"I'd Rather Do It Myself!"

It's important to understand why—and then how—to delegate.

BY LYNN HOMISAK, PRT

To Our Readers: *There are no foolish questions. Chances are that if you have a question or concern in your practice, others are experiencing a similar situation. We're here to help. PM [doctor and staff] readers are encouraged to submit questions to lynn@soshms.com which will be printed and answered in this column anonymously.*

Subject: "I'd Rather Do It Myself!"

Dear Lynn,

I'll admit I'm a little leery about delegating tasks to my staff. Rationally, I know if they are given the chance, they can handle more responsibility; I just have a problem letting go. If you could share your secrets of successful delegation, I might be inclined to give it another try.

The "secrets" start with knowing WHY it's worthwhile to delegate; then we can make clear knowing HOW. Let's begin with the why.

Take orthotic dispensing as an example. Currently, this might be a task you are reluctant to delegate, mostly because you maintain that it only takes you ten minutes and likely would require double the time (twenty minutes) to train your staff. So, you point out that you're actually saving ten minutes by doing it yourself. Yes, if that was the ONLY orthotic dispense you ever plan to do, you would be correct. In a one-dispense scenario, there is a net time savings of ten minutes.

What if instead of one dispense, however, you had three that day? If you were to personally dispense each pair, you're now spending thirty minutes, compared to the ten minutes you could have saved by training your staff. It still doesn't seem like a lot? Moving along, now tack on a ten minute savings each time your trained staff repeats the task and over time, you will find, as all physicians do, you can use those saved minutes/hours to accomplish more of your own revenue producing procedures that only licensed doctors are permitted to do.

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Admittedly, letting go is difficult, but difficult is not the same as impossible. It can be extremely beneficial to leverage your time and efforts by assigning lower priority/skilled tasks to staff and using them as a valued extension of you.

It's important to have a well-thought-out plan before designating jobs at random and understand that proper delegation is more than just assigning work to someone else. It's not only letting go of a task; it's also transferring the decision-making responsibilities along with it; making sure the person is capable of the job and transferring the task in such a way that the assignee is granted full ownership of it. It is about empowerment and trust in your people. As for the HOW:

• Decide on which tasks to delegate—Not everything can (or should) be delegated. Begin by carefully selecting those jobs that can be effectively taught and which you are personally comfortable letting go of. Start small, then gradually develop your staff according to your mutual comfort.

• And WHO to delegate to—Review your employee skill sets and match their strengths and demonstrated skills to their job responsibilities. Expect some mistakes at first, remembering that errors (and knowing how to correct them) are components of learning and development. You are the teacher/professor/instructor/coach. Choose the candidates you think will succeed for your practice and for themselves. With your direction, patience, and guidance, they will surely handle the new assignment with more enthusiasm and confidence.

• Clarify and manage the job—Provide a complete and accurate description of the job they are being given. Is there a deadline so they

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can effectively prioritize their duties? Make available the necessary resources, tools, and coaching that allow them to achieve a successful outcome. Just because you have assigned a task to them doesn't mean you shouldn't stay involved. Review progress and provide needed supervision, and be careful not to micromanage. Micromanaging (aka nit-picking, controlling, breathing down someone's neck, meddling, interfering) limits independent thinking and creative ideas.

• Be open to a different approach. While it may be painful for you to accept at first, allow them to take an alternate path to achieve the result you are seeking and keep in mind that a new method might be an improvement.

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• Provide incentive and praise, and reward the action, especially for a job well done. Everyone likes to feel appreciated, right? When praising, be specific; don't just mumble "nice job" as you pass by. Instead, spell out what in particular they are being commended for by saying, "Mary, the patient history you took today was very thorough. Well done. Keep up the good work!" Appreciation is the ultimate morale builder. Consider also that rewarding good performance generally results in repeated good performance.

Subject: Organizing Our "Helter-Skelter" Billing Office

Dear Lynn,

I feel like our billing team has a chaotic way of managing their duties, resulting in less than productive outcomes. Is there some kind of structure in place to make our billing department more efficient and organized?

A couple of suggestions come to mind:

1) Determine if documented job descriptions are up-to-date and fully executed, all required duties covered and assigned.

2) Set goal markers for desired billing office productivity and provide the tools necessary to reach them, including the right number of staff, policy guidelines, responsible decision-making capabilities, and current technology.

3) Assess individual staff input by conducting regular performance reviews.

4) Create a spreadsheet checklist identifying each task that is expected of the billing department. To keep to a schedule, it should also include a timetable indicating how often each needs to be accomplished, i.e., daily, weekly, monthly, quarterly, annually, and PRN. You want to also be sure to break down larger tasks so you are confident all aspects are completed. For example, "Collections" is not a line item in and of itself. There are multiple components, both on the patient and third party sides that require management and each should be listed.

5) Have regular owner/partner and billing staff meetings to share status and progress of practice performance. On the agenda, for example, you might want to include updates of monthly gross billing and receivables, net collection ratio, number of days claims are outstanding, aged balances, invoice quantities, patient follow-up results, accounts sent to collections, errors report, denials, appeals progress, write-offs, patient complaints, etc.

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Subject: Helping Patients Be Patient

Dear Readers:

No one actually wrote in about this particular challenge. During a recent visit to the mammography clinic, I saw this sign hanging in their reception area. I thought that in order to ease patients' frustration and help them understand why "THAT WOMAN went in before ME, even though I was here first", a similar message should hang on the walls of every medical office. This might be particularly helpful in a multi-doctor practice.

With a little customization, it could read:

[Practice Name] is a multi-doctor clinic and performs many different exams. If someone who has been waiting less time than you is taken to an exam room before you, please do not feel overlooked. Please let us know if you have been waiting longer than fifteen minutes. It is very important to us to keep you informed and provide you with excellent service.

What? A "longer than 15 minute wait" is normal in your office? Better do something about that first!

"Anger and intolerance are the enemies of correct understanding."
—Mahatma Gandhi. **PM**

Ms. Lynn Homisak, President of SOS Healthcare Management Solutions, carries a Certificate in Human Resource Studies from Cornell University School of Industry and Labor Relations. She is the 2010 recipient of Podiatry Management's Lifetime Achievement Award and was inducted into the PM Hall of Fame. She is also an Editorial Advisor for Podiatry Management Magazine and is recognized nationwide as a speaker, writer, and expert in staff and human resource management.