



TIPS FOR TEAM SUCCESS

Evaluation Distribution:

Templating evaluation slots is an extremely effective way to manage the flow of new patients coming into your clinic. Consider the following points:

- Train your front office staff to schedule new patients in available evaluation slots first. If no slots are available, the front office staff should communicate with the clinical team to identify another eval slot. The clinician is best suited to identify additional eval slot locations.
- Eval slots should be predetermined. Each clinician should carefully consider the number and location of eval slots each day. Time slots should be alternated daily to avoid a scheduling bottleneck effect of patients. For example, a clinician who only takes evaluations in the evening will quickly find it difficult to schedule follow up appointments in the evening.
- Consider adjusting/manipulating number and location of eval slots, based on the needs of your clinic. If your clinic is very busy in the evening, offer more eval slots in the am. If your busiest day for follow up visits is Monday, consider offering less eval slots on Monday, and more on Tuesday-Friday.

Support Staff:

It is critical to utilize support staff with a teamwork mentality. Clinicians must always be willing to help each other, and to equitably share support staff. Doing so ensures the best clinical experience for all patients.

Finding time for “clinical outreach”:

In today’s healthcare system, and in private practice in particular, it is no longer an option to decide whether to market yourself and your profession in the community. Finding time to do so can be a challenge for the busy clinician, and there may be a genuine fear of leaving the clinic which may reduce available clinical treatment hours as a result. The clinician must approach clinical outreach as a necessary component of comprehensive professional responsibility. The key is to proactively plan outreach initiatives that can be quickly implemented when time allows.

Patients referred to a specific provider:

Patients often wish to schedule their evaluation with a specific provider. The relationship between patient and provider is not easily formed, and once established should be respected wherever possible. Less experienced clinicians are less likely to receive direct referrals, but over time as they build their reputation in the community they will build a loyal following of patients.

Hiring additional staff:

The decision to hire additional staff can be a difficult one. It is ideal to proactively establish guidelines and conditions under which a new provider will be introduced into the office. Ideally, a new provider will be given the opportunity to add patients to the clinic by building their own caseload, rather than inheriting a caseload from other providers. Consider holding a team discussion to establish parameters under which a new provider will be introduced to the team. If you are considering hiring clinical staff due to increased volumes, we suggest avoiding doing so unless you have confirmed at least 3 consecutive months of volumes which exceed your organization’s capacity based on your current staffing model.

Covering PTO:

When a clinician covers for another clinician who is taking PTO, patients should be scheduled out past the period of PTO to ensure that patients return to the primary provider’s schedule. Patients often request to remain on the covering provider’s schedule even after the primary provider returns. With very few exceptions, optimal care quality and efficiency occurs when a primary provider manages the entire course of care from evaluation through to discharge. We highly recommend ensuring that each member of your team understands this concept before this type of scenario presents itself in your clinic.

**For more tips for OnusOne success, refer to our regular monthly blog posts on our website!