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# How to Hire Office Staff that
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## "The front of the office is patients' first and last impression,"

says Kenneth Hertz, a heathcare consultant. And the quality of these patient experiences depends on ordinary, daily exchanges between patients and office staff. This is a fundamental truth of medical practice, but many physician groups have yet to reckon with it.

The place to begin that reckoning is with the hiring of top talent for every position from the reception desk to the back office.

But the path to fielding excellent office staff is packed with challenges. You've got to identify high-potential job candidates. Vet them carefully – while selling them on the career opportunity. Hire quickly – but without resorting to "filling seats with warm bodies." Onboard new hires thoughtfully. And finally, nurture each staff member to keep them happy enough to stay with your practice for years to come.

We've assembled experts to give advice on these steps – and to discuss how smart deployment of digital tools can improve both staff engagement and patient satisfaction. But first, let's enumerate all the reasons patient experience matters.

### Staffing is all about Patient Experience

In this era of high deductibles and consumer-driven healthcare, satisfying the expectations of patients is more important than ever.

"The entire patient experience is critical for many reasons," says Hertz, who is a fellow of the American College of Medical Practice Executives.

Healthcare consumers are taking their business to practices – not just doctors – that deliver empathetic, competent and convenient care. And CMS is paying attention to patient satisfaction survey results. Even

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private health plans are gravitating toward offering financial incentives to group practices to improve patient satisfaction, says Peg Board, director of operations at San Dimas Medical Group in greater Los Angeles. San Dimas specializes in obstetrics, gynecology and other health services for women.

What does this mean for a physician group? From the moment a new patient receives a referral, to the encounters where they receive follow-up diagnostic results and pay what they may owe, every staff member has a role in optimizing the patient's experience. In addition to clinicians, that experience will be in the hands of everyone from receptionists, schedulers and office managers to coders, billers and collectors.

Patient experience is also critical to word-of-mouth referrals, and that powerful demand driver is multiplied by social media. "Patients are our No. 1 marketing tool," says Anthony Schirer, MBA, executive director of Cheyenne OBGYN in Cheyenne, Wyoming.

But not all physician practices give due weight to the nonclinical workers who shape so many aspects of patient experience. Doctors may harbor the notion that "office staffing is not what I do," says Hertz. "So we often hear, 'I love my doctor, but I hate his office staff.' " Such sentiments should be taken to heart by medical practices, because health consumers have choices, and retaining patients is critical.

Engaged employees make all the difference. "You have to have a culture of empowerment, give them authority to make decisions on their own," says Schirer. "We make them part of our process improvement. They're free to speak their minds." Office staff need to hear from the clinicians they support that their interactions with patients are critically important.

### The Tight Market for Tech-Adept, People-Friendly Office Talent

The relationship between supply and demand for medical office talent varies by geography and other factors. But the strong economy poses hiring challenges everywhere.

In many major metro areas, competition for qualified workers is fierce. "The market for office staff is pretty competitive," says Board of San Dimas. As more physicians go to work for hospitals, "some office people have been recruited away for much better benefits."

A tight labor supply requires managers to plan realistically with respect to time- to-hire. "It might take a month to find someone like a billing manager, but we don't end up short-staffed," says Olga Brooks, chief administrative officer for Delaware Center for Digestive Care. DCDC's 22 physicians specializing in gastroenterology and hepatology are supported by a staff that includes seven office managers, eight receptionists, 25 billing and collections workers, 20 schedulers and seven employees doing chart prep.

Some managers say it's increasingly difficult to find committed office staff who will truly engage with patients. "It's become more challenging to find someone who really wants to invest in our company," says Monique Clarke, administrator at Freedman Memorial Cardiology in Alexandria, Louisiana. Freedman's four physicians employ four front-desk staff, two specialists in precertification, a medical records person and an administrative assistant. Billing, collection and scheduling are outsourced.

There's a consensus that — with the likely exception of highly trained coders — good communication skills are harder to find than the ability to learn digital tasks. "I recruit more for people skills and we train them in the technical skills," says Schirer of Cheyenne OBGYN.

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"I have had a challenge finding a certified coder — that's a shortage in this area," he adds. The practice has six physicians, three front-desk staff answering the phone and scheduling, and three more workers doing preauthorization, checkout, coding, billing and collections. "We've tried to grow our own certified coders, and it does take them a while to learn."

**The Fundamentals of Medical Office Hiring**

It's hard to overestimate the importance of the basics of medical office hiring, but many practices do fall short, Hertz says. "It's critical to have a clear idea of what you're looking for, a position profile" or job descriptions.

**Hertz suggests these hiring best practices:**
- Continuously reevaluate how you source candidates
- In job interviews, use a fixed set of questions
- Engage a human resources professional to train everyone on the hiring team
- Offer a cash reward to staffers who refer a successful candidate
- Be open to candidates who are quick learners and have customer service and other relevant experience, even if they have not worked in healthcare

**How to Source Quality Candidates for Office Positions**

The managers who hire for physicians' offices have many choices when it comes to sourcing channels for candidates.

*Job boards and their aggregators, and career pages:* "Indeed.com has gotten a good response for us, as have postings on our web sites, as well as word of mouth," says Board. Sites like Glassdoor, Indeed, Simply-Hired and LinkedIn Jobs offer access to millions of candidates. If your practice's web site lacks a careers page or hasn't updated that page in years, it's time.

*Social media:* "I look at a candidate's Facebook page and I do check references," says Clarke. She tried recruiting via the practice's Facebook page, but the applications received were "less filtered than I wanted them to be." Ensure that all appropriate background checks are performed before extending an offer. But don't automatically rule out everyone who has the slightest mark on their record; good people can make mistakes and go on to achieve great things.

*Employee referrals:* Applicants referred by current employees often succeed if they're hired; after all, the referrer knows both the job and the candidate. But consider that "enrolling your current staff in recruitment efforts is likely to bring you candidates similar to the people you already have," says Hertz. This can be beneficial if you already have good people — but beware the danger that everyone on your staff is too like-minded. A lack of diversity — cognitive, racial, ethnic or by gender — is a potential drawback of employee referrals.

*Partnerships with educational institutions:* Consider how you might create a talent pipeline by establishing relationships with educational institutions. "We've done externships with local colleges," says Board.

*Sourcing in the wild:* "The last few hires that I've done, I literally found them by watching workers from afar, including someone working at a service station," says Clarke. She says she can spot good customer service skills quickly, and that these skills often are transferrable to a medical office environment.

**How to Weigh Candidates' Tech and Interpersonal Skills**

Hiring managers tend to be comfortable with the digital skills and experience of many of the candidates they consider for most office staff positions.

"Twenty-somethings know computers even if they don't have college," says Clarke. "They catch on really fast, even with the complexities of EHRs. The hard part is teaching them how to interact with people, their communication skills."

However, Brooke comes to a different conclusion regarding the tech requirements for candidates for positions with substantial charting responsibilities. "In the interview, we make it clear that if you don't have EHR experience, we can't hire you," he says.

But there is a strong consensus that interpersonal skills, from communications to customer service, are paramount as well. "No matter how good your tech skills, if you're not aligned with the vision and values of the practice, you're not going to be a good front-desk person," says Hertz.

Some organizations choose to hire for interpersonal skills, subsequently training new-hires for position-specific technical skills. However, when the tech requirements are substantial, it is imperative to evaluate the resource requirements for training people skills in lieu of hiring individuals with those traits.

**The good news is that if your practice has implemented efficient digital tools for the office staff** – *for scheduling, check-in, patient engagement before the appointment, and so on* – **your staff can find the time to train on their communications skills.**

**Set Realistic Expectations During Interviews and Onboarding**

It's vitally important that your hiring process shows candidates what the job is like, day-to-day.

DCDC's candidate selection process includes staff shadowing, where the prospective employee spends half a day with a team member, giving them time to observe and assess each other, Brooks says.

At San Dimas, Board works to ensure that candidates understand the fast pace of the job even before they consider an offer – and that they'll be expected to put the patient first regardless of how busy the office is. "San Dimas is high-volume; we see 400-plus patients per day," says Board. "So you're going to be hopping at times." With 13 physicians, the practice employs 12 call center workers doing scheduling, generating messages to clinicians and refilling prescriptions. About a dozen more workers handle medical records, coding and billing.

Hiring best practices don't end with the new employee's first day on the job. As part of onboarding, DCDC's new hires are assigned a mentor for their first 3 weeks. A manager also meets with her new employees each week for the first month to check in and ask how the practice can help the employee better meet patient needs.

**Training and Professional Development are Key to Patient Satisfaction**

Medical offices take a variety of approaches to staff training, depending on their size and the financial and human resources available. But they share the goal of fully preparing workers to give patients the best possible end-to-end experience.

At Cheyenne OBGYN "most of the training is in-house, our own experienced workers passing on information" to new hires who typically arrive with some experience, says Schirer.

San Dimas tries to start a batch of new hires on the same day. For the first 3 or 4 days, the new employees sit with trainers in a training room, to get acclimated to the EHR and practice management systems. Each trainer specializes in reception, billing or call center. Board finds that "training on patient data is the most effective, so we go back and forth between the training room and working with patient data."

At DCDC "we use online customer service training," says Brooks. The interactive program covers issues such as how a front-desk worker can continue a patient interaction seamlessly when they need to look at a computer record. Other practices send workers to community college for classes in customer service or ICD-10 coding, for example.

Training shouldn't end just because a new employee's orientation is complete. "Whenever there's a big change in a digital system, we want everybody to get comfortable with it ahead of time, so they don't get frustrated and quit," says Brooks. So when major revisions to the EHR are coming, the staff is given days to practice before the changes go live.

But professional development should extend beyond routine training. "We're a small business, not owned by a corporation, so I can cross-train," says Clarke. "I've moved people up through the company and given them the opportunity to grow."

**Ensure that Compensation is Competitive**

High turnover shouldn't come as a surprise to practices that merely pay their office staff as little as possible. As with physicians and nurses, it's best to determine staff compensation using market data.

"I base salaries on the MGMA [Medical Group Management Association] survey, so they get decent wages for what they're doing," says Schirer.

Diverse sources of salary data are available. "I do research on Salary.com, Glassdoor and with our local medical society," says Brooks. DCDC's compensation committee reviews benefits each year to make them more appealing to employees — for example, by pitching in more for the health insurance deductible when it increases. The practice also has profit-sharing and is considering awarding incentive bonuses based on team performance.

**Make Your Practice an Employer of Choice**

The engagement and satisfaction of your current office staff is the key to retaining them — and to making quality hires when the need arises.

"I try to build a culture that people will talk about," says Schirer. "My goal is to have a waiting list of people qualified to work here. Even if I'm not hiring, they'll call me up or send their resume and come in and talk." It's important to give your office team regular feedback on how the customer service that they provide is received by patients. "We read patient comments at monthly staff meetings, as a form of employee recognition," says Board.

Feedback from leadership — both clinical and administrative — is also critical to fielding a staff that meets patients' expectations. "I tell them how important their job is," says Clarke. "That motivates them to work hard for me."