

# GET FIT: CROSS-TRAIN YOUR STAFF

Cross-training your team ensures a healthy practice.

BY MARIE CZENKO, MA

Cross-training is a dominant trend in today's fitness world. It involves taking on a sport or exercise program outside of one's usual practice/routine with the goal of improving overall athletic performance. Cross-training employees in a medical practice—whether the team is large or small—can be equally tied to increasing overall performance and gaining a competitive edge. From clinical to administrative support, multiple tasks need to be completed daily. Cross-training staff can ensure practice teams are properly equipped and prepared to meet all everyday needs, no matter what manpower challenges it might face.

In the medical office, cross-training can help staff accomplish three important practice goals:

- **Preparedness:** Cross-training helps ensure planned or unplanned events do not disrupt the patient experience, impact service, or upset workflow.
- **Teamwork:** Cross-training inspires everyone to appreciate the roles and functions of other team members.
- **Opportunity:** Cross-training allows for objective input on new processes or tasks from those with experience and insight.

Whether leading a practice of two or 200, proactive physicians/CEOs must acutely understand that their strategy for competitive success needs to include a well-trained, proficient team. Cross-training staff is one way to ensure staff is prepared. However, cross-training takes commitment, time, and effort, requiring tactical planning, scheduling, development, continued feedback, and adjustment. It also requires that the physician/CEO and the team be agile and clearly see the benefits of cross-training in daily workflow, patient experience, and opportunities for continued improvement.

## GETTING STARTED

To undertake a cross-training challenge, it is important that everyone acknowledge that, at least in theory, you already do a certain amount of cross-training—that there is always an individual who can “cover” for someone who is absent or pitch-in where needed or when things seem to be falling behind. To truly use cross-training to advance your competitive edge, however, remember two additional goals: teamwork to better appreciate the contributions of others and the opportunity to create cross-functional teams for special projects and new developments.

Getting started on a formal cross-training initiative requires organization. Here is what you need to do:

- **Build an organizational chart.** Clearly define the chain of authority, lines of communication, and core departments of your practice (see “Organizational Mapping” at right).
- **Define each role.** Do not target each individual staff member. Rather, focus on each role in the practice, based on the organizational chart. Ultimately, you want to build a list of tasks per function. Ask your team to create daily, weekly, monthly, quarterly, and annual task lists for the function they fill. These need not be lengthy descriptors, but bulleted tasks (i.e., run procedure by provider reports monthly).
- **Combine the organizational chart and task assignments.** Connect the task assignments to key organizational areas and to the individuals who currently have “ownership” or participate on that functional team.
- **Schedule training time.** Build a realistic calendar of formal training time per function and per individual. Two half-days per month are usually sufficient for seasoned team members. One day per week (can be divided into smaller increments) for those who are two years or less in a role is optimal.
- **Seek input.** Obtaining insight and information from the trainee and the trainer is essential to determine what works best and what is further needed to feel proficient. Core fundamentals in didactic or online learning help provide a foundation and support best practices. Observational and hands-on learning are essential to see and practice skills in action.
- **Conduct QI checks.** Make sure there are protocols for feedback on improvement in workflow, team morale, patient experience, and for reporting on progress of special projects or innovation.
- **Create update/review processes.** Your needs may change as the business evolves. Task lists must be reviewed and updated regularly (annually, at least). Organizational charts must be updated with new hires. Re-organization, added locations, or major changes (i.e., a new partnership) require reviewing the cross-training plan and each component.
- **Set a timeline and establish goals before delegating the key elements of the plan to your team.** Having a firm understanding of your primary cross-training goals is essential. For example, is your goal:
  - Improved patient experience?

## ORGANIZATIONAL MAPPING

Intimately understanding your practice organization is critical to building an effective cross-training program. Mapping the hierarchy of your practice is an important first step to cross-training. Generally, organizational planning in a medical practice is like most traditional business organizations: a top down approach with the owner/CEO at the top of the ladder. Newer, engaging structures and theories in business organization model the business as a spoke-and-hub, with the owner/CEO at the center of the organization. No matter what model your practice chooses—and no matter the size of your practice—a simple organizational map is key to understanding the chain of authority, determining the lines of communication, and defining the core business areas. Whether a small or large in practice, at the most basic, your organizational chart will include:

Owner/CEO—One or partners.

- **Practice management**—One individual or teams that manage front office, clinical support, clinicians/providers, back office, human resources, financial management.
- **Front office**—Reception, patient services, marketing.
- **Provider support**—Patient care coordinators, medical assistants, aestheticians and nurses working in a support capacity to clinicians.
- **Clinicians**—Staff physicians, certified physician assistants, nurse practitioners, cosmetic providers/injectors, and aestheticians.
- **Back office**—Billing, accounting, IT, HR.

In a small practice, the front and back offices may be covered by one or two individuals. In a large practice, there could be additional individual roles such as legal, property management, webmaster, or purchasing. All of the core functional areas of the organization need to be defined and assigned in order to keep your practice fit and organized.

- Growing practice revenue?
- Planning for a new location in three to five years?
- Adding a new provider?

You may have all (or none) of these goals; However, the reality is that your practice will feel the pinch and so will your patients if you do not have a cross-training plan when a member of your team is absent without notice or for a prolonged time.

### CROSS-TRAINING BY TEAMS

Who needs to be cross-trained is a question with a simple response: everyone. A basic plan for getting started is to train by service team.

**Front office:** Reception, patient service (i.e., patient care coordinators), and marketing all need to understand and support each other's functions. In smaller practices, these roles may be combined, while in larger practices, one may not replace the other. In all practices, however, they need to understand, interface, and integrate with one another. The front line is your reception staff; everyone on the team should spend at least a half day per month answering phones and greeting patients. This keeps the team grounded in the basic communication that begins—and sets the tone for—the entire patient experience.

**Back office:** Billing, accounting, IT, and HR may be all one point person, or several. A cross-trained team not only offers more manpower, it affords more problem-solving and support in areas where discrepancies can be data- or technology-driven. For security reasons, and if someone other than the physician-owner is managing the bank, it is essential to have two authorizations on an account and two individuals carefully monitoring accounts receivable/accounts payable. For flexibility reasons and time/cash flow savings, it is recommended to have more than one person trained on daily closings, reporting, and submitting billing to third-party payers. IT is most commonly managing third parties; however, back-ups, security, and maintenance all need scheduling and accountability. HR is a sensitive topic with many legal intricacies that vary by state. Typically, the physician owner and the practice manager constitute the HR team, although the HR team may sometimes include an outside advisor or agency. Regardless, while the “back office” may not work directly with patients, it is vital to every moment your practice is customer centric (and more).

**Clinic support staff:** Medical and surgical assistants, in-clinic medical scribes, support nurses, support PAs, and support aestheticians are all integral parts to keeping the clinic flowing and patient records accurate. While the training and scope of capabilities may vary greatly by individual and

role, the common core is understanding what each function offers and how to make the patient experience fluid and thoughtful. There are numerous touch points and many personalities the patient may or may not connect with, but you never know exactly when each touch point will take place. The bottom line is that if you are looking to shave five minutes off patient appointments, turn rooms more quickly, free up provider time for actual treatment, or to simply enhance the clinical experience for your patients, this is the team that directly interacts with patients and can act to make change.

**Providers:** Surgeon/physician, PA, CNP, cosmetic RN, and aesthetician are all providers, yet training, scope of practice, and accountability varies significantly. In this case, cross-training involves careful consideration of scope of practice, patient safety and outcomes, and time value for the provider. In some cases, providers and clinical support staff may cross train for things like pre- and post-ops and for assisting providers. Obviously, there must exist a clear chain of command for patient complications or concerns. Clearly, any new treatments, technologies, and protocols need to be cross-trained across many areas: the front office for information and education, the clinical support team for in-clinic and patient support, and the provider team for those who will offer treatment or refer the patient to a provider in the office.

### LOOKING TO IMPROVE

There is never a wrong time to engage your team and get started on initiating a cross-training program. Successful teams are always looking to improve. In addition to continuing education and personal development, effective teams view cross-training as a vital element of a high-performing practice. While getting a cross-training program off the ground may be a challenge, it is important to remember that one of the basic program goals is to build a multi-functional team that can deal with disruption and tackle special projects. ■



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