provide based on your needs. Generally, an initial exam will cost between X and Y. If you are needing corrective lenses or supplies, we have a wide range of products that can fit your budget. We do file claims with major insurance plans as well.

These are just a few examples of the common questions that staff are faced with daily. Many offices talk about an answer book but few take the time to make it happen. I guarantee it will revolutionize communication in your office. Make the time and start on it today. Be patient as you create it and add questions daily until it is complete. Review on a regular basis to make sure changes have been updated appropriately.

The Art of Cross-Training

Cross-training is the process of teaching staff to handle a variety of responsibilities beyond their primary duties in the office. For example, a receptionist may be taught to make minor frame adjustments. Or the clinical support person might be taught to make appointments and accept payments on accounts. More and more offices are heading toward this training format. It takes patience and the right combination of staff people to make it work. However, the benefits are great and the offices that I have worked with who feel they have mastered this skill have been very pleased with the results.

Advantages of Cross-Training

- Easier for all staff to see the big picture
- May find talents people have that were going untapped
- Career growth by knowing more
- Decreased departmentalization
- Much easier to shift work force to fill the need
- Possibly less staff needed

Pitfalls of Cross-Training

- Tough to find time to train
- Uneven pull of the load (staff find they like some tasks better than others)
- Task pickers
- Animosity or competition
- Job description confusion
- Downsizing may cause tension with those who stay

Empowerment

Helping the people who work for you to become successful is a great secret. Encourage your staff to grow by allowing them the power to make decisions on behalf of the practice. Here are some tools to help you learn how to empower people more effectively.

- Build a strong foundation by setting the example
- Establish boundaries (when can they make a decision and when can't they?)
- Create a communicative environment
- Don't be a "second guesser"
- Help people be successful

(See article on empowerment in section 6 of the handbook)

Building a Cohesive Team

By far, the number one question I am asked during my presentations is, “How can we get along better and understand each other more effectively?” My response? Consider your coworkers part of a “professional marriage” with all the same interpersonal skills required in matrimony.

1. **Learn to communicate.** Communication is a two-way street. Create an environment where any professional matters can be discussed without anger or resentment. Here are two simple ideas to improve communication.

- Communication board in a “non-patient” area that includes a calendar of when staff will be out of the office. There is no need to put the reason why a staff member may be out. Just enter the date and times so others are aware.
- Post memos on all policy changes or office issues. Each staff person must initial that they have read the document. When all staff have initialed the memo it is placed on file instead of being thrown away. Then if someone says, “No one ever told me about that!” you can produce the memo to remind them.

2. **See it from the other person’s viewpoint.** There are several views in the workplace. Owner, doctor(s), staff, and patient. Any problem you are trying to solve must be looked at from all sides before the correct answer is found.

3. **Trust, support, believe in each other.** The triple crown of a good relationship rests with these three points. Where there is no trust, there is no future. **Trust** is earned and maintained. If it is ever lost (by either side) it is difficult, if not impossible, to regain. **Support** each other to the fullest. Everyone in the office (including the doctor) must adhere to the office policies you have created. I am disappointed when staff describe a situation where they have tried to enforce a policy only to have the doctor “make an exception” at the patient’s request. This action is a BIG MISTAKE. Even though the patient is pacified, the staff have been undermined. **Believe** in the institution where you work and believe in each other.

4. **Share your goals.** This message is mostly for the doctor(s) and management team. If you know where the office is headed then it is best to tell everyone else so you “row in the same direction.” When managers ask me what they can do to help staff retention this is the first thing that comes to mind. No one wants to follow a leader if they don’t know where they are headed. Clue everyone in on the game plan (no matter how vague it may be) and let them know how important their role is in achieving that goal.

5. **Agree to disagree.** This is an important aspect to any relationship. When the sides do not agree, discuss things, consider compromises. If that doesn’t resolve the issue then formally agree to disagree.

Abbreviation List

A

ā	before
ABM	anterior basement membrane
AC	anterior chamber
ADL	activities of daily living
AK	astigmatic keratotomy
am	morning
AODM	adult onset diabetes mellitus
AR	atropine refraction
ARMD	age related macular degeneration
ASA	aspirin

B

BAT	brightness acuity test
B&C	beam and cell
B/L	bilateral
BD	base down prism
BDR	background diabetic retinopathy
bid	twice a day
BRAO	branch retinal artery occlusion
BRVO	branch retinal vein occlusion
BU	base up prism

C

ċ	with
ċċ	chief complaint
cc	with correction
CD	corneal diameter
C/D	cup-to-disc ratio
CF	count fingers
CL	contact lens
CME	cystoid macular edema
CNV	cannot visualize
c/o	complains of
COAG	chronic open angle glaucoma
CR	cycloplegic refraction
CRAO	central retinal artery occlusion
CRVO	central retinal vein occlusion

D

d/c	discontinue
DOB	date of birth
DOS	date of service
DR	diabetic retinopathy
dx	diagnosis

E

E	esophoria
EOM	extraocular muscles
ER	emergency
err	error
ET	esotropia

F

FA	fluorescein
FB	foreign body
FBS	fasting blood sugar
F&C	flare and cells
F&F	fix and follow
FH	fissure height

G

gtt	drop (fluid)
gutt	guttata

H

H/A	headache
HBP	high blood pressure
HM	hand motion
HO	history of
hs	at bedtime
hx	history

I

inf inferior
inj injection
inst instilled
IOL intraocular lens
IOP intraocular pressure

J**K**

k keratometer
KCS keratoconjunctivitis sicca (dry eyes)

L

LLL left lower lid
LP light perception
LXT left exotropia

M

M manifest refraction
MD macular degeneration

N

NVA near vision
NA not applicable
nas nasally
neg negative
neo neovascularization
NI no improvement
NKA no known allergies
NLP no light perception
nml normal

O

OA open angle
OD right eye
ON optic nerve
OS left eye
OU both eyes

P

\bar{p} after
P2.5 phenylephrine 2.5%
PAM potential acuity meter
PC posterior capsule
PCN penicillin
PDR proliferative diabetic retinopathy
PF pred forte
PH pinhole
PHACO phacoemulsification
pilo pilocarpine
pl plano
po by mouth
p/op postoperative
prn as needed
PVD posterior vitreous detachment

Q

q every
qd once a day
qid four times a day
qod every other day

R

RAPD relative afferent pupillary defect
RD retinal detachment
R/O rule out
Rx prescription

S

\bar{s} without
 \bar{sc} without correction
S/P status post

T

Ta tonometry by applanation
temp temporal
tx treatment

U

ung ointment

V

VA visual acuity

VF visual field

WXYZ

WC worker's compensation

W/C will call

WNL within normal limits

X exophoria

XT exotropia

YAG yttrium aluminum garnett (YAG laser)

Time Studies

Many offices ask me for tips on how to maximize the “flow of the office.” This can be a challenging problem since the answer is hidden between moving targets that change daily. The staff load, patient mix, doctor attitude, and the nature of the chief complaints all are factors in determining the ease of flow.

However, the first thing you have to do in trying to solve your own flow problem is to track the patient’s experience in a very literal way -- with a team of wrist watches! The time grid below is just a basic example of how you can map out the encounters of your patients. It is important to pay attention to the following key issues before you start this type of project:

1. Track several days in a row, not just one random day.
2. Pick a “typical day” in the office. Do not choose your busiest or slowest as it will not help you find the trouble spots as clearly.
3. Design a grid similar to the example below using column headings that represent your major check points in the office.
4. All staff persons need to synchronize their wrist watches so that when you touch the chart the time you record is as close as possible to the same time as your team members. I’ve even seen this task done with stop watches but that seems a little extreme.
5. Attach the strip of paper to the top of the chart and each person who interacts with the patient will document the time of care according to the logical order
6. When the visit is over, remove the strip from the chart and place in a location to be reviewed with the others at a later time.

When you have accumulated many of the data strips, investigate the areas where too much time is being spent in relation to the task. For example, if patients are waiting fifteen minutes longer than acceptable for the pre-tester to begin his/her work, there may a bottle neck that needs fixing. Note whether this type of problem happens on a regular basis or only at certain times of the day. Discuss with staff ways that the flow could be made better. Review the tasks you are doing at each station and notice if there is duplication of tasks or unnecessary rules. If there are places to make things more efficient then change them!

The most dramatic example I ever saw with this tool was in an office where I worked for many years. We found that the average length of time it took our new patients to fill out the admission forms was 25 minutes! We changed our admission form to a check-box style format and immediately decreased that time to 11 minutes. We later began mailing them out to patients prior to their exam and decreased the time even more! Amazing what a simple time study can do to increase your efficiency and your patient satisfaction.

Date _____

Pt Name	Check-in	Pre-test	Tech start	Tech end	Ready for doc	Dr. starts	Dr. ends	disp	check-out	Total
Jones, A.	9:13	9:30	9:45	10:00	10:20	10:30	11:00	11-11:30	11:25	2H,12m

Twenty Ideas to Reward and Appreciate Your Staff

No Cost Ideas

1. On a rotating basis post the personal bio and family pictures of a staff member for patients to see. Place a quote from each doctor about that staff member. Be sure you feature each staff person on a rotating basis. If you cannot decide who to do first, consider posting in the order of their anniversary with the practice.
2. Consider a “dress in jeans” work day once in awhile. Post a sign to patients that says that your staff is being rewarded for work well done by dressing casually.
3. Write a note of appreciation to each staff member and send it to their home. Be sure each one is original in the wording because often times they share!
4. Start a letter of appreciation to the staff and then write a sincere compliment to one staff person. Give that paper to them to read and then ask them to add a compliment about someone else and pass it along on to someone else. By the time the page has rotated through the staff everyone will be feeling a sense of increased appreciation. (Be sure as the doctor you start out by complementing the entire staff.)
5. This idea came was contributed by an office staff who attended a program of mine at the American Optometric Conference in 2002 - “The best thing our doctor ever did to reward us was use his Saturday off to hand wash our cars!” - Great idea Doc!

Low Cost Ideas

6. “Smiley Coupons” are small yellow pieces of paper with a smiley face in the middle and a space for two names. When a staff person sees someone doing something nice for a patient or coworker, they describe the act on the back of the paper. They put the name of who they are giving it to, along with their own name. Those are displayed by the receiver in their work area. Once a quarter, all slips are put in a hat and a ticket is drawn. Then giver and the receiver both win a prize of some kind. There is no limit to the number of coupons a staff member can receive!
7. Purchase several instant lottery tickets and at the end of a particularly good day, congratulate the staff and pass one out to everyone. Say something sincere like, “I want you to know how important you all are to the success of this practice.”
8. On a staff person’s anniversary with the practice, buy them a corsage or boutonniere to let them stand out from the rest all day.
9. Offer to have a “happy hour” (no alcohol required) after work at your home. By inviting staff in for munchies and fun you may be surprised at how much bonding can take place.
10. Place vendor gifts in a box throughout the quarter and allow staff to “take their pick” at a staff meeting. Draw numbers to determine order.

Moderate Cost Ideas

11. Provide a bonus based on sharing practice profits. Set specific goals and reward the success of the staff with a certain percent of net profit. Cut checks on a quarterly basis.
12. Bring in a chair-side masseuse for one day and reward each staff member with a five-minute neck massage.
13. Plan a staff retreat away from the office. Fill the day with fun, food, and learning. It's a great experience. (Not sure how to make that happen? Give us a call. We specialize in retreats!)
14. On a day when you are not swamped with patients, surprise a staff member and tell them to go home an hour or two early and pay them for their time. (Be sure to rotate that reward and warn staff before the first day you do it so as not to offend those who don't get the first reward.)
15. Survey the staff for a list a "things for the office" that would make their job easier. Once a quarter buy one of the things on the list and make to show them you are responsive to their requests when the budget allows.

Words instead of gifts

16. Compliment your staff in front of patients.
"Mrs. Jones, this is Sue and she does a fantastic job with frame selection so I am going to leave you in her expert hands." (Patient has confidence; staff feels important.)
17. Ask for help when you need it.
"Sue, I've been having trouble coming up with the theme for the next open house. Since you are so creative would you mind taking that project on?" (More likely to get a positive attitude.)
18. Start every meeting on a positive note.
"Well everybody, we have had a terrific quarter. Let me show you a few of the ways that I have noticed what a great job you are all doing." (People like coming to meeting when they know they are going to be publicly complemented.)
19. Consider pitching in on their work.
"I'm done early, can I help you with the filing?" (Yes I know, this never happens in an office. But think of the impact it would make if it did.)
20. Triple Greenlight Rule.
Before you get ready to say anything, ask yourself three questions: Is what I am about to say necessary, is it truthful, is it without hate? (You'll be amazed how often the answer is no and you avoid something you would have later regretted.)

Have you got a great idea you'd like to share with others? Email us your concept and we will add to our list of "Best Kept Secrets from Others." Email info@careercafe.biz. Remember, a little idea can go a long way!

Retreats

What is a retreat?

A retreat is a chance to get away from the office for a day or portion of a day with your entire staff. You can choose to work on problem solving, training, improving communication, all in a fun and relaxing atmosphere. Many choose to use a retreat as a time to plan for future growth and prepare for changes in the coming year. A well-planned retreat can produce huge benefits while at the same time providing your staff with a day that is a real TREAT!

The practices I have worked with that have made a commitment to a retreat have been ecstatic about the results. Being away from the office helps avoid the constant interruptions and distractions. The uninterrupted time also allows indepth discussion of ideas and plans that can't happen durin daily business. The investment in a retreat also shows your staff that you consider them an important part of your practice and an integral part of your joint successful futures.

There are many ways to go about planning a retreat. Retreats can be planned by the doctor or an office manager. [See next page for more details.] Retreats can also be prepared and planned by a facilitator who can do all the work for you. The doctor(s) and office manager will meet with the facilitator to determine the major issues and goals of the retreat. The facilitator then plans activities and presentations specifically designed to reach the desired goals. Each method has its own advantages and disadvantages. Let me highlight a few key considerations.

Do-it-yourself Retreats

- Lower cost
- Complete control
- Can be done more often
- Staff can be actively involved in the planning and presenting

Facilitated Retreats

- Limited pre-event time required by you
- Proven exercises and content geared to meet your needs
- Sharing of ideas from others in your industry
- Facilitator is often able to see barriers and opportunities that go unnoticed by staff
- Entire staff experiences more of a "treat"

Where to Start

If you want to consider a facilitated retreat, contact us at 815-758-5580 and we will send you an information packet to help you get started toward a fun and rewarding retreat.

If you would rather try a Do-It-Yourself Retreat, see the next page for some guidelines.

Do-It-Yourself Office Retreat

Before you begin to plan your retreat, you need to determine your purpose. Since you can only deal effectively with two or three main issues, limit the scope of your plan. Choose those topics that can benefit from the attention of the entire staff, or address specific concerns that affect your practice. Know what you want to accomplish before you begin so that you can structure your time and staff energy appropriately. Then, follow these steps to prepare for an awesome office retreat!

Step One: Make the decision to invest in your practice.

- Pick a date at least eight weeks in advance.
- Determine your budget.
- Secure a site. Do NOT attempt to have the retreat in your office!
- Make arrangements for meals and snacks.
- Notify staff members of the date and let them know that their attendance is required!
- Doctors must set the example by positive anticipation and by attending the retreat.

Step Two: Now for the details.

- Choose a theme for your retreat.
- Plan an agenda including planning sessions, activities, and breaks.
- Assign staff members specific duties to help with preparation of information for the retreat.
- Seek input from the staff concerning issues they would like to see addressed at a retreat making it clear that everything can't fit into one retreat.
- If your retreat is planned for a day your office would have been open, post a sign notifying patients that you will be unavailable that day while your staff prepares to better serve them.

Step Three: Retreat Day!

- Start the day off with a fun exercise or game giving people a chance to warm up.
- Treat your staff all day long; serve snacks, prizes, and other fun rewards.
- Stay focused on the agenda and keep on time. However, if something is going really well, realize that you can make the decision to pursue that issue regardless of the reward.
- Encourage participation and welcome any comments with an open mind.
- Find ways to vary groups of people. Avoid the same people hanging together.
- Make time for evaluation at the end. Have a prepared form with some specific questions.
- Always end with a reward for each person. The could be a token gift or cash bonus.

Step Four: Now what?

Make sure you go away from your retreat with a plan to implement at least several of the ideas developed during your retreat. This will help everyone leave with a feeling of accomplishment and pride in their participation. It will also leave your staff eager and ready to prepare for their next retreat. Staff members once convinced they are a key to the success of the practice will enthusiastically support improvements and changes they helped devise. You will be amazed at the benefit your practice and staff will receive from an office retreat!

Advice to Staff

Pull Your Load.

When someone is having an off day, pull their load too!

Worry about yourself and your tasks.

Believe in your doctor(s) and the practice, speak well of them always.

Every decision you make and every action you take needs to be in the best interest of the patient and practice.

Advice to the Doctor

Your attitude sets the tone.

Make changes quickly and never more often than necessary.

Clean out deadwood.

Rebuild with career-minded people.

SHOW APPRECIATION REGULARLY!

Advice to Managers

Be fair.

Empower others.

Surround yourself with good people.

Read the need. (Help with patient care when it's busy, do office work later)

Work the hours and share the bad hours too.

Advice to All

Memorize the 12 Steps to Dealing with the Angry Patient

(see appendix for reproducible flyer)

DECISION MAKING

These tools can help make decision making easier for your team. When trying to take action on tough topics use the grid on the next page and consider the following thoughts:

Column 1 - Write down the problem you are trying to analyze. Be specific. For example, don't state "Low patient volume" instead state "Need to increase patient volume by X% during the next quarter."

Column 2 - Indicate the possible causes for the problem. Be specific. For example, "Other office in town started an aggressive marketing campaign and we are currently not competing well."

Column 3 - List all the possible solutions. Do not limit yourself at this stage. ANY idea should be written down even if it is not feasible. Be sure to list the pros and cons of each solution.

Eliminate any solutions that have consequences that are extremely detrimental to the practice. For example your possible solution may be to increase office hours and be open every evening. The con of this solution may be that staff choose to leave the practice if the hours are unacceptable to them. This would be detrimental to the practice and may need to be modified to one night per week or find additional part-time staff who desire evening hours.

Column 4 - Rank the rest of the possible solutions in order with the most desirable and/or most effective first. Take the cost and benefit factor into consideration. Now choose the best solution.

Column 5 - Delegation is the key to successful decision making! If it is a small task, delegate it to one person. If it a large time consuming project, break it into bite size pieces and delegate to several people.

Column 6 - All the delegated tasks need a deadline date attached it them. For example "Mary Jones is in charge of finding out the current prices on newspaper advertising for the new campaign we are going to start. She will have a price list from both local papers by our next meeting on (date). Remember, no deadline means "do when you get a chance" and often times there is never a chance so the job doesn't get done.

Column 7 - What expectations do you have as a result of your actions. Be as specific as you can. For example, "We expect an increase of 2 new patients per week within one month of the advertising start date." Set realistic expectations.

Column 8 - Follow-up (FU) and Monitor (M) means to make sure that after the change has been made that you check back and see if it made a difference. Did it solve your original problem? Are there new causes to consider? Is there a better solution that was missed? Was it delegated to the right person and are they doing a good job? This is especially important when the delegation is made to a person outside the office team like an graphic designer or a contract of some kind.

Finally, when you make a decision on any matter in the office, keep your staff informed. Make sure that part-time staff are aware of the change and their role in the change if applicable.

INCIDENT REPORTS

Despite our very best efforts and intentions, there are times when things happen that we wish hadn't. Those "things" range from errors on orders to long waits before an exam, a fall in the waiting room, or perhaps an error on a bill. It is unrealistic to think that we can ever avoid those kinds of problems, but it is essential that we do everything we can do avoid repeating them.

An Incident Report is an internal communication tool that helps record, track, and avoid repeating any sort of negative incident. Essentially a simple form is created that includes several critical pieces of information: the date, the nature of the problem, the people involved (staff and patient), and the course of action required or taken. The form should also clearly indicate how the problem was resolved and if policy or procedures need to change. [See example on next page.]

As the reports are gathered and reviewed, it is important to notice trends. For example, if you begin receiving complaints about late deliveries on glasses, you need to determine where the problem exists. If, on the other hand, you only have one complaint all year regarding the long wait for the doctor, you can feel relatively confident you don't have a real problem in that area.

It is essential that all your staff understand that the purpose of the report is to improve service to the patients. It should never be seen as a tool to record and reprimand staff performance. If staff members can see the reports used to review procedures within the office and improve customer service, they are likely to participate eagerly.

One of the reasons I feel that Incident Reports are so important is that many office have part-time staff. This means that one patient complaint could actually be repeated several times before anyone may be aware of the pattern because of the rotating staff. Incident Reports help track patterns and solve problems before they negatively affect the practice.

Incident Report

Date of incident: _____

Nature of the incident: complaint accident/fall staff issue grievance other

Patient involved (if applicable)

Name of Staff Involved

Name

Address

City/ST/Zip

Phone

Describe what happened including date and approximate times of incident: (see reverse)

Course of action:

Is policy change or creation necessary as a result of this incident? yes no

Has the matter been closed with all parties involved? yes no

If no, what needs to happen in order for it to be closed?

Signatures of all staff involved:

Doctor(s) and Manger reviewed _____
date

(Reproducible pages located in appendix, chapter 5.)

Steps to Creating a Market Plan

I am amazed how many businesses continue to function year after year without a strategic market plan in place. Take the time to make a plan for your company. Most people find the task of creating a “business plan” daunting and unless you were forced to create one for your banker, you most likely jumped into business without taking the time to plan for its success. One of the most crucial parts of a business plan is the section entitled “Market Strategy.” The following template is just a basic outline of the questions you should ask yourself as you develop a detailed market plan.

Defining Statement: One sentence that “defines” your office. (Different than a mission statement)

History: This outlines the history of your marketing efforts since the practice opened. Make note of dates, strategies used, and the result of the efforts.

Current Status: Bullet points that outline the current situation at the office. Include the positives and negatives of the product(s) and service(s) you intend to promote. Remember to include issues like your location, market served, specialities provided, staffing issues, and practice set-backs.

Goals: Divide the goals into bite-size pieces. Try to separate your thoughts into logical, realistic increments of time. Often people choose to outline the 6 month, 1, 3, 5, and 10 year goals.

Financial Outlook: Same process as noted in “goals” but focused money issues.

Strengths: List the attributes and factors working in favor of your success.

Weaknesses: List the areas of challenge and ways to lessen or improve them if possible.

Opportunities: Focus on the circumstances that may provide the environment for practice growth. For example, a trend for population growth, a new industry development, a new product that appeals to your market, etc.

Threats: Study the other offices in your market zone and list their strengths and weaknesses as well. Then take a look at the overall state of your industry, future trends that could jeopardize your product/service, and the economical state of your community.
(The four headings above are commonly called the “SWOT Analysis” and is a simple, yet beneficial way of looking at the middle steps of a market plan.)

Market Strategy: This is a list of the possible ways the goals and financial benchmarks can be achieved. The list should include advertising concepts, special promotions, trade/health fairs, networking, media exposure, as well as internal and external marketing ideas.

Timeline: Place the strategy list in a logical sequence of time. Be sure to give yourself deadlines and try to delegate responsibilities whenever possible.

10 Easy Ideas for Sales and Promotion

- 1. Create a “theme of the month”** and package your items in a kit with additional items to make it special. The kit can include the traditional give-a-ways like lens cleaner/cloth and case. Think about adding a small extra bonus like a coupon for a local restaurant or service. There may be other business owners who would be happy to team-up with you to provide the coupon at no cost to you. It is great marketing for them too! Be sure the kit is placed at a focus point of the office and ALWAYS include a deadline for purchase. If it is a monthly concept than the last day of the month is logical choice.
- 2. Trunk Shows.** Many offices have tried and failed in this category. I worked with one office however whose experience was quite the opposite. Then invite 3-4 vendors to showcase their goods in exchange for one free frame. They choose a theme and spend months getting everything in order. They serve refreshments, and have helium balloons fill the ceiling that include discount coupons for purchases as well as the coupons for the free frames given by the vendors. They have made thousands of dollars at each of their shows once they learned it had to be more of an event than a sales tool.
- 3. Staff promotion.** Purchase business cards for each staff person and allow them to write 20% on the back of the cards and initial them. They should distribute these to people they come in contact with and then collect the cards turned in. At the end of a time period add up all of the net revenue from the cards and give a percent to the staff as a bonus. Your best form of advertising is word or mouth and your staff have mouths!
- 4. Patient promotion.** Your patient’s have mouths too! When someone thanks you for a great job be brave enough to ask them to send their friends! Then when a referral comes in take the time to give thanks, a token gift, or a discount on one of their future visits. I worked with an office where the doctor gave 10% off the next product purchase for every new patient you referred. You could accumulate the discounts up to full value of any frame. He felt it was well worth the investment. By the way, he is a very successful optometrist with NO media advertising.
- 5. Public Education.** If you are in a smaller community, offer to write a column for your local paper on eye diseases and treatment. Be sure to include a small black and white photo and contact information at the bottom so people know how to find you!
- 6. Radio program.** For two years I had a half-hour talk radio program about eye diseases and treatment. Each week I would invite a different doctor to visit and I would use a list of prepared questions to focus on one particular area of the eye. People listening would call in to ask questions and we even had a multiple choice quiz question for gift certificates to local restaurants at the end of every show. It never ceased to amaze me how many people were actually listening and would call the doctor afterwards for additional information.
- 7. Vision screenings.** There are many state regulations regarding screenings so be sure you have checked all the rules and follow them closely. However, when done correctly, this is a great opportunity to meet potential new patients. Set up times to visit senior centers, meet-and-eat sites, banks, and other places where seniors are the focus.
- 8. Create a fun environment.** People want to do business with people they like. We have an advantage in eye care in that for the most part the people who need our services can experience fun while they are there! This is rare in health care so take advantage of it! Make your office a place people WANT to be. If children are included in your market plan be sure your office caters to their needs. When dealing with kids you have TWO customers -- the parent and the child!
- 9. Be creative.** Ask yourself, “What is that we can do that no one else in our area is doing?” Several offices have told me that they started doing home delivery and house call adjustments at places of business. Both are very unique ideas and helps to build customer loyalty. Be sure as you develop your creative ideas that you process the cost vs. benefit factor and make sure the idea will ultimately help the bottom line.
- 10. Ignite the old warm leads.** Marketing experts say it costs significantly less to retain a patient than acquire a new one. That makes sense to me. Yet most people who ask for marketing help are determined to create “new patients” and turn their back on trying to retain the old ones! Take a look at your patient records and evaluate what percent of them have not returned in the last three years. If it is a high number, you have work ahead of you! Send a simple postcard mailer with “address correction requested” as your first step to update your mailing list. Returned cards with expired forwarding order will tell you they have relocated (possibly out of your region). For others who have moved recently, you will obtain their new address. Step two is to send a letter (keep it very short) that invites them to return, educating them about the importance of regular exams and including a coupon for product. There are so many choices in the industry that sometimes if you don’t ask them to return, patients can easily find somewhere else to go!

Bull's Eye Approach to Strategic Marketing



- Step one:** The very center of the target is your generic product or service. *What is your business?*
eyecare
delivery of exam, diagnosis, treatment, product sales
- Step two:** The next ring is your expected product/service. *What does the patient EXPECT from you?*
accuracy
speed
friendly
fair price
one time delivery
knowledgeable doctor and staff
- Step three:** The next ring is your augmented product/service. *What do you currently do for the patient that is considered "value-added."*
free adjustments
lens cleaner/cloth/case as a gift with purchase
extended hours
variety of discounts and specials
- Step four:** The outside ring is your potential product/service. *What COULD you be doing to enhance the patient's experience that no one else is doing?*
The secret is to think very creatively and don't let yourself be stuck with the same old ideas. Successful entrepreneurs try odd ideas and keep "tweaking them" until they discover something that makes the product/service unique.