

Five Common Myths of New Practitioners

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Along the course of our podiatric education and post-graduate training we experience information overload. It is difficult to sort out the truths, fallacies and myths. Our forged beliefs which develop over this period of time are what builds the foundation of our professional life in practice. The myths we believe as a new practitioner can limit our potential and create much frustration as we begin our careers.

Myth #1 – There is little potential to make significant money in podiatry with the current healthcare environment.

The days of hanging a sign outside your office and having patients walk through your door are over. Darwinism now rules in medicine especially with podiatry because of the public's general lack of knowledge of what we do. The concept of survival of the fittest now applies and has resulted in more high and low income practices with less in the middle.

As new practitioners you each have the opportunity to "be fit" and end up with a thriving practice. You are the best medically and surgically trained group of podiatrists our profession has seen. This is an important piece of the puzzle but many more pieces must be coupled to achieve success. The students and residents who spend the time to learn as much as possible about practice and people management have consistently been the colleagues with the largest, most profitable practices who articulate how much they enjoy the practice of podiatry.

Some tips to gain practice and people management skills while a student and resident include:

- Spend as much time as possible in multiple podiatrist's offices. Don't just spend time with the doctor but also a significant amount of time at the front desk and billing office if the doctor allows.
- Read every Podiatry Management Magazine cover to cover. Keep every issue with a large white sticker on the cover with relevant articles inside. To get information on receiving the magazine go to www.pmanagement.com.
- Subscribe and read the podiatry related free e-newsletters and information services. These include: www.codingline.com, www.footzine.com, www.pmnnews.com and www.podiatryonline.com.
- Read the medical marketing book written by Neil Baum, MD, "Marketing Your Clinical Practice." This can be ordered on www.amazon.com
- Join the practice management club at your podiatry school and The American Academy of Podiatric Practice Management (www.aappm.com or call 978-686-6185) when in practice. This group offers a wealth of information especially for new practitioners and has a valuable mentoring program to allow members to speak to successful practitioners on a regular basis to seek their advice.
- Take a class on sales at local college or business that does training.
- Read any article in any journal you come across on practice management and coding.
- Attend any practice management track or lectures at meetings.
- Sit in on assistant's tracks at meetings you attend. There is a wealth of information here and will be an eye opener.

- Read books and article on customer service as well as leadership. Many of these are also available on tape and CD so you can listen in the car. Go to Amazon.com or Barnesandnoble.com and search under “customer service” and “leadership.”

Myth #2 – You can no longer succeed by starting a new practice just out of residency.

Years ago opening your own practice just out of your post-graduate training program was more realistic for many. But by no means are the days of starting a solo practice over. We continue to mentor many new practitioners who open in as we hear “saturated areas” and quickly thrive. Some have returned to open an office near their families and others to researched growing areas with high potential for growth. But the common trait among these new practitioners was the core desire to succeed. These individuals have a sense of what it will take to realize those desires, are willing to pay the price and prepare themselves for achievement.

These individuals have positioned themselves for success by being proactive during podiatry school and in their residency and understanding that “knowledge is power.”

Myth #1 above discusses several ways to gain the knowledge that is critical for “starting from scratch.” They spent the time to learn such things as coding and billing, internal and external marketing, staff relations, office technology, designing an office and patient relations.

There are several forces which make starting a new practice more challenging. Managed care plans have limited access to patients through restricting the number of specialists in an area. It is then the savvy practitioner who prospers by aggressively and continually trying to get on the plans but even more importantly markets themselves to the population which has open access to anyone they choose such as patients with Medicare. A simple way to learn about the insurance plans in your area is to ask your local hospital and physical therapy and radiology groups for their lists and contacts. The frustrations relating to financing can be minimized by forging relationships with the small community banks in you locale. Your strength is in the loan proposal you present. The American Academy of Podiatric Practice Management can provide you with templates to save you significant time with this and ensure a professional, strong presentation.

Starting a new solo practice is not for everyone. Working as an associate will be the most practical approach for many. The over-riding fear of risk many envision to go solo places them in a more comfortable position as an associate. This security is necessary for many and also benefit from the strength of a group practice. Consider the first couple years as an associate in private practice as a “fellowship in practice management” to learn patient and office management. This may be stepping stone spring boarding you into solo practice and prepare you with the skills to build a strong, healthy practice.

Myth #3 – The customer (aka patient) is #1

The adage that “the customer is #1” is one of the Ten Commandments we have learned about customer service. But the wisest in business will be soon to realize that by all means our customers write our paychecks but that our most valuable asset and #1 our success and sanity is our staff. In our offices, we measure success not only by our rapport with patients, but also through the doctor-assistant relationship. Our present level of success, both financially and professionally, is exponentially related to our assistants.

A common quandary we see with new practitioners is putting themselves at a level above that of their staff. In most cases the staff has been there several years and directly responsible for building and increasing efficiency in the office. The new doctor joins the group and attempts to define their territory by alienating themselves from the staff instead of bridging the relationship. Several of us seasoned practitioners have the scars we acquired from not knowing early on the utter respect and appreciation we must show for our employees. Even more important than your staff's salary is your appreciation articulated daily with a simple "thank you" and finding them doing something "right".

The primary goal in our practices is to meet and then exceed patient expectations. With the focus being directed on the needs of the patient, office titles have become unimportant. Doctors and staff alike in our offices have discovered unimaginable satisfaction by looking outside of us and concentrating on helping patients feel better. We would speak regularly at office meetings about turning the attention away from ourselves and thinking only about how our actions could improve the overall care that each patient was receiving in the office. At the end of each day we all feel more fulfilled and return the next morning refreshed and excited to face new challenges.

The greatest lesson in working with assistants is that, in working toward a winning team, the momentum must start at the top. Our role as the doctor is to coach our team, and lead by example. In coaching our team we have learned that our attitudes are contagious, and sets the tone of our workplace. Through open communication and especially listening to one another, our office continues to learn from each other and grow together. Our staff reflects that listening to their needs is evidence of our respect and general concern for them, and I see their comments in a similar light. Let your guiding light be that together everyone achieves more..you, your staff, your patients and your bottom line!

Myth #4 – I'm just getting started and still paying off my debts. I couldn't possibly afford to hire staff NOW!

On the contrary. As they say...you can't afford NOT to! Here is a fact. Hear it. Learn it. Live it...people do not care what your debts are. Perhaps your financial situation may have you "strapped" right now (and for what it's worth, some patients may even recognize that), but when weighed against the amount of money you will conceivably make as a "doctor," they feel justified withholding any sympathy for your current situation. Realize of course that to most of your patients (and the general public) everything is relative and by comparison, your debt is insignificant to their own financial woes. Add that to the reality that physically sitting in your office 24/7 (so you don't miss a call) and doing everything yourself is not only a waste of your time (see Myth #5) but it actually sends out negative inferences, such as:

- You are desperate for patients and will "hook" anyone that comes through the door.
- You are too cheap to hire someone and will foolishly overlook increased efficiency for perceived increased revenue.
- You must be impossible because apparently no one wants to work for you
- But the one you should be most concerned about is....
- Your practice is unprofessional.

Your professional image is SO important and throughout your entire career, protecting this should always be one of your top priorities. Right now, in the early stages of your practice, you have the opportunity to mold this image which in turn will generate not only

referrals, but also integrity and respect. At this time, I'm going to suggest you not even think about the cost of hiring someone. Think and do what's good for your practice overall. This is a very impressionable time for your patients. They literally observe (and judge) everything you do, so while you are in a position to make a powerful impression, just bite the bullet and hire someone. Train this individual to answer your phone, greet your patients with a friendly "hello", make their appointment, address their questions and well, just physically BE there when they finally present to your office. If it's the right person, expect both your credibility (and your pocketbook) to benefit.

Yes, now is the time that you need to consider hiring someone, but remember to keep things in perspective. You obviously won't need to look into a full-time (or high-salaried) employee right at the start; however, you may want to consider a personable relative or friend who is motivated to help you get the practice up and running. Or consider a part time student who is looking to initiate a new career right along with you. Later, when you get busier, you will want to get a full-time employee (or move your part timer into a full time position) and have her/him contribute more to the growth and efficiency of the practice.

So, don't make a habit of answering your own phones, save that "typical" recorded message for after hours and put the "hook" away (try not to appear so eager). Personalize your practice and hire someone you can trust to manage that phone for a set number of hours each day. Feel confident that in doing this, you will be taking a positive step towards setting a positive professional image for your new and exciting practice.

Myth #5 – I'll never find the time to market my practice! I'll need to spend every minute at my office so I don't miss any potential patients that might want to be seen.

"If you build it...they will come." That is one of my favorite lines from a movie entitled "Field of Dreams" and it was the incentive that encouraged the main character to follow through with his far-fetched "plan" to build a ballpark. It may have seemed a bit overwhelming when he started, but he believed in it and worked hard to make it a reality. That formula can be as worthwhile for you as it was for him with one slight difference.....he was building a ballpark and you're building a practice. Ok, minor detail! The similarity however, lies in the fact that he didn't accomplish what he did by sitting at home, waiting for it to build itself. Neither does building your practice mean staying glued to your office waiting for patients to knock your door down. If handled correctly, the notion that patients will go elsewhere is a huge misconception. (Refer back to Myth #4 for reasons to hire staff)

Do what you can to schedule your time wisely at the office and understand that sitting there waiting for that phone to ring is a total waste of your time. I'm not suggesting you deliberately turn anyone away, but from a scheduling standpoint, try to compactly position appointments as close to each other as possible. In other words....if Mr. Toe wants be seen at 2:00pm, offer to schedule Mrs. Jam at 2:15 or 2:30pm. This serves two purposes. First, the likelihood that they might run into each other at some point is enough to convince them that your office is "crowded"....or at least "seemingly busy!" Second, with all (both) of your patients scheduled back to back....you now have very shrewdly made some quality "marketing" time for yourself. Set a realistic goal that you will spend at least one hour a day visiting one new place. Get out and meet as many new people as you can in the neighborhood. Now is not the time to be shy. Schedule visits to schools, AARP meetings, nursing homes, sports clubs and other doctor's

offices. Stop in at the hospital cafeterias and introduce yourself to staff, colleagues and other healthcare professionals. Keep in mind that where there are people....there are feet and where there are feet, there you should be too! The more that people see you, the more they will start to recognize you as the “foot doctor.” Make that....THE “foot doctor.” If you are serious about building your practice and are willing to put that extra effort into effective, proven marketing “tools,” things will start to happen around you, whether you are physically there or not. Remember.....“If you build it...they will come”....you’ll see.

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